

**BOARD OF REGISTERED NURSING**  
**Education/Licensing Committee**  
**Agenda Item Summary**

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**AGENDA ITEM:** 7.1  
**DATE:** September 3, 2015

**ACTION REQUESTED:** Vote On Whether To Ratify Minor Curriculum Revisions and Acknowledge Receipt of Program Progress Report

**REQUESTED BY:** Michael Jackson, MSN, RN  
Chairperson, Education/Licensing Committee

**BACKGROUND:** According to Board policy, Nursing Education Consultants may approve minor curriculum changes that do not significantly alter philosophy, objectives, or content. Approvals must be reported to the Education/Licensing Committee and the Board.

Minor Curriculum revisions include the following categories:

- Curriculum changes
- Work Study programs
- Preceptor programs
- Public Health Nurse (PHN) certificate programs
- Progress reports that are not related to continuing approval
- Approved Nurse Practitioner program adding a category of specialization

The following programs have submitted minor curriculum revisions that have been approved by the NECs:

- Mount Saint Mary's University Baccalaureate Degree Nursing Program
- San Diego State University Baccalaureate Degree Nursing Program
- Simpson University Baccalaureate Degree Nursing Program
- Sonoma State University Baccalaureate Degree Nursing Program
- University of San Francisco Baccalaureate Degree Nursing Program
- Charles Drew University Of Medicine And Science Entry Level Master's Degree Nursing Program
- Sonoma State University Entry Level Master's Degree Nursing Program
- University of San Diego Hahn School Of Nursing Entry Level Master's Degree Nursing Program
- University Of San Francisco Entry Level Master's Degree Nursing Program
- Chabot College Associate Degree Nursing Program
- Chaffey College Associate Degree Nursing Program
- Mira Costa College Associate Degree Nursing Program
- Reedley College At Madera Community College Center LVN-RN Associate Degree Nursing Program
- Sacramento City College Associate Degree Nursing Program
- Saddleback College Associate Degree Nursing Program
- Santa Barbara City College Associate Degree Nursing Program
- Sierra College Associate Degree Nursing Program
- Solano Community College Associate Degree Nursing Program
- Stanbridge College Associate Degree Nursing Program
- Weimar Institute Associate Degree Nursing Program
- Samuel Merritt University Family Nurse Practitioner Program

Acknowledge Receipt of Program Progress Report:

- Los Angeles Trade-Tech College Associate Degree Nursing Program
- Napa Valley College Associate Degree Nursing Program
- San Joaquin Valley College Associate Degree Nursing Program
- Stanbridge College Associate Degree Nursing Program
- Weimar Institute Associate Degree Nursing Program

**NEXT STEP:** Notify the programs of Board action.

**PERSON TO CONTACT:** Leslie A. Moody, RN, MSN, MAEd , Nursing Education Consultant

## MINOR CURRICULUM REVISIONS

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SCHOOL NAME	APPROVED BY NEC	DATE APPROVED	SUMMARY OF CHANGES
Mount Saint Mary's University Baccalaureate Degree Nursing Program	L. Chouinard	03/11/2015	In September of 2012, Mount Saint Mary's University BSN program submitted a Major Curriculum Revisions which was approved. This new curriculum began in the Traditional BSN (TBSN) option in the fall of 2013 and that first class will graduate May 2016. The Accelerated BSN (ABSBN) option was scheduled to begin the new curriculum this fall (August 2015). The University has requested a postponement to summer May 2016, (implementation is only one cohort behind the originally planned cohort). The reason for this request is so that the first class in the TBSN program can graduate and it will allow for total curriculum review and alterations to syllabi, teaching assignments, and other pedagogy to be completed prior to implementing this in the accelerated option.
San Diego State University Baccalaureate Degree Nursing Program	L. Moody	06/01/2015	The program was directed by the college to change enrollment pattern from 80 student admissions each in Fall and Spring, to 160 students admitted only each Fall. This created the need to split the admitted students into two sub-cohorts so that capacity of the program's individual course/semester resources would not be exceeded. The course sequencing across each of the four program years is varied for each of two sub-cohorts. Total course, nursing and program units, and time to complete, remain unchanged and consistent for all students regardless of sub-cohort assignment. This change also necessitated a one-time revision to course sequencing for those students that will be entering the nursing program as university sophomores in Fall 2015. Revised Total Curriculum Plan (EDP-P-05) forms for each sequence are approved and on file.
Simpson University Baccalaureate Degree Nursing Program	K. Daugherty	05/26/2015	Effective September 2015, replace other degree theology course, TH 2600 with a CORE 2000 course. No other changes. CRL/TCP and forms updated to reflect this change. PHN form remains unchanged.
Sonoma State University Baccalaureate Degree Nursing Program	K. Daugherty	06/25/2015	Effective academic year 2014-2015, SSU relocated its simulation facilities and learning activities from the Indian Valley Campus Regional Simulation Center to the Critical Care Institute (CCI) located at 1360 North Dutton in Santa Rosa, California. Through the newly established five year partnership agreement with CCI, SSU nursing program simulation instruction by SSU faculty will occur

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			with technical support being provided by CCI staff. SSU will have priority scheduling at this site, and the faculty model, curriculum and instructional delivery of simulation activities (10% of each clinical course) by SSU faculty will not change as a result of the re-location.
University of San Francisco Baccalaureate Degree Nursing Program	K. Daugherty	06/02/2015	Effective Spring 2016 change the course number for N 375 to N 378 and increase course from 3 to 4 units; decrease N 475 from 5 units to 4 units. Course objectives and content remain unchanged. Replace the N 470 course with a new N 472 Senior Seminar and increase from 1 to 2 units. Change LVN 30 unit option to reflect these changes. CRL units will change from 90 to 91 units; other degree units will change from 38 to 37 units and graduation units remain at 128 units.
Charles Drew University of Medicine and Science Entry Level Master's Degree Nursing Program	M. Minato	06/16/2015	Program submitted changes, to be effective immediately, that involved timing of eligibility for NCLEX-examination and course re-numbering. This request allows students to take the NCLEX-RN licensure exam earlier than at the end of the curriculum, after completion of the 6 <sup>th</sup> semester. Students will take the exam at the end of the 5 <sup>th</sup> semester when they complete all required prelicensure nursing courses, including NUR619, Residency 1. When the curriculum changed in February 2013, the current graduating cohort started the new curriculum and is now completing the 5 <sup>th</sup> semester. This change reduces the wait time for students after the completion of the basic nursing courses, which is correlated with better pass-rate outcomes when exams are taken within 3 months of completion of the courses. The course number changes included NUR 618 (Adv. Medical-Surgical, previously NUR 518) and NUR 629 (Residency 1, previously NUR 519). Forms were updated to reflect these changes. There were no changes to units.
Sonoma State University Entry Level Master's Degree Program	K. Daugherty	06/17/2015	Permanently discontinue the DEMSN degree option effective Spring 2015. This degree option has been discontinued to budgetary and other resource constraints. Appropriate institutional and CSU Chancellor's office notifications are in progress.
University of San Diego Hahn School of Nursing	L. Moody	07/01/2015	MSNC 519 Pharmacology II: Application to Practice course name and number changed to APNC 524 Advanced Pharmacology, and course description and

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Entry Level Master's Degree Nursing Program			objectives have been updated in keeping with current standards. Course MEPN 521/521L Health Assessment is presented in a condensed timeframe of 3 weeks. These revisions do not affect course or program units.
University of San Francisco Entry Level Master's Degree Nursing Program	K. Daugherty	04/27/2015	CRL/TCP and PHN forms updated to correct calculations errors on previous forms. Total CRL 73 instead of 75 units; other degree is 27 units instead of 30 units; total units for graduation 100 units instead of 105 per the curriculum pattern document provided by the program.
Chabot College Associate Degree Nursing Program	K. Daugherty	06/11/2015	Effective January 2016, N59 (OB/Peds) 8.5 units replaced by N51 (OB) 4 units and N52 (Peds) 4 units and N60A reduced from 4.5 to 4 units. N56 (.5 unit) eliminated. Total nursing course content unchanged. LVN advanced placement option reflects inclusion of N70 (1.5 units) and N70L and N84 (.5 unit each) on CRL/TCP forms. Total CRL for generic option 70-73 instead of 71.5 to 74.5 units and 72.5-75.5 for the LVN option, LVN 30 unit option now totals 28.5 units. Other degree requirements now total 10-18 units instead of 10-15 units with the addition of the Am.Culture course (3 units).
Chaffey College Associate Degree Nursing Program	L. Chouinard	07/03/2015	Program submitted a minor curriculum revision based on program evaluation by faculty, to be implemented with the class admitted August 2016. Minor curriculum revision includes the following changes: Renamed, renumbered, and re-distributed content for Fundamentals and Medical Surgical courses, as Nursing Process I, II, III, and IV; The Mental Health and Psychiatric course content was moved from first to fourth semester based on student feedback and programmatic evaluation. Leadership /Management content are incorporated into these fourth semester courses. Adjusted units to reflect changes with redistributed content for all courses, some increasing units while other courses had reduced units. Changes to units reduced the 30 U-Option to 27.5 units, but nursing units required for licensure were unchanged at 41.5 units. Correction was made to total units required for degree, which is 71.5 units.
Mira Costa College Associate Degree Nursing	C. Velas	04/16/2015	Beginning with Fall 2015 admissions, Pharm 150 and 151 (4units) will be condensed into Pharm 201 (2units). OB, Peds, and Psych pharmacology will be

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Program			threaded into theory courses. Total units from theory, licensure and graduation will decrease by 2units.
Reedley College At Madera Community College Center LVN-RN Associate Degree Nursing Program	L. Moody	06/30/2015	Geriatric learning objectives and clinical learning activities have been added and revised for courses RN74 Geriatric Nursing and RN75 Intermediate Med/Surg Nursing to ensure clinical practice application of geriatric theory as part of the student learning experience. These revisions resolve a noncompliance identified during the April 2015 continuing approval visit.
Sacramento City College Associate Degree Nursing Program	K. Daugherty	06/23/2015	For Fall 2015, the extended campus site will not admit at that site. Admission in Spring 2016 is yet to be determined. Enrollment patterns on the main campus are unchanged.
Saddleback College Associate Degree Nursing Program	B. Caraway	06/08/2015	The program submitted changes in the modality of N165:Lifecycle1: Fundamentals of Aging course to include online internet capability. The change allows the program to offer on campus classes as well as internet version of the class and will assist the students in accessing a required nursing course online. The course content and objectives did not change. The course is a required course in the nursing program curriculum. The faculty have attended required Distance Education (DE) course and have been approved by the college to teach in this modality. The changes were reflected in the revised" Total Curriculum Plan" and the "Required Curriculum: Content Required for Licensure" forms. The college will implement this change in Fall 2015.
Santa Barbara City College Associate Degree Nursing Program	C. Velas	07/02/2015	Currently N119 Introduction to Registered Nursing for the Licensed Vocational Nurse course is 2.4 units (3 weeks) with students completing the course during the summer. Faculty recognizes that students need more time in the clinical setting to successfully integrate into the generic ADN program or the LVN 30 Unit Option. N119 will increase to 3.0 units (8 weeks) and student will begin the course during the 8th week of the Fall semester. The increase in 0.6units will give students extra time to prepare for the role transition. The increase in units does not affect the total units for the ADN generic students, however, does increase the LVN 30 unit Option units from 26.4units to 27units. This change will become effective Fall 2015.

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Sierra College Associate Degree Nursing Program	K. Daugherty	06/29/2015	Effective Fall 2015 accept several additional Math courses to meet institutional and transfer credit requirements. CRL and TCP forms will also be update to reflect the series of Humanities courses accepted for graduation, changes in nursing course titles consistent with the college catalog and recently identified course calculation corrections will be made.
Solano Community College Associate Degree Nursing Program	B. Caraway	06/08/2015	<p>The program submitted curriculum changes in the following two courses for the summer 2015 course offering only: Nursing 063- Advanced Medical-Surgical and Community Nursing ,( 7units-4-8 Theory hours plus 19.2 clinical hours per week); Nursing 061- Mental Health Nursing ( 5 units- 5 Theory hours per week plus clinical 24 clinical hours per week)</p> <p>The changes were made to address the needs of International / Foreign nursing graduates with identified BRN deficiency in the Advanced Medical-Surgical and Psychiatric – Mental Health courses. For the proposed summer 2015 courses, NURS 061 has been condensed from 8-5 weeks and NURS 063 has been condensed from 12-10 weeks. During the first week of the program, students will be individually assessed to determine their current level of knowledge and skills. Following course completion, students will take Kaplan integrated testing, as well as complete an NCLEX prep workshop to assist them with preparation for that examination. In addition, during the summer, tutoring and test taking strategy workshop will be offered; all college resources and student support services will also be made available to facilitate student success and completion. The totals of 44 students are enrolled for summer 2015. Program Director has been advised to submit a Major curriculum revision request for any future summer course offerings such as “Summer Nursing Institute”, as this revision will be consider as a new track/ program. The changes were reflected in the revised” Total Curriculum Plan” and the “Required Curriculum: Content Required for Licensure” forms.</p>
Stanbridge College Associate Degree Nursing Program	B. Caraway	07/23/2015	The program has made minor revisions in its curriculum, to re-sequence the topics in the NUR 1100 Fundamentals of Nursing 1(M-S) and NUR 1200 Fundamentals of Nursing 11 (M-S) courses. This revision is in response to the students’ feedback to the program survey and the recent BRN visit. Both

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			<p>Cohort 1 and Cohort 2 students have expressed concern about the heavy content load in the last four weeks of the NUR 1200 course and have said that it would be helpful to have some of this content presented earlier in the program, i.e. in the NUR 1100 course. The faculty have agreed that this change would help the students be more successful in their learning.</p> <p>This re-sequencing will not change any of the content or objectives in these courses; it will only change the order of the topics. There are no changes in units, and courses of the proposed curriculum. The anticipated date of implementation of the new curriculum will be Fall 2015</p>
Weimar Institute Associate Degree Nursing Program	K. Daugherty	05/19/2015	<p>Reduce the number admitted to the new program's first cohort from 20 to 10 students in Fall 2015 and subsequently return to the originally approved enrollment pattern of 20 students no later than the Fall 2016 or Fall 2017. The enrollment change is designed to ensure first class enrollment with the strongest academic qualifications and better manage successful implementation of the program in relation to program administration, faculty, students, and clinical facilities availability and use.</p>
Samuel Merritt University Family Nurse Practitioner Program	J. Wackerly	05/05/2015	<p>School of Nursing launches on line Family Nurse Practitioner MSN program. The program received approval from the university, Western Association of Schools and Colleges Senior College and University Commission (WSCUC). Staff have been increased to support the program and will add faculty incrementally. Dr Arlene Sargent is the Associate Dean of Graduate Programs and Dr. Rhonda Ramirez remains director of the FNP programs in Oakland and Sacramento. All online courses were designed by current faculty, will be taught by those same faculty as least through first enrollment. The curriculum is identical to on campus programs at Oakland and Sacramento, only the delivery method is altered. <a href="https://www.samuelmerritt.edu/nursing/fnp_nursing_online">https://www.samuelmerritt.edu/nursing/fnp_nursing_online</a>.</p>

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SCHOOL NAME	APPROVED BY NEC	DATE APPROVED	PROGRESS REPORT
Los Angeles Trade-Tech College Associate Degree Nursing Program	L. Chouinard	07/09/2015	The program received written notification of non-compliance with CCR 1431 annual pass rate <75%. Program pass rate for (July 1, 2013-June 30, 2014) was 65.79% (n = 38) first time test takers. The program has submitted a comprehensive assessment and action plan to improve the annual pass rate.
Napa Valley College Associate Degree Nursing Program	J. Wackerly	07/02/2015	Dean Robert Harris notified the BRN that Janice Ankenmann has accepted the Director position. June 25, 2015 program submitted semester changes for HESI testing. July 2, 2015 reported activities related to deferred action: director position, update to Student Handbook, accepting 40 nursing students for fall 2015 providing student handbook, first course syllabi, classes calendar/schedule. June 1 Faculty met for review of course eval, faculty evaluation of facilities, course objectives, standard test scores to determine need for changes in the program. Consultant expert to exploration for Napa curriculum to include Elsevier, Dr. Ann Brett PhD,RN from Nurse Tim, and Dr. Elizabeth Cooper from USF a QSEN expert.
San Joaquin Valley College Associate Degree Nursing Program	M. Minato	07/01/2015	A site visit of Ontario campus was made on July 1 to verify the completion of the skills and simulation lab and for SJVC-Ontario program for transferred Everest College students to start July 2015. The six-bed Skills Lab is reserved for the use by RN students only. The room will be scheduled for use by each cohort; when the room is not used, it will be available as open-lab time, staffed by faculty as part of assigned office time. Schedules will be made to provide open lab hours. The school has two 'Sim-man and Birthing Mom simulator. The simulation room is separate from the Skills lab, has a separate viewing area. Discussed about creating a conference space to debrief.
Stanbridge College Associate Degree Nursing Program	B. Caraway	06/10/2015	A site visit was conducted on 05-15-2015, marking the end of the first academic year since initial program approval. Meetings were held with Mr. Yasith Weerasuriya, CEO/President and co-Founder of Stanbridge College, Assistant Director (The program director was on medical leave.), faculty and students from cohort one and cohort two. 19/26 students from cohort one, who started in Fall 2014, remain in the program. Cohort 2 started with 30 students who were admitted in Spring 2015. Cohort 3 will start in August 2015. The program has added faculty as curriculum progressed; total of 13 faculty have been hired. Plan is progress for hiring full -time OB and Pediatric Instructors. Met with faculty members and students. Faculty meetings are being held; Assistant Director and faculty spoke about how the meetings are becoming more formalized. Using students' feedback, faculty are in the



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**AGENDA ITEM: 7.2**  
**DATE: September 3, 2015**

**ACTION REQUESTED:** Vote on Whether to Approve Education/Licensing Committee Recommendations

**REQUESTED BY:** Michael Jackson, MSN, RN  
Chairperson, Education/Licensing Committee

**BACKGROUND:** The Education/Licensing Committee met on August 6, 2015 and makes the following recommendations:

- A. Continue Approval of Prelicensure Nursing Program
  - Western University of Health Sciences Entry Level Master's Degree Nursing Program
  - College of the Redwoods Associate Degree Nursing Program
  - Contra Costa College Associate Degree Nursing Program
  - Hartnell College Associate Degree Nursing Program
  - Kaplan College Associate Degree Nursing Program
  - Los Angeles City College Associate Degree Nursing Program
  - Modesto Junior College Associate Degree Nursing Program
  
- B. Defer Approval of Prelicensure Nursing Program
  - Dominican University of California Baccalaureate Degree Nursing Program
  - Reedley College At Madera Community College Center Associate Degree Nursing Program
  
- C. Approve Major Curriculum Revision
  - Azusa Pacific University LVN-Baccalaureate Degree and Entry Level Master's Degree Nursing Program
  - California State University, Fresno Baccalaureate Degree Nursing Program
  - Western University of Health Sciences Entry Level Master's Degree Nursing Program
  - Glendale Community College Associate Degree Nursing Program
  - Kaplan College Associate Degree Nursing Program
  - Ohlone College Associate Degree Nursing Program
  - Pasadena City College Associate Degree Nursing Program
  - San Joaquin Valley College Associate Degree Nursing Program
  - Loma Linda University Nurse Practitioner Program

A summary of the above requests and actions is attached.

**NEXT STEPS:** Notify the programs of Board action.

**PERSON TO CONTACT:** Leslie A. Moody, RN, MSN, MAEd  
Nursing Education Consultant

Education/Licensing Committee Recommendations  
From meeting of August 6, 2015

**The Education/Licensing Committee met on August 6, 2015 and makes the following recommendations:**

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**A. CONTINUE APPROVAL OF PRELICENSURE NURSING PROGRAM**

• **Western University of Health Sciences Entry Level Master's Degree Nursing Program.  
Ms. Ivy Tuason, Director of Nursing and Dr. Karen Hanford, Dean.**

The Western University of Health Sciences (WUHS) is regionally accredited by the Western Association of Schools and Colleges (WASC). The WUHS Nursing program is approved by the BRN and the Commission on Collegiate Nursing Education (CCNE). The ELM program was approved by the BRN in 2004, to prepare students with a non-nursing BA or BS to complete all the BRN requirements for RN licensure and continue in one of three Master of Science degree tracks (Administrative, Clinical Nurse Leader, Family Nurse Practitioner). A regularly scheduled continuing approval visit was conducted on March 12-14, 2015 by Nursing Education Consultants Carol Mackay, Loretta Chouinard, Linda Sperling and Badrieh Caraway. The program was found to be in noncompliance in one area CCR Section 1426(a) Curriculum, and three recommendations were given in CCR SECTION 1424(g) - Faculty Responsibilities, CCR Sections 1420 (f), 1424(h) and 1425.1 Content Experts/Faculty, and CCR Section 1426.1 Preceptorship. The program has submitted a progress report for the non-compliance and recommendations.

During the visit it was identified that the program had implemented three ELM options without Board approval resulting in one area of non-compliance. The correction for the area of non-compliance is presented as a Major curriculum revision. In a well-attended meeting, the full-time faculty described a high level of involvement with program monitoring and improvement, as well as instructional delivery. Some part-time faculty expressed limited communication and involvement in the total program development, implementation and evaluation. Meetings were held with students of all levels who are satisfied with their opportunities for involvement with program review and change recommendations. Some students reported inconsistency among faculty in timely feedback and evaluation of their homework or assignments. Students also felt challenged by the Psychiatric Mental Health (P/MH) course and expressed concerns with their clinical experiences on Saturdays, which did not provide them with necessary activities to meet course objectives. One group of students who have selected "Focus" clinical option, expressed lack of continuity with their preceptors resulting in lack of sufficient leadership and management experiences during their preceptorship. These concerns were shared with the faculty and administration team. Plan of action has been included in the program's response to recommendations. NCLEX- RN outcomes of the first time test takers have exceeded BRN requirements for the past six years.

**ACTION: Continue approval of Western University of Health Sciences Entry Level Master's Degree Nursing Program.**

• **College of the Redwoods Associate Degree Nursing Program.  
Dr. Alison Stull, Program Director.**

A continuing program approval visit to College of the Redwoods was conducted on April 13 & 14, 2015 by Carol Velas, NEC and Janette Wackerley SNEC. The program was found to have one noncompliance in Administration and Organization of the Nursing Program, involving two sections: CCR 1424(b)(1)-Total Program Evaluation and CCR 1424(g)-Faculty Responsibility. Four recommendations were given, two in Administration and Organization of the Nursing Program, sections CCR 1424(e) and CCR 1424(h), and two in Curriculum, sections CCR 1425.1(a) and 1426(d). The program submitted a progress report on June 2, 2015 addressing noncompliance and recommendations. Since the last visit in 2009, processes for regular and

accurate data collection, analysis, and reporting have not been implemented by faculty. The program has not had a systematic total program evaluation in place, although there was a recommendation in 2009 to include trends, faculty evaluation, and outcome analysis, for consideration of programmatic change. Insufficient faculty and lack of time were reasons given for why the faculty failed to implement an evaluation process, however, faculty committed to working to implement program evaluation when the problem was discussed at the faculty meeting. The Program Director has a 10-month contract with 100% release time and oversight of eight programs, devoting 75% of her time to the registered nursing program. The Assistant Director does not have release time to support the Program Director. Full-time faculty currently carry excessive overload. Difficulty hiring part-time faculty has been experienced recently. Program resources meet the needs of the students including simulation that is integrated into most courses and students report open skills lab hours are adequate.

Beginning in summer 2015, the faculty has committed to a major curriculum revision with changes that will bring the program into alignment with contemporary nursing. The Program Director is actively seeking partnerships with public and private institutions for the smooth transition to baccalaureate programs. Student comments identified overall satisfaction with the nursing program and gratitude to the faculty for their support. The administration is very supportive of the nursing program and has a vision of growing the program to support the need for nursing positions in the community as healthcare provision in the county changes. There was a strong commitment from the Executive Vice President for support in the areas found to be in noncompliance and/or recommendations for this program. College of the Redwoods has consistently met and/or exceeded the annual NCLEX first-time pass rates.

**ACTION: Continue approval of College of the Redwoods Associate Degree Nursing Program.**

- **Contra Costa College Associate Degree Nursing Program.**

**Dr. Sandra Castillo, Director of Nursing and Dr. Cheri Etheredge, Assistant Director of Nursing.**

CCC's Associate Degree in Nursing Program is located in San Pablo, CA and has been graduating nurses since 1960. The college is an accredited member of the Western Association of Schools and Colleges (WASC) and was recognized by QSEN Institute as one of seven nationally recognized STAR status for their integration and implementation of QSEN Competencies. In addition to offering their program to students who are seeking degree completion or an accelerated LVN to RN option, they also offer enrollment, on a space available basis, to foreign educated nursing students that need additional nursing classes to apply for licensure in California. On April 20 – 22, 2015 a scheduled routine continuing approval visit was conducted at CCC by Loretta Chouinard, Nursing Education Consultant and Miyo Minato, Supervising Nursing Education Consultant. There was one finding of non-compliance for 1425.1(d) Faculty Qualification. Two recommendations were given: Section 1424(h) Program Administration and Faculty Qualifications with related section 1424(d) Sufficiency of Resource; Section 1426.1 Preceptorship (specifically sections (B)(6) and (7)). CCC currently enrolls 40 nursing students once a year with the assistance of grant funding. The number of enrollments has decreased by 30 available spaces from a previous enrollment number of 70 students per year in 2009. This decrease was due to budget cuts and the retirement of 4 experienced FT faculty members. The program now has 6 FT faculty including the Interim DON, and 22 PT faculty. Although current faculty are providing instruction and fulfilling other faculty responsibilities these FT faculty are now doing the work that was previously performed by 10 FT faculty members. This program has tried to compensate by increasing the hiring of PT faculty but there are 4 more experienced FT faculty members projected to retire over the next 4 years. This places the program at risk as the orientation of new faculty members will take an extensive period of mentoring and the requested positions have yet to be approved.

CCC offers an Advanced Medical Surgical course NURS275 with integrated Geriatric Content in the nursing student's final semester. Some of the faculty teaching in this course were not approved in the Geriatric content area but were already making plans for this remediation. Preceptorship experience is included in this last course. Records for preceptors were kept but were incomplete and need to be more systematic. Faculty agreed to complete the remediation process and to implement a systematic method for Preceptorship record keeping.

CCC's Nursing Program graduates have consistently scored better than 90 percent on their first time NCLEX pass rate since 2003, except for this last year. The faculty members are tracking the current year and evaluating student information so that this does not start a trend. NCLEX pass rate: 2009–2010 96.08%; 2010–2011 93.88%; 2011–2012 91.80%; 2012–2013 93.48%; 2013–2014 85%; 2014–2015 71.43% (July – Sept) and 83.33% (Oct – Dec).

**ACTION: Continue approval of Contra Costa College Associate Degree Nursing Program.**

- **Hartnell College Associate Degree Nursing Program.**

**Debra Kacmar, Dean of Academic Affairs, Nursing and Allied Health.**

Debra Kacmar was appointed June 20, 2012 and has 100% release time to administer the Associate Degree Nursing, licensed vocational, respiratory care practitioner, and emergency medical technician programs. Ms. Kacmar has sufficient time to administer the ADN program. Mary Cousineau MSN, RN, PNP-BC, CNE was appointed assistant director June 20, 2012 and has 40% of release time to assist the director. A regularly scheduled continuing approval visit was conducted April 20-22, 2015 by Susan Engle, Nursing Education Consultant and Janet Wackerly, Supervising Nursing Education Consultant. The program was found to be in compliance with all regulatory requirements. One recommendation was made under Section 1424(d) Resources- sufficient space to accommodate patterns of student enrollment, storage for equipment, confidential area for faculty/student conversations, laboratory technician support. NCLEX outcomes are above threshold for the past 5 years. The program is consulting with Dr. Linda Caputi to explore a concept-based curriculum. A major curriculum revision is planned for 2015-2016 academic year. The program is interested in improving data analysis and implications for the program. The program created an inter-professional educational (IPE) environment that enhances students' soft and advanced technical skills for marketability.

**ACTION: Continue approval of Hartnell College Associate Degree Nursing Program.**

- **Kaplan College Associate Degree Nursing Program.**

**Ms. Karen Anderson, Program Director, Ms. Joy Brychta, Assistant Director, Dr. David Movsesian, Executive Director, and Mr. Kevin Prehn, Market President.**

A regularly scheduled continuing approval visit was conducted April 29-30, 2014. Visit findings included seven areas of noncompliance and three recommendations. Program faculty and leadership performed an assessment to identify where improvement was needed and then implemented a plan of action to correct all areas of noncompliance and recommendation, with regular progress reports submitted and most corrective actions completed by the end of 2014. The two remaining areas of noncompliance involved curriculum which required extensive revision, and <75% NCLEX-RN pass rate for the year 2013-14. The ELC (8/7/2014) recommended and the Board (9/18/2014) voted to defer action to continue approval so that the program could have additional time to complete the curriculum review/revision and to achieve compliance in regards to NCLEX-RN pass rate. The major curriculum revision proposal is presented in this meeting agenda as a separate item and the NCLEX pass rate for the 2014-15 year is above 75%.

**ACTION: Continue approval of Kaplan College Associate Degree Nursing Program.**

- **Los Angeles City College Associate Degree Nursing Program.**

**Dr. Christina Baskaran, Program Director and Dr. Thelma Day, Dean-Academic Affairs.**

Barbara Napper, RN, MSN, was the Director of Nursing Program since July 28, 2014. Jocelyn Simpson-Turk, MSN, RN, Assistant Director, was appointed Assistant Director, on September 19, 2013. Christina Baskaran, RN, MSN, PhD, was appointed Director of Nursing program July 1, 2015. LACC reopened the Associate Degree Registered Nursing Program in fall, 2002 with BRN approved enrollment of twenty. Beginning January, 2012, with funding from the Chancellor's Enrollment Growth Grant, the number increased to forty admissions per semester. Current enrollment is 160 students. A regularly scheduled continuing approval visit was conducted on May 4-5, 2015, by Loretta, Chouinard, NEC and Badrieh Caraway, NEC. The program was found to be in non-compliance with the Board rules and regulations in Section 1424(d) Sufficiency of Resources. On June 26, 2015, the program submitted a progress report addressing the area of non-compliance.

Since the 2013 resignation of the nursing program director the program has experienced difficulty filling the full-time nursing program director vacancy. Recently there has been a reduction in the grant funding resources, such as the skills lab and the simulation lab coordinator, and the nursing counselor /recruiter positions. A total of 29 faculty (7 Full –Time and 22 Part -Time) are teaching in the program. During the visit, faculty expressed concern regarding lack of stability with the interim director position; the recruitment effort for hiring the permanent director was in progress. There is sufficient faculty to meet the students' needs. Program resources include a large skills lab, a simulation lab, and a computer lab. The state of the art skills lab has four (4) patient care stations, each with high fidelity human patient simulator (Noelle, Sim Baby, and two Sim Man). The simulation lab has ample simulation equipment, including high fidelity simulators of adult, child, OB and infant models. Grant funds support nursing counselor, skills lab coordinator/ tutor/ remediation, simulation technician, equipment and supplies, and faculty attendance at workshops and seminars. There has been no instructional assistant since Fall 2014 which has affected the open lab hours. Students are frustrated by limited access to an RN supervised skills lab to provide practice, and simulation and media to enhance their learning. College administration voiced their commitment to continue to provide the program with needed resources should granting funding sources discontinue.

The program has an articulation agreement with CSULA for RN-BSN and residency program with LA Children's Hospital. Three cohorts of ten students have matriculated to CSULA with the first cohort graduated in Spring 2015. The program also has Memorandum of Understanding agreements signed with Chamberlain and the University Of Phoenix. NCLEX- RN pass rate has exceeded BRN requirements for the past six years.

**ACTION: Continue approval of Los Angeles City College Associate Degree Nursing Program.**

- **Modesto Junior College Associate Degree Nursing Program.**

**Ms. Lisa Riggs, Associate Degree Program Director.**

Lisa, Riggs, RN, PHN, MSN was appointed Associate Degree program director May 28, 2009. Ms. Riggs has 98% release time to administer the program with 2% teaching assignment. Kelly Butler RN, PHN, MSN appointed 8/27/2012 and Sandra Brunn RN, MSN, PNP appointed January 13, 2014 are assistant directors with 68% and 9% release time respectively. Modesto Junior College is located in the upper portion of the San Joaquin Valley. Modesto Junior College and Columbia College are part of the Yosemite Community College District. The college has two sites: the original MJC-East on College Avenue and MJC-West on Blue Gum Avenue in northwest Modesto. The nursing program is offered on the West campus at Glacier Hall and the Columbia satellite campus in the Redbud building. Program strengths include long term leadership provided by the director, NCLEX-RN pass rates, community and administration support, strong

application technology, Integrated Resource Center, and use of high-fidelity simulation to improve inter-professional collaboration.

A regularly scheduled continuing approval visit was conducted by Susan Engle, Nursing Education Consultant on February 17-19, 2015. The program was found to be in compliance with BRN rules and regulations. Five recommendations were given in the areas of CCR Section 1425(c) the director shall dedicate sufficient time for the administration of the program; Section 1424(f) The program shall have a board approved assistant director at the Columbia Campus; Section 1424(d) the program shall have sufficient resources; 1424(k) the student/teacher ratio in the clinical setting; and 1426 required Curriculum. A letter from Modesto Junior College program dated May 15, 2015 responded to the five recommendations.

**ACTION: Continue approval of Modesto Junior College Associate Degree Nursing Program.**

## **B. DEFER ACTION TO CONTINUE APPROVAL FOR PRELICENSURE NURSING PROGRAM**

### **• Dominican University of California Baccalaureate Degree Nursing Program.**

**Dr. Andrea Renwanz Boyle, Chair and Dr. Luanne Linnard-Palmer, Assistant Director.**

Dr. Andrea Renwanz Boyle, Chair and Professor was appointed Director July 1, 2014. Ms. Boyle has 88% release time during the academic year and 100% during the summer. Dr. Luanne Linnard-Palmer, Professor was appointed Assistant Director October 1, 2014 with 25% release time. A regularly scheduled continuing approval visit was conducted April 13-15, 2015 by Nursing Education Consultants Susan Engle and Carol Mackay. The program was found to have two areas of non-compliance Section 1431 Licensing Examination Pass Rate Standard, and Section 1424(g) Faculty members shall have the primary responsibility for developing policies and procedures, planning, organizing, implementing and evaluating all aspects of the program. There were four recommendations- Section 1424(d) resources, 1425 notification faculty changes, 1426(b) incorporate standards of competent performance into curriculum, 1426(d) direct patient care experiences in beginning nursing courses. The program submitted a comprehensive progress report that details the progress made to date to correct the areas of non-compliance and address the recommendations. The program made substantial gains to minimize the areas of non-compliance. The director, faculty, administration, and the college are committed to student success as evident in the program faculty dedication, support, rigor and scholarship. NCLEX pass rate: 2009-10 83.1%; 2010-11 76.09%; 2011-12 74.58%; 2012-13 93.15%; 2013-14 71.97% and 2014-15 <75%. The program has implemented and revised the plan to improve NCLEX-RN pass rates for first time testers.

In fall 2015, the School of Health & Natural Sciences and the Department of Nursing plan to relocate to the Meadowlands Hall newly renovated historic 30,000 square-foot centrally located building that will centralize nursing faculty and staff into one location to better meet student needs. The building will contain general classrooms, computer laboratory, dean's office, five high fidelity simulation rooms with video conferencing/debriefing rooms and two large nursing laboratories. This move will provide optimal space and technology resources for the student enrollment patterns.

**ACTION: Defer action to continue approval for Dominican University of California Baccalaureate Degree Nursing Program with progress report required and return to Education/Licensing Committee in August 2016.**

### **• Reedley College at Madera Community College Center Associate Degree Nursing Program.**

**Ms. Theresa Souza, past Director of Nursing, Ms. Kimi Kato-Gee, current Director of Nursing, Dr. Chin, Dean of Instruction.**

Theresa Souza, RN, MSN, CNS, Director of Nursing was the program director at the time of visit and Kimi Kato-Gee, RN, MSN the Assistant Director of Nursing. Ms. Kato-Gee became the program director upon Ms. Souza’s retirement in June 2015 and the new full-time faculty Ms. Elizabeth Day hired to begin July 1, 2015 assumed the role of assistant director.

Reedley College (RC) is part of the State Center Community College District, and operates two extension centers, one of which is the Madera Community College Center where the LVN-RN program is presented. A regularly scheduled continuing approval visit was conducted on April 30, 2015 by Nursing Education Consultants Leslie A. Moody and Linda Sperling. There were three findings of noncompliance for CCR Section 1424(e) insufficient program director time for administration of the program, 1424(d) insufficient faculty and support staff and related 1424(h) insufficient faculty, and 1426(d) lack of geriatric clinical component. Five recommendations were written: CCR Section 1424(b)(1) improve program evaluation; 1424(g) increase part-time faculty participation in program review and coordination; 1426(b) application of QSEN competencies; 1426(f) med/surg course clinical evaluation tools; and 1427(b) assigning and coordinating students’ clinical learning experience assignments. The program submitted a thorough corrective plan of action which addresses all areas of noncompliance and recommendation. A remaining area of concern is the lack of OB instructional and content expert faculty which, although currently in recruitment, is not planned to be filled until January 2016 with the next OB course planned to begin in March 2016.

Initial program approval was granted in June 2010 for enrollment of 24 students each year, and the first cohort of 12 students began Summer 2011. In the first four years of program operation there were a total 40 students admitted of which 30 completed. Twenty-two of the thirty completers have taken NCLEX of which 19 have passed. Enrollment, completion and NCLEX-RN pass are depicted in the following table:

	2011-12	2012-13	2013-14	2014-15	2015-16
Enrolled	12	15	8	7 (2 re-entry)	15
Completed	7	13	4	6	in progress
NCLEX-RN Taken/Passed*	4/4 100%	5/5 100%	10/8 80%	3/2 66.67%	—————

\*NCLEX pass numbers presented are for BRN measurement year, not per program cohort

Dr. Chin, Dean of Instruction and Dr. John Fitzer, Vice President for the Madera Center acknowledged that resources for the program are not adequate to support full enrollment of 24 students, and have sponsored measures to increase resources so that the lower enrollment of 12-15 will be adequately supported. Improvements implemented include designation of 25% time of an admissions counsellor for the nursing students, hiring a new full-time program director and a new full-time faculty who will also assume the assistant director role, hiring a technician that will have 50% time dedicated to assist with skills lab physical maintenance, increasing faculty time to allow open skills lab time for students, and recruitment of OB faculty to provide instructional faculty and content expert for this content area. There is a need for increased attention to program review, specifically in regards to curriculum, which has been limited by only two full-time faculty employed and irregular part-time faculty participation. Part-time faculty will now be compensated for participation which should increase the scope and depth of faculty contribution.

Dr. Chin and Dr. Fitzer provided information regarding tentative future plans (5-10 years) to apply for approval to implement a generic ADN program and, pending passage of a public bond, construction of a new building to house the nursing programs. Students express overall satisfaction regarding program delivery with the exception of the unmet need for open skills lab access, and confidence in the faculty, who are found to be clinically current and competent.

**ACTION: Defer action to continue approval for Reedley College At Madera Community College Center Associate Degree Nursing Program, with progress report due for January 2016 Education/Licensing Committee. Limit annual enrollment to fifteen students.**

**C. APPROVE MAJOR CURRICULUM REVISION**

**Azusa Pacific University LVN-Baccalaureate Degree and Entry Level Master's Degree Nursing Program.**

**Dr. Renee Pozza, Associate Dean, School of Nursing.**

The program submitted a major curriculum revision for two tracks, LVN to BSN and the ELM with Nursing Education option, to be implemented in Fall, 2015.

Entry Level Master's Degree (ELM) - Nursing Education track: The APU School of nursing began offering the Entry Level Master program in 2004. Enrollment is approximately 20 students per cohort, three times per year, at three site locations (Azusa/Monrovia, San Diego, and Inland Empire), for a total of 180 students per calendar year. The proposed revision prepares graduates for a role in nursing education as either a clinical faculty member or nurse educator, and will prepare students for eligibility to take the Nurse Educator national certification examination offered by the NLN. The proposed curriculum will be an exact replica of the current BRN approved ELM program with the addition of post-licensure course work to support the track. Students may take the post-licensure coursework in a full or part-time format. ELM students take RN licensure examinations in semester 5 of program. Students must have equivalent of one year full-time RN experience in order to enroll in the clinical teaching practicum which is scheduled in their final semester of the program. The course sequence of 37 units (total ELM program of 117 units) prepares the student in teaching and learning theories, and curriculum development, with a teaching practicum for hands-on experience. The total program length varies from 3-6 years depending on full or part-time study. The revised units are: nursing 52 units (theory 30; clinical 22); communication 6 units; science 22 units; total units for licensure 80 units; other degree requirements 37 units. The University has approved fiscal support to the program, with a budget allowing for addition of two full-time faculty members, one full-time staff support, and adjunct faculty to support the coursework. A current faculty member will assume leadership for this additional track and will report to Dr. Bonita Huiskes, Department Chair of Graduate Programs. Additional clinical placement needs should be minimal as the curriculum is based on practical experiences in teaching. Current full-time faculty members will serve as preceptors and mentors to the students in this track.

LVN-BSN Track: Over the past few years, the School of Nursing at Azusa Pacific University has increasingly received calls and requests from LVNs interested in pursuing higher education and obtaining their RN license. This proposal seeks approval to enroll LVN students utilizing a cohort model in groups of 10-20 students each semester based on a three semester year. This track will be organizationally located within the Department of Undergraduate Professional Programs, along with the RN to BSN program and the transfer BSN program in the High Desert (2+2). LVN students will complete coursework and clinical rotations at the Azusa/Monrovia campuses with support from the various Los Angeles area clinical partners. There will be no negative impact on students, faculty or clinical placements of the existing BSN program. The traditional BSN program will remain stable with an enrollment of 80-100 students per year. The 2+2 High Desert transfer BSN program will remain stable with an enrollment of 60 students per year. The proposed curriculum replicates the existing BRN approved BSN program curriculum, with the same admission criteria and transferability of coursework. Course objectives and student program outcomes are clearly identified and align with all of the BSN programs offered at APU. The curriculum for the LVN to BSN is intended for students who have completed 60 units of transferable courses. The University enrollment team, in conjunction with nursing department staff and faculty, will evaluate each applicant to

assess prior education and experience. Credit may be obtained for prior coursework through transcript evaluation or by challenge examination for some courses. The Previous Nursing Training Portfolio will be utilized to determine if the basic nursing course, UNRS 105 -Foundations of Professional Nursing (6 units), can be waived as a requirement. Additional credit for prior extra-collegiate learning may be earned through this process (UNRS 260 Nutrition (2 units) and UNRS -113 Pharmacology (2 units)). LVN students will be required to take UNRS 270 Professional Concepts in Nursing (2 units) in their first semester as a role transition course.

The LVN students will use the Monrovia building, which is located six miles from the main APU campus. The Monrovia building currently houses 14 full-time faculty, seven full-time staff, and 13 to 14 adjunct faculty members with the potential for further expansion. In order to accommodate increased enrollment Azusa Pacific University leased space near the Azusa campus in Monrovia on behalf of the School of Nursing in 2013. An additional 7,500 square feet was added in the second floor expansion, and 6 more faculty offices are projected for the Fall 2015 semester. The Monrovia building has a computer lab and carts of laptop computers that can turn any classroom into a computer lab. The LVN students have access to a health assessment lab, a skills lab, and a 5 room simulation center with a debrief room. As part of the expansion proposal the university has approved a full-time LVN to BSN faculty director, 3 full-time nursing faculty, 4 full-time adjunct faculty and a staff level program manager. Two full-time nursing faculty positions have been hired to support the LVN to BSN track with a faculty search committee actively recruiting the additional nursing faculty. The program will have a 50% faculty simulation coordinator and a 50% simulation technician to support simulation. Documents submitted demonstrate that the increased resources (fiscal, physical, academic support, and faculty members) allocated to this program are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Students have been notified for the past two years of these curriculum changes. Information and applications have been posted on the University and School of Nursing websites. Methods for easy transition into the program have been provided. The revised units are: nursing 50 (theory 28; clinical 22); communication 6; science 25; total units for licensure 81; other degree requirements 54; total units for graduation 135.

This proposal meets BRN rules and regulations. The program plans to implement all elements of these revisions beginning Fall 2015.

**ACTION: Approve major curriculum revisions for Azusa Pacific University Baccalaureate Degree (addition of LVN-BSN track) and Entry Level Master's Degree Nursing Programs.**

• **California State University, Fresno Baccalaureate Degree Nursing Program.**

**Dr. F. Ndidi Griffin-Myers, Director/Chair and Dr. Sylvia Miller, Assistant Director.**

The major curriculum revision proposal to be implemented Fall 2016 restructures the curriculum into five semesters from the current six semesters. This proposal reduces overlapping/redundant content, and reshapes and strengthens courses. The following is a summary of the changes:

- Course syllabi, course objectives and student evaluation tools reflect consistent application of the framework and an appropriate progression of concept and skill complexity across the program.
- Some course names were revised to reflect realignment of content and/or creation of a new course.
- First Semester: Two separate courses (Fundamentals Skills and Health Assessment) combined to provide integrated approach to teaching content. Pathophysiology course expanded to provide more depth of content. Fundamentals Lab/Clinical hours increased to provide simulation practice which contributes to skills assimilation and application of the nursing process in the clinical setting. Increase of 2 units.
- Second Semester: Nursing Research moved from fourth to second semester to provide for an earlier presentation in order to strengthen critical thinking & clinical judgment. Increase of 3 units.

- Third Semester: Med-Surg (theory & clinical) deleted due to significant overlapping of content with two other Med-Surg courses (second & fourth semester) – remaining content shifted to those courses; clinical units/hours shifted to first semester fundamentals lab course and fifth semester Leadership Practicum. Obstetrics-Pediatrics content replaces Psych-Mental Health (moved to fourth semester). No change in units.
- Fourth Semester: Advanced Med-Surg and Cardiac dysrhythmia courses moved from fifth to fourth semester. Advanced Med-Surg course revised for content shifted from third semester Med-Surg course. Decrease of 2 units.
- Fifth Semester: Community courses (theory & clinical) unchanged. Leadership & Practicum moved here from sixth semester – practicum hours increased to provide students additional clinical time to gain more in-depth knowledge and experience. Service Learning Project course (1 unit) moved here from sixth semester. Newly developed Advanced Problem-Based Clinical Case Studies course added to provide an opportunity for students to participate in a comprehensive review and discussion of nursing care through the use of clinically-based scenarios and situational learning opportunities. Increase of 4 units.
- Sixth Semester: Deleted. Courses moved to fifth semester.

Summary of revised units: Nursing Units increased from 49 to 50 units: Theory increased from 29 to 31 units; Clinical decreased from 20 to 19 units. Total Units for Licensure increased from 83 to 84 units. No changes to Communication and Science units. Other degree requirements decreased from 36 to 35 units. Total Units for Graduation remain at 119. This proposal meets BRN rules and regulations and details of the curriculum changes are outlined in the attachments to this Agenda Item Summary.

**ACTION: Approve major curriculum revision for California State University, Fresno Baccalaureate Degree Nursing Program.**

- **Western University of Health Sciences Entry Level Master’s Degree Nursing Program.**

**Ms. Ivy Tuason, Director of Nursing.**

Western University of Health Sciences (WUHS) program submitted a major curriculum revision request for the three ELM track options: Clinical Nurse Leader (CNL), Administrative Nurse Leader (ANL) and Ambulatory Care (AMB). These three track options have been added to the initially Board approved ELM-FNP option, in 2004. The revision is being made to facilitate completion of the MSN degree in a shorter period (three years vs four years) and to enhance employment opportunities for ELM students. The program had added these options mirroring the prelicensure portion of the ELM-FNP program but had not obtained approval. This oversight was noted during the recent continuing approval visit and is being brought for Board approval at this time. The proposed change in the curriculum includes addition of MSN course requirements for Clinical Nurse Leader, Administrative Nurse Leader, and Ambulatory Care to the prelicensure ELM nursing content already approved for NP track. Information regarding courses required for each track was documented and reviewed, and the curriculum for each option was determined to meet BRN requirements.

**ACTION: Approve major curriculum revision for Western University of Health Sciences Entry Level Master’s Degree Nursing Program**

- **Glendale Community College Associate Degree Nursing Program.**

**Ms. Kohar Kesian, Assistant Director, Ms. Michelle Ramirez, Assistant Director, Ms. Karima Esmail, Associate Professor, Ms. Rose Onyekwe, Instructor, and Ms. Catherine Dudley, Instructor.**

The program submitted a major curriculum revision proposal to be implemented in Fall 2015, which reflects the updated language of the American Association of Colleges of Nursing (AACN), integrates Quality and Safety Education for Nurses (QSEN) competencies in the curriculum, and strengthens courses and overall

program outcomes. The proposed changes are the work of the faculty group, and based on the faculty experiences, training, student evaluations, other programmatic evaluation data, and trends in health care. The following is a summary of the revision proposal elements: Revision of the program's fundamental frameworks of their mission, vision, value, goals, and philosophy, which are operationalized in revised threads/concepts, course and program objectives, leveled course learning outcomes and competencies, graduate outcomes and course re-sequencing to fully integrate Quality and Safety Education for Nurses (QSEN) competencies. The referenced works included the QSEN competencies; the American Nurses Association Code of Ethics, Nursing Scope and Standards of Practice, Nursing Informatics Scope and Standards; and AACN Essentials of Baccalaureate Education. Revision of one units NS 217 LVN-RN Bridge Course-1 unit course revised from: 0.75 units lecture and 0.25 units lab to 0.5 units lecture and 0.5 units lab; to increase skills practice and simulation time in the nursing resource lab.

Complete documentation was provided to NEC for review, including course syllabi and content distribution map, and all were found to demonstrate total curriculum integration of the revised structure, philosophy, framework and concepts. The revised units are: nursing 41.5 units (theory 21; clinical 20.05); communication 6 units; sciences 17 units; total units for graduation 79.5. This proposal meets BRN rules and regulations.

**ACTION: Approve major curriculum revision for Glendale Community College Associate Degree Nursing Program.**

- **Kaplan College Associate Degree Nursing Program.**

**Ms. Karen Anderson, Program Director, Ms. Joy Brychta, Assistant Director, Dr. David Movsesian, Executive Director, and Mr. Kevin Prehn, Market President.**

The program has two tracks, a generic option and an LVN Step-up option, with the LVN 30 unit Option also offered. During the April 2014 continuing approval visit curriculum deficits were identified and the program recognized the need for comprehensive curriculum review and revision. Faculty and program leadership have worked with an external consultant during the past year to perform a thorough review, applying resources of contemporary nursing practice, education and content standards to rewrite the curriculum and redesign program delivery. The program provided a very detailed and comprehensive explanation of proposed program changes including details of course content. The proposed major curriculum revision includes the following:

- Revised statements of program mission, philosophy and unifying framework which have been applied to direct the revised curriculum and instruction.
- Revised and mapped course outcomes across all courses, and revised student clinical performance assessment instruments that reflect course outcome statements with levelled performance expectations for each nursing course.
- Updated and realigned content of all program courses including natural and behavioral sciences, math, communications and nursing.
- The presentation of the program is changed from 6 semesters to 8 quarters for the generic option and from 5 semesters to 7 quarters for the LVN Step-Up option, to provide improved alignment of courses and term length with other campus programs. Overall program cost does not change.
- Course allotment of hours for lab and clinical experiences was reconfigured with corresponding revision of units.
- Course sequencing is revised to ensure knowledge progression as well as considering distribution of units to allow student eligibility for financial aid.
- Pharmacology content is split into two separate courses and hours increased.

- Instructional strategies, lesson plans, and instructional tools are updated including expanded use of NCLEX style exam questions.

This revision improves curriculum content and delivery, meets BRN requirements and is planned to be implemented for cohorts admitted January 2016 and after. The program will not change from their currently approved enrollment/admission pattern of 50 students admitted three times per year (Jan-May-Sept) at this time, although the revision lays a foundation for future additional revision proposal to change the enrollment/admission pattern by increasing frequency of enrollment with decreased cohort size.

**ACTION: Approve major curriculum revision for Kaplan College Associate Degree Nursing Program.**

- **Ohlone College Associate Degree Nursing Program.**

**Ms. Sally Scofield, Director and Dr. Kim Stiles, Faculty.**

This proposal is for a major curriculum revision to be implemented Fall 2015. The proposal changes from Roy's Adaptation Model to the "Ohlone Caring Science" model, with revised conceptual framework, philosophy and program learning outcomes. The proposed "caring science" model has five major concepts and thirteen integrated processes identified as themes and threads. The conceptual framework is drawn primarily from Dr. Jean Watson's Human Caring Science theory of nursing. This revision does not change the total curriculum plan, course numbers, sequencing, and primary content. The rationale for changing the conceptual framework is to better prepare their graduates for current nursing practice. The change will align the nursing program with Ohlone College's culture of caring and clinical facility adoption of caring science model. The change reflects the program's faculty's current values and commitment to care for students and patients.

The Ohlone College Nursing Program used an internal consultant, Dr. Kim Stiles, a faculty member of the nursing program who used her year-long sabbatical leave for 2014-15 to coordinate the nursing program's curricular change to caring science. She became an expert resource for this curricular change through concurrent participation in the six month Watson Caring Science Institute's Caritas Coach Education Program. Dr. Stiles worked with Dr. Jan Anderson an expert in associate degree curriculum revision to caring science. The Caritas Coach Education Program is an American Nurses Credentialing Center (ANCC) accredited nursing skills competency program that prepares participants to implement caring science practices in a variety of settings. Administration, faculty, students, and alumni were invited to participate in workgroup activities. Workshop participants (the Dean, Program Director, 7 faculty, 4 students, and 3 alumni) then conducted a values clarification exercise based on the new information presented that created a foundation for new terminal student learning outcomes for the program.

**ACTION: Approve major curriculum revision for Ohlone College Associate Degree Nursing Program.**

- **Pasadena City College Associate Degree Nursing Program.**

**Dr. Marylynn Aguirre, Director of Nursing.**

The program submitted a major curriculum revision proposal to be implemented in Fall 2015. The following is a summary of the revision proposal elements:

- Separation of three specialty courses (Maternal- Newborn Nursing, Pediatric Nursing, and Psychiatric Mental Health Nursing) from the Medical Surgical component to allow the program to more effectively utilize clinical sites and provide an improved clinical experience for students. 2nd Semester will be three separate courses (theory and lab): Maternal Newborn will be increased by 0.5 units of clinical and Pediatric Nursing will be increased by 0.5 units of clinical. N51A and N51L – 5 weeks of Medical Surgical Nursing (3units); N40 and N40L – 5 weeks of OB Nursing (3 units); N41 and N41L - 5 week of

Pediatric Nursing (3units). 3rd Semester will be two separate courses (theory and lab). N52A and N52L – 10 weeks of Medical Surgical Nursing (5.5 units); N42 and N42L – 5 weeks of Psychiatric Mental Health Nursing (2.5 units). By specifying each course in the PCC college catalog, the program will facilitate student registration and transferability. The change will also improve assessment of student learning, and enhance remediation process. Faculty preparation for teaching will be improved, as faculty can maintain expertise in one content area. Separate courses will allow the program to more effectively utilize clinical sites and help provide an improved clinical experience for students.

- Reflect the updated language of American Association of Colleges of Nursing's (AACN), integrate the Quality and Safety Education for Nurses (QSEN) competencies in the curriculum, and strengthen courses and overall program outcomes. Dr. Aguirre, and program faculty in response to the Institute of Medicine Recommendations (IOM), have conducted a thorough review of the curriculum resulting in the revisions to fundamental frameworks of mission, vision, value, goals, and philosophy, which are operationalized in revised threads/concepts, course and program objectives, leveled course learning outcomes and competencies, graduate outcomes and course re-sequencing to fully integrate Quality and Safety Education for Nurses (QSEN) competencies. The referenced works included the QSEN competencies; the American Nurses Association Code of Ethics, Nursing Scope and Standards of Practice, Nursing Informatics Scope and Standards; AACN Essentials of Baccalaureate Education; and the National League for Nursing's Education Competencies Model.

The revision resulted in one unit increase in Nursing from 38 to 39 units. The revised units are: nursing 39 units with theory 18.75 units (no change) and clinical 20.25 units (one unit increase- 0.5 OB and 0.5 pediatrics); communication 7 units; sciences 18 units; total units for graduation 79. Complete documentation was provided to NEC for review, including course syllabi and content distribution map, and all were found to demonstrate total curriculum integration of the revised structure, philosophy, framework and concepts. This proposal meets BRN rules and regulations.

**ACTION: Approve major curriculum revision for Pasadena City College Associate Degree Nursing Program.**

- **San Joaquin Valley College Associate Degree Nursing Program.**

- **Dr. Janine Spencer, Program Director and Dr. Ruth Ngati, Assistant Director.**

Dr. Janine Spencer, RN, EdD, is the Program Director at the primary campus of the SJVC ADN Program, located in Visalia, California. Dr. Ruth Ngati, RN, DNP is the Assistant Director and coordinator of the nursing students at the SJVC's Ontario Campus. On April 26, 2015 Corinthian Colleges, Inc., closed Everest College, Ontario ADN Program without notice, leaving the students at the school with little option for completing their nursing program. SJVC nursing program came forward and submitted a curriculum proposal for the Everest students that allowed transfer of credits from Everest College and a curriculum plan that allowed students to complete a nursing curriculum and graduate from SJVC. This plan only added three months to their anticipated graduation date, making it possible for students to earn the associate degree. The Board gave limited approval to SJVC on June 4, 2015 to use their Ontario Campus to run a nursing program as an alternate location for the three cohorts of Everest students to complete the curriculum. The last cohort group from this program will graduate on July 2016. The SJVC Ontario Campus offered degree and certificate programs other than the registered nursing, the program resources, such as classrooms and student services were already in place and operational. It was SJVC's plan to establish a SJVC ADN Program at this campus for some time before the event with the Everest College.

On July 1, 2015 a site visit was conducted to verify adequacy of resources and nursing labs. SJVC had already interviewed and hired the majority of Everest's faculty and renewed the contracts for clinical

agencies used by Everest College and continued to secure additional agencies. Contracts were reviewed at this time for adequacy of clinical sites. The program submitted a proposal on July 6, 2015 to add this SJVC, Ontario campus to the primary SJVC, Visalia campus, as an alternate location for nursing program instruction. The proposal followed the procedures outlined in the guideline and described adequacy of physical and personnel resources for SJVC to continue to offer the ADN program at Ontario campus when the temporary approval for its use is completed on July 2016. Current physical and educational resources have already been verified as sufficient. The proposal stated enrollment of 24 students in the first cohort on May 18, 2016, followed by a second cohort of 36 students in April 2017. The admission cycle is 36 students annually. The proposal indicated that LVN advanced placements will be available at the Visalia campus and limited Ontario campus to admit generic ADN students.

The Ontario campus currently has the faculty, clinical agencies, and physical resources to handle a cohort size of 40 students. The program has established a six-bed skills lab and a separate simulation lab area with two high-fidelity manikins and a birthing simulator for instruction of nursing students. The plan considers that as Everest's transferred students graduate, there will be faculty and clinical agencies available to handle new admissions. When the proposed new SJVC, Ontario cohort (24 students) is admitted on May 18, 2016 entering the first semester nursing courses, there is one group of 42 Everest students, who will be completing fourth semester courses. Due to their scheduling there is a little overlap as students are transitioning the end of the course. When the first cohort is starting in their third semester, the second SJVC-Ontario cohort (36 students) will enter first semester. There will be a total enrollment of about 72 students in the nursing program at any one time with the annual enrollment cycle of 36 students in April/May. Schedule of courses and clinical placement has been evaluated. The program has a clinical coordinator, who continues to expand the list of available clinical sites. Dr. Ngati, Assistant Director, will be the coordinator and contact person for the Ontario campus. The program has elected to appoint a second Assistant Director, to assist Dr. Ngati with the administration of the program. SJVC has explored an IT system that allows meetings between the campuses for faculty meetings.

The SJVC proposal to add a new alternate site to their Ontario campus by admission of SJVC's generic students that replaces Everest students allows continued use of the current resources at the Ontario Campus and the contracted clinical agencies to offer an ADN Program. This proposal meets the requirements for establishing alternate campus location.

**ACTION: Approve major curriculum revision for San Joaquin Valley College Associate Degree Nursing Program.**

• **Loma Linda University Nurse Practitioner Program.**

**Dr. Elizabeth Bossert, Dean, and Dr. Susan Lloyd, Associate Dean.**

The LLU School of Nursing has combined the current MS and DNP programs to form a BS-DNP program slated to begin Fall 2015. This program will house the 5 NP tracks (Adult-Gerontology NP, Family Nurse Practitioner, Pediatric Nurse Practitioner, Neonatal Nurse Practitioner, Psychiatric Nurse Practitioner) to provide nurse practitioner students with an opportunity to receive both a master's degree with state and national certification, as well as a practice doctorate (DNP) degree within one program. The goal of this program is to more effectively prepare the nurse practitioner for a leadership role in the health care system. The AACN is strongly recommending schools to provide this program in the attempt to make the DNP the entry level for advanced practice nurses. Summary of revision:

- The Advanced Physical Assessment Course for 4 tracks has changed from 3 units to 4 units to add in health promotion strategies. The NNP takes a separate Neonatal Advanced Health Assessment Course (4 units) to provide specific training for the neonate.

- For all NP tracks,( Adult-Gerontology NP, Family NP, Pediatric NP, Neonatal NP, Psychiatric NP) theory content has not changed from the previously approved BRN Consultant Approval Report (10-20-22-14). Both theory and clinical units have been moved between clinical courses for better flow. Units have been added to each program to strengthen the clinical courses and include a new skills lab.
- All students in the BS-DNP program have the option to “Opt Out” of the program and receive an MS degree after completion of the required courses.
- Course Sequencing: Students begin their sequenced clinical courses after completion of their Pharmacology, Pathophysiology, and Advanced Physical Assessment courses and most of their theory courses. Length of program completion is dependent upon whether the student chooses to study part-time or full time. In the MS opt out program students will complete in 2-3 years; in the BS-DNP program it is expected students will complete in 3-4 years.
- All postmasters’ certificate programs have been closed due to the Title IV funding issue which no longer allows for federal loans for these programs.
- The revised program will increase enrollment for the NP tracks. At the last BRN site visit (2014) there were 18 students enrolled. The program currently has accepted 45 NP students to begin in fall 2015.

There will be no negative impact upon either students in the MS-NP teach out program or those selecting to transition to the BS-DNP program. Those transitioning into the BS-DNP program will be given credit for courses already taken. The currently approved NP faculty will continue to teach the NP clinical courses as previously identified. One new full time FNP instructor is currently being hired to strengthen the program, and one Adult-Gerontology NP is being recruited for a faculty member who is leaving. A clinical site coordinator is currently working successfully to obtain new clinical sites and more NP preceptors for when they are needed in 2017. The BS-DNP program theory courses will be presented in the hybrid model. The NNP and the Psych NP programs will be piloting the hybrid model within the next year. The other NP options will plan to pilot this format in the next 2-3 years. Current NP students continue in the face to face format.

Students have been notified for the past two years of these curriculum changes. Information and applications have been posted on the University and School of Nursing websites. Methods for easy transition into the program have been provided.

All NP students will be prepared to sit for certification exams after completion of the NP clinical courses. Students in the MS Opt Out will be ready to sit for their certification exams following the completion of their comprehensive project, posting of their degree and application to the certifying body. For students in the BS-DNP program, once the NP clinical courses have been completed, a letter stating all NP course content has been completed will be sent to the certification agencies, which will allow students to sit for their exams prior to completion of the DNP degree. It is expected that the only DNP requirement needed will be completion of the DNP project.

This proposal meets BRN rules and regulations and details of the curriculum changes are outlined in the attachments to this Agenda Item Summary. The program plans to implement all elements of this revision beginning Fall 2015.

**ACTION: Approve major curriculum revision for Loma Linda University Nurse Practitioner Program.**

**BOARD OF REGISTERED NURSING**  
**Education/Licensing Committee**  
**Agenda Item Summary**

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**AGENDA ITEM: 7.3**  
**DATE: September 3, 2015**

**ACTION REQUESTED:** Vote on Whether to Accept Recommendation to Place East Los Angeles College Associate Degree Nursing Program on Warning Status with Intent to Close the Nursing Program

**REQUESTED BY:** Michael Jackson, MSN, RN  
Chairperson, Education/Licensing Committee

**BACKGROUND:** Lurelean Gaines, RN, MSN, Program Director/Chairperson  
The Board at its February 6, 2014 meeting placed the program on Warning Status with Intent to Withdraw Approval, as a result of the findings and progress to date from the 5 areas of non-compliance identified at the October 7-8, 2013, scheduled continuing approval visit (letter attached). The Board at its September 18, 2014 meeting voted to change the program's approval status to Defer Action to Continue Approval (letter attached).

Actions that the program was required to comply with as a condition of the Defer Action to Continue Approval status (September 18, 2014) included:

- Program to return to Education/Licensing Committee for a progress report in August 2015
- Submit quarterly progress reports to the NEC
- Continue to recruit full-time faculty to fill the psych/mental health position
- Continue to limit program admission/enrollment to (48) students admitted twice annually

Responses sent to the NEC after September 2014 included:

Submission of 4 progress reports from December 2014- June 2015. The program met the requirement to submit quarterly progress reports. The Systematic Plan for Program Evaluation and Assessment of Outcomes document was revised in spring 2015, as recommended by the NEC, and provides information on program review by faculty (attached).

The program did receive approval for a new assistant instructor in the mental health and geriatric nursing areas (Nelson Okeke 4-8-15). The progress report submitted on June 23, 2015 (attached), indicates that the program is continuing the recruitment process for 1 full-time mental health faculty position in summer 2015.

The program reported that it continued to limit new enrollments to 48 for new students entering the program in Winter/Spring 2015.

NCLEX- RN examination pass rates are:

2014-2015 – 58.02% - (81 taken, 47 passed) -July 2014-Mar. 2015

2013-2014 - 49.45% - (91 taken, 45 passed)

2012-2013 – 62.28% - (114 taken, 71 passed)  
2011-2012 – 82.26 % - (124 taken, 102 passed) \* the only year in last eight years where pass rate > 75%  
2010-2011 – 69.05% - (84 taken, 58 passed)  
2009-2010 – 61.67% - (120 taken, 74 passed)  
2008-2009 -74.77% - (107 taken, 80 passed) \*\* close to 75% pass rate  
2007-2008 – 64.44% - (90 taken, 58 passed)

The NCLEX examination pass rate area of non-compliance remains unresolved from the October 2013 continuing approval visit. The program implemented the major curriculum revision approved by the Board in November 2014, with newly enrolled students as planned in January 2015. This cohort is scheduled to graduate in December 2016. The Systematic Plan for Program Evaluation and Assessment of Outcomes data analysis indicated that “many first- time test takers are delaying first attempt (6) months to a year.

**ELC Recommendation: Place East Los Angeles College Associate Degree Nursing Program on Warning Status with Intent To Close The Nursing Program. The program is required to submit quarterly progress reports to the Nursing Education Consultant and return to the Education/Licensing Committee in August 2016.**

**NEXT STEPS:** Place on Board agenda.

**PERSON TO CONTACT:** Shelley Ward, MPH, RN  
Nursing Education Consultant



February 11, 2014

Ms. Lurelean Gaines, RN, MSN  
Program Director/Chairperson  
East Los Angeles College Associate Degree Nursing Program  
1301 Avenida Cesar Chavez  
Monterey Park, CA 91754

Dear Ms. Gaines:

The Board of Registered Nursing, at its February 6, 2014 meeting in Oakland, California determined that the East Los Angeles College Associate Degree Nursing Program (ELAC) was not in compliance with the requirements set forth in Article 3 of Division 14 of Title 16 of the California Code of Regulation regarding Board approved preclicensure programs. Specifically, per the report of the October 7-8, 2013 continuing approval visit, it was determined that ELAC was not in compliance with the following provisions:

- CCR SECTION 1424(b)(1)- Administration/Organization – Program Evaluation  
The program lacks evidence of implementation of the systematic plan for total program evaluation.
- CCR SECTION 1424(d) - Administration/Organization – Sufficient Resources  
The nursing building that provides classroom and skills/simulation lab space lacks sufficient supplies, and requires physical plant repairs and maintenance.
- CCR SECTION 1424(h) - Administration/Organization – Faculty Adequacy  
The program lacks a sufficient number of qualified full-time faculty to achieve program objectives.
- CCR SECTION 1426(b) – Required Curriculum  
The current curriculum does not provide the structure and content to ensure that students have the knowledge, skills and abilities necessary to function and to meet the minimum competency standards of a registered nurse.
- CCR SECTION 1431 – Licensing Examination Pass Rate Standard  
The NCLEX examination pass rate for first-time test takers is below 75%.

Consequent to these findings the Board voted to impose the following actions:

- Place the program on Warning Status With Intent To Withdraw Approval.
- Require the program to provide progress reports to the NEC for inclusion in the March, May and August 2014 Education/Licensing Committee meeting reports.



**BOARD OF REGISTERED NURSING**  
PO Box 944210, Sacramento, CA 94244-2100  
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**Louise R. Bailey, MEd, RN, Executive Officer**

- Require the program to be presented at the August 2014 Education/Licensing Committee meeting and the September 2014 BRN Board meeting for review, at which time full compliance must be demonstrated.
- Reduce program enrollments to forty-eight (48) students admitted twice annually effective immediately.

Failure to achieve full compliance with all of the deficiencies noted above by August 6, 2014 may result in Board action to initiate withdrawal of program approval.

If further information is needed please do not hesitate to contact Shelley Ward, NEC at (818) 558-5062.

Sincerely,

BOARD OF REGISTERED NURSING

A handwritten signature in blue ink that reads "Miyo Minato".

Miyo Minato, MN, RN  
Supervising Nursing Education Consultant

cc: Mr. Laureano Flores, Dean, ELAC  
Shelley Ward, NEC



September 24, 2014

Lurelean B. Gaines, MSN, RN  
Chairperson  
East Los Angeles College  
1301 Avenida Cesar Chavez  
Monterey Park, CA 91754

Dear Mrs. Gaines:

The Board of Registered Nursing, at its September 18, 2014, meeting in Costa Mesa, California voted the following actions for East Los Angeles College Associate Degree Nursing Program:

- Change program approval status to Defer Action to Continue Approval
- Program to submit quarterly progress reports to NEC, continue to recruit full-time faculty to fill the psych/mental health position, continue to limit program, admission/enrollment to 48 students admitted twice annually.
- Program will return to Education/Licensing Committee for progress report in August 2015.

If further information is needed please do not hesitate to contact Shelley Ward, Nursing Education Consultant at (818) 558-5062.

Sincerely,

BOARD OF REGISTERED NURSING

A handwritten signature in blue ink that reads "Miyo Minato".

Miyo Minato, MN, RN  
Supervising Nursing Education Consultant

cc: Shelley Ward

# EAST LOS ANGELES COLLEGE ASSOCIATE DEGREE NURSING PROGRAM

## Final Progress Report

### Part 1

October 2013 East Los Angeles College RN program was found to be out of compliance in the following area(s):

#### **CCR SECTION 1424(b)(1)-Administration/Organization-Program Evaluation**

**The nursing program shall have a written plan for evaluation of the total program, including admission and selection procedure, attrition, and retention of students, and performance of graduates in meeting community needs.**

*“The program lacks evidence of implementation of the systematic plan for total program evaluation.”*

The program has a total systematic plan of evaluation which includes an admission and selection procedure, attrition, and retention of students, and performance of graduates in meeting community needs.

This information is documented in the program systematic evaluation plan, departmental minutes, and the Nursing Student Handbook.

CCR Section 1424(b)(1) is fully met.

#### **CCR SECTION 1424(d)-Administration/Organization-Sufficient Resources**

**The program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment, including technology, to achieve the program’s objectives.**

*“The nursing building that provides classroom and skill/simulation lab space lacks sufficient supplies, and requires physical plant repairs and maintenance.”*

The nursing building physical plant repairs have all been completed and maintenance is a continuous process that is addressed on a daily basis.

CCR Section 1424(d) is fully met.

**CCR SECTION 1424(h)-Administration/Organization-Faculty Adequacy**

**The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas of nursing listed in section 1426(d) who will be the content expert in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned.** “The program lacks a sufficient number of qualified full-time faculty to achieve program objectives.”

The program currently has 8 full-time qualified faculty (not including the chairperson) and 12 part-time qualified faculty. The program has 3 budgeted full-time long term substitute positions that are to be filled summer 2015 for the fall semester. The two positions for medical/surgical nursing and the one position for psychiatric mental health nursing lead to full-time permanent budgeted positions. Hiring three new faculty would bring nursing faculty positions back to a full complement of qualified faculty.

The program is in the process of fully meeting CCR Section 1424(h).

**CCR SECTION 1426(b) –Required Curriculum**

**The curriculum shall reflect a unifying theme, which includes the nursing process as defined by the faculty, and shall be designed so that a student who completes the program will have the knowledge, skills, and abilities necessary to function in accordance with the registered nurse scope of practice as defined in code section 2725, and to meet minimum competency standards of a registered nurse.**

“The current curriculum does not provide the structure and content to ensure that students have the knowledge, skills and abilities necessary to function and to meet the minimum competency standards of a registered nurse.”

The newly revised curriculum that provides structure and content to ensure that students have the knowledge, skills and abilities necessary to function and meet minimum competency standards of a registered nurse was successfully implemented winter 2015.

The program is meeting CCR Section 1426(b).

**CCR SECTION 1431 – Licensing Examination Pass Rate Standard**

**The nursing program shall maintain a minimum pass rate of seventy-five percent (75%) for first time licensing examination candidates.**

“The NCLEX examination pass rate for first-time takers is below 75%.”

Numerous strategies have been implemented to address the NCLEX-RN examination pass rate for first-time takers below 75%.

CCR SECTION 1431 has not been fully met.

**RECOMMENDATIONS: (1)**

**CCR SECTION 1425.1(b)**

**Each faculty member shall participate in an orientation program, including, but not limited to, the program's curriculum, policies and procedures, strategies for teaching, and student supervision and evaluation.**

"Formalize the faculty orientation process specific to the nursing program."

The formal faculty orientation process specific to nursing has been developed and utilized over the past year.

CCR SECTION 1425.1(b) has been fully met.

**Part 2 ELAC complied with the 24 September 2014 Board Action Letter by doing the following:**

- **Progress reports were submitted to the Board NEC, on time, as requested the following months:**
  - December 2014 Minor curriculum revision progress report
  - February 2015 progress report update
  - March 2015 progress report update
  - April 2015 progress report update
  
- **Status of filling Psychiatric/Mental Health position**
  - The greatest impediment to filling the position for mental health is related to nurses wanting to maintain current full-time position outside of ELAC and work fulltime for ELAC. With the advent of one new part-time faculty that will begin working with ELAC fall 2015 the department remains hopeful to hire a full-time mental health instructor.
  - Winter 2015 ELAC decreased the number of students being admitted to the program by admitting 48 students.

**Part 3**

**The program has fully implemented the plan of correction for each area of non-compliance as submitted 7 July 2014.**

- **Program evaluation** specifically related to attrition and retention
  - If an ELAC nursing student fails two nursing courses, that student becomes a program failure. This means that the student is unable to return to the program.
  - If an ELAC nursing student fails a nursing course, the student will receive a remediation plan and have an opportunity to return to the program as space is available.
  - If an ELAC nursing student should leave the program for life issues, finances, illness, care provider for elderly parents or children, the student must return to the program within a two year period as space is available. Further, the student will be given a remediation plan that will enhance successful outcomes.

- **Expected level of Achievement: The mission, philosophy, and program outcomes of the nursing program are congruent with the core values and mission and goals of ELAC and comply with BRN regulations.**

**Expected Outcome and Key Performance Indicators:**

- An evaluation plan is present and utilized for systematic program evaluation and assessment of educational outcomes as evidenced by:
    - a. The newly revised evaluation plan is cohesive, comprehensive and congruent with state and national standards 90% of the time.
    - b. Evaluation plan is used for continuous program improvement 90% of the time.
  - Graduation Rates - 90% of all students will successfully complete the program.
  - Retention Rates - 90% of all students will successfully complete the program on time.
  - Attrition Rates – 10% or less of the students will fail to complete the program.
  - Licensure Rates – 76% of all students will successfully pass the NCLEX-RN on first attempt.
  - Job Placement – 75% of all graduates will be employed as staff nurses with 9 to 12 months of graduation.
  - Student Program Satisfaction – 95% of responding graduates will evaluate the program as satisfactory (agree or strongly agree) regarding curriculum, faculty, learning resources, and clinical sites on the Graduate Survey.
  - Employer Program Satisfaction of Graduates – 90% of responding administrators will evaluate the graduates’ performance as satisfactory (agree or strongly agree) regarding judgment, technical performance, and effectiveness of nursing interventions.
- **Student resource adequacy**
    - Campus resources are in place to ensure student success (Nursing Learning Lab., Library, and Learning Resource Centers)
  - **Adequacy of faculty**
    - Three positions are currently being advertised for the fall
    - Interviews to take place before the fall 2015 semester begins
  - **Major curriculum revision**
    - Implementation of the major curriculum revision took place 5 January 2015
    - The cohort that began 5 January 2015 anticipated on time completion is December 2016
  - Attached are three surveys—Clinical Agency, Course, and Instructor evaluation. The links for each are below:
    - Nursing Instructor Evaluation – <http://escantron.elac.edu/classclimate/online.php?p=NursingInstructorEval>
    - Nursing Course Evaluation – <http://escantron.elac.edu/classclimate/online.php?p=NursingCourseEval>
    - Nursing Clinical Agency Evaluation – <http://escantron.elac.edu/classclimate/online.php?p=NursingClinicalEval>

- See Nursing Cohort Dashboard (separate attachment)

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Mission and Administrative Capacity**

*The mission of the nursing education unit reflects the LACCD/ELAC governing board's core values and is congruent with its' mission & goals. The LACCD/ELAC governing board and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified program outcomes.*

**1.1: Mission, Philosophy, and Program Outcomes of the nursing program are congruent with the core values, mission, and goals of LACCD/ELAC governing board.**

**Expected Level of Achievement: The Mission / philosophy and program outcomes of the nursing education unit are congruent with the core values and mission /goals that of ELAC and comply with the BRN regulations.**

**RESULTS**  
Actions Resulting From Analysis of the Data Documented in Faculty Minutes

Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
1424a Mission statement and program outcomes of ELAC	Every two (2) years or with every institutional revision	Compare & analyze mission and program outcomes of ELAC and philosophy & program outcomes of nursing unit	100% achievement		Review annually to validate content	As needed or when the college revises mission statement
Philosophy & objectives of the nursing program	Every two (2) years or with program revision	Review & discuss beliefs. Review of ADN competencies	100% achievement		Review program philosophy annually	Review and revise program policies as needed
Philosophy includes faculty believes that health constitutes high-level wellness on the health-illness continuum, and a persons' perceptions/beliefs largely influence ones' state of health.	Every two (2) years or with program revision	Review faculty beliefs  Survey teaching methodologies used by faculty	!00% achievement		Review as needed	

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Mission and Administrative Capacity**

<p><i>1. 2 The LACCD/ELAC governing board and nursing program ensure representation of the nurse administrator and nursing faculty in governance activities; opportunities exist for student representation in governance activities.</i></p> <p><b>Expected Level of Achievement: The nursing administrator and faculty are represented in governing activities.</b></p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual Level of Achievement	Development	Maintenance	Revision
1424c Organizational chart identifies the relationship of the program to the institution	Annually and as changes are made institution wide	Analyze organizational chart	100% achievement	Elections and new hires require revisions	Update program organization chart as needed	Recently changes have occurred more frequently with administrative changes on campus and the Board of Trustees
Faculty & administrator participation on college committees, faculty active on nursing unit committees	Annual	Review status of faculty to verify that all full-time faculty are on a college committee	100% achievement		Review in faculty meetings as changes are made or opportunities exist	Realignment are made as needed on program and campus committees
Student participation in ASU/SNA/Club (Associated Student Union and Student Nurse Association/Nursing Club)	Annual	Attendance at ASU/SNA meetings	100% achievement	Faculty Advisor updates the department as needed	Dean of Students updates the department as changes are made to maintain campus status	Revisions are made as representation changes each semester
1428a Student participation in nursing unit committees	Annual	Attendance at department meetings Review of professional role development policy & reports				

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Mission and Administrative Capacity**

<p><i>1.3 Communities of interest have input into program processes and decision making.</i></p> <p><b>Expected Level of Achievement: The healthcare community have input in the planning and decision-making of the nursing unit.</b></p> <p><i>1.4 Partnerships exist that promote excellence in nursing education, enhance the profession, and benefit the community.</i></p> <p><b>Expected Level of Achievement: Partnerships, informal and formal, enhance the learning environment, nursing profession,</b></p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual Level of Achievement	Development	Maintenance	Revision
<p>Affiliating Agencies: LA County Department of Health Services; TELACU Education Foundation;</p> <p>CSU@LA (Academic Progression in Nursing);</p> <p>American Diabetes Association</p>	Annually	<p>Outside audit</p> <p>Review of academic status of students Students with GPA's of 3.0 in the Sciences</p>	<p>100% achievement</p> <p>Scholarships provided for 4 students (\$8,000.00 and job placement)</p> <p>10 students earned BSN 6/2015 (1<sup>st</sup> cohort)</p>	Ongoing grant	Provide quarterly reports to DHS Files available for review	Made as necessary per DHS mandates
<p>LA County-USC Medical Center; St. Vincent's Medical Center; Downey Regional Medical Center; White Memorial Medical Center; and Monterey Park Hospital</p>	Biannually	Faculty have orientation in the clinical settings provided by the facilities	75%-100% (variances in responses)	Forward questions to members of the Community Advisory Committee to obtain updates on policy changes and new hires from ELAC Nursing	Biannual Community Advisory Meeting	Need to continue requesting information form affiliating facilities regarding employment of EKAC graduates and information regarding their performance.

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Mission and Administrative Capacity**

<p>1.5 Nursing program is administered by a nurse who holds a graduate degree with a major in nursing.</p> <p>1.6 The nurse administrator is experientially qualified, meets governing organization and state requirements, and is oriented and mentored to the role.</p> <p>1.7 When present, nursing program coordinators and/or faculty who assist with program administration are academically and experientially qualified.</p> <p>1.8 The nurse administrator has authority and responsibility for development and administration of the program and has adequate time and resources to fulfill the role responsibilities.</p> <p><b>Expected Level of Achievement: The nursing administrator is educationally, experientially qualified, meets the state requirements to administer the program, and has the authority and responsibility for the development and administration of the program. The assistant director(s) of the program are academically and experientially qualified and approved by the CA BRN.</b></p>	<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>
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Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
1424(e) Job description-Administrator of nursing program	Every three (3) years	Analyze job description of administrator of nursing program; compare this with CA BRN criteria	100% achievement Changes in assistants occurs as needed to facilitate progress in program matters	LACCD meets BRN expectations	Reviewed and changed 2014 to ensure completion of Curricular changes	Occurs with election of Chairperson/Director
1425(a) Curriculum Vitae of Administrator	Every three (3) years as needed	Analyze qualifications of Administrator of nursing program, compare this with criteria of BRN	100% achievement			
Workload of Administrator	Annually and as needed	Compare with BRN regulations & college mandates				Budgeted positions posted (to close 30 July 2015) to hire additional faculty in Med/Surg and Mental Health

Administrator's participation in local, state, regional & national organizations	Annually	Self-report	100% achievement	Community partnership that assist in campus activities	LACCD Nursing Discipline Committee; COADN; 3CNAC; ACCJC Substantive Committee; ADA	Involvement in organizations mentioned provides the Director with information that is shared with faculty, staff, students, and administration as needed/relevant
1425(b)(f) Curriculum Vitae of Assistant Director(s)	Annually	Analyze or compare with BRN regulations, and AFT contract	100% achievement			Assignments are reviewed to facilitate program/department outcomes based on expertise
1424(e) Job description of Assistant Director	Annually	Compare job description with BRN regulations, and AFT contract	100% achievement			Revision to work load subject to change due to departmental needs

## Systematic Plan for Program Evaluation and Assessment of Outcomes Mission and Administrative Capacity

<p><i>1.9 The nurse administrator has authority to prepare and administer the program budget with faculty input.</i></p> <p><b>Expected Level of Achievement: The nurse administrator has the authority to prepare and administer in the program budget with input from faculty.</b></p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Job description identifying responsibilities the nurse administrator of the nursing program	Annually, and as needed	Analyze and or compare with BRN regulations and description	100% achievement	The budget is developed by administration, Director submits departmental request for personnel, software, and equipment as needed	Budget request are obtained from faculty during meetings and or via email and considered for request	There is strong administrative support for the nursing program

## Systematic Plan for Program Evaluation and Assessment of Outcomes

### Mission and Administrative Capacity

<p><b>1.10: Policies for nursing faculty are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of LACCD/ELAC governing board; differences are justified by the goals and outcomes of the nursing program.</b></p> <p><b>Expected Level of Achievement: 95% of the policies pertaining to faculty are consistent for faculty at the college and differences are justified.</b></p>				<p>RESULTS</p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Policies of ELAC & the nursing program pertaining to: Non-Discrimination; Admission; Academic Progression; Grading; Retention; Grievance; & Challenges are published	Annually and as changes are made	Compare & contrast policies of ELAC, the nursing program, and LACCD Nursing Discipline Committee	100% achievement Information is published in the college catalog and on line, and in the Nursing Student Handbook	E10 Guide – Registered Nursing Standards	Reviewed as needed  Nursing Student Handbook is reviewed annually	Last revision 7/2013  Addendums are given to students as changes are made (i.e., hospital changes in policy or procedure)
Personnel policies are accessible and equitable	Annually and as needed	Review policies and procedures in LACCD	100% achievement		Discipline committee meets monthly	Revisions are made as needed
Nursing faculty workload in comparison to non-nursing faculty	AFT Contract	Review & compare workload of nursing faculty with non-nursing faculty	95% achievement based on contractual agreements	Validate concerns regarding teaching as all LACCD full-time Nursing faculty must be able to do theory and practical assignments		

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Mission and Administrative Capacity**

<p><i>1.11 Distance education, when utilized, is congruent with the mission of LACCD/ELAC governing board and the mission &amp;, philosophy of the nursing program.</i></p> <p><b>Expected Level of Achievement:</b> The mission of LACCD/ELAC governing board is congruent with distance education provided in the nursing program if needed.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Institutions policies and best practice related to distance education			0%	To date nursing does not utilize distance education as a means of delivery		

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Faculty and Staff**

*Qualified and credentialed faculty are sufficient in number to ensure the achievement of the student learning outcomes and program outcomes. Sufficient qualified staff is available to support the nursing program.*

<p>2.1: Full-time faculty holds a minimum of a master's degree with a major in nursing. Full-time and part-time faculty includes those individuals teaching and or evaluating students in classroom, clinical, or nursing laboratory setting.</p> <p>2.2 Part-time faculty holds a minimum of a baccalaureate degree with a major in nursing; a minimum of 50% of the part-time faculty also hold a graduate degree with a major in nursing.</p> <p><b>Expected Level of Achievement:</b> 100% of full and part-time faculty meets the requirements of the California Board of Registered Nurses pertaining to education and clinical expertise. 100% of Full-time faculty holds a master's degree in Nursing. 80% of part-time faculty holds a Master's degree in Nursing.</p>	<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>
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Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
1424d; 1424h; 1425.1(a) Clinical competence of faculty in assigned area Curriculum Vitae of faculty Continuing Ed Course Work Nursing faculty hold a minimum of a Master's degree with a major in Nursing or give rationale for the acceptance of other than the minimum credential	Annually	Analysis of curriculum vitae  Self-assessment survey  Compare and contrast BRN qualification with job description at ELAC	100% of full-time faculty hold a master's degree or higher and 80% of part-time faculty hold a master's degree		It is anticipated that one of the part-time faculty will obtain a master's degree summer 2015	Status review will occur in fall 2015
Job descriptions of faculty Faculty responsibilities Responsibilities of lead instructor	Annually	Analysis of job description and program expectations	100% achievement	Lead teachers have monthly or every other month meeting	Meet to review teaching methods, testing, and student outcomes	Information shared with total faculty as needed

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Faculty and Staff**

2.3 Faculty (full-time and part-time) credentials meet LACCD/ELAC governing board and CA BRN requirements.  <b>Expected Level of Achievement: 100% of the nursing faculty meets the qualifications of LACCD/ELAC governing board and CABRN.</b>				RESULTS		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Actions Resulting From Analysis of the Data Documented in Faculty Minutes		
				Development	Maintenance	Revision
Faculty meet the BRN & California Community College Chancellor's Office/education code requirements	As needed annually		100% achievement	Send to BRN for evaluate prior to considering for hire	Update as necessary	Attempt to update annually when needed
1424g Organizational chart within Nursing Unit 1424(j) The assistant director shall function under the supervision of the director. Instructors shall function under the supervision of the director or the designee. Assistant instructors and clinical teaching assistants shall function under the supervision of an instructor	Annually	Review of data	100% achievement			Visits to clinical site to verify compliance
1424h Qualified instructor responsible for each nursing area, i.e., geriatrics, med-surg, pediatrics, obstetrics, & mental health	Annually	Critique job description with clinical expectations	100% achievement		Minutes submitted to Nursing office for filing	
1424i Curriculum Vitae and Description of non-faculty individuals who participate in the instruction & supervision of students in the clinical area	Annually	Review of data				To review in fall 2015
1425b Registered nurse faculty shall be responsible for clinical supervision only of those students enrolled in the registered nursing program	Every two years	Review faculty assignments				

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Faculty and Staff**

<p><i>2.4 Preceptors, when utilized, are academically and experientially qualified, oriented, mentored, and monitored, and have clearly documented roles and responsibilities.</i></p> <p><b>Expected Level of Achievement: The preceptors meet the BRN standards for clinical teaching assistant (CTA) and are oriented, monitored and the roles and responsibilities are documented.</b></p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
SECTION 1426.1(b) The program shall have written policies and shall keep policies on file for conducting the preceptorship.			0%			ELAC revised Med/Surg content in the second year of the program to enhance students clinical skills especially in med/surf IV. Students have an increase in of clinical hours.

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Faculty and Staff**

<p><b>2.5:</b> The number of full-time faculty is sufficient to ensure that the student learning outcomes and program outcomes are achieved.</p> <p><b>Expected Level of Achievement:</b> Student learning and program outcomes have been achieved with the current number of full-time faculty.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
<p>Definition of part-time &amp; full-time faculty</p> <p>Faculty utilization in relationship to mission /goals of LACCD/ELAC governing board</p> <p>Faculty /student ratios in nursing classroom &amp; clinical</p> <p>Faculty/student ratio in nursing program with non-nursing classes</p>	<p>Annually</p> <p>Annually</p> <p>Annually</p>	<p>Review established policies &amp; AFT contract</p> <p>Review &amp; analyze policies of CA instructional code, LACCD/ELAC, &amp; affiliated health care facilities</p> <p>Clinical facilities dictate ratio</p> <p>Based on the number of students per quarter</p>	<p>50% achievement</p> <p>100% achievement</p> <p>100% achievement</p>	<p>ELAC seeks to maintain 75%full-time faculty and 25% part-time faculty</p> <p>Decrease in number of student in the clinical setting at two major facilities</p>	<p>Request made in annual program review for department needs campus wide</p>	<p>Nursing requesting 2 additional full-time faculty in the upcoming program review</p> <p>Change in assignments and all clinicals covered</p>
<p>1424k</p> <p>The faculty/student ratio in the clinical setting shall be based on the following: acuity of patient needs; objectives of the learning experience; class level of students; geographic placement of students; teaching methods; requirements established by the clinical agency</p>	<p>Every semester</p> <p>Annually</p>	<p>Survey &amp; analyze all clinical rotation schedules and note ratio of full -time to part -time faculty</p>				
<p>1424h</p> <p>Requirements of regulatory bodies regarding number &amp; utilization of full &amp; part-time faculty</p>	<p>Annually</p>	<p>Compare ratio of full-time faculty to part-time faculty with CA BRN regulations</p>				

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Faculty and Staff**

<p><b>2.6:</b> Faculty (full-time and part-time) maintains expertise in their areas of responsibility, and their performance reflects scholarship and evidenced-based teaching and clinical practices.</p> <p><b>Expected Level of Achievement:</b> Faculty maintains expertise in their areas of responsibility, and their performance reflects scholarship and is evidenced by the Faculty Report Form.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
<p>Numbers of faculty / staff appointments to state, national, international service panels</p> <p>Numbers of faculty elected to scholarly academics</p> <p>Number of faculty receiving prestigious awards</p> <p>Number of faculty receiving external recognition for excellence in teaching</p> <p>Number of faculty with research support</p> <p>Advanced certification</p>	Annually	<p>Self-Report</p> <p>Published Data</p>	<p>100% achievement</p> <p>None shared</p> <p>In progress</p> <p>In progress</p>		<p>Survey faculty annually for information. Two possible completions fall 2015</p>	



**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Faculty and Staff**

<p>2.8 Faculty (full-time and part-time) are oriented and mentored in their areas of responsibility.</p> <p>Expected Level of Achievement: 100% of Faculty are oriented and mentored in their areas of responsibility.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
<p>Review New Faculty Orientation Handbook Use survey to evaluate needs of new faculty</p> <p>Review Faculty Policies and Procedures</p>	<p>Review annually</p> <p>Annually and as needed</p>	<p>All faculty review</p>	<p>100% achievement</p>		<p>Review with every year and update as necessary</p>	<p>Made as necessary, will review fall 2015</p>

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Faculty and Staff**

<p>2.9 Systematic assessment of faculty (full-time and part-time) performance demonstrates competencies that are consistent with program goals and outcomes.</p> <p><b>Expected Level of Achievement:</b> Full-time and part-time nursing faculty are evaluated according to the policies and procedures of LACCD/ELAC governing board and demonstrate competencies consistent with program goals and outcomes.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Evaluate faculty according to contract	Every other year according to AFT contract and as necessary	Evaluations on classroom and clinical performance is done every quarter In nursing	100% achievement	Academic Senate developed a document (Faculty guidelines for classroom visit) the form is used in theory and clinical along with the AFT document at the final evaluation of faculty.	Review comments from students	Make adjustments if warranted as needed This online survey will take place fall 2015 by having students use the LACCD email added so that research will automatically obtain date and report anonymous data

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Faculty and Staff**

<p><i>2.10 Faculty (full-time and part-time) engages in ongoing staff development and receives support for instructional and technological utilization.</i></p> <p><b>Expected Level of Achievement:</b> 100% of Faculty engage in ongoing staff development and receive support for instructional and technological utilization.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
All LACCD/ELAC faculty receive financial support for staff development; faculty also receives FLEX credit for activities scheduled and planned on campus.	Annually	Conference attendance	100% achievement All nursing faculty report continuing education via EDP-P-10 (Report on Faculty); ELAC provides an accounting of Flex credit based on courses faculty teach.	Coordinator of Staff Development responsible for creating interesting and informative activities	All faculty full-time and part-time nursing faculty are made aware of ELAC expectations that must be met	27 August 2015 is all campus Flex Day. The invitation is extended to all part-time faculty and required of all full-time faculty

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Students**

*Student policies and services support the achievement of the student learning outcomes and program outcomes of the nursing program.*

**3.1:** Policies for nursing students are congruent with those of the LACCD/ELAC governing board, publicly accessible, non-discriminatory, and consistently applied; differences are justified by the student learning outcomes and program outcomes.

**Expected Level of Achievement:** 95% of Policies for nursing students are congruent with those of LACCD/ELAC governing board, publicly accessible, non-discriminatory, and consistently applied; differences are justified by the student learning outcomes and program outcomes.

**RESULTS**

Actions Resulting From Analysis of the Data Documented in Faculty Minutes

Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
1424b The following student policies are published and available to students:  Non-discrimination Admission-Re-admission Academic Progression Grading Retention Dismissal Graduation Requirements Grievance-Complaints & Appeals Process Validation and/or Articulation Challenge Transfer Advanced Placement & Granting Credit for Prior Learning	Annually   Continuous process of review & revision	Review policies in each publication to determine consistency & accuracy	100% achievement			Ongoing revisions occur based on campus wide involvement
1424g Policies of nursing program are consistent with LACCD/ELAC governing policies	Annually	Comparison of nursing program policies to LACCD/ELAC governing policies	100% achievement			
Diversity of admitted student	Annually	Database	Maintained by Office of Research 100% achievement	Information shared campus wide		
1428B Nursing program's Grievance Policy		Review				

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Students**

<p>3.2 Public information is accurate, clear, consistent, and accessible, including the nursing program's approval status.</p> <p><b>Expected Level of Achievement:</b> Public information is accurate, clear, consistent, and accessible, including the nursing program's approval status.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Review brochures, websites, ELAC catalog, Nursing Student Handbook	Every two years or as changes occur		100% achievement		Biannually adjustments may be made depending on input from BRN, LACCD/ELAC and Community Advisory Committee, and other interested parties	Next BRN meeting November, next Community Advisory meeting November, next 3CNAC meeting November

<p>3.3 Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.</p> <p><b>Expected Level of Achievement:</b> Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Changes in policies, procedures, and program information.	Ongoing process as needed	Input from governing bodies (LACCD/ELAC/BRN/other outside agencies -clinical facilities)	Addendums are shared with students immediately, anytime facilities require changes or program changes in polices are adopted		Nursing is a fluid body that students are reminded of so they are informed to expect the unexpected Knowing that so many changes	Nursing prepares for changes that come from facilities that affect clinical rotations

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Students**

<p>3.4 Student services are commensurate with the needs of nursing students, including those receiving instruction using alternative methods of delivery.</p> <p><b>Expected Level of Achievement:</b> Student services are commensurate with the needs of nursing students, including those receiving instruction using alternative methods of delivery.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
<p>Support services are accessible to the students:</p> <p>Counseling, Admissions &amp; Records, Learning Resources, Disabled Student Services, Compliance Officer, Women's Center, Health Services, Financial Aid, Scholarships, &amp; Child Care Services</p>	Annually	Survey of students for use of services and based on instructor observations & assessment of students	<p>100% achievement</p> <p>Often time nursing students are referred for disabilities, financial support etc., and nursing students are usually assisted regardless of requirements</p>	<p>Student Services provides information about services on a semester basis</p>	<p>Nursing refers as needed</p>	<p>Ongoing process depending on student needs.</p>
<p>Credentials of support services staff/faculty</p> <p>Job description of support services staff/faculty</p>	As needed	Review/contract qualifications of faculty/staff in nursing performing services	100% achievement		<p>Staff changes in the Lab</p>	<p>Hiring additional support staff for the Nursing Learning Lab</p>

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Students**

<p>3.5 Student educational records are in compliance with the policies of LACCD/ELAC governing board, state, and federal guidelines.</p> <p><b>Expected Level of Achievement:</b> Student educational records are in compliance with the policies of the LACCD/ELAC governing board, state, and federal guidelines.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Guidelines for FERPA, State (California) Educational Code for student records, and Administrative Regulations of ELAC related to Student Services	Annually	Comparison of Family Educational Rights & Privacy Act (FERPA), state (Education Code) and federal laws to ELAC Administration Regulations related to FERPA.	100% achievement		Administration shares state of the College (finances, students, faculty, staff, etc.)	Nursing adjust as necessary

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Students**

<p><b>3.6 Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained, including default rates and the results of financial or compliance audits.</b>  <i>3.6.1 A written comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders are available.</i>  <i>3.6.2 Students are informed of their ethical responsibilities regarding financial assistance.</i>  <i>3.6.3 Financial aid records are maintained in compliance with the policies of LCCD/ELAC governing board, state, and federal guidelines.</i></p> <p><b>Expected Level of Achievement:</b> Financial Aid Services comply with the Higher Education Reauthorization Act Title IV.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Higher Education Reauthorization Act Title IV eligibility and certification requirements	As determined by LACCD/ELAC VP of Administration & VP of Student Services	Survey VP's of Administration and Student Services	100% achievement		Nursing adapt as necessary and remind students of obligations as related to integrity of the profession	

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Students**

<p><b>3.7:</b> Records reflect that nursing program complaints and grievances receive due process and include evidence of resolution.  <b>Expected Level of Achievement:</b>          100% of the documented complaints and grievances receive due process and include evidence of resolution.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Complaints and grievances received about the program	As needed	Review complaints	100% achievement		Follow-up of student complaints are addressed utilizing process in the Nursing Student Handbook	Resolved usually with instructor, student, and Director
Number of complaints and grievances	Annually	Administrator report				
Type of complaints, grievances and resolutions	As needed	Review complaints, gather evidence			Misunderstanding or inability to accept finding of clinical instructor as the expert	Review of incident usually leads to successful outcomes

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Students**

<p><i>3.8 Orientation to technology is provided and technological support is available to students, including those receiving instruction using alternative methods of delivery.</i></p> <p><b>Expected Level of Achievement:</b> Orientation to technology is provided and technological support is available to students, including those receiving instruction using alternative methods of delivery.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Technological support is available to everyone on campus.	As needed	Expressed need and IT responds	100% achievement	Frequent updates	IT provides workshops for faculty and staff on a regular basis	

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Students**

<p><i>3.9 Information related to technology requirements and policies specific to distance education is clear, accurate, consistent, and accessible.</i></p> <p><b>Expected Level of Achievement:</b> Information related to technology requirements and policies specific to distance education is clear, accurate, consistent, and accessible.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Information Technology has a team that works to enhance the work of ELAC faculty, staff, and students	Annually and as needed	New software updates	100% achievement Alert to changes, problems and timelines for completion given		Ongoing challenges due to challenges of spam mail	IT is very responsive to Nursing

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Curriculum**

*The curriculum supports the achievement of the identified student learning outcomes and program outcomes of the nursing program consistent with safe practice in contemporary healthcare environments.*

*4.1: The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning outcomes and program outcomes consistent with contemporary practice.*

**Expected Level of Achievement:**

*4.2 The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.*

**Expected Level of Achievement:**  
The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.

*4.3 The curriculum is developed by the faculty and regularly reviewed to ensure integrity, rigor, and currency.*

**Expected Level of Achievement:** The curriculum is developed by the faculty and regularly reviewed to ensure integrity, rigor, and currency.

*4.4 The curriculum includes general education courses that enhance professional nursing knowledge and practice.*

**Expected Level of Achievement:** The curriculum includes general education courses that enhance professional nursing knowledge and practice.

*4.5 The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives.*

**Expected Level of Achievement:** The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives.

**RESULTS**

Actions Resulting From Analysis of the Data Documented in Faculty Minutes

**25% achievement** Base on recent surveys from student utilizing the newly revised curriculum and completion of the first semester.

**100% achievement** SLOs inform the curriculum and in compliance with ELAC expectations

100% achievement reviewed quarterly

100% achievement counseling and admissions validates the same

100% achievement according to LACCD/ELAC, nursing adapts to campus expectations

Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
1426b The nursing curriculum is developed by the faculty	Revised every semester as needed	Review minutes program & course objectives	100% achievement			
SECTION 1426(b) The curriculum shall reflect a unifying theme, which includes the nursing process as defined by the faculty, and shall be designed so that a student who completes the program will have the knowledge, skills, and abilities necessary to meet minimum competency standards of a registered nurse.	Annually	Feedback from Community Advisory Committee, Literature review BRN changes, NLN workshops, & faculty discussion	100% achievement	Attend BRN updates and NLN workshops as available	Review information with all faculty	Student Handbook revised based on changes that occur in curriculum
SECTION 1426(c) The curriculum shall consist of not less than fifty-eight (58) semester units, or eighty-seven (87) quarter units, which shall include at least the following number of units in the specified course areas:	Annually and as needed	Review	100% achievement			
(1) Art and science of nursing, thirty-six (36) semester units or fifty-four (54) quarter units, of which eighteen (18) semester or twenty-seven (27) quarter units will be in theory and eighteen (18) semester or twenty-seven (27) quarter units will be in clinical practice	Annually and as needed	Review	100% achievement			
(2) Communication skills, six (6) semester or nine (9) quarter units. Communication skills shall include principles of oral, written and group communication.	Annually and as needed	Review	100% achievement	Mathematics is usually the area that changes and affects graduation outcomes	Nursing adapts as necessary	Students reminded each and every semester of GE requirements
(3) Related natural sciences (anatomy, physiology, and microbiology courses with labs), behavioral and social sciences, and sixteen (16) semester or twenty-four (24) quarter units.	Annually and as needed	Review	100% achievement	Students made aware of the 2.5GPA in Anatomy, Physiology, and Microbiology	Information guide made available to all potential students	

<p>SECTION 1426(d) Theory and clinical practice shall be concurrent in the following nursing areas: geriatrics, medical-surgical, mental health/psychiatric nursing, obstetrics, and pediatrics.</p> <p>Instructional outcomes will focus on delivering safe, therapeutic, effective patient-centered care; practicing evidence-based practice; working as part of the Interdisciplinary teams; focusing on quality improvement; and using information technology.</p> <p>Instructional contents shall include, but is not limited to, the following: critical thinking, personal hygiene, patient protection and safety, pain management, human sexuality, client abuse, cultural diversity, nutrition (including therapeutic aspects), pharmacology, patient advocacy, legal, social and ethical aspects of nursing, and nursing leadership and management.</p>	Annually and as need	Required	100% achievement in all of 1426(d)			Students reminded that theory and practice must be repeated if repeating a class also
<p>SECTION 1426(e) The following shall be integrated throughout the entire nursing curriculum.</p> <p>(1) The nursing process;</p> <p>(2) Basic intervention skills in preventive, remedial, supportive, and rehabilitative nursing;</p> <p>(3) Physical, behavioral, and social aspects of human development from birth through all age levels;</p>	Annually and as needed	Review for inclusion	100% achievement		Review as a faculty	

<p>(4) Knowledge and skills required to develop collegial relationships with health care providers from other disciplines;</p> <p>(5) Communication skills including principles of oral, written and group communications;</p> <p>(6) Natural science, including human anatomy, physiology, and microbiology; and</p> <p>(7) Related behavioral and social sciences with emphasis on societal and cultural patterns, human development and behavior relevant to health-illness.</p>						
<p>1426b Reflective of contemporary practice national &amp; local health care trends</p>	<p>Reviewed by content experts</p>	<p>Review BRN and NLN information that would inform trends</p>	<p>100% achievement</p>			
<p>Designed to provide a variety of learning experiences</p> <p>Designed to show progression</p>		<p>Review in faculty meetings</p>		<p>Opportunity for professional growth</p>	<p>Review regularly to provide real world experiences</p>	<p>Nursing forecast early so that students are informed in a timely manner</p>

**Systematic Plan for Program Evaluation and Assessment of Outcomes Curriculum**

<p><b>4.6 The curriculum and instructional processes reflect educational theory, interdisciplinary collaboration, research, and best practice standards while allowing for innovation, flexibility, and technological advances.</b></p> <p><b>Expected Level of Achievement:</b> The curriculum and instructional processes reflect educational theory, interdisciplinary collaboration, research, and best practice standards while allowing for innovation, flexibility, and technological advances.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Teaching strategies Innovative techniques Simulation Unfolding Case Studies Reflective Journaling	All components are utilized and more quarterly	Reviewed in content areas of expertise and shared as a total group	100% achievement All components provide opportunities to meet all learning styles and teaching styles	Creation more opportunities for simulation workshops	Med/sug and OB are frequent users of simulation	Students find that simulation enhances that confidence but recognize the need for real life situations

<p><b>4.7 Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes.</b></p> <p><b>Expected Level of Achievement:</b> Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Examinations (item analysis, testing blue print) Graded assignments (rubrics) Article Critiques	Quarterly	Item analysis used to review content	100% achievement Other components are used for validity of content		Faculty reviews	Individual instructors have found that item analysis assist in informing the process as to the need to reteach important data



**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Curriculum**

<p><b>4.9</b> Practice learning environments support the achievement of student learning outcomes and program outcomes.</p> <p><b>Expected Level of Achievement:</b> Practice learning environments support the achievement of student learning outcomes and program outcomes.</p> <p><b>4.10</b> Students participate in clinical experiences that are evidence-based and reflect contemporary practice and nationally established patient health and safety goals.</p> <p><b>Expected Level of Achievement:</b> Students participate in clinical experiences that are evidence-based and reflect contemporary practice and nationally established patient health and safety goals.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Comprehensive description and assessment of the adequacy of clinical facilities used to provide a variety of learning experiences	Annually & as needed	Faculty evaluation of clinical facility Site assessment tool Student evaluation of facility	100% achievement on 1424e, 1427, 1427a, and 1427b No site is utilized without CA BRN approval and contracts established after said review		Faculty and students are protected as a result of the governing bodies involvement	LACCD/ELAC must approve contract with facilities
1424e Written agreements ensure that nursing faculty can select appropriate clinical learning experiences for students	Every 2 years	Facility agreements Site Assessment tool				
1427a Criteria & process used for selection  BRN approval for each agency and/or community facility prior to utilization	Every 2 years & as needed  Prior to utilization with each new affiliation	Clinical evaluation criteria form				
1427b Written objectives for student learning in clinical facility/agency	Every 2 years				Faculty are reminded to share objectives with clinical facility and post daily assignments on units utilized	
Assign students only to facilities which can provide experiences necessary to meet those objectives	Annually	Evaluation of clinical facilities by faculty & students				

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Curriculum**

<p><b>4.11</b> <i>Written agreements for clinical practice agencies are current, specify expectations for all parties, and ensure the protection of students.</i></p> <p><b>Expected Level of Achievement:</b> Written agreements for clinical practice agencies are current, specify expectations for all parties, and ensure the protection of students.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
<p>1427. Clinical Facilities (c) Each such program shall maintain written agreements with such facilities and such agreements shall include the following: (1) Assurance of the availability and appropriateness of the learning environment in relation to the program's written objectives; (2) Provision for orientation of faculty and students; (3) A specification of the responsibilities and authority of the facility's staff as related to the program and to the educational experience of the students; (4) Assurance that staff is adequate in number and quality to ensure safe and continuous health care services to patients; (5) Provisions for continuing communication between the facility and the program; and (6) A description of the responsibilities of faculty assigned to the facility utilized by the program.</p>	<p>Every 2 years or as contract amended</p>	<p>Review contracts annually</p>				

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Curriculum**

<p><b>4.12</b> Learning activities, instructional materials, and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes.</p> <p><b>Expected Level of Achievement:</b> Learning activities, instructional materials, and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
Learning activities for each course is evaluated	Biannually and as needed	Review in areas of expertise and share for other input	100% achievement		Review based on clinical experiences in clinical facilities	

<p><b>4.13</b> The appropriateness of the relationship between clock and clinical hours is clear, reasonable and meets program goals/objectives and CA Board of Nursing requirements.</p> <p><b>Expected Level of Achievement:</b> The relationship between theory and clinical hours is in 100% compliance with the California State Board of Nursing requirements and meets program goals and objectives.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
1426a and 1426f The relationship of clinical clock hours and credit units is clear, reasonable and meets program goals and CA Board of Nursing requirements	Review with each change	Review of regulations  Tabulate hours based on credits	100% achievement		Review as needed	
One (1) hour instruction in theory throughout a semester, equals one (1) unit, three (3) hours of clinical practice each week throughout a semester	Review as needed	Tabulate hours based on units			Review to maintain accuracy	

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Resources**

*Fiscal, physical, and learning resources are sustainable and sufficient to ensure the achievement of the student learning outcomes and program outcomes of the nursing program.*

<p><b>5.1:</b> Fiscal resources are sustainable, sufficient to ensure the achievement of the nursing education unit outcomes, and commensurate with the resources of LACCD/ELAC governing board.</p> <p><b>Expected Level of Achievement:</b> 100% of faculty agrees that the fiscal resources are satisfactory to achieve student learning and program outcomes.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
1424d Nursing unit's fiscal and personnel resources	Annually	Analysis of needs	100% achievement Currently advertising for three positions (2 med/surg and 1 mental health)		Review for potential full-time positions	
The ELAC governing body is providing the nursing program with equitable resources	Annually	Compare allocation to nursing unit with other departments				Very supportive time for nursing program by campus community and community partners
Type and number of support personnel	Annually	Faculty/Student Survey-survey students and faculty to determine if adequate			Review again fall 2015	

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Resources**

<p><b>5.2</b> Physical resources are sufficient to ensure the achievement of the nursing program outcomes and meet the needs of faculty, staff, and students.</p> <p><b>Expected Level of Achievement:</b> Physical facilities support the learning environment of the nursing program as evidenced by satisfactory rating by 90% of the constituency of the nursing program.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
1424d Adequacy of the physical facilities	Every semester & as needed	Survey of faculty Survey of students	90% achievement Faculty and student teaching and learning space adequate	VPs looking for space to house office staff		Fall 2015 relocation of office staff
Classroom, laboratories, multimedia facilities, and conference rooms utilized by the nursing program	Every semester and as needed	Inventory & observation  Utilization analysis	100% achievement The facility has been open Monday through Saturday			Good utilization of the facility
Access to library, and/or Library databases communication systems	Annually	Survey of students	100% achievement Library staff support campus wide learning environment.	Students informed of extended hours and opening during weekends	Library and Learning Resource Center maintains open communication	
Offices of the nursing administrator, faculty & staff	Annually	Survey other facilities	80% achievement			Fall 2015 relocation to occur

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Resources**

<p><b>5.3 Learning resources and technology are selected with faculty input and are comprehensive, current, and accessible to faculty and students.</b></p> <p><b>Expected Level of Achievement:</b> Learning resources will be reported as current and comprehensive by <b>85%</b> of the nursing programs' constituents. <b>95%</b> of the nursing students will report learning resources as accessible and available. <b>100%</b> of faculty will agree that mechanisms are in place, which provide annual opportunity for faculty input into the procurement of learning resources.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
1424d Assess capabilities of the ELAC governing bodies and nursing program library.	Annually	Assess holdings for needs analysis				
Holdings are current and comprehensive to meet nursing programs goals & objectives	Annually	Survey of faculty  Survey of students				
Software & hardware are available to students and faculty to support the goals & objectives of the nursing program	Annually	Faculty surveys  Student surveys			Review annually with faculty and student input	
1424d Other learning resources available to support the goals & objectives of the nursing program	Annually	Survey students utilization of learning resource center on main campus				
Mechanisms by which nursing faculty have input into the development and maintenance of the library and other learning resources	Annually	Review minutes, CTE student survey, CTE, Perkins request, & Technology request				

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Resources**

<p><i>5.4 Fiscal, physical, technological, and learning resources are sufficient to meet the needs of faculty and students engaged in alternative methods of delivery.</i></p> <p><b>Expected Level of Achievement:</b> Fiscal, physical, technological, and learning resources are sufficient to meet the needs of faculty and students engaged in alternative methods of delivery.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
1424d Nursing programs fiscal and personnel resources	Annually & as budget changes occur	Review with CTE administration	100% achievement With the latest influx of funds and the student enrollment campus wide ELAC is in a very positive position as a college		Review needs	Faculty and classified positions reviewed
ELAC governing body is providing the nursing program with equitable resources	Annually and as needed		100% achievement			
Type and number of support personnel	Annual program review					

**Systematic Plan for Program Evaluation and Assessment of Outcomes**  
**Outcomes**

*Program evaluation demonstrates that students and graduates have achieved the student learning outcomes, program outcomes, and role-specific graduate competencies of the nursing program.*

**6.1:** The systematic plan for evaluation of the nursing program emphasizes the ongoing assessment and evaluation of each of the following: student learning outcomes; program outcome; & role-specific graduate competencies.

**Expected Level of Achievement:** The systematic plan for evaluation of the nursing program emphasizes the ongoing assessment and evaluation of each of the following: student learning outcomes; program outcome; & role-specific graduate competencies.

The systematic plan for evaluation contains specific, measurable expected levels of achievement; appropriate assessment methods; and a minimum of three (2) years of data for each component within the plan.

*6.2 Evaluation findings are aggregated and trended by program option, location, and date of completion and are sufficient to inform program decision-making for the maintenance and improvement of the student learning outcomes and the program outcomes.*

**Expected Level of Achievement:** Faculty will agree that systematic evaluation is used to improve the nursing program. 100% of the required elements are included in the systematic evaluation plan.

RESULTS

Actions Resulting From Analysis of the Data Documented in Faculty Minutes

Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
1424b(1) & 1424g The nursing program's master plan for evaluation includes: all components;; Time/frequency of evaluation; Assessment methods & rationale; reliability; validity; trustworthiness; report of data; implications & actions	Every two (2) years	Analysis of BRN standards			Annually reviewed due to status of NCLEX performance for first time takers	
Rationale for the methods and process used to evaluate or measure evaluation criteria, required outcomes, and optional outcomes	With each component evaluated	Faculty discussions Literature review and comparative data				
Analysis/evaluation of the effectiveness of the methods & processes used	With each component evaluated	Feedback from all components				
How data is used for development, maintenance, and/or revision of the nursing program	With each component evaluated	Systematic evaluation plan  Data clustering				

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Outcomes**

6.3 Evaluation findings are shared with communities of interest.				RESULTS Actions Resulting From Analysis of the Data Documented in Faculty Minutes		
Expected Level of Achievement: Evaluation findings are shared with communities of interest.						
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
LA County DHS; Community Advisory Committee; TELACU Education Foundation; and American Diabetes Association	Biannually	Committee meetings	100% achievement Community partners share concerns, praise student performance, and support financially to enhance successful outcomes		Faculty review as needed	Work to maintain positive community partners

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Outcomes**

**6.4: The program demonstrates evidence of achievement in meeting the program outcomes.**

**Expected Level of Achievement:**

**6.4.1 Performance on licensure exam: the program's annual mean for the licensure examination pass rate will be at 76% or above.**

**Expected Level of Achievement:** Performance of graduates on NCLEX examination will be at 76% or higher for first time takers is a goal nursing is working to achieve.

**6.4.2 Program completion: *Expected levels of achievement for program completion are determined by the faculty and reflect program demographics and program options.***

**Expected Level of Achievement:** Expected levels of achievement for program completion are determined by the faculty and reflect program demographics and program options.

**6.4.3 Graduate Program Satisfaction: *Qualitative and quantitative measures address graduates six to twelve months post-graduation.***

**Expected Level of Achievement:** Qualitative and quantitative measures address graduates six to twelve months post-graduation.

**6.4.4 Employer Placement Satisfaction: *Qualitative and quantitative measures address employer satisfaction with graduate preparation for entry-level positions six to twelve months post-graduation.***

**Expected Level of Achievement:** Qualitative and quantitative measures address employer satisfaction with graduate preparation for entry-level positions six to twelve months post-graduation

**6.4.5 Job Placement Rates: *Expected levels of achievement are determined by the faculty and are addressed through quantified measures six to twelve months post-graduation.***

**Expected Level of Achievement:** Expected levels of achievement are determined by the faculty and are addressed through quantified measures six to twelve months post-graduation.

**RESULTS**

Actions Resulting From Analysis of the Data Documented in Faculty Minutes

Nursing continues to work on strategies that will enhance student performance on NCLEX for first time takers. Remediation plans have been enforced, tutoring and mentoring encouraged, student mentor groups developed (student driven), outside content expert provide additional workshops.

After reviewing NCLEX results it was noted that many first time takers were delaying first attempt 6 months to a year.

50% of facilities report hiring status, graduates report, faculty report when observed in the clinical settings. Alumni gatherings annually also inform the program of graduate satisfaction and employment.

Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
<p>Completion rates</p> <p>Attrition rate for each cohort</p> <p>NCLEX Performance</p> <p>Employment/Job Placement rate</p>	<p>Each graduating cohort</p> <p>Annually</p> <p>Each graduating cohort</p> <p>Annually (6-9 months after completing program)</p>	<p>Analyze number of students completing program on time</p> <p>Analyze attrition rate by course &amp; review results BRN Annual Report</p> <p>Analyze results of NCLEX</p> <p>Survey of affiliating agencies and graduates via mail or phone</p>				<p>Assistance form research is currently assisting in validating completion (2013-2015 will be reviewed to validate outcomes)</p>
<p>Program satisfaction</p> <p>Employer Satisfaction with new graduates</p>	<p>6-9 months after completing program</p> <p>Annually (6-9 months after completing program)</p>	<p>Graduate surveys and aspects of the ongoing program evaluations</p>				

**Systematic Plan for Program Evaluation and Assessment of Outcomes  
Outcomes**

<p><b>6.7</b> Evaluation of admission and selection procedures; attrition and retention of students; performance of graduates in meeting community needs.</p> <p><b>Expected Level of Achievement:</b> 100% of the faculty agrees that the admission procedure and the attrition and retention rates of students are evaluated. Annual feedback from 75% of constituents will confirm that graduates are prepared to function in entry-level positions.</p>				<p><b>RESULTS</b></p> <p>Actions Resulting From Analysis of the Data Documented in Faculty Minutes</p>		
Component	Time & Frequency of Assessment	Assessment Method	Report of the Data: Including actual level of achievement	Development	Maintenance	Revision
1424b(1) Admission-Selection Process	Annually	Review policies and compare LACCD Discipline Committee	100% achievement		Review annually and review total data from 2013 to 2015	Separate out data for cohorts from 2014 to 2016 for comparison of performance based on new curriculum
Attrition & Retention of Students	Annually	Analysis of data pertaining to attrition & retention				
Performance of graduates in meeting community needs	Annually	Graduate Surveys				

**BOARD OF REGISTERED NURSING**  
**Education/Licensing Committee**  
**Agenda Item Summary**

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**AGENDA ITEM: 7.4**  
**DATE: September 3, 2015**

**ACTION REQUESTED:** Vote on Whether to Accept Recommendation to Continue Warning Status with Intent to Close the Nursing Program for Shepherd University (SU) Associate Degree Nursing Program

**REQUESTED BY:** Michael Jackson, MSN, RN  
Chairperson, Education/Licensing Committee

**BACKGROUND:** Misun Sprina Jeon, RN, MSN, is Director of ADN Program since November 2011.

On February 26 - 27, 2014, Miyo Minato, SNEC, and Shelley Ward, NEC, conducted a regularly scheduled first continuing approval visit to Shepherd University ADN Program. Additionally this board-approval visit was done pursuant to CCR 1431(b) for the program's licensing pass rate for first time candidates below 75% for two consecutive academic years.

The program was found to be in non-compliance in three areas: Sec 1424(h) Insufficient FT faculty; Sec 1426(a) Approved curriculum; Sec 1431 NCLEX pass rate standard, and three recommendations were given: Sec 1424(b)(1) Program evaluation; Sec 1424(d) Sufficient resources; Sec 1425.1(b) Faculty responsibilities for instruction. SU's progress report submitted June 29, 2014 showed actions to correct deficiencies and the recommendations. ELC reviewed the NEC's Report and the progress report on August 7, 2014 and recommended to place SU on a warning status with intent to withdraw approval. ELC directed SU to continue implementation of corrective actions and return to ELC at August 2015 meeting. The Board endorsed ELC's recommendation on September 18, with the following actions: Place the program on Warning Status with Intent to Withdraw Approval; the program is to notify existing and future students of the status of the school and post the program's status information on the school's Website; NEC to monitor school's progress, make a site visit in Spring 2015 and provide progress report to ELC in August 2015; the program will ensure that new student admission/enrollment pattern is in accordance with approved cohort size of 33 students.

On July 7, 2015 SU submitted a progress report as required per the board action. NEC has been in close contact with the director and the consultant working with the school since the 2014 Board visit. A site visit to the school was done on June 16, 2015. The current progress report provided the following update:

**Areas of Non-compliance:**

- Section 1424(h) Insufficient FT faculty was addressed and in compliance. There are seven full-time faculty for the program, which included two new hires, and needed complementary clinical faculty to offer the number of admission each semester. There is content-expert for each of the required nursing areas. Following the continuing approval visit in 2014, Sue Albert, former Director at College of the Canyons, has been acting as curriculum consultant at SU and assisting with faculty and curriculum development activities.
- Section 1426(a) Approved curriculum – The report and attached documents showed that the curriculum is being implemented as approved, following the academic calendar and schedule and admission of students are in accordance with the curriculum sequencing to maintain the approved number of admissions each cohort. There have been multiple staff development, and the faculty

participated in faculty development opportunities related to curriculum review, evaluation tools, teaching enhancements, including incorporating simulations throughout the curriculum. All course syllabi were reviewed for consistency and clarity as instructional guide.

- Section 1431(b) NCLEX Pass rate – below 75% remains low and not improved.

### Shepherd University NCLEX Report

	JUL-SEP			OCT-DEC			JAN-MAR			APR-JUN			ANNUAL RATE		
2010	Taken	Passed	Percent	Taken	Passed	Percent									
2011	0	0		0	0		0	0		0	0	100%	1	1	100%
-															
2011	Taken	Passed	Percent	Taken	Passed	Percent									
2012	28	21	75%	1	0	0.00%	13	11	84.62%	13	8	61.54%	55	40	74.73%
-															
2012	Taken	Passed	Percent	Taken	Passed	Percent									
2013	12	9	75%	17	9	52.94%	31	20	64.52%	6	2	33.33%	66	40	60.61%
-															
2013	Taken	Passed	Percent	Taken	Passed	Percent									
2014	5	3	60.00%	19	8	42.11%	3	0	0.00%	16	8	50%	43	19	44.19%
-															
2014	Taken	Passed	Percent	Taken	Passed	Percent									
2015	14	4	28.57%	23	4	17.39%	9	1	11.11%	18	10	55.56%	64	19	29.69%
-															

The changes described in the Progress Reports of 2014 and 2015 were raised admission criteria, strengthened progression requirements, improved students' testing skills, reviewed faculty theory/clinical teaching, and provided success and support strategies and have been added over the last two years. Additions of Kaplan resources have been implemented for each course and comprehensive exam at end of each semester to ensure learning, as well as comprehensive predictor test to improve success with testing. Students take Kaplan Review to prepare for NCLEX exam. The report indicated that at the time of this progress report, "6 students taking the NCLEX who have received the changes that the program has implemented since 2013 to present, four have passed." They are hopeful that "this demonstrates some improvement, but it is important to remember that these students have the benefit from having only 2 semesters of the new changes. The full impact of the changes that were implemented Fall 2014 will not be seen until this class graduates on June 2016 and takes the licensing exam." Attached to this summary are tables described in the recent progress report. (Table 8-1. 3QTRs NCLEX result of 2014/2015; Table 8-2. 2014/15 NCLEX Result Identified by Graduate Timelines (Non-Action Plan Applied Cohorts) (Table 8-3. 2014/15 NCLEX Result Achieved from Action Plan Applied Graduates- Dec 2014) (Table 13. Shepherd Graduates' NCLEX-RN Result by Exam Period) (Table 17. Number/Percent Comparison of First Language (native) versus ESL (English as Second Language)).

Despite implementation of many corrective actions the current pass rate is low. Attached is a table that NEC prepared to assist with data review by showing quarterly NCLEX results and distribution of students taking the NCLEX exam grouped per graduation date. Graduating classes June 2011 (63.65%), January 2012 (76.93%), and January 2013 (67.67%) have pass-rate above 60%, while graduating classes June 2012, June 2013, January 2014, and June 2014 have scored in the 40's% or below. In order to achieve improved first time pass rate, the program needs additional program evaluation which includes analysis of individual student characteristics to accurately identify and target areas of improvement needed to ensure graduate success.

**ELC Recommendation: Continue warning status with intent to close the nursing program for Shepherd University Associate Degree Nursing Program and monitor progress. The program is to submit to the Board a progress report on the quarterly NCLEX performance and return to ELC in March 2016.**

**NEXT STEPS:**

Notify the program of Board action.

**PERSON TO CONTACT:**

Miyo Minato, MN, RN  
Supervising Nursing Education Consultant  
[miyo.minato@dca.ca.gov](mailto:miyo.minato@dca.ca.gov)  
(323) 890-9950

## REPORT OF FINDINGS

### SHEPHERD UNIVERSITY ASSOCIATE DEGREE NURSING PROGRAM CONTINUING APPROVAL VISIT February 26 – 27, 2014

#### NON-COMPLIANCE:

**SECTION 1424(h)** The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas of nursing required by section 1426 (d) who will be the content expert in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned.

*Insufficient FT faculty to implement the curriculum for the currently enrolled students.  
See also CCR 1425.1(a)*

**SECTION 1426(a)** The curriculum of a nursing program shall be that set forth in this section and shall be approved by the board. Any revised curriculum shall be approved by the board prior to its implementation.

*Implementation of the curriculum is inconsistent with the approved curriculum. Future enrollment pattern must meet implementation of the approved generic curriculum.*

**SECTION 1431** The nursing program shall maintain a minimum pass rate of seventy five percent (75%) for first time licensing examination candidates.

*NCLEX Pass rates are below 75% for 2011-12 and 2012-13.*

#### RECOMMENDATION:

**Section 1424(b)(1)** The nursing program shall have a written plan for evaluation of the total program, including admission and selection procedures, attrition and retention of students, and performance of graduates in meeting community needs.

*Examine effectiveness of implementation of actions taken and planned to address NCLEX pass rate below 75%.*

**SECTION 1424(d)** The program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment including technology to achieve the program's objectives.

- *Enhance tutoring/learning resources for students by providing structured tutoring resources to increase student success.*
- *Ensure adequate supply for each student to have a realistic initial experience of skills, such as the use of sterile supplies, i.e., foley cath, sterile dressings*

**SECTION 1425.1(a)** Each faculty member shall assume responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content.

*Consider consultation from a curriculum expert to assist with faculty development and the curriculum revision under consideration, including a strategy for full integration of simulation in each course.*



June 1, 2015

Miyo Minato, MN, RN, NEC  
Supervising Nursing Education Consultant  
California Board of Registered Nursing  
P.O. Box 944210  
Sacramento, CA94244

**Subject: Progress Report for Shepherd University ADN Program**

Dear Ms. Minato,

This progress report addresses the areas of non-compliance and recommendations required for the continued approval of the Shepherd University ADN program as determined by the Board of Registered Nursing. The report demonstrates that the program has achieved compliance to correct all deficiencies noted by the Board. Although the NCLEX pass rate is still below 75% in 2014-15, the program has demonstrated a significant improvement on the NCLEX performance for the Dec 2014 Cohort. The action plans were implemented in the third semester with this group. Evidence of the plans and actions taken are enclosed.

The faculty have met several times with the nursing education consultant, Sue Albert, to develop approaches to rectify the issues that were affecting the students' success in the Shepherd University Nursing Program. The faculty have improved their performance as faculty. Data was critically reviewed and actions to correct identified weaknesses were implemented including:

- Hiring a content expert.
- Hiring additional fulltime faculty.
- Compensating the part time content experts to help support them.
- Ensured the new students' admission/enrollment pattern is in accordance with approved cohort size of 33 students.

Notified existing and future students of the status of the school upon admission counselling and posted the program as being on Warning Status at official school website

Thank you and we hope the actions taken and the substantive progress that has been made are considered at the ELC meeting by the Board to allow the program to remove the "Warning Status" and to continue approval until the outcomes of the program changes have been measured.  
Sincerely,

Sprina Jeon, MSN, RN  
Director of ADN Program  
School of Nursing

**Enclosed Summary of Progress Report and Action Plan Table with Table and Attachments**



June 1, 2015

**SUMMARY OF PROGRESS REPORT**  
**SHEPHERD UNIVERSITY ASSOCIATE DEGREE NURSING PROGRAM**

**NON-COMPLIANCE:**

**SECTION 1424(h)** The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas of nursing required by section 1426 (d) who will be the content expert in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned.

*There are insufficient FT faculty to implement the curriculum for the currently enrolled students. See also CCR 1425.1(a)*

**Response:**

**1. Number of Teaching FT and PT faculty members during fall 2014 and spring 2015**

- The program has 7 full time faculty including 6 teaching faculty and 1 non-teaching faculty. This includes 2 new hires. The program has all necessary content experts. All have been approved by the BRN. **(Table 1. Lists of Fulltime Faculty and Ratio of Student to Faculty; Table 2. Lists of Content Expert)**
- A faculty member resigned for health reasons and interviews are underway to replace her. Overall faculty retention has stabilized. The 2 new hires were to increase the complement of full time faculty members. All faculty are participating in staff development programs.

**2. Enhanced Faculty development activity (Table 4. Lists of on-site Faculty Development Activity)**

- All faculty including part time faculty attended a workshop in fall 2014 conducted by Ms. Albert, external expert.
- All faculty attended a mandatory seminar in fall 2014 conducted by Ms. Donna Ignatavicius. The seminar was held to improve course evaluation materials to incorporate the NCLEX-RN exam style.
- Faculty attended a simulation seminar presented by Tina Waller, College of the Canyons' simulation coordinator in July 2014.
- Nursing faculty have integrated the knowledge obtained from the workshops into the curriculum as reflected in the Spring 2015 course syllabi.



#### **NON-COMPLIANCE**

**SECTION 1426(a)** The curriculum of a nursing program shall be that set forth in this section and shall be approved by the board. Any revised curriculum shall be approved by the board prior to its implementation.

*Implementation of the curriculum is inconsistent with the approved curriculum. The curriculum does not flow across the program and recognize student levels needed for participation in experiences. The courses did not start nor finish in the assigned time. Future enrollment pattern must meet implementation of the approved generic curriculum.*

#### **Response:**

##### **1. Maintain academic calendar schedule**

All classes were conducted per calendar schedule since visit in 2014. All clinical courses are completed without having to change clinical sites. This demonstrates sufficient clinical sites and clinical faculty for program implementation. **Attachment 2. Spring 2015 Class Schedule; Attachment 3. BRN Approval of New Clinical Sites for OB & Peds)**

##### **2. Reorganized syllabi to have consistency in theory and clinical schedule and objectives.**

All syllabi have been reviewed by faculty and consultant. Based on review all syllabi were revised. Now the curriculum flows across the program reflecting student level of knowledge in each course. The courses and the evaluations in the courses all reflect student growth through the program. The clinical experiences are fully integrated with the theory.

##### **3. Simulation Plan**

- Simulation is being integrated into all levels of nursing curriculum. The case scenarios are appropriate the level of the course and course content. This is an on-going process.

##### **3. Compliance with new student admission/enrollment patterns in accordance with approved cohort size of 33 students**

- During fall 2014 and spring 2015 semester, new admissions have been accepted by the approved enrollment numbers with 22 Generic RN and 11 Advanced Placement; and the program has ensured completion of prerequisites prior to nursing admissions. Refer to the Table 4. Enrollment Projection Table for the details. **(Table. 4. Enrollment Number Table in Fall 2014 and Spring 2015)**

##### **5. Completion on Posting Warning Status**

- The program had notified existing students in Dec 2014 and prospective students about the program's warning status during admission counseling; and the program has placed the sign of warning status since Sep 2014 at School Website. Refer to this link.  
<http://www.shepherduniversity.edu/nursing/accreditation/>



**NON-COMPLIANCE:**

**SECTION 1431** The nursing program shall maintain a minimum pass rate of seventy five percent (75%) for first time licensing examination candidates.

*NCLEX Pass rates are below 75% for 2011-12 and 2012-13.*

**RECOMMENDATIONS:**

**Section 1424(b)(1)** The nursing program shall have a written plan for evaluation of the total program, including admission and selection procedures, attrition and retention of students, and performance of graduates in meeting community needs.

*Examine effectiveness of implementation of actions taken and planned to address NCLEX pass rate below 75%.*

**Response:**

Action plans as submitted were implemented during late fall 2014 and spring 2015 semester. The actions taken include the following:

**1. Strengthened LVN advanced placement admission selection criteria**

- The program has increased the admission criteria of TEAS score from 58% to 65%.

**2. Increased admission GPA to 2.8 and require OB & Peds Knowledge Validity Check**

- The program implemented the requirement of an increased GPA of 2.8 for LVN advanced students in Spring 2015. (**Table 7. Admission GPA & Test results of TEAS/OB/PEDS for Spring 2015 LVN Advanced Placement**)

**3. Monitor NCLEX results for LVN to RN graduates**

- The students entering in Spring 2015 will be the first LVN to RN students to benefit from the total implementation of all changes. Therefore the NCLEX results for these students will first be reflected in December 2015 results.

**\*\*\*Please note that this plan was implemented in Spring 2015 therefore changes in NCLEX scores reflecting these changes will not be noted until these students take NCLEX in December 2015.**

**4. Updated Report of NCLEX Result**

**When reviewing the NCLEX results please note the following timelines for students receiving the changes in curriculum and presentation. During summer 2014 through fall 2014 the program was examined, consultants were brought in and syllabi were revised to reflect**



changes. The syllabi were approved and changes were approved and implementation of changes in Fall 2014. Therefore NCLEX results reflect the following:

- a) Students taking NCLEX in December 2014 had received only one (1) semester of the changes in the program.
- b) Students taking NCLEX in May 2015 had received only two (2) semesters of the changes in the program.
- c) Students taking NCLEX in December 2015 will have received only three semesters (3) of the changes in the program.
- d) Students taking NCLEX in May 2016 will be the very first students to have completed the program with all the changes in place.

Students that had not benefitted from full implementation of the changes did receive intensive tutoring and test-taking preparation.

The program has continued to monitor the NCLEX pass rate for 2014/15 and updated the results of three (3) QTRs of 2014/15 which were taken during 7.1.14-3.31.15. Currently the pass rate remains below 75%. Final results for the spring 2015 graduates have not been received. At this time of the 11 students taking the NCLEX 7 have passed. **This demonstrates some improvement but it is important to remember that these students have benefitted from only 2 semesters of the changes. The full impact of the changes that were implemented in Fall 2015 will not be seen until the class of Spring of 2016.** (Table 8-1. 3QTRs NCLEX result of 2014/2015; Table 8-2. 2014/15 NCLEX Result Identified by Graduate Timelines (Non-Action Plan Applied Cohorts) (Table 8-3. 2014/15 NCLEX Result Achieved from Action Plan Applied Graduates- Dec 2014) (Table 13. Shepherd Graduates' NCLEX-RN Result by Exam Period).

## 6. Update of 30-unit Option admissions in LVN Advanced Placement tract

The program has not had space available for 30 unit options students. (Table 10. Admission Number for 30-Unit Option since SP2014)

## 7. Reinforcement of evaluation policy

The program deleted the re-taking of the final exam policy effective fall 2014 semester. The students were given an official notification prior to implementation of the policy; students were not allowed a second chance to take the final exam beginning fall 2014 semester (Attachment 5. Notification of Changed Policy)

- Following the presentation by Dr. Ignatavicius the faculty developed exams utilizing NCLEX testing style. All faculty established consistent evaluation instruments for both theory and clinical grading across all Medical-Surgical courses. All exams utilize

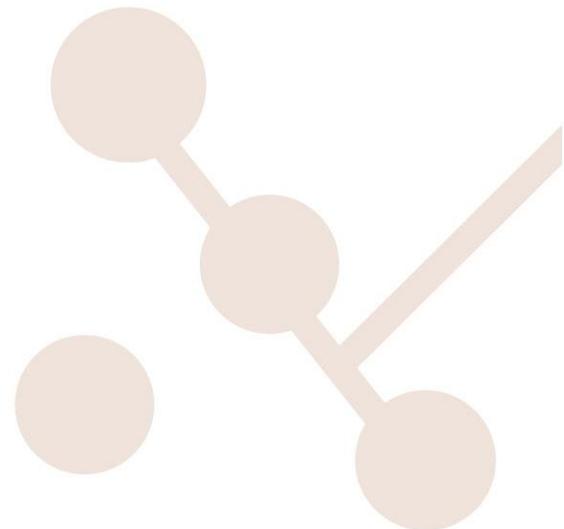


more critical thinking questions rather than recall. (**Table 11. Attrition Rate by Program**)

- In Fall 2014, the policy on the Comprehensive Semester Basis Exit exam was changed and implemented which requires the student to achieve a minimum grade of 80% or higher in order to move on to next semester. The test may only be taken once. Failure to achieve the minimum grade of 80% on the semester exit exam, results in the student being required to repeat the failed courses from failed semester. (**Table 12. Result of Comprehensive Exit Exam**)

### 8. Curriculum Development/Faculty Development

- All faculty including part time faculty attended a workshop in fall 2014 conducted by Ms. Albert, external expert.
- All faculty attended a mandatory seminar in fall 2014 conducted by Ms. Donna Ignatavicius. The seminar was held to improve course evaluation materials to incorporate the NCLEX-RN exam style.
- Faculty attended a simulation seminar presented by Tina Waller, College of the Canyons' simulation coordinator in July 2014.
- Nursing faculty have integrated the information obtained from the workshops into the curriculum as reflected in the Spring 2015 course syllabi.
- Strategies were developed for implementation of curriculum. These include the revised syllabi and the development of clinical syllabi with schedules reflecting the theory being studied. It included integration of simulations reflecting the theory and the use of tutoring.





**RECOMMENDATIONS:**

**SECTION 1424(d)** The program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment including technology to achieve the program's objectives.

*Enhance tutoring/learning resources for students by providing structured tutoring resources to increase student success.*

*Ensure adequate supply for each student to have a realistic initial experience of skills, such as the use of sterile supplies, i.e., foley cath, sterile dressings*

**Response:**

**1. Improved Support System for Prospective Student**

- New enrollees have been informed of the title IV unavailability during admission counseling.
- The University continues to work to obtain financial aid. The expectation is that the university will be eligible from fall 2015 semester

**2. Systemized the Student Learning Resources Center policy applied effective Fall 2014**

- SU has a procedure in place to ensure that all nursing students have full access to services offered in Learning Resource Center and other student tutorial support.
- Students who want to utilize specific resources in skills lab such as virtual case scenario module, nursing skills video resources on MS, OB, Pediatrics & Pharmacology and tutorial on nursing care plan may complete a request to the Skills Lab Coordinator for appointment as scheduled throughout the semester.
- As of Fall 2014, the school has implemented a policy to purchase a skills practice bag for new nursing students, which include sterile and clean supplies necessary for skills lab practice.
- Nursing textbooks utilized for all courses have been published for no longer than 4 years. The Lead faculty of each course is charged with reviewing the books and required readings to ensure they reflect current nursing practice.



### 3. Improved support for student success

#### <During Program>

#### **Tutorial sessions implemented to improve knowledge acquisition.**

- The program provided med-surg tutorial classes fall 2014 and spring 2015 to the graduating students during the regular class schedule as once a week classes for 3-4hrs by one of full time faculty who is the med-surg content expert.
- The Program assigned one full time faculty to provide individual tutoring during spring 2015 semester to assist with individual weaknesses identified by mock tests. (**Table 15. Schedule of Student Individual Tutorial Plan for sem 4**)
- Students who had poor tests results in NR401 were referred to faculty with a learning contract for improving in their weak areas as demonstrated by the Kaplan resources.
- The weekly NCLEX Q & A session was provided at the end of fall semester of 2014 for 8 sessions; it was offered in Spring 2015 for the graduating cohort.
- The weekly NCLEX Tutorial class was implemented in the fall semester of 2014. It was offered 15 times by a full-time faculty each semester.
- The Kaplan NCLEX review course was provided in December of 2014 and May of 2015. It will continue to be offered as part of student support services.

#### **Mock testing implemented to improve test taking strategies and to track success with new curriculum.**

- In Fall 2014 Kaplan standardized testing was adopted across all program courses and implemented in the following areas:
  - At the end of each course, students took a customized and proctored Kaplan test
  - Graduating students attended a mandatory on site 4-day NCLEX review course by Kaplan and 14 -week NCLEX review conducted) by Shepherd faculty who was assigned to do med-surg content review.
  - During the semester, graduating students were required to take proctored Kaplan standardized exams (NCLEX Question Trainers and Predictor Tests) to further assess and evaluate students' readiness to take NCLEX.



- Dec 2014 graduates were followed to determine their status on Eligibility test paper and the exam dates. Graduates were encouraged to continue to attend the current NCLEX tutorial/review class.

#### <After Graduation>

- The program has continued to offer the tutorial class after graduation for two months and students were encouraged to take the Kaplan Secure Predictability Tests prior to taking NCLEX – RN until they achieved a 65% on the predictability test which has a 95% predictability of passing the NCLEX (**Refer to Table 9-1. Result of Kaplan Predictability Test in Dec 2014 Graduates**).
- In addition, the program implemented more effective schedules outcomes among predictability tests, NCLEX review, and tutorial sessions to provide for improved NCLEX results. (**Table 16. Review & Tutorial Class Schedules of Spring 2015**).
- Identified 19 graduates who had not taken NCLEX besides Dec 2014 graduates; Six fulltime faculty have been assigned to them for identifying the reasons for not taking NCLEX so far and for providing available school resources such as individual study guides, SU NCLEX review and to provide classes and Kaplan Predictor test plan. This is to help students who completed the program prior to implementation of changes. (**Table 15-1. Lists of Non-NCLEX Graduates and Assigned faculty for Follow-up**)

#### RECOMMENDATIONS:

**SECTION 1425.1(a) Each faculty member shall assume responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content.**

***Consider consultation from a curriculum expert to assist with faculty development and the curriculum revision under consideration, including a strategy for full integration of simulation in each course.***

#### Response:

As discussed throughout the Summary the faculty members have assumed responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content. This is demonstrated by the revised syllabi, the new evaluation instruments and the provision of student support by the faculty.

All faculty participated in faculty development programs prior to the changes.

Ms. Sue Albert continues to support the program as the external curriculum expert since April 2104 and the curriculum committee is continuing to improve the program under her assistance on an as needed basis.

Table 8-1. Annual NCLEX-RN Pass Rates

	2010/11	2011/12	2012/13	2013/14	2014/15 (7.1.14-3.31.15)	
					1 <sup>st</sup> ~ 3 <sup>rd</sup> QTR	4 <sup>th</sup> QTR
<b>Total</b>	<b>100% (1/1)</b>	<b>72.73% (40/55)</b>	<b>60.61% (40/66)</b>	<b>44.19% (19/43)</b>	<b>24.32% (9/37)</b>	TBA (by late July 2015)
LVN 30U	N/A	50% (4/8)	40% (6/15)	33.33% (1/3)	0% (0/1)	
LVN Adv	100% (1/1)	76.60% (36/47)	66.67% (34/51)	50% (12/24)	39.13% (9/23)	
Generic	N/A	N/A	N/A	37.5% (6/16)	0% (0/14)	

Table 8-2. 2014/15 NCLEX Result Identified by Graduate Timelines (Non-Action Plan Applied Cohorts)

updated : 4.31.15

2014/15	1st QTR	2nd QTR	3rd QTR	4th QTR	Sub Total
	7/1/2014-9/30/2014	10/1/2014 - 12/30/2014	1/1/2015 - 3/30/2015	4/1/2015 - 6/30/2015	
Delivered (%)	28.57%	17.39%	11.11%	<b>TBA in Late July</b>	24.32%
	14	23	9		46
Passed Identified by Graduation Timeline	4	4	1		9
	Jan. 2014: 4	June 2014: 3 Jan. 2014: 1	Dec 2014: 1		
Failed Identified by Graduation Timeline	10	19	8		37
	June 2013: 2 Dec 2013: 8	Dec 2013: 6 June 2014: 13	Dec 2013: 3 June 2014: 4 Dec 2014: 1		

Table 8-3. 2014/15 NCLEX Result Achieved from Action Plan Applied Graduates- Dec 2014

<Total # of Graduates of Dec 2014: 19>

NCLEX Result from Dec 2014 Graduates
<p><b>63.63%</b> ( 7 passed in 11 delivered )</p>

\* The result of NCLEX above showed the radical improvement in the graduates of Dec 2014 who were applied the action plans.

\*\*As of May 30, 2015, the program is waiting for the result from the rests of 8 graduates' NCLEX result which will be taking during fall 2015.

Table 13. Shepherd Graduates' NCLEX-RN Result by Exam Period  
(June 2011 – December 2014)

<N: 202>

Graduation	Passed	Failed	Total
Within 3 months	60.75% (65)	18.95% (18)	<b>41.09% (83)</b>
After 3 months	39.25% (42)	81.05% (77)	<b>58.91% (119)</b>

- The result above showed there were even better pass rate in the group who took the NCLEX within three months of graduation and the failure were lower than the group who took the exam after three months of their graduation.
- The program has kept encouraging to sit the NCLEX within 3months after graduation for Dec 2014 graduates, but most graduates were not able to receive eligibility letter from the BRN in 3months. The program director asked for the expedition to the BRN.

Table 14. Cognitive Test Plan of Curriculum

Level	Semester	Level 1		Level 2	
		1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>
	Courses	NR101 NR102 NR310 NR103	NR201 NR202 NR203 *NR104 (L-R)	NR301 NR302	NR401 NR402 NR403
Non-critical thinking	Memorizing /Understanding /Recall	50%	30%	15%	0
Critical thinking	Application or higher	50%	70%	85%	100%
	Total Goal	100%	100%	100%	100%
	Select all that apply (Selective Test Answers (STA); multiple response); one or any answers	20%	30%	40%	50%
		<i>Considering with partial credits</i>			

Table 16. Review Schedules of Spring 2015

COURSE TITLE	TIME	DAYS	FACULTY	CLASSROOM	TERM
Kaplan NCLEX On-site Review	8:00am-5:00pm	Tu-F	Kaplan Nursing	RN Skills Lab	5/19-5/22/15 (4days)
*Kaplan Pre-Predictability Test	9:00am-12:00pm	Tu	n/a	SU Computer Lab	5/26
SU NCLEX Review	5:00pm-8:00pm	Tu	Dr. Karen Kim	RN Skills Lab	6/2-7/28/15 (9Tuesdays)
*Kaplan Post-Predictability Test	9:00am-12:00pm	Th	n/a	SU Computer Lab	7/30/15

Table 17. The Number /Percent Comparison of NCLEX-RN Result by First Language (Native) versus ESL (English as Second Language)

Academic Year July 1 – June 30	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015 (7.1.14- 12.31.14)	Average
<b>Native</b>	N/A	15% (6/40)	15% (6/40)	37.50% (3/8)	7.14% (1/14)	15.69% (16/102)
<b>LVN Adv</b>	N/A	8.33% (3/36)	11.76% (4/34)	50% (2/4)	12.5% (1/8)	12.2% (10/82)
<b>30-Unit</b>	N/A	75% (3/4)	33.33% (2/6)	0% (0/1)	N/A	45.45% (5/11)
<b>Generic</b>	N/A	N/A	N/A	33.33% (1/3)	0% (0/6)	11.11% (1/9)
<b>English as a second language</b>	100% (1/1)	85% (34/40)	85% (34/40)	42.86% (15/35)	17.39% (4/23)	63.31% (88/139)
<b>LVN Adv</b>	100% (1/1)	91.67% (33/36)	88.24% (30/34)	42.86% (9/21)	28.57% (4/14)	72.64% (77/106)
<b>30-Unit</b>	N/A	25% (1/4)	66.67% (4/6)	100% (1/1)	0% (0/1)	50% (6/12)
<b>Generic</b>	N/A	N/A	N/A	38.46% (5/13)	0% (0/8)	23.81% (5/21)

*Shepherd University*

	<i>JUL-SEP</i>			<i>OCT-DEC</i>			<i>JAN-MAR</i>			<i>APR-JUN</i>			<i>ANNUAL RATE</i>		
<i>2010 - 2011</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>									
	0	0		0	0		0	0		1	1	100.00%	1	1	100.00%
<i>2011 - 2012</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>									
	28	21	75.00%	1	0	0.00%	13	11	84.62%	13	8	61.54%	55	40	72.73%
<i>2012 - 2013</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>									
	12	9	75.00%	17	9	52.94%	31	20	64.52%	6	2	33.33%	66	40	60.61%
<i>2013 - 2014</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>									
	5	3	60.00%	19	8	42.11%	3	0	0.00%	16	8	50.00%	43	19	44.19%
<i>2014 - 2015</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>	<i>Taken</i>	<i>Passed</i>	<i>Percent</i>									
	14	4	28.57%	23	4	17.39%	9	1	11.11%	0	0		46	9	19.57%

4 <sup>th</sup> Quarter Report 01 Apr 2015 to 30 Jun 2015	<b>Taken</b>	<b>Passed</b>	<b>Percent</b>	<b>Taken</b>	<b>Passed</b>	<b>Percent</b>
	18	10	55.56%	64	19	29.69%

Report received 7/24/15\*

SU Graduates and NCLEX results

**2011-12 40/55 = 72.73%**

- July-Sept – Grad **Jun 2011** group (21/28 = 75%)
- Oct-Dec – Grad **Jun 2011** (0/1 = 0%)
- Jan-Mar – Aug 1973 1; **Grad Dec 2011/Grad Jan 2012** 12 (11/13 = 84.62%)
- Apr-Jun - Prior grad date 2; **Grad Dec 2011/Grad Jan 2012** 11 (8/13 = 61.54%)

**2012-13 40/66 = 60.61%**

- July-Sept – No quarterly report
- Oct-Dec – **Grad Dec 2011/Jan 2012** 2; **Grad Jun 2012** 14; **Grad Oct 2012** 2 (9/17 = 52.94%)
- Jan-Mar – **Grad Jun 2012** 7; **Grad Jan 2013** 24; (20/31 = 64.52%)
- Apr-Jun - **Grad Jun 2012** 1; **Grad Jan 2013** 5; (2/6 = 33.33%)

**2013-2014 19/43 = 44.19%**

- July-Sept – **Grad Jun 2012** 1; **Grad Jan 2013** 4; (3/5 = 60%)
- Oct-Dec – **Grad Jan 2013** 1; **Grad Jun 2013** 18 (8/19=42.11%)
- Jan-Mar – **Grad Jun 2012** 1; **Grad Jun 2013** 2 (0/3 = 0%)
- Apr-Jun – **Grad Jun 2013** 1; **Grad Dec/Jan 2014** 15 (8/16 = 50%)

**2014-2015 9/46= 19.57%**

- July-Sept – **Grad Jun 2013** 2; **Grad Jan 2014** 12 (4/14 = 28.57%);
- Oct-Dec – **Grad Jan 2014** 8; **Grad Jun 2014** 15 (4/23 = 17.39%);
- Jan – Mar – **Grad Jan 2014** 3; **Grad Jun 2014** 4; **Grad Dec 2014** 2; (1/9 = 11.11%)
- Apr – Jun – **Grad Jan 2014** 1; **Grad Jun 2014** 6; **Grad Dec 2014** 11; (10/8 = 55.56%)

Cohort Graduation Date	1 <sup>st</sup> time pass/not pass	1 <sup>st</sup> time pass rate
June 2011	21/12	63.65% (21/33)
Dec 2011/ Jan 2012	20/6	76.93% (20/26)
<b>June 2012</b>	<b>10/16</b>	<b>38.46%</b> <b>(10/26)</b>
Jan 2013	21/10	67.67% (21/31)
<b>June 2013</b>	<b>11/15</b>	<b>42.31%</b> <b>(11/26)</b>
<b>Jan 2014</b>	<b>12/25</b>	<b>32.43%</b> <b>(12/37)</b>
<b>June 2014</b>	<b>7/18</b>	<b>28%</b> <b>(7/25)</b>
Dec 2014	7/6	53.85%* (7/13)

M. Minato 6/2015; revised 7/24/15\*

**Report 4 Rolling Quarter – Jurisdiction Program Summary of  
all First-Time Candidates Licensed in All Jurisdictions**

01 Apr 2015 to 30 Jun 2015

NCSBN Confidential

California Board of Registered Nursing (21)

CA - SHEPHERD UNIVERSITY - ADN (US04409000)

Education Program Code	Education Program	Education Program City	Graduation Date	-- Current Quarter -- 04/01/2015 – 06/30/2015				-- Total -- 07/01/2014 – 06/30/2015			
				# Delivered	# Passed	# Failed	% Passed	# Delivered	# Passed	# Failed	% Passed
US04409000	CA - SHEPHERD UNIVERSITY - ADN (US04409000)	LOS ANGELES	01/2014	1	0	1	0.00%	21	5	16	23.81%
			05/2014	0	0	0	0.00%	1	0	1	0.00%
			06/2013	0	0	0	0.00%	2	0	2	0.00%
			06/2014	6	4	2	66.67%	25	7	18	28.00%
			12/2013	0	0	0	0.00%	2	0	2	0.00%
			12/2014	11	6	5	54.55%	13	7	6	53.85%
<b>Total:</b>				<b>18</b>	<b>10</b>	<b>8</b>	<b>55.56%</b>	<b>64</b>	<b>19</b>	<b>45</b>	<b>29.69%</b>

**BOARD OF REGISTERED NURSING**  
**Education/Licensing Committee**  
**Agenda Item Summary**

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**AGENDA ITEM: 7.5**  
**DATE: September 3, 2015**

**ACTION REQUESTED:** Vote on Whether to Accept Recommendation for Addition of Nursing Program Information to the BRN Website (Accreditation, Retention, Attrition)

**REQUESTED BY:** Michael Jackson, MSN, RN, Chairperson  
Education/Licensing Committee

**BACKGROUND:** Currently the BRN website provides the following data related to each approved pre-licensure nursing program:

- Listing of programs by degree type with complete school address, telephone number and whether they have an accelerated fast track program or the program admits LVNs only. The program listing is also linked to the schools website.
- Information about and indication of programs on warning status included on the school listing (as approved by the Board at the June 2015 Board meeting).
- Most recent five years of NCLEX results by program.

Recommendations from the Senate Committee on Business, Professions and Economic Development (BP&ED) and the Assembly Committee on Business and Professions (B&P), collectively “the Committees”, in response to the 2014 Sunset Review Report, are to additionally post individual program information regarding accreditation, attrition, and retention to the website to better inform current and potential students as well as the general public.

- **Accreditation** – There are two types of accreditation, institutional/school accreditation and program accreditation. School and/or program accreditation may impact the student’s transfer of academic credits from one institution to another, their ability to qualify for admission to a higher degree program, or employer’s recognition of the degree.

To date the BRN has collected institutional accreditation information only during the initial approval process and receives verification of approval from BPPE. This information has not been systematically updated. Regular collection of this data will begin with the 2014-2015 Annual School Survey. Program accreditation information is currently collected on the Annual School Survey. Thus, current information regarding program accreditation is available and could be added to the BRN website at any time and institutional accreditation information will be available beginning in early 2016 from the 2014-2015 Annual School Survey.

- **Attrition and Retention** – The BRN Annual Survey currently collects program data that is used to calculate attrition and retention via and reports this along with other data from the survey in aggregate (regionally, by program type, statewide, etc.). Attrition and retention data is calculated and reported in various ways by different schools, programs and organizations and

there does not appear to be one universal method. The BRN has collected student completion data for many years which includes the number of students: scheduled on admission to complete the program during the survey time period; completed during the survey time period; dropped out of the program or were disqualified during the survey time period; still enrolled in the program during the survey time period; completed the program during the survey time period but behind schedule. Since 2004-2005, the BRN has calculated and reported retention and attrition in the same manner:

- Retention = (students completing the program on-time) / (students scheduled to complete the program)
- Attrition = (students dropped or disqualified who were scheduled to complete) / (students scheduled to complete the program)

Although the two most common nursing program accrediting bodies (ACEN and CCNE) use different formulas, the BRN's Education Issues Workgroup (EIW) has discussed the issue of calculations many times (most recently at the April 30, 2015 meeting) and they continue to recommend the BRN calculate and report in the same way. Questions on the BRN Annual School Survey regarding this data do not specify a time period, allowing the programs to decide by providing the number of students who were scheduled to complete.

Program-specific information provided on the BRN website should include definitions for attrition, retention and factors influencing the experiences, to help the public understand and interpret the data. The attachment to this AIS presents a proposed format for BRN website posting of program specific accreditation, attrition and retention data.

BRN staff proposed the following for website presentation of program-specific data:

- Maintain program specific NCLEX data and aggregate program data as currently presented on the website.
- Add a table to present program specific data for institutional accreditation, program accreditation, attrition and retention.

**ELC Recommendation: Approve addition to the BRN website of program and institutional accreditation, attrition and retention information in the format presented.**

**NEXT STEPS:** Per direction of the Board.

**PERSON TO CONTACT:** Julie Campbell-Warnock  
Research Program Specialist

# Current NCLEX Data Presentation

Board of Registered Nursing | rn.ca.gov/schools/passrates.shtml

DEPARTMENT OF CONSUMER AFFAIRS  
**BOARD of REGISTERED NURSING**

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**CALIFORNIA BOARD OF REGISTERED NURSING**

## NCLEX Pass Rates

The table below is categorized by academic year (e.g., July 1st - June 30th) and reflects the results of all graduates who have taken the NCLEX examination for the first time within the last five years (including those students who graduated more than five years ago). Due to possible changes in this data, the BRN asks that you contact the individual programs directly for the most accurate and up-to-date information. Please refer to [RN Programs](#) for a contact list of all BRN accredited programs.

School	2009/2010		2010/2011		2011/2012		2012/2013		2013/2014	
	# Taken	% Pass								
Allan Hancock College	35	80%	33	84.85%	37	86.49%	35	82.86%	34	79.41%
American River College	103	92.23%	95	90.53%	80	95%	55	94.55%	49	85.71%
American University of Health Sciences	22	90.91%	17	70.59%	26	73.08%	36	50%	60	80%
Antelope Valley College	129	94.57%	140	85.71%	105	90.48%	112	91.96%	100	81%
Azusa Pacific University - BSN	123	84.55%	179	83.24%	152	80.26%	273	87.18%	248	83.46%
Azusa Pacific University - MSN	39	79.49%	35	88.57%	30	80%	18	94.44%	N/A	N/A
Bakersfield College	190	93.16%	126	88.10%	145	93.10%	99	97.98%	93	91.4%
Biola University	24	83.33%	36	88.89%	37	91.89%	23	82.61%	29	79.31%
Butte College	85	82.35%	111	82.88%	99	87.88%	122	86.07%	59	83.05%
Cabrillo College	57	85.96%	65	80.00%	53	77.36%	58	86.21%	56	75%
California State University - BSN	48	84.57%	40	85.71%	44	90.91%	71	78.87%	76	79.23%

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- Meetings
- Practice Information
- Renew Online
- BreEZe License Verification
- Web Site Satisfaction Survey
- Join Our Email List
- Department of Consumer Affairs

**Related Links**

- Health Care Related State Agencies
- Specialty and Advanced

11:20 AM 7/22/2015

# Proposed Format

School	Institutional Accreditation	Program Accreditation	Retention & Attrition Rates									
			2009-10		2010-11		2011-12		2012-13		2013-14	
			Retention Rate	Attrition Rate	Retention Rate	Attrition Rate	Retention Rate	Attrition Rate	Retention Rate	Attrition Rate	Retention Rate	Attrition Rate
All Knowing School	ABHES NWSCUC	CCNE	72.5%	6.2%	81.5%	4.1%	85.6%	3.3%	91.7%	2.3%	81.5%	4.1%
Example College	WASC-JC	ACEN CCNE	88.9%	2.5%	88.2%	3.4%	81.5%	4.1%	85.6%	3.3%	91.7%	2.3%
Sample University	CHEA WASC	None	72.7%	7.2%	85.6%	3.3%	91.7%	2.3%	88.2%	3.4%	81.5%	4.1%

**Attrition Rate:** The total number of generic students who withdrew or were dismissed from the program and were scheduled to complete the program between August 1, 2014 and July 31, 2015, divided by the total number of generic students enrolled who were scheduled to complete during the same time period.

**Retention Rate:** The total number of generic students who completed the program between August 1, 2014 and July 31, 2015 divided by the total number of generic students enrolled who were scheduled to complete during the same time period.

LEGEND			
Institutional Accreditation		Program Accreditation	
ABHES	Accrediting Bureau of Health Education Schools	ACEN	Accreditation Commission for Education in Nursing
WASC-JC	Accrediting Commission for Community and Junior Colleges of the Western Association of Schools and Colleges	CCNE	Commission on Collegiate Nursing Education
ACCSC	Accrediting Commission of Career Schools & Colleges	CNEA	Commission for Nursing Education Accreditation
ACCST	Accrediting Commission of Career Schools and Colleges of Technology		
ACICS	Accrediting Council for Independent Colleges and Schools		
CHEA	Council for Higher Education Accreditation		
COE	Council on Occupational Education		
NWCCU	Northwest Commission on Colleges and Universities		
WSCUC	WASC – Senior College and University Commission		

**BOARD OF REGISTERED NURSING**  
**Education/Licensing Committee**  
**Agenda Item Summary**

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**AGENDA ITEM: 7.6**  
**DATE: September 3, 2015**

**ACTION REQUESTED:** Licensing Program Report

**REQUESTED BY:** Michael Jackson, MSN, RN  
Chairperson, Education/Licensing Committee

**BACKGROUND:**

Program Update: The Licensing Program evaluators are currently processing the initial review of exam and endorsement applications cashiered in early June.

The vacant Associate Governmental Program Analyst position has been filled by Mario Zetter. Mario was promoted on July 24<sup>th</sup> and brings with him extensive licensing experience having started with the BRN Licensing Unit in 2006 and has worked in all facet of the evaluation process. I would like to take this opportunity to welcome Mario into his new role as an Advanced Practice Analyst. With his promotion, the Board will recruit to fill his vacant Staff Services Analyst position in the International Evaluations unit as well as two new vacancies for limited term Program Technician II within the Licensing Unit. I expect to have these positions as well as a limited term Program Technician I and three Seasonal positions filled by the end of August or early September.

The Licensing Program management reported the following information regarding the Licensing Process Mapping and recommendations report from the Department of Consumer Affairs SOLID planning Solutions at the ELC meeting on August 6<sup>th</sup>. The Board of Registered Nursing (Board) licensing unit's subject matter experts met with the DCA's SOLID planning solutions to develop a Licensing Process Map that would diagram the Board's licensing processes. The entire project was conducted over a span of three months. At the end of the project, SOLID provided the Board with a comprehensive Licensing Process Mapping report that was a total of 87 pages. The report contained all of the information that was collected and analyzed in order to provide the Board with the information they need to correspond to the auditor's request.

Within this report, SOLID made some recommendations for the Board. There were four main recommendations throughout the report:

1. Eliminate re-checking of work done by the support staff.
  - a. Re-checking of work is completed for quality control.
2. Research and implement more effective ways to track and store documents received from applicants. Documents located in too many different locations.
  - a. The Board is frequently coming up with better ways to improve the process.

3. Research a more effective process for support staff to eliminate the lengthy time spent prior to evaluating applications.
  - a. By scanning documents beforehand, it eliminates the need for support staff to check multiple locations to retrieve documents.
4. Potential BreEZe configuration issues.
  - a. The areas they identified have to do with separate interfaces that interact with BreEZe and due to specific program requirements are not changeable.

Additional changes not included in the report:

1. Change the way the licensing unit processes web applications.
2. Specific units for application type which we are discussing the separation of the unit by application method (i.e. exam, endorsement).

**NEXT STEPS:** None

**PERSON TO CONTACT:** Long Dau, Staff Services Manager I  
Licensing Standards and Evaluations  
(916) 515-5258

**BOARD OF REGISTERED NURSING**  
**Education/Licensing Committee**  
**Agenda Item Summary**

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**AGENDA ITEM: 7.7**  
**DATE: September 3, 2015**

**ACTION REQUESTED:** NCLEX Update

**REQUESTED BY:** Michael Jackson, MSN, RN  
 Chairperson, Education/Licensing Committee

**BACKGROUND:** The Board of Registered Nursing receives quarterly reports from the National Council of State Boards of Nursing (NCSBN) about the NCLEX-RN test results by quarter and with an annual perspective. The following tables show this information for the last 12 months and by each quarter.

**NCLEX RESULTS – FIRST TIME CANDIDATES**  
**July 1, 2014-June 30, 2015\***

JURISDICTION	TOTAL TAKING TEST	PERCENT PASSED %
California*	10,960	84.22
United States and Territories	159,528	82.53

**CALIFORNIA NCLEX RESULTS – FIRST TIME CANDIDATES**  
**By Quarters and Year July 1, 2014-June 30, 2015\***

7/01/14- 9/30/14		10/01/14- 12/31/14		1/01/15- 3/31/15		4/01/15- 6/30/15		7/01/14- 6/30/15	
# cand.	% pass	# cand.	% pass	# cand.	% pass	# cand.	% pass	# cand.	% pass
3,946	83.27	1,673	78.54	2,909	87.01	2,432	86.31	10,960	84.22

*\*Includes (4), (1), (1) and (3) "re-entry" candidates. The 2013 NCLEX-RN Test Plan and higher Passing Standard of 0.00 logit remains effective through March 31, 2016. A logit is a unit of measurement to report relative differences between candidate ability estimates and exam item difficulties.*

*Please note: The proposed 2016 NCSBN NCLEX-RN Test Plan to be adopted by NCSBN Delegate Assembly in mid-August 2015 will be effective April 1, 2016. Refer to the attached strikethrough copy for the minor edits and additions to the proposed 2016 plan. The 2016 NCLEX-RN Passing Standard will be evaluated in December 2015 by the NCSBN Board of Directors and be effective April 1, 2016 along with the 2016 NCLEX-RN Test Plan. Copies of the 2016 Test Plan and Passing Standard, when released by NCSBN, can be obtained at [www.ncsbn.org](http://www.ncsbn.org).*

Nursing Education Consultants (NECs) monitor the NCLEX results of their assigned programs. If a program's first time pass rate is below 75% pass rate for an academic year (July 1-June 30), the NEC sends the program written notification of non-compliance (CCR 1431) and requests the program submit a written assessment and corrective action plan to improve results. The NEC will summarize the program's report for NCLEX improvement for the ELC/Board meetings per the Licensing Examination Passing Standard EDP-I-29 document approved 11/6/13. If a second consecutive year of substandard performance occurs, a continuing approval visit will be scheduled within six months, and the NEC's continuing approval visit findings reported to ELC with program representatives in attendance.

**NEXT STEP(s):** Continue to monitor results.

**PERSON TO CONTACT:** Katie Daugherty, MN, RN  
 (916) 574-7685

**California Board of Registered Nursing**

**NCLEX-RN Pass Rates First Time Candidates  
Comparison of National US Educated and CA Educated Pass Rates  
By Degree Type  
Academic Year July 1, 2014-June 30, 2015**

<b>Academic Year July 1-June 30<sup>^</sup></b>	<b>July-Sept #Tested % Pass</b>	<b>Oct-Dec #Tested % Pass</b>	<b>Jan-Mar #Tested % Pass</b>	<b>April-June #Tested %Pass</b>	<b><sup>^</sup>2014-2015 Cumulative Totals</b>
<b>National US Educated- All degree types *</b>	<b>53,989 (78.4)</b>	<b>14,340 (71.0)</b>	<b>39,686 (85.2)</b>	<b>51,513 (87.9)</b>	
<b>CA Educated- All degree types*</b>	<b>3,946 (83.2)</b>	<b>1,673 (78.5)</b>	<b>2,909 (87.1)</b>	<b>2,432 (86.3)</b>	
<b>National-Associate Degree rates**</b>	<b>28,510 (76.5)</b>	<b>8,199 (65.4)</b>	<b>21,674 (82.7)</b>	<b>27,809 (85.4)</b>	
<b>CA-Associate Degree rates**</b>	<b>2,201 (85.5)</b>	<b>759 (75.3)</b>	<b>1,528 (86.7)</b>	<b>1,188 (84.6)</b>	
<b>National-BSN+ELM rates**/**</b>	<b>23,966 (80.3)</b>	<b>5,848 (78.7)</b>	<b>17,518 (88.3)</b>	<b>23,285 (90.8)</b>	
<b>CA-BSN+ELM rates**/**</b>	<b>1,732 (80.4)</b>	<b>912 (81.1)</b>	<b>1,370 (87.2)</b>	<b>1,241 (87.9)</b>	

\*National rate for All Degree types includes four categories of results: Diploma, AD, BSN+ELM, and Special Codes. Use of the Special Codes category may vary from state to state. In CA, the Special Codes category is most commonly used for re-entry candidates such as eight year retake candidates wishing to reinstate an expired license per CCR 1419.3(b). The CA aggregate rate for the All degree types includes AD, BSN+ELM, and Special Codes but no diploma program rates since there are no diploma programs in CA. CA rates by specific degree type exclude special code counts since these are not reported by specific degree type.

\*\*National and CA rates reported by specific degree type include only the specific results for the AD or BSN+ELM categories.

\*\*\*ELM program rates are included in the BSN degree category by NCSBN.

<sup>^</sup>Note: Cumulative totals in this report may vary from quarterly totals due to quarterly NCSBN corrections. Typically, the NCSBN corrections have not significantly changed from previously reported quarterly pass rate info. Effective April 1, 2013 the NCLEX RN Test Plan changed and the PassingStandard became 0.00 logit through 3/31/16.

Source: National Council of State Boards Pass Rate Reports

## Proposed 2016 NCLEX-RN® Test Plan – Strikethrough Copy

1 | ~~2013-2016 NCLEX-RN® Test Plan~~

### 2 | **National Council Licensure Examination** 3 | **for Registered Nurses**

#### 4 | **(NCLEX-RN® EXAMINATION)**

##### 5 | **Introduction**

6 | Entry into the practice of nursing is regulated by the licensing authorities within each of the National  
7 | Council of State Boards of Nursing (NCSBN™) member board jurisdictions (state, commonwealth, and  
8 | territorial boards of nursing). To ensure public protection, each jurisdiction requires candidates for  
9 | licensure to meet set requirements that include passing an examination that measures the competencies  
10 | needed to perform safely and effectively as a newly licensed, entry-level registered nurse. NCSBN  
11 | develops a licensure examination, the National Council Licensure Examination for Registered Nurses  
12 | (NCLEX-RN®), which is used by member board jurisdictions to assist in making licensure decisions.

13 | Several steps occur in the development of the NCLEX-RN Test Plan. The first step is conducting a  
14 | practice analysis that is used to collect data on the current practice of the entry-level nurse (*Report of*  
15 | *Findings from the 2011-2014 RN Practice Analysis: Linking the NCLEX-RN® Examination to Practice*, NCSBN,  
16 | ~~2012~~2014). Twelve thousand newly licensed registered nurses are asked about the frequency and  
17 | importance of performing ~~141-139~~ nursing care activities. Nursing care activities are then analyzed in  
18 | relation to the frequency of performance, impact on maintaining client safety, and client care settings  
19 | where the activities are performed. This analysis guides the development of a framework for entry-level  
20 | nursing practice that incorporates specific client needs as well as processes fundamental to the practice of  
21 | nursing. The second step is the development of the NCLEX-RN Test Plan, which guides the selection of  
22 | content and behaviors to be tested.

23 | The NCLEX-RN Test Plan provides a concise summary of the content and scope of the licensing  
24 | examination. It serves as a guide for examination development as well as candidate preparation. The  
25 | NCLEX® examination assesses the knowledge, skills and abilities that are essential for the entry-level  
26 | nurse to use in order to meet the needs of clients requiring the promotion, maintenance or restoration of  
27 | health. The following sections describe beliefs about people and nursing that are integral to the  
28 | examination, cognitive abilities that will be tested in the examination and specific components of the  
29 | NCLEX-RN Test Plan.

##### 30 | **Beliefs**

31 | Beliefs about people and nursing underlie the NCLEX-RN Test Plan. People are finite beings with varying  
32 | capacities to function in society. They are unique individuals who have defined systems of daily living  
33 | reflecting their values, motives and lifestyles. People have the right to make decisions regarding their  
34 | health care needs and to participate in meeting those needs. The profession of nursing makes a unique  
35 | contribution in helping clients (individual, family or group, including significant others and  
36 | population~~individual, family, or group~~) achieve an optimal level of health in a variety of settings. For the  
37 | purposes of the NCLEX Examination, a client is defined as the individual, family, or group which  
38 | includes significant others and population.

39

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40 Nursing is both an art and a science, founded on a professional body of knowledge that integrates  
41 concepts from the liberal arts and the biological, physical, psychological and social sciences. It is a learned  
42 profession based on knowledge of the human condition across the life span and the relationships of an  
43 individual with others and within the environment. Nursing is a dynamic, continually evolving  
44 discipline that employs critical thinking to integrate increasingly complex knowledge, skills,  
45 technologies, and client care activities into evidence-based nursing practice. The goal of nursing for client  
46 care is preventing illness and potential complications; protecting, promoting, restoring, and facilitating  
47 comfort; health; and dignity in dying.

48 The registered nurse provides a unique, comprehensive assessment of the health status of the client,  
49 applying principles of ethics, client safety, health promotion and the nursing process, the nurse then  
50 develops and implements an explicit plan of care considering unique cultural and spiritual client  
51 preferences. The nurse assists clients to promote health, cope with health problems, adapt to and/or  
52 recover from the effects of disease or injury, and support the right to a dignified death. The registered  
53 nurse is accountable for abiding by all applicable member board jurisdiction statutes related to nursing  
54 practice.

### 55 **Classification of Cognitive Levels**

56 Bloom's taxonomy for the cognitive domain is used as a basis for writing and coding items for the  
57 examination (Bloom, et al., 1956; Anderson & Krathwohl, 2001). Since the practice of nursing requires  
58 application of knowledge, skills and abilities, the majority of items are written at the application or higher  
59 levels of cognitive ability, which requires more complex thought processing.

### 60 **Test Plan Structure**

61 The framework of Client Needs was selected for the examination because it provides a universal  
62 structure for defining nursing actions and competencies, and focuses on clients in all settings.

### 63 **Client Needs**

64 The content of the NCLEX-RN Test Plan is organized into four major Client Needs categories. Two of the  
65 four categories are divided into subcategories:

- 66 **Safe and Effective Care Environment**
- 67     ▪ Management of Care
- 68     ▪ Safety and Infection Control
- 69 **Health Promotion and Maintenance**
- 70 **Psychosocial Integrity**
- 71 **Physiological Integrity**
- 72     ▪ Basic Care and Comfort
- 73     ▪ Pharmacological and Parenteral Therapies
- 74     ▪ Reduction of Risk Potential
- 75     ▪ Physiological Adaptation

76

77

78 **Integrated Processes**

79 The following processes are fundamental to the practice of nursing and are integrated throughout the  
80 Client Needs categories and subcategories:

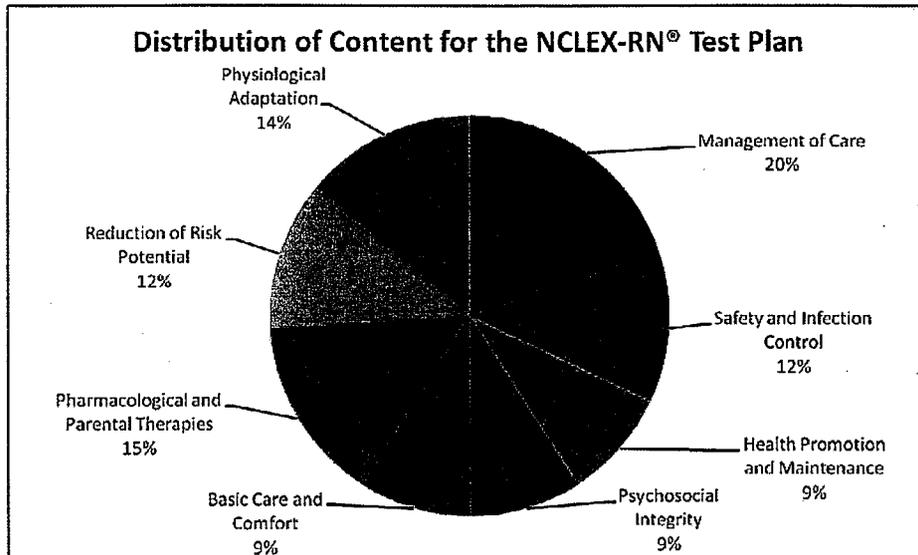
- 81       ▪ *Nursing Process* - a scientific, clinical reasoning approach to client care that includes  
82       assessment, analysis, planning, implementation and evaluation.
- 83       ▪ *Caring* - interaction of the nurse and client in an atmosphere of mutual respect and trust. In  
84       this collaborative environment, the nurse provides encouragement, hope, support and  
85       compassion to help achieve desired outcomes.
- 86       ▪ *Communication and Documentation* - verbal and nonverbal interactions between the nurse and  
87       the client, the client's significant others and the other members of the health care team.  
88       Events and activities associated with client care are recorded in written and/or electronic  
89       records that demonstrate adherence to the standards of practice and accountability in the  
90       provision of care.
- 91       ▪ *Teaching/Learning* - facilitation of the acquisition of knowledge, skills and attitudes promoting  
92       a change in behavior.
- 93       ▪ *Culture and Spirituality* - interaction of the nurse and the client (individual, family or group,  
94       including significant others and population) which recognizes and considers the client-  
95       reported, self-identified, unique and individual preferences to client care.

96 **Distribution of Content**

97 The percentage of test questions assigned to each Client Needs category and subcategory of the NCLEX-  
98 RN Test Plan is based on the results of the *Report of Findings from the 2011-2014 RN Practice Analysis:*  
99 *Linking the NCLEX-RN® Examination to Practice* NCSBN, 2012(2014), and expert judgment provided by  
100 members of the NCLEX Examination Committee.

Client Needs	Percentage of Items From Each Category/Subcategory
<b>Safe and Effective Care Environment</b>	
▪ Management of Care	17-23%
▪ Safety and Infection Control	9-15%
<b>Health Promotion And Maintenance</b>	6-12%
<b>Psychosocial Integrity</b>	6-12%
<b>Physiological Integrity</b>	
▪ Basic Care and Comfort	6-12%
▪ Pharmacological and Parenteral Therapies	12-18%
▪ Reduction of Risk Potential	9-15%
▪ Physiological Adaptation	11-17%

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108

109

NCLEX-RN examinations are administrated adaptively in variable length format to target candidate-specific ability. To accommodate possible variations in test length, content area distributions of the individual examinations may differ up to  $\pm 3\%$  in each category.

112

113

### Overview of Content

114

All content categories and subcategories reflect client needs across the life span in a variety of settings.

115

#### Safe and Effective Care Environment

116

The nurse promotes achievement of client outcomes by providing and directing nursing care that enhances the care delivery setting in order to protect clients and health care personnel.

117

118

119

- *Management of Care* – providing and directing nursing care that enhances the care delivery setting to protect clients and health care personnel.

120

Related content includes but is not limited to:

- |  |   |
|--|---|
| ▪ <u>Advance Directives/Self-Determination/Life Planning</u> | ▪ <u>Organ Donation</u>                         |
| ▪ Advocacy   | ▪ Assignment, Delegation and Supervision        |
| ▪ Case Management  | ▪ Establishing Priorities                       |
| ▪ Client Rights  | ▪ Ethical Practice                              |
| ▪ Collaboration with Interdisciplinary Team                  | ▪ Informed Consent                              |
| ▪ Concepts of Management                                     | ▪ Information Technology                        |
| ▪ Confidentiality/ Information Security                      | ▪ Legal Rights and Responsibilities             |
| ▪ Continuity of Care   | ▪ Performance Improvement (Quality Improvement) |
|  | ▪ Referrals                                     |

- 121  
122  
123  
124
- *Safety and Infection Control* - protecting clients and health care personnel from health and environmental hazards.
- 125
- Related content includes but is **not limited to**:
- Accident/Error/Injury Prevention
  - Emergency Response Plan
  - Ergonomic Principles
  - Handling Hazardous and Infectious Materials
  - Home Safety
  - Reporting of Incident/Event/Irregular Occurrence/Variance
  - Safe Use of Equipment
  - Security Plan
  - Standard Precautions/Transmission-Based Precautions/Surgical Asepsis
  - Use of Restraints/Safety Devices
- 126 **Health Promotion and Maintenance**
- 127 The nurse provides and directs nursing care of the client that incorporates the knowledge of expected  
128 growth and development principles; prevention and/or early detection of health problems, and strategies  
129 to achieve optimal health.
- 130
- Related content includes but is **not limited to**:
- Aging Process
  - Ante/Intra/Postpartum and Newborn Care
  - Developmental Stages and Transitions
  - Health Promotion/Disease Prevention
  - Health Screening
  - High Risk Behaviors
  - Lifestyle Choices
  - Self-Care
  - Techniques of Physical Assessment
- 131 **Psychosocial Integrity**
- 132 The nurse provides and directs nursing care that promotes and supports the emotional, mental and social  
133 well-being of the client experiencing stressful events, as well as clients with acute or chronic mental  
134 illness.
- 135
- Related content includes but is **not limited to**:
- Abuse/Neglect
  - Behavioral Interventions
  - Chemical and Other Dependencies/Substance Use Disorder
  - Coping Mechanisms
  - Crisis Intervention
  - Cultural Awareness/Cultural Influences on Health
  - End of Life Care
  - Family Dynamics
  - Grief and Loss
  - Mental Health Concepts
  - Religious and Spiritual Influences on Health
  - Sensory/Perceptual Alterations
  - Stress Management
  - Support Systems
  - Therapeutic Communication
  - Therapeutic Environment

136

137 **Physiological Integrity**

138 The nurse promotes physical health and wellness by providing care and comfort, reducing client risk  
139 potential and managing health alterations.

140

- 141 ■ *Basic Care and Comfort* - providing comfort and assistance in the performance of activities of daily  
142 living.

143 Related content includes but is **not limited to**:

- Assistive Devices
- Elimination
- Mobility/Immobility
- Non-Pharmacological Comfort Interventions
- Nutrition and Oral Hydration
- Personal Hygiene
- Rest and Sleep

- 144 ■ *Pharmacological and Parenteral Therapies* - providing care related to the administration of  
145 medications and parenteral therapies.

146 Related content includes but is **not limited to**:

- Adverse Effects/Contraindications/  
Side Effects/Interactions
- Blood and Blood Products
- Central Venous Access Devices
- Dosage Calculation
- Expected Actions/Outcomes
- Medication Administration
- Parenteral/Intravenous Therapies
- Pharmacological Pain Management
- Total Parenteral Nutrition

147

- 148 ■ *Reduction of Risk Potential* - reducing the likelihood that clients will develop complications or  
149 health problems related to existing conditions, treatments or procedures.

150 Related content includes but is **not limited to**:

- Changes/Abnormalities in Vital Signs
- Diagnostic Tests
- Laboratory Values
- Potential for Alterations in Body Systems
- Potential for Complications of Diagnostic Tests/Treatments/Procedures
- Potential for Complications from Surgical Procedures and Health Alterations
- System Specific Assessments
- Therapeutic Procedures

151

- 152 ■ *Physiological Adaptation* - managing and providing care for clients with acute, chronic or life  
153 threatening physical health conditions.

154 Related content includes but is **not limited to**:

- Alterations in Body Systems
- Fluid and Electrolyte Imbalances
- Hemodynamics
- Illness Management
- Medical Emergencies
- Pathophysiology
- Unexpected Response to Therapies

155 **Administration of the NCLEX-RN® Examination**

156 The NCLEX-RN Examination is administered to candidates by computerized adaptive testing (CAT).  
 157 CAT is a method of delivering examinations that uses computer technology and measurement theory.  
 158 With CAT, each candidate's examination is unique because it is assembled interactively as the  
 159 examination proceeds. Computer technology selects items to administer that match the candidate's  
 160 ability. The items, which are stored in a large item pool, have been classified by test plan category and  
 161 level of difficulty. After the candidate answers an item, the computer calculates an ability estimate based  
 162 on all of the previous answers the candidate selected. The next item administered is chosen to measure  
 163 the candidate's ability in the appropriate test plan category. This process is repeated for each item,  
 164 creating an examination tailored to the candidate's knowledge and skills while fulfilling all NCLEX-RN  
 165 Test Plan requirements. The examination continues with items selected and administered in this way  
 166 until a pass or fail decision is made.

167  
 168 All registered nurse candidates must answer a minimum of 75 items. The maximum number of items  
 169 that a registered nurse candidate may answer is 265 during the allotted six-hour time period. The  
 170 maximum six-hour time limit to complete the examination includes the tutorial, sample questions and all  
 171 breaks. Candidates may be administered multiple choice items as well as items written in alternate  
 172 formats. These formats may include but are not limited to multiple response, fill-in-the-blank calculation,  
 173 ordered response, and/or hot spots. All item types may include multimedia such as charts, tables,  
 174 graphics, sound and video. All items go through an extensive review process before being used as items  
 175 on the examination.

176  
 177 More information about the NCLEX examination, including CAT methodology, items, the candidate  
 178 bulletin and Web tutorials can be found on the the NCSBN website: <http://www.ncsbn.org>.  
 179

180 **Examination Security and Confidentiality**

181 Any candidate that violates test center regulations or rules, or engages in irregular behavior, misconduct  
 182 and/or does not follow a test center administrator's warning to discontinue inappropriate behavior may  
 183 be dismissed from the test center. Additionally, exam results may be withheld or cancelled and the  
 184 licensing board may take other disciplinary action such as denial of a license and/or disqualifying the  
 185 candidate from future registrations for licensure. Refer to the current candidate bulletin for more  
 186 information.

187  
 188 Candidates should be aware and understand that the disclosure of any examination materials including  
 189 the nature or content of examination items, before, during or after the examination is a violation of law.  
 190 Violations of confidentiality and/or candidates' rules can result in criminal prosecution or civil liability  
 191 and/or disciplinary actions by the licensing agency including the denial of licensure. Disclosure of  
 192 examination materials includes but is not limited to discussing examination items with faculty, friends,  
 193 family, or others.

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196 **Bibliography**

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**Attachment C**

**Timeline for Implementation of the 2016 NCLEX-RN®  
Test Plan**

October 2014	NCLEX Examination Committee reviews 2014 RN Practice Analysis results and makes recommendations for the proposed 2016 NCLEX-RN® Test Plan.
January 2015	Proposed 2016 NCLEX-RN® Test Plan is sent to member boards for feedback.
April 2015	NEC reviews test plan feedback and submits recommendations to the Delegate Assembly.
July 2015	NCSBN Board of Directors (BOD) review proposed test plan.
August 2015	Delegate Assembly action is provided.
September 2015	The approved 2016 NCLEX-RN® Test Plan is published and placed on the NCSBN website.
September 2015	Panel of Judges meet to recommend the 2016 NCLEX-RN® Passing Standard.
December 2015	NCSBN BOD evaluates the 2016 NCLEX-RN® Passing Standard.
April 1, 2016	Approved 2016 NCLEX-RN® Test Plan and the 2016 NCLEX-RN® Passing Standard go into effect.

**BOARD OF REGISTERED NURSING**  
**Education/Licensing Committee**  
**Agenda Item Summary**

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**AGENDA ITEM: 7.8**  
**DATE: September 3, 2015**

**ACTION REQUESTED:** 2013-15 ELC Goals and Objectives Achievement Report

**REQUESTED BY:** Michael Jackson, MSN, RN  
Chairperson, Education/Licensing Committee

**BACKGROUND:** The Education/Licensing Committee annually reviews and reports the achievements relative to the ELC goals and objectives. At the end of the two-year period a comprehensive report of achievements is submitted. The attached report presents the achievements for the period of July 1, 2013 – June 30, 2015 relative to the ELC Goals and Objectives 2013-2015 which were Board approved on 02/06/2013.

Nursing program education activities reported for the period include:

- Scheduled continuing approval visits are conducted for prelicensure and advanced practice nursing programs every five years. Nursing Education Consultant (NEC) continuing approval visit reports were reviewed by Education/Licensing Committee (ELC) for 40 ADN programs, 16 BSN programs, 3 ELM programs and 5 NP programs with approval status recommendations made to the Board.
- Eight letters of intent (LOI) for new prelicensure programs were received. Six feasibility studies were reviewed and accepted by ELC. Three new ADN and one new ELM prelicensure nursing programs were granted initial program approval.
- ELC reviewed and made recommendations regarding twenty-five major curriculum revision proposals.
- Teach out plan and final progress report were reviewed for ITT Tech, Rancho Cordova Associate Degree Nursing Program that closed June 2015.
- Everest College closed April 27, 2015 without notice resulting also in closure of the Associate Degree Nursing Program. Program approval was withdrawn and arrangements were facilitated for the requesting San Joaquin Valley College Associate Degree Nursing Program to assume instruction of the displaced nursing students.

These achievements in addition to others related to goals of the committee are presented in the report attached to this agenda item summary.

**PERSON TO CONTACT:** Leslie A. Moody, RN, MSN, MAEd  
Nursing Education Consultant

**BOARD OF REGISTERED NURSING  
EDUCATION/LICENSING COMMITTEE  
2013-2015 GOALS AND OBJECTIVES**

**GOAL ACHIEVEMENT REPORT July 1, 2013 – June 30, 2015**

This report is comprehensive for the period including information of the 2013-2014 annual report.

**GOAL 1**

**Ensure that programs of nursing education meet regulatory requirements and that the curriculum integrates content to address recent political, technical, economic, healthcare and nursing practice developments.**

- 1.1 Review prelicensure and advanced practice program content, including public health nurse content, to determine compliance with regulatory requirements and Board policy, and if they reflect current trends in healthcare and nursing practice.
- 1.2 Maintain BRN policy statements that reflect current statute, regulation and policy.
- 1.3 Ensure that nursing education programs include the Scope of Practice of Registered Nurses in California (BPC 2725) and the Standards for Competent Performance (CCR 1443.5) in their curriculum, and that advanced practice education program curriculum additionally includes Article 7 Standardized Procedure Guidelines.
- 1.4 Maintain awareness of current political, technical, economic, healthcare and nursing practice trends through attending and participating in educational conferences, committees and other events within California and nationally, for development of regulation and policy.
- 1.5 Monitor legislation affecting nursing education and convene advisory committees when appropriate.
- 1.6 Monitor nursing program curriculum structure and content for application of recommendations from the 2010 Institute of Medicine's - Future of Nursing, Carnegie Study on the Transformation of Nursing Education, the Quality and Safety Education for Nurses (QSEN) Competencies, The Essentials of Baccalaureate Education in Nursing, The Essentials of Master's Education in Nursing and other such works from established sources that present generally accepted standards.
- 1.7 Evaluate proposed new programs to ensure regulatory compliance and ability to secure necessary resources with timely program implementation adhering to the application process and timeline identified in regulations and policy.

**ACHIEVEMENTS:**

- Prelicensure and advanced practice nursing education program curriculum was regularly evaluated as part of scheduled continuing approval visits and as needed relative to curriculum revision proposal, special focus issue or a request for consultation, for application of contemporary standards including IOM recommendations, QSEN Competencies, Essentials of Baccalaureate Education and Master's Education, and inclusion of BPC 2725 and CCR 1443.5 content.
- Scheduled continuing approval visits are conducted for prelicensure and advanced practice nursing programs every five years. Nursing Education Consultant (NEC) continuing approval visit reports were reviewed by Education/Licensing Committee (ELC) for 40 ADN programs, 16 BSN programs, 3 ELM programs and 5 NP programs with approval status recommendations made to the Board.

- Eight letters of intent (LOI) for new prelicensure programs were received. Six feasibility studies were reviewed and accepted by ELC. Three new ADN and one new ELM prelicensure nursing programs were granted initial program approval.
- ELC reviewed and made recommendations regarding twenty-five major curriculum revision proposals.
- Teach out plan and final progress report were reviewed for ITT Tech, Rancho Cordova Associate Degree Nursing Program that closed June 2015.
- Everest College closed April 27, 2015 without notice resulting also in closure of the Associate Degree Nursing Program. Program approval was withdrawn and arrangements were facilitated for the requesting San Joaquin Valley College Associate Degree Nursing Program to assume instruction of the displaced nursing students.
- BRN policy guidelines were created or updated as follows:
  - o “Guidelines for Alternative/Secondary Program Location”, “Incomplete New Prelicensure Program Applications”, and “Licensing Examination Pass Rate Standard” were revised to ensure clarity and compliance with current regulations.
  - o New Guideline: CA RN Licensure Qualifications For Persons Serving In Medical Corps Of Armed Services was created and posted by link on the BRN website homepage to provide easy access to information about education and licensure requirements relevant to military service credit.
  - o New “Guideline: CA RN Licensure Qualifications For Graduates Of Foreign Nursing Program” was created assist foreign graduate licensure applicants in understanding the process by providing a consolidated information document.
  - o Other BRN policy statements and practice advisories were addressed as part of the Board’s Nursing Practice Committee agendas.All new and revised guidelines were distributed to nursing program deans and directors, and posted on the BRN website.
- BRN NEC staff regularly participated in regional and statewide nursing program deans/directors meetings and conferences, NCSBN education and practice workgroup telemeetings, CINHC meetings, Health Professions Education Foundation meetings, CA Interagency Council on Veterans telemeetings, Institute of Medicine on-line workshops, and other events as appropriate or requested to maintain awareness and provide input.
- Prelicensure nursing program deans and directors are sent a monthly e-mail reminder of BRN Board discipline hearings to encourage student attendance.
- Legislation affecting nursing education was addressed as part of the BRN Legislative Committee agendas.

## **GOAL 2**

### **Provide leadership in the development of new approaches to nursing education.**

- 2.1 Support creative approaches to curriculum and instructional delivery, and strategic partnerships between nursing education programs, healthcare industry and the community, such as transition to practice and post-licensure residency programs, to prepare registered nurses to meet current nursing and community needs.
- 2.2 Review Nursing Practice Act regulations for congruence with current nursing education, practice standards and trends, and recommend or promulgate proposals for revisions to regulation that will ensure the high quality of nursing education.

- 2.3 Sponsor and/or co-sponsor educational opportunities for professional development of nursing educators and directors in service and academia.
- 2.4 Evaluate the use of technology in teaching activities, such as on-line research, distance learning, Web-based instruction and high-fidelity simulation laboratory experiences.
- 2.5 Encourage and support programs' development of articulation agreements and other practices that facilitate seamless transition between programs for transfer and admission into higher degree programs.
- 2.6 Encourage and support graduate nursing education programs to prepare nurse educators and other nursing specialists to support implementation of the Health Care Reform Act of 2009.
- 2.7 Collaborate with the BRN Nursing Practice Committee to review, evaluate and recommend revision as needed of regulations pertinent to advanced practice nursing education.
- 2.8 Contribute to the NCSBN's Transition to Practice Study, ensuring a voice for California stakeholders.

**ACHIEVEMENTS:**

- Education Issues Workgroup meetings were held. BRN participants included: Board Member, Executive Officer, Supervising Nursing Education Consultant, and Research Program Specialist, and external partner stakeholder participants included CINHC leadership, California Community Colleges Chancellor's Office representative, and representatives from multiple colleges and universities. Agenda items included: ADN/RN to BSN education pathways, use of clinical simulation in nursing education, and review/revision recommendations for the 2012-2013 BRN Annual Survey instrument.
- The BRN website and Winter 2013 BRN Report presented information regarding registered nursing scholarship and loan repayment programs available through The Health Professions Education Foundation, and included an article (Implementing the Future of Nursing Recommendations in California) which examined the work of the California Action Coalition in response to the IOM's report on The Future of Nursing.
- Regulations regarding nursing program compliance with addition of campus locations, new program applications, and licensing examination pass rate were reviewed and BRN policies were revised to ensure clarity and consistency with regulatory requirements.
- Programs visited for continuing approval and proposed new programs were evaluated for the use of technology including simulation lab. The BRN Annual Survey includes questions which capture data regarding prelicensure programs' use of simulation.
- Numerous minor and major curriculum revision proposals were submitted by programs with the goal of revising/reorganizing the curriculum to facilitate program graduates' seamless transition into BSN or higher degree programs. These proposals were reviewed by NECs and then brought forward for review by ELC for ratification (minor revisions) or recommendation to the Board regarding approval (major revision).
- NECs attended CCMNE regional meetings where national perspective on academic progression, progress of the California Collaborative Model of Nursing Education (ADN-BSN seamless progression, articulation) and the CSULA Academic Progression In Nursing regional project were discussed.
- A BRN staff workgroup was formed in October 2013 as a joint project of ELC and Practice Committee to review the regulations pertaining to advance practice nurse education. Much time has been spent gathering and reviewing relevant materials and input from external stakeholders to develop a preliminary basis, framework and language

for regulatory revision. The workgroup has met regularly and presented reports on their work at meetings of the BRN Board Practice Committee where stakeholders have had an opportunity to give input. Work is in progress to finalize drafting of proposed regulatory revision language.

- Relevant Nursing Practice Act regulations were reviewed to update and/or create new BRN policy statements (see Goal 1 Achievements).
- Structure and meetings of the Nursing Workforce Advisory Committee and the Education Issues Workgroup was reviewed and revised to ensure effective participation and functioning of those groups.
- NECs attended via webcast conference the NCSBN Virtual Conference on the Regulatory Perspectives in Prelicensure Distance Education Programs to be informed regarding issues, concerns and trends related to online prelicensure nursing education.

### **GOAL 3**

**Ensure that reports and data sources related to nursing education in California are made available to nurse educators, the public, and others, and are utilized in nursing program design.**

- 3.1 Collaborate with the contracted provider retained to conduct the consolidated online annual school survey of the prelicensure nursing education programs in California, and publish survey results on the BRN Website.
- 3.2 Maintain and analyze systematic data sources related to prelicensure and advanced nursing education, including the use of simulation, reporting findings annually.
- 3.3 Provide information about nursing programs to the public.
- 3.4 Maintain information related to each prelicensure program and update periodically.
- 3.5 Provide data to assist nursing programs in making grant or funding applications.
- 3.6 Encourage prelicensure programs to utilize NCSBN data and analysis of entry level RN practice to evaluate the effectiveness of their nursing education programs in preparing graduates for practice.

#### **ACHIEVEMENTS:**

- Staff worked with the contracted vendor to prepare surveys and reports which were then presented at meetings of ELC and the Board, published on the BRN website, provided to the California Community Colleges Chancellor's Office, and provided to schools and other stakeholders as requested. Surveys conducted in collaboration with UCSF and other organizations included: 2012-13 and 2013-14 Annual School Survey of prelicensure nursing programs producing the 2012-2013 and 2013-14 Regional Annual School Reports published on the BRN website and individual reports available to each school; The Diversity of California's Registered Nursing Workforce - Update; 2012-2013 Post Licensure Program survey; Forecast of the Registered Nurse Workforce in California; Survey of Registered Nurses in California; and Survey of Nurses' Educational Experiences, 2013 to assess RNs experiences pursuing education after licensure.
- A meeting was held with the contracted survey vendor, Julie Campbell-Warnock and BRN NECs to review and make recommendations for the Annual School Survey tool. These recommendations were taken forward to the Education Issues Workgroup for development of the BRN Annual Survey 2015.

- The Prelicensure Interactive Database which allows the public to select and review data by variables such as region, degree type and program type has been updated on the website to include data for years 2012-2013 and 2013-2014.
- Evaluation of the use of instructional technology including simulation was conducted prior to approval of new programs and during scheduled continuing approval visits. Data regarding prelicensure nursing programs' use of simulation was captured as part of the Annual School Survey.
- Nursing program information has been maintained on the BRN website and includes lists of approved prelicensure and advanced practice nursing programs by type of program with hyperlink to school website, address and phone contact information. The information was updated annually and as changes were reported by programs. New procedure has been implemented to place notification on the BRN website of any nursing program placed on Warning Status, and evaluation is being conducted to determine the best methods for posting additional prelicensure nursing information including attrition, retention, accreditation, .
- NECs and other BRN staff have responded to phone (via BRN call center and direct calls) and e-mail (via DCA webmaster and direct) inquiries from nurses, general public, legislators and other stakeholders regarding nursing education.
- The Winter 2013 BRN Report (distributed via e-mail per mailing list and posted to the BRN website, with print copies made available at November 2013 BRN Board meeting) included information regarding number of approved programs, the role of NECs related to oversight of approved programs, BRN website information available regarding California nursing programs, and encouragement to report fraudulent nursing programs with instructions on how/where to report.
- The BRN website was updated to improve visitors' access to information regarding prelicensure and advanced practice programs.
- BRN staff created a survey (Title 16, Code of Regulations (CCR) Sec. 1430 Previous Education Credit Survey of Prelicensure RN Education and Military Veterans) which was distributed to existing prelicensure nursing programs to gather information on educational options available to military veterans with prior education and/or experience in health care occupations and determine what methods are used by nursing schools to assess and evaluate veteran's prior education in offering academic credits. Data obtained was collated, analyzed, and reported to the Education Issues Workgroup resulting in questions being added to the BRN Annual Survey 2015 to collect additional data.
- NECs encouraged prelicensure programs to utilize the NCSBN NCLEX-RN Test Plan and other related resources when evaluating a program's curriculum/instruction as part of continuing approval visits, problem focused visits, and when consultation was requested by a program.

#### **GOAL 4**

##### **Facilitate and maintain an environment of collegial relationships with deans and directors of prelicensure and advanced practice nursing education programs.**

- 4.1 Conduct an annual orientation for new directors and an annual update for both new and continuing directors of prelicensure programs.
- 4.2 Maintain open communication and provide consultation and support services to prelicensure and advanced practice nursing programs in California.

- 4.3 Present BRN updates at COADN Directors' Meetings, annual CACN/ADN Meeting, and other venues as appropriate.
- 4.4 Conduct biennial meetings with advanced practice program directors to seek input, provide updates and foster discussions regarding current issues, regulatory reform and other topics pertinent to advanced practice in California, such as the implications of the Health Care Reform Act of 2009.

**ACHIEVEMENTS:**

- The Annual BRN Update for nursing education program deans and directors was presented in Fall 2013 and 2014 to provide orientation for new directors, and provide instruction for both new and continuing directors regarding prelicensure program administration, continuing approval visit preparation of self-study, instruction regarding licensure application, and interactive question/answer opportunity. Updated Directors Handbook on CD was distributed to all prelicensure program directors prior to each Annual BRN Update. The ELC Chairperson attended the meetings.
- Each BRN approved prelicensure and advanced practice nursing program had an assigned NEC who provided guidance to the program through written correspondence, phone contact, and visits to the nursing program sites.
- Northern NECs presented a Spring 2013 inservice for program directors titled "Tips for Successful Continuing Approval Self Study Reports and Visit Arrangements."
- The Winter 2013 BRN Report presented an article that described the role of BRN NEC and profiled each of the current NECs.
- NECs attended meetings of CACN, COADN, CINHC, ICV, NCSBN and other groups to provide BRN activity updates and clarification of BRN regulations, policy and procedure.

**GOAL 5**

**Provide ongoing monitoring of the Continuing Education (CE) Program, and verify compliance with BRN requirements by licensees and providers.**

- 5.1 Review and consider for approval CE provider applications to ensure regulatory compliance.
- 5.2 Conduct systematic random audits of registered nurses to monitor compliance with renewal requirements and appropriateness of CE courses completed.
- 5.3 Conduct systematic random reviews of CE providers to monitor compliance with CE regulations.

**ACHIEVEMENTS:**

- The BRN received 470 Continuing Education Provider (CEP) applications and issued 356 CEP certificates. Through April 2015 approximately 78% of applications were reviewed by the NEC liaison to the Continuing Education Program to ensure that content is post-licensure and appropriate for nursing continuing education, or for review of instructor qualifications. Beginning May 2015 100% of CEP applications were reviewed by the NEC. Cease and Desist letters were sent to one RN providing CEUs without an RN license and one CEP provider whose number expired but continued to offer CEUs.
- The online tracking system application implemented in October 2013 does not capture information related to the number of renewals processed during this period, nor has it been able to provide the number of BRN-approved CEPs. The BRN is working with the Department to develop a better report that will capture this data.

- Random auditing activity of registered nurses and CEPs related to their compliance with the continuing education regulations has been conducted on a minimal and infrequent basis due to ongoing Renewals Unit staff shortages. The BRN submitted a budget request for additional staff to fulfill its mandate to conduct these audits. In 2015 a limited term staff was assigned and has conducted random audits of RN continuing education.
- Staff responded to phone and written inquiries from the public regarding continuing education and worked with Providers to reinforce the BRN's expectations related to appropriate course content, use of the CEP number in advertising or marketing materials, and other issues.
- NECs and staff responded to phone and e-mail inquiries from RNs and others requesting information about continuing education requirements for licensure renewal.

### **GOAL 6**

#### **Continue the assessment and review of the NCLEX-RN examination process, and maintain a collaborative relationship with the National Council of State Boards of Nursing.**

- 6.1 Participate in periodic review of the NCLEX-RN examination process to ensure established security, test administration procedures and other testing standards are met.
- 6.2 Encourage nurse educators and working RNs to participate in NCLEX-RN examination panels to ensure consistent representation from California.
- 6.3 Participate in NCSBN committees and conferences to maintain representation from California.
- 6.4 Monitor and report California and national NCLEX-RN first time pass rates of California candidates, including results for internationally educated candidates.
- 6.5 Provide input into the NCSBN Practice Analysis, Test Plan revision and passing standard as requested or appropriate.

#### **ACHIEVEMENTS:**

- The Winter 2013 BRN Report included an article encouraging California RNs to serve as item writers, item reviewers, or members of the Standard Setting Panel of Judges for the NCLEX item and examination development process.
- The BRN Executive Officer attended the National Council of State Boards of Nursing (NCSBN) annual meetings. Nursing Education Consultants regularly participated in NCSBN education committee and practice committee tele-meetings which were held several times during the year.
- Quarterly and annual NCLEX-RN exam results were reported as part of the ELC report segment of Board meeting agendas.
- NECs monitored NCLEX-RN exam outcomes for their assigned nursing programs and took action as required by regulation for any program performing below threshold.
- BRN licensing unit staff and NECs have participated in NCSBN/Pearson VUE information conference calls and webinars throughout the year on topics including NCLEX- RN examination processes, security and administration, revisions of exam test plan and passing standard, exam candidate security.
- NCLEX related NCSBN and CA BRN electronic interfaces and reporting processes in the new BrEZe system were made fully operational and CA BRN NCLEX Test Accommodation processes have been refined to interface with the new BreEze system.

- NEC NCLEX liaison and licensing unit staff have evaluated and monitored NCLEX Exam policy/procedure, and interacted with NCSBN Examination staff including the Chief Officer of Exams to facilitate effective exam reporting processes and procedures, validate national pass rate trends, and provide input related to NCSBN NCLEX subscription reports and reports revision.
- NECs and BRN administrative staff have been notified of updates to the NCSBN NCLEX administrative manual, exam information and website.
- The NEC NCLEX liaison worked with BRN licensing unit and other BRN staff, and NCSBN staff to ensure timely distribution of quarterly program reports and completion of related follow up, and accuracy of NCSBN and CA NCLEX databases and published statistics.
- NECs provided NCSBN written feedback related to proposed changes in the 2016 NCLEX-RN Test Plan to be adopted by NCSBN Delegate Assembly in August 2015 and implemented effective April 1, 2016.