## I. Team Members

<table>
<thead>
<tr>
<th>Name</th>
<th>Member Type</th>
<th>Email</th>
<th>Contact</th>
<th>Responsible for what part</th>
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<tbody>
<tr>
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<td><a href="mailto:roz.hartman@marin.edu">roz.hartman@marin.edu</a></td>
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<td>Budget and overall review, Dept. Chair and Manager</td>
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<tr>
<td>Sara Lefkowitz</td>
<td>Primary Team Member</td>
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## II. Program Review Committee

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<tr>
<th>Name</th>
<th>Committee (Chairs)</th>
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<tbody>
<tr>
<td>Chris Schultz</td>
<td>Curriculum Committee Chair</td>
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<tr>
<td>Blaze Woodlief</td>
<td>Educational Planning Committee</td>
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<tr>
<td>V-Anne Chernock and Erik Dunmire</td>
<td>Facilities Committee Co-Chairs</td>
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<tr>
<td>Yolanda Bellisimo</td>
<td>Planning and Resource Allocation Committee Co-Chair/Academic Senate President</td>
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<tr>
<td>Nick Chang</td>
<td>Planning and Resource Allocation Committee Co-Chair/Instructional Equipment Committee Chair</td>
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<tr>
<td>Sara McKinnon and Becky Brown</td>
<td>Program Review Committee Chair and SLO Coordinators</td>
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<tr>
<td>Chris Schulz</td>
<td>Student Access and Success Committee Chair</td>
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<tr>
<td>Michael Irvine</td>
<td>Tech Committee Chair</td>
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## III. Vice President of Academic Affairs

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<tr>
<th>Name</th>
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<tr>
<td>Nick Chang</td>
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## IV. Board of Trustees President

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<tr>
<th>Name</th>
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<tr>
<td>Eva Long</td>
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Instructions: Use this form to quickly outline your program at College of Marin. Briefly answer each of the questions and use bullet points whenever possible. Provide any attachments that substantiate or expand on the questions below.

I. Program Definition
Outline the unique qualities that define the importance of your program.

The Registered Nursing Education Program is a two year Associate Degree Program which prepares students to pass the Registered Nursing Licensing examination and to obtain a job as a Registered Nurse. For the school year 2009 - 2010, program enrollment is 91 full time students. The Program is unable to accept all qualified applicants. For the class of 2011, from the 134 applications, 44 were not qualified, 9 went elsewhere, 46 were accepted and 35 we were unable to accept. There are seven full time faculty, one temporary faculty a with full time assignment for fall 2009 and two part time faculty. A Program Director and Administrative Assistant are shared between Registered Nursing, Early Childhood Education, Medical Assisting, Dental Assisting and the Emergency Medical Technician Program. Additional staff members include one part time Skills Laboratory Technician, one grant funded part time Simulation Coordinator and one part time grant funded Administrative Assistant. Training facilities include a Nursing Skills Laboratory which is designed to simulate a hospital environment. It has five hospital beds, five patient mannequins and medical and nursing equipment found in local hospitals. We also have a grant funded Human Patient Simulation Laboratory with two high fidelity mannequins. These mannequins mimic human physiology and are used to run patient care scenarios. Simulation is a teaching modality new to the nursing profession, but used extensively by other industries to train students to perform competently in real life high stress/ high stake situations. Students are trained at over eight acute care facilities and approximately twenty community agencies. The RN Program support other disciplines at the college as statistics indicate that the majority of pre requisite courses and courses required for graduation are taken at the College of Marin.

II. Program Purpose
Pathway:
Career Tech. Ed.
Briefly describe how your program fits into the pathways you have chosen.
The RN Program is both a career degree program and a transfer program! Program graduates complete all of the coursework required by the California Board of Registered Nursing to qualify them to take the Registered Nursing Licensure Exam. Program graduates satisfy the COM requirements to earn an Associate Degree in Science. Our graduates are prepared to join the workforce as an entry level Registered Nurse and many are employed in local hospitals and other healthcare facilities. Program graduates are qualified to transfer to a four year institution to obtain a Baccalaureate Degree in Nursing. Students are encouraged to pursue advanced education in nursing as there is a shortage of advanced practice nurses. Currently the program has collaborative grants with Sonoma State University which is promoting ADN to MSN completion. This is the second year of this grant. Students in this program are concurrently enrolled in the RN Program and the Sonoma State Extended Ed program.

III. Students Served
Briefly outline what students are served in your program.
The program serves pre-nursing students, generic, returning, advanced placement, transfer, LVN to RN students, as well as graduates of the program. The demographics of the 46 students in the entering class of 2011:

Gender: 87% female:

Ages:
A. < 25 years of age (11)  F. 46 - 50 years of age (3)  
B. 26 - 30 years of age (10)  G. 51 -55 years of age (1)  
C. 31 - 35 years of age (7)  H. 56 -59 years of age (2)  
D. 36 - 40 years of age (6)  I. 60 and above years of age  
E. 41 - 45 years of age (5)  

Ethnicity:  
A. White, Non Hispanic (37)  
B. Asian, Pacific Islander (2)  
C. Hispanic (2)  
D. African-American/Black, Non Hispanic (2)  
E. American Indian, Alaskan, Native, Indian  
F. Filipino (3) (+Caucasian)  

37% with dependents, 76% working, 72% with Associate Degrees, bachelor's or higher degrees.  
85% have taken the prerequisite courses at the College of Marin.  

Comparing our demographics to those in the BRN annual 2007-2008 survey we find that the 2007-2008 BRN annual report found that ADN programs admitted 48% Caucasians while we admitted 80% in 2009 and 78% in 2008. So COM RN enrollment for nonwhites is below the average of other ADN programs.  

Males was reported at 19.4% while ours was 13.6% in 2009 and 15% in 2008. Again we were below other ADN programs statewide.  

The RN demographics statewide of the RN workforce are 58.6% Caucasian and 14.4% male.  

IV. Program History  
Briefly outline the recent history of your program.  

The Program was reviewed by the Board of Registered Nursing in November 2009 as part of the regular approval process. The last five years of the program have seen an expansion of the program to meet the national nursing shortage. The base enrollment of the program is 36 students admitted each fall. As a result of The Chancellor's Office Enrollment Growth and Expansion funds, the program admits 46 students each fall. This is a growth of 27%. This has resulted in additional demands on faculty, administration and support services for these additional students. To address attrition in the state, nursing programs have revised selection processes. The COM program in collaboration with the research office studied past classes to validate use of the Chancellor's formula effective Fall 2007. Fall 2008 the program began implementation of an assessment test (TEAS) for admission into the program. These enrollment procedures require the use of additional college resources - counseling, admission, and research. An additional technician was hired to assist the administrative assistant to handle the additional students. The faculty composition has changed with the retirement of 3 full time faculty of 30 years. There are 5 tenured faculty and 2 faculty on the tenure track. The program has embarked on incorporating simulation as a teaching modality. A simulation lab was established in Harlan Center Fall of 2007. Faculty received education in this new teaching modality and are now incorporating simulation as part
of clinical teaching. Capacity funds provided the for the hiring of a clinical simulation coordinator and additional lab tech hours for the simulation lab tech.

Chancellor's office grant requirements require tracking data on students who were admitted using assessment testing. This requires additional staff time to complete this activity.

Beginning January 2009, Education Code changes require the admission of all students regardless of residency. Screening additional students increases the work of the program. Hospital agencies are enacting additional quality control measures which require additional requirements on the program to complete background checks, OSHA training and health screening. Implementation of the electronic medical record has required new IT requirements.

Attachments:
List and briefly describe any attachments
Five Pathways

A description of how you serve students in the five pathways as described in the Educational Master Plan.

Nursing-2009

I. Please refer to the table of estimates of how many students are in each pathway for your program/discipline over the past four years.

1. Basic Skills
Students on the Basic Skills pathway seek to improve day-to-day functioning, enhance job performance, enter new careers, and/or acquire pre-collegiate fundamental skills in order to successfully complete college level courses. The Basic Skills pathway includes English as a Second Language courses offered in both credit and non-credit divisions as well as courses in developmental mathematics and English as well as basic skills courses in computers and Library.

Our program serves students in this pathway: Some students

2. Career and Technical Education
Students on the Career and Technical Education pathway pursue knowledge, technical and skill training necessary for career placement, career advancement and career changes or for creative endeavors that require technical skills. Their educational goals are either an associate degree or certificate. For some degrees/ certificates, such as Nursing, the course of study is defined by external professional regulations or licensing criteria.

Our program serves students in this pathway: Exclusively/ primarily

3. Cultural Enrichment
Students on the Cultural Enrichment pathway focus on acquiring and expanding aesthetic abilities. Students broaden their intellectual and artistic skills through participation in creative opportunities including exhibitions, performances, or publishing work.

Our program serves students in this pathway: None

4. Lifelong Learning
Students on the Lifelong Learning pathway focus on intellectual and physical enrichment. Some Lifelong students may have already completed degrees and/or may be in significantly advanced positions in their careers.

Our program serves students in this pathway: Some students

5. Transfer
Students on the Transfer pathway seek successful matriculation from College of Marin to four-year institutions, universities, colleges or specialized educational institutions by completing courses that fulfill requirements for the baccalaureate degree or admission to specialized programs such as nursing. In the process of completing transfer requirements, these students may also earn an associate degree.

Our program serves students in this pathway:
Transfer GE: Exclusively/ primarily
Transfer Major: Exclusively/ primarily

II. What are your program’s goals for each pathway?

Prepare to meet employers' expectations

Prepare students to pass the National Licensing examination.

Prepare students to obtain employment as a registered nurse.

Prepare students to Transfer by offering collaborative program with Sonoma State

Prepare students to complete BS and MSN degrees.
III. How does your program/discipline help students meet these goals?
We offer an associate degree program that is approved by the Board of Registered Nursing Content as well as the National League for Nursing Accrediting Commission. We offer a nationally accredited curriculum that meets the requirements for transfer to all major four year universities.

In a collaborative partnership funded by two grants with Sonoma State, current students are enrolled in both colleges and will complete the ADN degree as well as courses needed for the MSN pathway. This partnership illustrates that our program is both a transfer and a degree program.

We help students meet their goals through a student success program which is described below.

IV. How do you measure your success?
We measure our success in the following ways:

- graduation rates
- NCLEX pass rates
- job placement rates
- employer and new graduate surveys
- achievement of our seven student learning outcomes

V. How do you make sure your students are able to get through your program in a timely fashion?
Our program is designed to be completed in 4 semesters. The majority of students complete the program in four consecutive semesters. The program does not allow part time attendance; however, students have dropped for various reasons and have returned following a break in attendance.
I. Access
Based on the enrollment numbers and demographic breakdown for your courses, what significant factors or barriers are influencing student access to your courses or program?

Enrollment procedures for the Nursing Program are outlined on the webpage http://www.marin.edu/departments/HealthSciences/Nursing/enrollment1.htm

Enrollment is based on:
1. Completing prerequisite courses.
2. A cutscore of 72% based on a calculation of grades in core biology classes, grade in college level English, repeated core biology classes and overall GPA. (Based on Chancellor's formula)
3. Passing the TEAS test with a cut score of 67%.
4. Criminal background checks must meet industry standards.
5. Drug screening will be implemented due to clinical agency requirements with a target date of Fall 2010.
6. Once the above requirements are met and if there are more students than space, students are selected by lottery.
7. In Fall 2009, the Education Code changed and ended the Marin County residency requirements for enrollment.

The nursing program admits once per year in the Fall. To date, we have had sufficient eligible applicants to meet our enrollment goal of 46 students. Numbers 1-4 affect enrollment and demographics in our program. However, these standards result in a student body that is academically prepared to meet the rigors of the program. Criminal background checks and the upcoming drug screening are requirements imposed by the major clinical facilities that our program uses.

Demographics Data from College of Marin Demographics Enrollment Unduplicated Count of Credit Students By Discipline, Fall 2004 - Fall 2008. Fall 08 showed 221 students enrolled in Nursing Education 3.4% of College student Population.

Data for Fall 08 students; - 84% female, 16% male; 64% white, 13% Hispanic, 10% Asian, 7% Other, 4% Black, 2% Undeclared. Our student body is overwhelmingly female and mostly white.

Data from College of Marin Success Demographics Career Fall 08-Spring 09 Students overall there was a 97% pass rate. By age, the largest group of failures was in the <20 age group. Statistics further broke down by ethnicity showed a 94% pass rate for Hispanics of all ages and black non Hispanic also had a 94% pass rate.

Summary data for nursing is not reflective of the major as the Introductory course is included in the data and many of these students do not enter the program.

We admit 46 students once per year in the Fall semester. In the last 5 years, we have had more qualified applicants then seats. Enrollment has increased by 10 students in each year with funding from the Chancellor's grant. Our program has more Caucasian students and less male students than the state wide average. Recruitment efforts to attract more minority and male students who increase access to the program.

II. Student Success
Based on the student success and retention rates breakdown for your courses, what significant factors or
barriers are influencing student success in your courses or program measured by completion of course and grade earned?

**Note:** Success Rate is the percentage if students who received a passing grade of A, B, C, or P at the end of the semester.

**Note:** Retention Rate is the percentage of students retained in a class at the end of the semester. In Progress and Report Delayed grades are excluded. Cancelled classes and classes with no grades shown are excluded.

The COM Nursing Program has a high retention and success rate as measured by program completion and passing of the NCLEX test. Attrition and graduation rates and NCLEX pass rates for 2005-2009 can be found in the California BRN Continuing Approval Report Fall 2009 pages 87 -92. The class of 2011 has a 100% retention rate. The class of 2010 has a 96% retention rate. High retention rates are a result of faculty dedication, identification of at risk students, and implementation of remediation plans. Grant funding for simulation coordinator, hi risk student mentor and funding for clinical, theory and skills lab tutors are crucial for remediating at risk students. ATI NCLEX Predictor Assessment, grant funding for NCLEX Mentor and grant funded NCLEX review sessions are crucial for remediating students at risk for failing NCLEX.

### III. Student Retention

Based on the student success and retention rates breakdown for your courses, what significant factors or barriers are influencing the ability for the student to succeed at more advanced courses for which your course is a prerequisite.

The Registered Nursing Program has a retention rate of greater than 90%. Analysis of our program since curriculum revision in 2006 shows no one demographic with an outstanding failure rate. This can be attributed to our admissions requirements (TEAS and Chancellor's Formula) which give us an academically prepared student. Additionally, we have Success strategy including the Grant Funded Simulation Coordinator, Hi Risk Student Mentor, NCLEX Mentor, Open Skills Lab, use of ATI Content Mastery Series and ATI proctored and non proctored assessments. All faculty are invested in student success. Nursing faculty are highly dedicated and recognize and remediate the at-risk student in a timely manner. Counseling, childcare, financial aid and scholarships are campus services that support our students.

### IV. Improving Student Success and Retention

What key factors would further improve your student success and retention or support your current level of success? Please check any applicable statements below and then provide additional details/explanation on your choices below.

- [ ] Access to student support services (counseling, tutoring, etc.)
- [ ] Curriculum change
- [ ] Course scheduling for students needs
- [ ] New offerings/additional sections
- [ ] Articulation for transfer or COM GE
- [ ] Recruitment/outreach
- [ ] Student/job market demand change
- [ ] Faculty availability
- [ ] Facilities & technology
- [ ] Professional development

**Simulation:** The COM RN Program has an on campus simulation center in Harlan Center.
with three high-fidelity patient simulators. The IVC Simulation Center is part of a consortium and is used by COM and other Marin County Nursing Schools and Hospitals.

V. Please explain and provide additional details regarding your choices above:

Access to Student Support Services: Student support services are vital to our program. Counseling works with the prenursing students and guides them through the prerequisites. Counseling reviews admissions applications and determines coursework eligibility and applies the Chancellor's Formula to identify candidate eligibility. During the program we frequently refer students to counseling for stress management. Counselors meet with students to ensure that their corequisites are completed and that they have the course work needed for the AA degree. The Testing Center administers the TEAS, ATI program entry critical thinking assessment, ATI NCLEX predictor assessment, and other computerized assessments. The Childcare Center is used by many of our students. The clinical portion of our program is time intensive for the students, 15 hours/week in semesters II, III and IV plus a trip to the clinical facility to prelab (additional 2 hours plus travel time). To succeed in our program many students must cut back on their work schedule resulting in reduced income during our 2 year intensive program; Financial Aid, and Scholarships are integral to student success. Library Services is important to student success. Books, journals, audiovisual materials and assistance with computer based research are all vital to our student success. Blackboard/WebCT is an integral part of many nursing courses. All nursing courses utilize PowerPoint and internet in their teaching modalities. Media Services does an outstanding job providing us with computers, CD players and assisting us in working the equipment. DSPS identifies students with learning disabilities, nursing faculty often refer students for this service. DSPS administers assessments to students who have accommodations. We currently have 5 students enrolled who require this service. Nursing faculty are very grateful for all the campus services that support our students and program. I hope I have not left anyone out!

Curriculum Change: COM Nursing did a major curriculum revision which was implemented in 2006. This new curriculum needs to be reassessed; known problem areas include physical assessment, pediatric and critical thinking. We will continue to develop a comprehensive plan to further integrate and standardize simulation experiences into all of our courses. The BRN is requiring all nursing schools to include more content on The Nurse Practice Act and Evidence Based Practice. Faculty members will be learning and implementing QSEN (Quality and Safety Education for Nurses). The overall goal of QSEN is to address the challenge of preparing future nurses with the knowledge, skills and attitudes (KSA) necessary to continuously improve the quality and safety of the healthcare systems in which they work. Information literacy, COM standard needs to be better articulated in SLOs and course content. Curriculum change will be deferred till Fall 2009, as faculty are currently working on the NLNAC Report.

New Offerings/Additions Sections: Spring 2009 we have two Open Skills Labs. Student enrollment may require the opening of an additional Open Skills Section. We would like to add a simulation course for students in the IV semester. Other new offerings will be pending our new curriculum analysis.

Articulation/transfer: All COM RN courses are transferable to the CSUS. A partnership with Sonoma State University allows eligible students to pursue their BSN and MSN while enrolled at COM. A statistics course is required for both degrees.

Student/Job Market Demand: The goal of COM is to prepare nursing students for entry level RN positions in healthcare facilities. The Advisory Committee provides input from the Service sector. We have more qualified students apply then seats. Limitations to program enrollment include nationwide faculty shortages and difficulty securing clinical placements because of competition from other RN programs. We have no plans to increase enrollment. There is a nationwide nursing shortage, however due to the economic downturn new graduate registered nurses are having difficulty getting jobs. We are encouraging students to pursue the BSN and MSN degrees with our partnership with Sonoma State University. Advanced degrees will make students more competitive in the job market.

Faculty Availability: There is a national wide nursing faculty shortage especially in the specialty areas. COM is very proud to presently have 7 Full Time Faculty members. Five are tenured and 2 are tenure track. Part time faculty continues to be difficult to recruit. Barriers are low pay for clinical and high workload. Clinical workload includes traveling to the clinical facility, unpaid orientations, unpaid required in-services, traveling to the clinical facility the previous day to make a clinical assignment, grading care plans and informal and formal clinical evaluations and clinical remediation. Recruiting full time faculty is difficult because salaries for Nursing Instructors are not competitive with service sector salaries. Faculty workload is high. Student success depends on our ability to recruit and retain qualified nursing faculty.

Facilities and Technology: Computer smart rooms with access to the internet, Blackboard, facilities for computerized testing, computers in the skills lab for student use are all integral to student success. It is difficult to schedule classrooms for our large classes. Our skills lab and simulation lab are cramped and do not have the square footage to
accommodate program needs. We hope to solve our space shortage with the move to our new building as part of the campus redesign.

**Professional Development:** Professional development and lifelong learning is a strong value in the nursing department. Every year nursing faculty attend multiple conferences to keep their knowledge and skills current and to bring new ideas to the nursing department. An example is that several nursing faculty will attend the QSEN conference this summer. QSEN assists faculty to develop curriculum and teaching modalities to enhance nursing quality and patient safety. Many faculty members have been attending conferences on simulation to bring this teaching modality to the students. Professional development ensures current and quality nursing instruction. We appreciate the college's funding for nursing conferences.
Facilities Questionnaire
Nursing-2009

What are the existing facilities issues that impact student access and success, or health and safety? (address any of the following: Size, location, conditions, maintenance, features, a/c, lighting, adjacencies, other.)

The existing facilities issues that impact student success are a lack of adequately sized classrooms to accommodate our large size classes of 46 students. There is also a lack of computer smart classrooms to accommodate our teaching needs. Several times a year we require computerized testing for 46 students. It is difficult to schedule due to limited resources and competition with other programs. Our current skills lab is overcrowded. It has 5 computers which are outdated and need to be replaced. We often need to schedule additional classrooms during the academic year to accommodate program needs; there is a lack of available classrooms. Our program and equipment is located in Harlan Center; sometimes if we can schedule rooms; there are problems transporting necessary equipment.

The Harlan Center building is outdated and there are problems with heating and ventilation, bathroom facilities are outdated and there is no access to the second floor for persons with mobility issues. These issues should be resolved when we move to the new building.
Curriculum
Nursing-2009

1. Course Outlines of Record must be updated every 5 years to remain current for content, texts, student learning outcomes as well as for articulation purposes. Are you aware of the dates on your course outlines? If not, contact OIM to check. If you have courses that are over 5 years old, are you planning on updating them? Please list.

Nursing Education did a major curriculum revision in Fall 2006 all of our courses were updated at that time with the exception of NE90 and NE95. These courses will be updated in 2010. It appears that the courses are due for revision in 2011.

2. Are you planning on changing, updating or revising and degree or certificate requirements? If so, please explain how it will improve student learning, student success and/or access.

The RN Program faculty agreed to had a more indepth discussion about the direction of the curriculum spring 2010. Nursing Education has discussed adding a Nutrition course as a pre or corequisite. Nutrition is an important aspect of health. Nutrition is currently integrated in our courses. It would benefit students to have a better foundation and more integrated approach to the subject and yet it would add units to the program. The curriculum implemented in 2006 is to be evaluated for change Spring 2010.

3. Are you collaborating (or thinking about collaborating) with other departments to develop joint curriculum for learning communities? If so, please describe briefly and explain how it will improve student learning, student success and/or access.

There has been informal discussion with English and Nursing faculty about a learning committee for health care students. This learning community would cohort health science students in English classes. It would focus on healthcare literature that deals with psychosocial issues of illness, recovery and death. Suggested readings would include

- Tuesdays with Morrie by Mitch Albom
- The Spirit Catches You and You Fall Down by Anne Fadimen
- It Is Not About the Bike by Lance Armstrong

In addition the language department has approached the program chair with ideas on a learning community for the conversational spanish class and the ESL faculty has approached the program asking us to give thought to needs for ESL students in our program.

4. Do you plan to develop any new curriculum? If so, please describe briefly and explain how it will improve student learning, student success and/or access.

Nursing education did a major curriculum revision which was implemented in Fall 2006; this impacted every course in our 2 year program. We have now graduated 2 classes (class of 2008 and 2009) with the new curriculum. In 2010, faculty will evaluate data from these classes and design new curriculum based on our analysis.

Nursing education is planning on adding a simulation course for students in their 4th semester. This will help students develop the patient care and management skills that they need to succeed...
in the workplace.

5. Do you plan to develop any new Distance Ed courses or develop Distance Ed versions of existing courses? If so, please describe briefly and explain how it will improve student learning, student success and/or access.

Not at this time

6. Do you plan to add or increase your material fees for any of your classes? If so, please list the classes and the proposed new or revised material fees for the respective classes.

Skills lab classes require materials fees for intravenous catheters, foley catheters, intravenous bags and tubing, bandages, etc. Costs of these continue to rise. Depending on grant and college funding sources we may need to raise fees.
Student Learning Outcomes
Nursing-2009

Five College Learning Outcomes:
1. Written, Oral and Visual Communication: Communicate effectively in writing, orally and/or visually using traditional and/or modern information resources and supporting technology.
2. Scientific and Quantitative Reasoning: Locate, identify, collect, and organize data in order to then analyze, interpret or evaluate it using mathematical skills and/or the scientific method.
3. Critical Thinking: Differentiate between facts, influences, opinions, and assumptions to reach reasoned and supportable conclusions.
4. Problem Solving: Recognize and identify the components of a problem or issue, look at it from multiple perspectives and investigate ways to resolve it.
5. Information Literacy: Formulate strategies to locate, evaluate and apply information from a variety of sources - print and/or electronic.

I. Degrees and Certificates
1. What degrees and certificates does your discipline offer?

   Associate Degree of Registered Nursing
   Intravenous Therapy Certificate

2. Keeping in mind the five College Learning Outcomes above as well as what your discipline specifically requires of your graduating students, what should students be able to do when they have completed your discipline’s requirements for each degree or certificate?

   They should have achieved the seven learning outcomes of the RN program.
   They should have achieved the BRN Standards of Competent performance.
   Associate Degree of Registered Nursing: When the student passes the NCLEX exam, they are eligible for an entry level RN position.
   Intravenous Therapy Certificate: Certifies that the student has basic competencies in IV therapy. This is not required for employment, but is helpful.
   Transfer to a CSU for a BSN degree

3. How do students in your program demonstrate that they meet each of the college-wide learning outcomes? What courses, activities, and/or projects are students required to complete that relate to each outcome?
   i. Written, Oral and Visual Communication
   
   The College of Marin Registered Nursing Program has 7 Student Learning Outcomes which are leveled throughout semesters I - IV. These outcomes are in the College of Marin Registered Nursing Student Handbook 2009-2010 pages 16 -31. Student Learning Outcome #5 Apply effective written, verbal, nonverbal communication techniques in interactions with client[s] and members of the healthcare team. This is leveled throughout our courses: NE135/NE135L, NE138, NE101, NE140/NE140L, NE220A, NE102, NE210/NE210L, NE212/NE212L, NE214/NE214L, NE216/NE216L, NE220B, NE203 and NE225/NE225L

   ii. Scientific and Quantitative Reasoning

   The 5 steps of the Nursing Process are assessment, analysis, planning, implementation and evaluation. The nursing process is taught in the 1st semester and leveled throughout the program. Scientific knowledge and reasoning are implicit in the nursing process. NE135/NE135L, NE138, NE101, NE140/NE140L, NE220A, NE102, NE210/NE210L, NE212/NE212L, NE214/NE214L, NE216/NE216L, NE220B, NE203 and NE225/NE225L

   iii. Critical Thinking
Critical Thinking is a leveled program outcome #2: "Utilize critical thinking in applying the nursing process in a variety of settings to assist clients to promote, maintain, and restore optimal wellness or provide support during the dying process. Critical thinking is measured by an assessment on entry to and exit from the RN program." This is leveled throughout our courses: NE135/NE135L, NE138, NE101, NE140/NE140L, NE220A, NE102, NE210/NE210L, NE212/NE212L, NE214/NE214L, NE216/NE216L, NE220B, NE203 and NE225/NE225L.

iv. Problem Solving

The application of the nursing process encompasses problem solving. Leveled SLO #6 Mange care for a group of clients, prioritizing, delegating, and coordinating aspects of care and maximizing use of available resources while assuring quality and safety. Leveled in courses NE135/NE135L, NE138, NE101, NE140/NE140L, NE220A, NE102, NE210/NE210L, NE212/NE212L, NE214/NE214L, NE216/NE216L, NE220B, NE203 and NE225/NE225L

v. Information Literacy

Students are introduced in the 1st semester of the nursing program to concepts of evidence based practice. They are taught to evaluate medical literature on the basis of the source; personal and popular sources of knowledge vs. peer reviewed professional publications. Web based healthcare information is evaluated in a similar way. Nursing students are required to be computer literate as the healthcare industry moves towards the computerized health care record.

II. General Education:

1. Does your discipline offer any classes which count for general education requirements?

No

2. Which General Education courses in your discipline address the each of the five College Learning Outcomes? Please list courses for each of the following:

   i. Written, Oral and Visual Communication

   Our program has 7 Student Learning Outcomes which are threaded throughout our courses. These 7 Outcomes are Leveled from Semester I - IV. These can be found in our College of Marin Registered Nursing Program Student Handbook 2009 -2010 pages 16-31. Outcome #5: apply effective written, verbal, and nonverbal communication techniques in interactions with clients and members of the health care team. This outcome addressed in all nursing education courses. NE135/NE135L, NE138, NE101, NE140/NE140L, NE102, NE220A, NE210/NE210L, NE212/NE212L, NE214/NE214L, NE216/NE216L, NE220B, NE203 and NE225/NE225L

   ii. Scientific and Quantitative Reasoning

   All nursing courses employ scientific and quantitative reasoning. NE135/NE135L, NE138, NE101, NE140/NE140L, NE102, NE220A, NE210/NE210L, NE212/NE212L, NE214/NE214L, NE216/NE216L, NE220B, NE203 and NE225/NE225L

   iii. Critical Thinking

   Student learning Outcome #2 Use critical thinking skills in applying the nursing process in a variety of settings to assist clients to promote, maintain, and restore optimal wellness, or provide support during the dying process. This outcome is leveled over 4 semesters. NE135/NE135L, NE138, NE101, NE140/NE140L, NE102, NE220A, NE210/NE210L, NE212/NE212L, NE214/NE214L, NE216/NE216L, NE220B, NE203 and NE225/NE225L

   iv. Problem Solving

   Student Learning Outcome #6: Manage care for a group of clients, prioritizing, delegating, and coordinating aspects of care and maximizing use of available resources while assuring quality and safety. This outcome is leveled over 4 semesters. NE135/NE135L, NE138, NE101, NE140/NE140L, NE102, NE220A, NE210/NE210L, NE212/NE212L, NE214/NE214L, NE216/NE216L, NE220B, NE203 and NE225/NE225L

   v. Information Literacy
Students are introduced in the 1st semester of the nursing program to concepts of evidence based practice. They are taught to evaluate medical literature on the basis of the source; personal and popular sources of knowledge vs. peer reviewed professional publications. Web based healthcare information is evaluated in a similar way. Nursing students are required to be computer literate as the healthcare industry moves towards the computerized health care record.

Students are introduced in the 1st semester of the nursing program to concepts of evidence based practice. They are taught to evaluate medical literature on the basis of the source; personal and popular sources of knowledge vs. peer reviewed professional publications. Web based healthcare information is evaluated in a similar way. Nursing students are required to be computer literate as the healthcare industry moves towards the computerized health care record.

III. Course Level Outcomes:
1. Do all of your Course Outlines of Record include Student Learning Outcomes? If not, are you revising them?

We revised our curriculum in 2006. All Course Outlines contain student learning outcomes.

2. What percentage of faculty members in your discipline include SLOs in their course syllabi?

100%

3. Assessment:
   i. How often do you assess these SLOs?

The Nursing Program has an extensive Program Evaluation Plan. A copy of this can be found in the College of Marin Registered Nursing Program California Board of Registered Nursing Continuing Approval Report Fall 2009. Standard IV Curriculum Criterion 4.3 "The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities and evaluate student progress. Frequency of Assessment is every two years at the day long last faculty meeting of the year, or when the organizing framework for curriculum changes. Assessment of student learning outcomes is done by both individual faculty and the Program Director. Levels of Achievement is benchmarked at 85%. Evidence of this evaluation process can be found in our faculty meeting minutes. All nursing courses are also evaluated by students on an ongoing basis as specified in our Program Evaluation Plan. These evaluations are analyzed with respect to the achievement of student learning outcomes. Courses are revised every two years based on student input. Evidence of this can be found in meeting minutes and aforementioned BRN report.

3. Assessment:
   ii. In the last two years every discipline developed SLOs specifically related to College Learning Outcome #3: Critical Thinking. Have you assessed this or any of the stated Student Learning Outcomes in your course outlines over the last year? If so, please summarize the results.

The ATI NCLEX Predictor Assessment is administered once/year to nursing students in the middle of the 4th semester. Critical thinking is one category that is measured and reported. ATI measures critical thinking in the areas of interpretation, analysis, evaluation, inference and explanation. In the Class of 2009, two areas of critical thinking explanation and evaluation did not meet the benchmark of 65%. (See ATI Summary Report March 20 2009.) Critical thinking is the foundation for clinical decision making. Nursing faculty plan to address these deficiencies during our ongoing curriculum analysis and revision.

3. Assessment:
   iii. What improvements have you made or do you plan to make in the future?

Nursing implemented a major curriculum revision in Fall 2006. The revised curriculum was designed to reflect current health care trends, required competencies and accreditation standards, address content changes in the NCLEX_RN test plan, reduce redundancies, incorporate new learning and assessment modalities, create improved sequencing of learning opportunities for students and ease of articulation with BSN and MSN programs. The Program Evaluation Plan was revised in Spring 2009 to align with the new curriculum. It clearly delineates all areas of our program which we evaluate as
required by the Board of Registered Nursing.

3. Assessment:
   iv. What do you plan to assess this year? Who will you assess? How will you assess?
   
   Please see the Evaluation of Program and Assessment of Outcomes Calendar in the Board of Registered Nursing Continuing Approval Report Fall 2009. We assess all aspects of our program as delineated in the calendar. This is done formally once a year at the end of year meeting and recorded in our minutes. Other methods of assessment are student course evaluations (placed on survey monkey this semester, 6th month post graduation survey, and input from our advisory committee which is comprised on members of the healthcare community. We were evaluated by the BRN Fall 2009 and approved for accreditation. In Fall 2010, we will be evaluated by the National League of Nursing Accreditation Committee (NLNAC). Both these accreditations require extensive program assessment.
I. Technology/Software Requests

This section will be filled out by faculty and reviewed by the Department Chair, the Area Dean, the Technology Committee, IPC and Budget.

<table>
<thead>
<tr>
<th>Priority</th>
<th>To Support:</th>
<th>Category</th>
<th>Discipline Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>300 Students</td>
<td>Online</td>
<td>RN,</td>
</tr>
</tbody>
</table>

Description and part number for ordering:

Proquest online journal database

<table>
<thead>
<tr>
<th>Qty.</th>
<th>Unit Cost:</th>
<th>Tax:</th>
<th>Shipping:</th>
<th>Total:</th>
</tr>
</thead>
<tbody>
<tr>
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<td>$6,700.00</td>
<td>$670.00</td>
<td>$0.00</td>
<td>$7,370.00</td>
</tr>
</tbody>
</table>

Type

New

How often?

Annually

College-wide

Distance Education

Discipline-Specific

Out-of-class Assignments

Item to be shared with the following Department/Program: (Include any shared expenses)

MEDA, DENT, EMT and possibly science students in pre health areas as well as library will use this resource. We are requesting that this is a library expense and not a nursing expense.

Justification for Item (See Rating Rubric)

1. Indicate how important this item is to the life of your discipline.
   • 'A' means that your discipline cannot teach your course(s) without the requested equipment.
   • 'B' means that your course(s) would be greatly enhanced with the requested equipment.
   • 'C' means that you would like this piece of equipment for your course(s) but can wait for a future academic year.

In addition, how many times have you requested this item, but you have not received it?

Online research for evidenced based practice is essential to nursing education. Teaching students to do evidenced based practice is required by the BRN and NLNAC. The current data base for nursing is inadequate. The current online offerings are in many cases abstracts instead of full text articles.

2. Is this software required to meet Title 5 and/or Ed Code? If so, how? (Cite code)

Is this equipment required to meet any local, state or federal Health and Safety Code? If so, how? (Cite code)

Adequate library resources is a requirement for both BRN and NLNAC accreditation for nursing programs.

3. How will the quality of instruction be improved for student learning and success? Is it necessary for students to succeed in a series of courses?

   Access to information is essential in teaching students to think, write, and reflect. Access to online journals is required for each nursing course for students to succeed.

4. How will access for students be improved? How many students (annually) will benefit from this request? Is it required to accommodate existing students? Would it be vital to attracting new students?
Students in nursing, dental, medical assisting and EMT can use this data base. This will allow a virtual library and with the move of allied health to IVC this will be essential.

5. What student learning or other outcomes are expected? Is it important to the achievement of student goals?

SLO's include nursing care planning which requires students to use and document evidenced based practice. This requires access to online journals so that the college outcome of information literacy can be achieved.

6. How will these outcomes be measured for future planning? What data or evidence supports your request?

The RN Program has a Program Evaluation plan which includes evaluation of all student learning outcomes and resources.

Additional Justification for this item:

The health programs will be housed on two campuses and a virtual library will be needed to enable students on both campuses to access journal articles.
## Instructional Operating Supplies

### Nursing-2009

#### I. Consumable Instructional Operating Supplies

This section will be filled out by faculty and reviewed by the Department Chair, the Area Dean, the Technology Committee, IPC and Budget.

Note: Please group requests into broad categories of items required to teach a class. Make ONE entry for each category.

Note: These are generally ongoing costs. One-time items go under Instructional Equipment.

<table>
<thead>
<tr>
<th>Priority</th>
<th>To Support:</th>
<th>Discipline Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>92 Students</td>
<td>Nursing</td>
</tr>
</tbody>
</table>

**Broad Category (for example in Chemistry - "Chemicals")**

Skills lab supplies

<table>
<thead>
<tr>
<th>Annual Cost</th>
<th>Previous Cost</th>
<th>Amount of Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>5197.0</td>
<td>5197.0</td>
<td>0.0</td>
</tr>
</tbody>
</table>

**Type**

Increasing Cost  
**How Long?**

Ongoing/Recurring

**Item to be shared with the following Department/Program:** (Include any shared expenses)

The items cannot be shared as they are used up.

**Justification for Item (See Rating Rubric)**

1. **Indicate how important this item is to the life of your discipline.**
   - 'A' means that your discipline cannot teach your course(s) without the requested equipment.
   - 'B' means that your course(s) would be greatly enhanced with the requested equipment.
   - 'C' means that you would like this piece of equipment for your course(s) but can wait for a future academic year.

In addition, how many times have you requested this item, but you have not received it?

A: We cannot teach nursing skills, the technical side of nursing, without access to supplies for learning and practice. Employers expect that students have mastered a skill before performing it on a patient. Currently we get an additional $5000 from grants for supplies. We learned that grants are being cut for the next academic year and we do not know if the additional supply money will disappear. In that case we may need additional funding. We have made a case each year for the need for increasing supply funding.

2. **Is it necessary for students to succeed in a series of courses?**

Yes, students first learn basic skills and subsequently each course builds on the previous one. Students must succeed in basic skills before moving onto more advanced skills before performing skills on patients.

3. **How will access for students be improved? How many students (annually) will benefit from this request? Is it required to accommodate existing students? Would it be vital to attracting new students?**

This account is used to purchase nursing skills lab supplies for 92 full time students that cannot be charged as lab fees. It is used for purchase of items that need to be used in the lab or that are regulated by laws such as IV's. These supplies include needles, syringes, catheters, items costing less than $200 such as stethoscopes, BP equipment, probes for thermometers, glucose testing lancets and test strips, O2 equipment, tracheostomy care kits, airway suctioning kits. All RN students must enroll...
in skill lab courses, as well as use the lab during clinical orientation days and when we are unable to hold clinical at the hospital due to strikes or other facility issues. The lab supports NE101, 4 sections, NE103 1 section, NE135L 6 sections, NE203 4 sections, NE205 2 Sections, NE102 5 sections, NE103 1 section, NE210L 4 sections. The cost for items has increased while the budget remains the same. The nursing program increased admissions from 36 to 46 per year or total enrollment of full time students grew from 72 to 92 in the program. The increased cost for supplies has been paid out of the Capacity Grant for the last 3 years. Office supplies run 1000 per year: Lab supply budget of 3799 from the general fund and 1398 from Prop 20 for a total of 5197 for lab supplies is inadequate. The increased cost for supplies has been paid out of the Capacity Grant for the last 4 years. Lab supply budget of 3799 from the general fund and 1398 from Prop 20 for a total of 5197 for lab supplies is adequate with supplementation of $5000 from grants. Without grant funds the nursing program would not be able to teach the skills needed by RN's. The program is losing about 60% of grant funding for the academic year 2010-11.

4. What student learning or other outcomes are expected? Is it important to the achievement of student goals?

SLO that this meets is the following: Perform therapeutic nursing interventions competently, applying knowledge of culture and human development. Students cannot practice in the hospital without mastering skills taught in the skills lab.

5. How will these outcomes be measured for future planning? What data or evidence supports your request?

Achievement of this outcome is measured on clinical evaluations and skills check offs of students. Students also evaluate whether this outcome is met on course evaluations done every two years.
Non-Instructional Requests

Part I: Non-Instructional Equipment and Supplies

This section will be filled out by the Department Chair

Nursing-2009

I. Non-Instructional Equipment and Supplies

This section will be filled out by the Department Chair, and reviewed by the Area Dean, IPC and Budget.

<table>
<thead>
<tr>
<th>Priority</th>
<th>To Support:</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>1500 Students</td>
<td>Office Supply Budget</td>
</tr>
</tbody>
</table>

Type: Status
Not Applicable  Previously funded with cost increase

Description and part number for ordering:
Office supplies for health science program director, and faculty to support use of computers, printing costs (toner, printer cartridges), communication with clinical agencies (fax machine), pens and pencils, batteries, paper items, binders, file folders, envelopes, production of NLNAC accreditation report, CD's, food for meetings, etc.

<table>
<thead>
<tr>
<th>Qty</th>
<th>Unit Cost:</th>
<th>Tax:</th>
<th>Shipping:</th>
<th>Total:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$500.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$500.00</td>
</tr>
</tbody>
</table>

If this is an upgrade or replacement, please briefly describe your existing equipment in terms of age and capability or lack thereof:
Ongoing office supplies are expendable. These funds have also been used in the past to purchase a new shredder.

Item to be shared with the following Department/Program: (Include any shared expenses)
Fax machine is a shared item. Faculty printer is a shared item with those in Harlan Center.

Justification for Item (See Rating Rubric)
1. Who will use these supplies or equipment?
Nursing Department faculty and staff, Health Science Director, Faculty in ECE, Dental, MEDA and EMT, Phlebotomy to communicate within and college and outside the college to prospective students, clinical agencies and accrediting bodies.

2. How will access for students be improved?
This supports access to 500 current students as well as about 1000 prospective students and many graduates of these programs.
Type | Status
--- | ---
New | New and will be ongoing

**Description and part number for ordering:**
New Computer. We are requesting an additional administrative assistant at IVC for the health programs which will be moving to IVC Fall 2010. The assistant will need computer access.

<table>
<thead>
<tr>
<th>Qty</th>
<th>Unit Cost:</th>
<th>Tax:</th>
<th>Shipping:</th>
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</tr>
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<tr>
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<td>$1,200.00</td>
<td>$120.00</td>
<td>$100.00</td>
<td>$1,420.00</td>
</tr>
</tbody>
</table>

**If this is an upgrade or replacement, please briefly describe your existing equipment in terms of age and capability or lack thereof:**
New office equipment will be needed for a new position.

**Item to be shared with the following Department/Program:** (Include any shared expenses)
Will be used for EMT, ECE, MEDA, phlebotomy, and Dental programs.

**Justification for Item (See Rating Rubric)**

1. **Who will use these supplies or equipment?**
   Health Science Department assistant at IVC.

2. **How will access for students be improved?**
   Communication to approximately 200 health science students at IVC, incoming students and graduates.

---

### I. Non-Instructional Equipment and Supplies

*This section will be filled out by the Department Chair, and reviewed by the Area Dean, IPC and Budget.*

<table>
<thead>
<tr>
<th>Priority</th>
<th>To Support</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>500 Students</td>
<td>Office Computer</td>
</tr>
</tbody>
</table>

**Type | Status
--- | ---
Replacement | Previously funded ongoing expense

**Description and part number for ordering:**
Office computer for Department Assistant, Joan Rinaldi

<table>
<thead>
<tr>
<th>Qty</th>
<th>Unit Cost:</th>
<th>Tax:</th>
<th>Shipping:</th>
<th>Total:</th>
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<tbody>
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<td>$120.00</td>
<td>$100.00</td>
<td>$1,420.00</td>
</tr>
</tbody>
</table>

**If this is an upgrade or replacement, please briefly describe your existing equipment in terms of age and capability or lack thereof:**
The office computer was purchased in 2006. We have been having intermittent problems with this computer this year and most likely will need a replacement in the next year.

**Item to be shared with the following Department/Program:** (Include any shared expenses)
Item is used for nursing, dental, MEDA, EMT, phlebotomy, and ECE work.

**Justification for Item (See Rating Rubric)**

---

http://programreview.marin.edu/OEReportPart1.jsp

2/22/2010
1. **Who will use these supplies or equipment?**

The Health Science Department Assistant uses this computer.

2. **How will access for students be improved?**

Communication to incoming students, website update communication, and ongoing communication to current 400-500 students as well as over 1000 new students is done on this computer.
## Non-Instructional Requests

### Part II : Other Non-Instructional Costs/Contract Services

This section will be filled out by the Department Chair

Nursing-2009

### II. Other Non-Instructional Costs

This section will be filled out by the Department Chair and reviewed by the Area Dean, IPC and Budget.

Note: Service Contracts: maintenance, repairs, laundry, hazardous waste removal, etc.

<table>
<thead>
<tr>
<th>Category</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accreditation Cost</td>
<td>New One Time Only</td>
</tr>
</tbody>
</table>

**Description and part number for ordering:**

NLNAC Accreditation visit in 2010. Mandated cost for the three day visit is projected to be 5010. The visit occurs only every 8 years.

<table>
<thead>
<tr>
<th>Annual Cost</th>
<th>Previous Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>5010.0</td>
<td>5010.0</td>
</tr>
</tbody>
</table>

**Justification**

Please comment on request in terms of how it benefits your program, faculty and/or students:

This provides national accreditation for the Registered Nursing Program and allows students access to study at universities, access to military, and to work out of state as a result of graduating from a nationally accredited program.

---

### II. Other Non-Instructional Costs

This section will be filled out by the Department Chair and reviewed by the Area Dean, IPC and Budget.

Note: Service Contracts: maintenance, repairs, laundry, hazardous waste removal, etc.

<table>
<thead>
<tr>
<th>Category</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accreditation Cost</td>
<td>Previously funded ongoing expense</td>
</tr>
</tbody>
</table>

**Description and part number for ordering:**

Covers annual accreditation fees to NLNAC, NLN, and COADN membership.

<table>
<thead>
<tr>
<th>Annual Cost</th>
<th>Previous Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>2995.0</td>
<td>2995.0</td>
</tr>
</tbody>
</table>

**Justification**

Please comment on request in terms of how it benefits your program, faculty and/or students:

Annual fees to accreditation agencies allows the program to maintain access to quality research and innovation in nursing. National accreditation benefits students who transfer out of state for employment, into the military and onto further education. Maintaining the fee for COADN allows the program director access to statewide nursing program information, updates from the Chancellor's office as well as the Board of Registered Nursing.
II. Other Non-Instructional Costs

This section will be filled out by the Department Chair and reviewed by the Area Dean, IPC and Budget.
Note: Service Contracts: maintenance, repairs, laundry, hazardous waste removal, etc.

Category | Status
--- | ---
Awards/Graduation | New and will be ongoing

Description and part number for ordering:
Pinning Ceremony personnel costs in Fine Arts Theatre

<table>
<thead>
<tr>
<th>Annual Cost</th>
<th>Previous Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>600.0</td>
<td>600.0</td>
</tr>
</tbody>
</table>

Justification

Please comment on request in terms of how it benefits your program, faculty and/or students:

Each year the Nursing Program Pinning Ceremony is held in the Fine arts Theatre. The cost for staff for stage, lighting and sound has been paid using CTE funds, categorical funds. These funds should not be used for ongoing expenses. We would like the college to fund staffing for this evening. The students raise funds to pay for decorations, food, inviations and programs for this event.

---

II. Other Non-Instructional Costs

This section will be filled out by the Department Chair and reviewed by the Area Dean, IPC and Budget.
Note: Service Contracts: maintenance, repairs, laundry, hazardous waste removal, etc.

Category | Status
--- | ---
Insurance | Previously funded ongoing expense

Description and part number for ordering:
malpractice insurance

<table>
<thead>
<tr>
<th>Annual Cost</th>
<th>Previous Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>3535.0</td>
<td>3535.0</td>
</tr>
</tbody>
</table>

Justification

Please comment on request in terms of how it benefits your program, faculty and/or students:

This has been paid by administrative services each year but I wanted a placeholder for future budget planning.

---

II. Other Non-Instructional Costs

This section will be filled out by the Department Chair and reviewed by the Area Dean, IPC and Budget.
Note: Service Contracts: maintenance, repairs, laundry, hazardous waste removal, etc.

Category | Status
--- | ---
Other | New and will be ongoing

Description and part number for ordering:
nursing students.

<table>
<thead>
<tr>
<th>Annual Cost</th>
<th>Previous Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>1000.0</td>
<td>1000.0</td>
</tr>
</tbody>
</table>

**Justification**

**Please comment on request in terms of how it benefits your program, faculty and/or students:**

In order to complete selection of RN students, GPA calculation is needed. Admissions staff work overtime to accomplish this task. This is currently paid for using CTE funds, which is categorical funds and should not be used for ongoing projects. We need to get this into our budget or the college needs to designated staff who will do this during the normal work hours.

---

**II. Other Non-Instructional Costs**

This section will be filled out by the Department Chair and reviewed by the Area Dean, IPC and Budget.

*Note: Service Contracts: maintenance, repairs, laundry, hazardous waste removal, etc.*

<table>
<thead>
<tr>
<th>Category</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
<td>Previously funded ongoing expense</td>
</tr>
</tbody>
</table>

**Description and part number for ordering:**

Travel for Nursing faculty to supervise students in clinical agencies in the Bay area. In addition the Director must attend meetings at the clinical agencies, and attend statewide meetings to run the program.

<table>
<thead>
<tr>
<th>Annual Cost</th>
<th>Previous Cost</th>
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</thead>
<tbody>
<tr>
<td>3580.0</td>
<td>3580.0</td>
</tr>
</tbody>
</table>

**Justification**

**Please comment on request in terms of how it benefits your program, faculty and/or students:**

We cannot offer our clinical courses in SF, Berkeley, Oakland and Marin without faculty travel to supervise students. Bridge, mileage and tolls are included in this cost. Currently the Capacity grant pays for $1000 per year of travel to cover the total travel expenses for the faculty and director.

---

**II. Other Non-Instructional Costs**

This section will be filled out by the Department Chair and reviewed by the Area Dean, IPC and Budget.

*Note: Service Contracts: maintenance, repairs, laundry, hazardous waste removal, etc.*

<table>
<thead>
<tr>
<th>Category</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Contracts</td>
<td>New and will be ongoing</td>
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</table>

**Description and part number for ordering:**

warranties for simulators

<table>
<thead>
<tr>
<th>Annual Cost</th>
<th>Previous Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>9280.0</td>
<td>9280.0</td>
</tr>
</tbody>
</table>
Justification
Please comment on request in terms of how it benefits your program, faculty and/or students:

Computerized mannequins, simulators, require ongoing service contracts. This year the Capacity grant paid for this service. The grant monitor said that the college needs to absorb this cost in the future. The cost for the warrantty for the two simulators is 9280.

II. Other Non-Instructional Costs
This section will be filled out by the Department Chair and reviewed by the Area Dean, IPC and Budget.
Note: Service Contracts: maintenance, repairs, laundry, hazardous waste removal, etc.

<table>
<thead>
<tr>
<th>Category</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Contracts</td>
<td>Previously funded ongoing expense</td>
</tr>
</tbody>
</table>

Description and part number for ordering:
CCPS- Computerized Clinical Placement service

<table>
<thead>
<tr>
<th>Annual Cost</th>
<th>Previous Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>995.0</td>
<td>995.0</td>
</tr>
</tbody>
</table>

Justification
Please comment on request in terms of how it benefits your program, faculty and/or students:

This cost was added two years ago to the required costs for nursing programs throughout the state. An outside agency manages a computerized online system for all the clinical placements for nursing students in the Bay Area. We must subscribe to use this service. We have asked that it be added to our budget but there had been no committee to approve this. Each year we ask Administrative services for an augmentation to pay for this and have received it but it needs to be added as an ongoing expense.

II. Other Non-Instructional Costs
This section will be filled out by the Department Chair and reviewed by the Area Dean, IPC and Budget.
Note: Service Contracts: maintenance, repairs, laundry, hazardous waste removal, etc.

<table>
<thead>
<tr>
<th>Category</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Contracts</td>
<td>Previously funded ongoing expense</td>
</tr>
</tbody>
</table>

Description and part number for ordering:
laundry

<table>
<thead>
<tr>
<th>Annual Cost</th>
<th>Previous Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>268.0</td>
<td>268.0</td>
</tr>
</tbody>
</table>

Justification
Please comment on request in terms of how it benefits your program, faculty and/or students:

Each spring we send the laundry from the nursing skills lab to be cleaned. This is needed to meet OSHA standards.
## II. Other Non-Instructional Costs

*This section will be filled out by the Department Chair and reviewed by the Area Dean, IPC and Budget.*

*Note: Service Contracts: maintenance, repairs, laundry, hazardous waste removal, etc.*

<table>
<thead>
<tr>
<th>Category</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Contracts</td>
<td>Previously funded ongoing expense</td>
</tr>
</tbody>
</table>

### Description and part number for ordering:

Contracts for hazardous waste, pagers and repair of typewriter each year.

<table>
<thead>
<tr>
<th>Annual Cost</th>
<th>Previous Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>457.0</td>
<td>457.0</td>
</tr>
</tbody>
</table>

### Justification

*Please comment on request in terms of how it benefits your program, faculty and/or students:*

This account is needed to offset expenses for pagers for faculty in clinical settings, to pay for disposal of hazardous waste, and repair costs for our equipment such as the typewriter and skills lab equipment.

---

## II. Other Non-Instructional Costs

*This section will be filled out by the Department Chair and reviewed by the Area Dean, IPC and Budget.*

*Note: Service Contracts: maintenance, repairs, laundry, hazardous waste removal, etc.*

<table>
<thead>
<tr>
<th>Category</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Contracts</td>
<td>New and will be ongoing</td>
</tr>
</tbody>
</table>

### Description and part number for ordering:

Zoomerang fee

<table>
<thead>
<tr>
<th>Annual Cost</th>
<th>Previous Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>300.0</td>
<td>0.0</td>
</tr>
</tbody>
</table>

### Justification

*Please comment on request in terms of how it benefits your program, faculty and/or students:*

The nursing program is required to continuously evaluate its effectiveness. Extensive use of surveys is required. This year the program began using Zoomerang on the college license. We wish to continue to do so and have been told that we may need to pay a fee in the future. At this time this is uncertain and it is felt that the research department should absorb this cost. This is a placeholder for nursing.
## Faculty Members
### Nursing-2009

### I. Program Faculty
List of Faculty Members and Total faculty Units separately for Fall, Spring and Summer

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Year Retired:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carrouche</td>
<td>Carmen</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Status:** Shared W/other program(s):
Full-time, tenured No

**Summer 2009 TU**
- Fall 2009 TU: 16.209
- Spring 2010 TU: 14.064

**Years of Service:** 4.5

**Specialty:** Psychiatric, Medical Surgical Nursing and Geriatric Nursing

**Leadership:** List involvement in committees or other service

$1000 stipend for hi risk NCLEX -RN mentor

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Year Retired:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coombes</td>
<td>Judy</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Status:** Shared W/other program(s):
Part-time, RETCUM No

**Summer 2009 TU**
- Fall 2009 TU: 1

**Years of Service:** 1

**Specialty:** Geriatric Nursing

**Leadership:** List involvement in committees or other service

Retired full time faculty and director

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Year Retired:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Haghighi</td>
<td>Faranak</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Status:** Temp Pool No

**Summer 2009 TU**
- Fall 2009 TU: 4.2
- Spring 2010 TU: 1.05

**Years of Service:** 1

**Specialty:** Geriatric Nursing

**Leadership:** List involvement in committees or other service

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Year Retired:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Johnson</td>
<td>Molly</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Status:** Full-time, probationary No

**Summer 2009 TU**
- Fall 2009 TU: 14.255
- Spring 2010 TU: 15.535

**Years of Service:** 2.5

**Specialty:** Maternity Nursing
### Leadership: List involvement in committees or other service

**SNA Advisor**

### List of Faculty Members and Total faculty Units separately for Fall, Spring and Summer

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Year Retired:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lama</td>
<td>Sudha</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Status:
- Shared W/other program(s):
- (Adjunct, ETCUM)
- No

<table>
<thead>
<tr>
<th>Summer 2009 TU</th>
<th>Fall 2009 TU</th>
<th>Spring 2010 TU</th>
<th>Reassigned (Total)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.5</td>
<td>3.12</td>
<td>00.000</td>
<td></td>
</tr>
</tbody>
</table>

#### Years of Service:
- 3

#### Leadership: List involvement in committees or other service

Assistant Director of Nursing. Coordinator of Nursing. Curriculum chair. Hi Risk student mentor.

### List of Faculty Members and Total faculty Units separately for Fall, Spring and Summer

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Year Retired:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Langinger</td>
<td>Jeannie</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Status:
- Shared W/other program(s):
- (Full-time, tenured)
- No

<table>
<thead>
<tr>
<th>Summer 2009 TU</th>
<th>Fall 2009 TU</th>
<th>Spring 2010 TU</th>
<th>Reassigned (Total)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>14.45</td>
<td>15.449</td>
<td></td>
</tr>
</tbody>
</table>

#### Years of Service:
- 12

#### Specialty:
- Medical Surgical Nursing, Pediatric Nursing, Geriatric Nursing

### List of Faculty Members and Total faculty Units separately for Fall, Spring and Summer

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Year Retired:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lefkowitz</td>
<td>Sara</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Status:
- Shared W/other program(s):
- (Full-time, tenured)
- No

<table>
<thead>
<tr>
<th>Summer 2009 TU</th>
<th>Fall 2009 TU</th>
<th>Spring 2010 TU</th>
<th>Reassigned (Total)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.7</td>
<td>11.585</td>
<td>11</td>
<td></td>
</tr>
</tbody>
</table>

#### Years of Service:
- 7.5

#### Specialty:
- Medical Surgical Nursing, Pediatric Nursing, Emergency nursing

### List of Faculty Members and Total faculty Units separately for Fall, Spring and Summer

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Year Retired:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pieper</td>
<td>Mary</td>
<td>Warren</td>
<td></td>
</tr>
</tbody>
</table>

#### Status:
- Shared W/other program(s):
- (Full-time, probationary)
- No

<table>
<thead>
<tr>
<th>Summer 2009 TU</th>
<th>Fall 2009 TU</th>
<th>Spring 2010 TU</th>
<th>Reassigned (Total)</th>
</tr>
</thead>
<tbody>
<tr>
<td>15.6</td>
<td>14.305</td>
<td>00.000</td>
<td></td>
</tr>
</tbody>
</table>
Years of Service: 3.5  
Specialty: Medical Surgical Nursing Critical care Simulation, Skills lab

Leadership: List involvement in committees or other service

List of Faculty Members and Total faculty Units separately for Fall, Spring and Summer

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Year Retired:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ridley</td>
<td>Diane</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Status: Full-time, tenured  
Shared W/other program (s): No

Summer 2009 TU  
Fall 2009 TU  
Spring 2010 TU  
Reassigned (Total)

17.65  
16.55  
00.5

Years of Service: 9.5  
Specialty: Medical Surgical Nursing Geriatric Nursing

Leadership: List involvement in committees or other service

List of Faculty Members and Total faculty Units separately for Fall, Spring and Summer

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Year Retired:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ruddle</td>
<td>Joanna</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Status: Full-time, tenured  
Shared W/other program (s): No

Summer 2009 TU  
Fall 2009 TU  
Spring 2010 TU  
Reassigned (Total)

15.95  
14.2  
1

Years of Service: 5.5  
Specialty: Medical Surgical Nursing

Leadership: List involvement in committees or other service

Coordinates the preceptor experience

Additional Teaching Unit Requests

III. FT Faculty Needs (Please fill this out ONLY if you are stating a need for new full time faculty in your area.)

1. Please indicate if there are NO FT faculty in your discipline. Please provide data regarding the length of time this discipline has been without a full time instructor.

2. Non-availability of part-time instructors in a subject area. Please provide evidence demonstrating the difficulty in finding part-time instructors to teach in the subject area.

   We have had difficulty recruiting part time faculty to teach pediatric and maternity nursing. In addition, we do not have sufficient substitutes for each of the clinical facilities in the Bay Area so that when teachers are ill we may need to cancel clinical for that day.

3. RETCUM Faculty: How many FT faculty have retired in the past ten years. How many units are now taught by RETCUM faculty each year?

   We have replaced all of our retirees in nursing with new full time faculty.

4. New FT Faculty: How many NEW FT faculty have been hired in past 10 years? Please list each faculty name and the year of employment. If this instructor is shared with another department, please list the equivalent FTE% for your department. Please list instructional equivalencies as necessary and if faculty member was the result of retreat rights.

   New full time faculty in the last 10 years include:

   Molly Johnson 2009
   Mary Piper Warren 2008
   Carmen Carrouche 2005
5. Reduction in department TUs as a result of FT Faculty retirements or other significant causes? Please provide data that illustrates a change in teaching unit allocation as a direct result of FT faculty retirements within your department and how this may change in the coming year(s).

6. Other reasons: Have there been other causes for a reduction in units in your discipline? If so, please explain and provide evidence.

7. Changes in Student Demand: Recent or forthcoming growth as a result of added sections due to enrollment demands. Provide evidence that illustrates the need for additional faculty due to increased student demand such as numbers of sections added and/or courses with waitlist totals showing a need for additional sections. What is the % of FTEF for this increase in units? If there has been a decline in student growth, please explain why.

8. Current of forthcoming changes that illustrate the immediate need of additional FT faculty within this department. Please outline all relevant circumstances that justify the priority of a FT hire in addition to those already outlined above. Consider changes in the field, changes in the job market and population shifts.

9. Program Review Findings: Indicate what trends you identified in your last program review that support the need for full time faculty hires. Tie these to the department and college mission.

10. Other considerations: Include such information as matriculation needs, changes in student demand or community and job market needs, response to legislation, or rapid growth of the discipline.

11. Shared Resources: If you have requested FT faculty that will be used by more than one department, please indicate here. Please indicate which disciplines and/or departments and the number of combined students/faculty or classes he/she would serve. Please indicate how it will improve access or outcomes and if it is needed for health and safety concerns or required by law.
Non-Instructional Support Staff
Nursing-2009

I. Current Support Staff

List of Support Staff

Name: Cesar Pomaljulca
Type: Lab Tech
Purpose: To support: 92 Students
Hours/Week: 15

Leadership: List involvement in committees or other service

List of Support Staff

Name: Edward Avrutin
Type: Other
Purpose: 92 Students
Hours/Week: 22

Leadership: List involvement in committees or other service
Simulation lab coordinator paid by Capacity Grant

List of Support Staff

Name: Elwanda Gammill
Type: Other
Purpose: 36 Classes
Hours/Week: 5

Leadership: List involvement in committees or other service
Grant coordinator

List of Support Staff

Name: Full Name
Type: 
Purpose: 0
Hours/Week: 0
To support: 0

Leadership: List involvement in committees or other service

List of Support Staff

Name: Joan Rinaldi
Type: Clerical
Purpose: 115 Classes
Hours/Week: 37

Leadership: List involvement in committees or other service
The Administrative Assistant position supports 6 disciplines (RN, DENT, ECE, MEDA, Phlebotomy, EMT) as well as the Manager in the area. The programs have grown in size and number in the last few years. One administrative assistant is inadequate to support six disciplines. The outside administrative work from hospital agencies has increased as well as the oversight from accrediting bodies. In addition Fall 2010 all health science programs but nursing will be at IVC. Administrative support will be needed on two campuses. **We need a second administrative assistant at IVC beginning Fall 2010.**
List of Support Staff
Name: Judy Coombes Type: Other Purpose: 2 36 Classes
Leadership: List involvement in committees or other service
Faculty Mentor

List of Support Staff
Name: Sara Lefkowitz Type: Other Purpose: 3 92 Students
Leadership: List involvement in committees or other service
Hi risk student advisor

List of Support Staff
Name: Therese Owen Type: Clerical Purpose: 15 92 Students
Leadership: List involvement in committees or other service
Paid by Enrollment Growth 08-10 grant

List of Support Staff
Name: to be hired Type: Clerical Purpose: 37 40 Classes
Leadership: List involvement in committees or other service
The Administrative Assistant position supports 5 disciplines as well as the Manager in the area. The programs have grown in size and number in the last few years. One administrative assistant is inadequate to support the disciplines. The outside demands from hospital agencies, grants, has increased as well as the oversight from accrediting bodies. We need a second administrative assistant in this area. Health Sciences will be housed on 2 campuses once construction is completed and there needs to be assistance for programs on both campuses. The position was also listed in other expenses, section II, to be hired.

II. Request for additional support staff (clerical, lab tech, IS, comp tech, tutor, etc.)

<table>
<thead>
<tr>
<th>Purpose:</th>
<th>Type</th>
<th>Approx. hours per week:</th>
<th>To support:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clerical</td>
<td>Full-Time</td>
<td>40</td>
<td>55 Classes</td>
</tr>
</tbody>
</table>

Justification: Please address the following areas as applicable. How will it be used? How will instruction be improved for student learning and success? How will access be improved? What student learning outcomes are expected? How will the outcomes be measured? What data or evidence is supplied to support your justification?

One administrative assistant is requested to perform duties for the health science disciplines who
will be at IVC beginning Fall 2010. Currently the administrative assistant at Kentfield is overseeing all health disciplines. The workload is too great for one person. It has been reported and recommended in last year's program review that an additional administrative assistant is needed in this area.

**Shared Resources:** If you have requested additional staff that will be used by more than one department, please indicate here. Please indicate which disciplines and/or departments and the number of combined students/faculty or classes he/she would serve. Please indicate how it will improve access or outcomes and if it is needed for health and safety concerns or required by law.

The administrative assistant requested would serve DENT, MEDA, Phlebotomy, EMT and ECE. All of these programs will be taught at IVC starting Fall 2010. The assistant would serve four coordinators and 4 state approved programs. State reports are required by 3 programs. Grants in ECE and Dental Assistance require administrative assistance with reporting data. Ongoing materials are prepared for each clinical agency experience. This includes sending agreements, collecting student forms, and sending rosters and letters to agencies. Each program is required to hold Advisory committees and keep minutes of these meeting. In addition in fall 2010 the Dental Assisting program will be compiling the accreditation report for the Association of Dental Examiners. This will require additional administrative assistance to compile this report.

<table>
<thead>
<tr>
<th>Purpose:</th>
<th>Type</th>
<th>Approx. hours per week:</th>
<th>To support:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clerical</td>
<td>Full-Time</td>
<td>7.5</td>
<td>76 Classes</td>
</tr>
</tbody>
</table>

**Justification:** Please address the following areas as applicable. How will it be used? How will instruction be improved for student learning and success? How will access be improved? What student learning outcomes are expected? How will the outcomes be measured? What data or evidence is supplied to support your justification?

One administrative assistant is requested to perform duties for the health science disciplines who will be moving to IVC beginning Fall 2010. Currently the administrative assistant at Kentfield is overseeing all health disciplines. The workload is too great for one person. It has been reported and recommended in last year's program review that an additional administrative assistant is needed in this area.

**Shared Resources:** If you have requested additional staff that will be used by more than one department, please indicate here. Please indicate which disciplines and/or departments and the number of combined students/faculty or classes he/she would serve. Please indicate how it will improve access or outcomes and if it is needed for health and safety concerns or required by law.

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Assisting program will be compiling the accreditation report for the Association of Dental Examiners. This will require additional administrative assistance to compile this report.

<table>
<thead>
<tr>
<th>Purpose:</th>
<th>Type</th>
<th>Approx. hours per week:</th>
<th>To support:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clerical</td>
<td>Full-Time</td>
<td>7.5</td>
<td>70 Classes</td>
</tr>
</tbody>
</table>

**Justification:** Please address the following areas as applicable. How will it be used? How will instruction be improved for student learning and success? How will access be improved? What student learning outcomes are expected? How will the outcomes be measured? What data or evidence is supplied to support your justification?

One administrative assistant is requested to perform duties for the health science disciplines who will be at IVC beginning Fall 2010. Currently the administrative assistant at Kentfield is overseeing all health disciplines. It has been reported and recommended in last year’s program review that an additional administrative assistant is needed in this area.

**Shared Resources:** If you have requested additional staff that will be used by more than one department, please indicate here. Please indicate which disciplines and/or departments and the number of combined students/faculty or classes he/she would serve. Please indicate how it will improve access or outcomes and if it is needed for health and safety concerns or required by law.

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Program Summary
Nursing-2009

Instructions: after reviewing your data and reports from all other sections of your program review, use this form to briefly summarize all of the information you have provided by closing with your concluding remarks (e.g. an executive one-page summary) for your entire program review.

I. Program Excellence (Best Practices)
Please address any of the following areas:
Overall Program structure, contextualized learning/learning communities, reputation of faculty, faculty collaboration, staff, retention and success, how you maintain a supportive environment, how you address issues of diversity, any specific student learning outcomes.

The COM Associate Degree Registered Nursing Program has a leveled integrated curriculum which is designed for students to complete in four semesters. Students who complete all course work are eligible to sit for the NCLEX-RN licensing exam and apply for entry level RN positions. Our program sequence is clearly outlined on the RN website. http://www.marin.edu/departments/HealthSciences/Nursing/suggested_sequence.htm

Student learning outcomes are integrated into our curriculum and every course. These can be found in our Student Handbook, Total Program Evaluation Plan and individual course syllabi.

The curriculum has three types of courses: theory, clinical and skills lab. Theory courses are in the classroom setting. Syllabi are updated every year. Nursing textbooks usually publish new editions every two years to reflect changes in nursing practice and medical knowledge. This new content is incorporated into our courses.

Clinical courses are taught at Bay Area Hospitals and healthcare facilities. Our major clinical sites are: 1. Marin County: Marin General Hospital and Kaiser San Rafael; 2. Alameda County: Herrick Hospital, Alta Bates Medical Center, Summit Medical Center and Children's Hospital of Oakland. 3. San Francisco County: University of California Medical Center and California Pacific Medical Center, St. Francis Hospital, Kaiser San Francisco. During clinical courses, the students are assigned patients and provide nursing care. The scope of care reflects course objectives and skill level. On student and alumni evaluations, the clinical rotations and preceptorship are consistently cited as best preparing students for practice in the workplace setting. (Student Survey at Program Completion 2009).

The COM skills labs are leveled and focus on clinical nursing skills. Each semester skills increase in complexity and build on earlier knowledge. Skills are always taught in a context emphasizing concepts of problem solving, critical thinking, patient safety, patient teaching, communication, teamwork and evidence based practice. Case studies are a teaching methodologies used in skills lab.

Simulation is a newer teaching modality that has been used at COM since 2005. High fidelity mannequins and patient care scenarios are utilized in this experiential teaching modality. Students must apply the nursing process and perform therapeutic nursing interventions during a dynamic care scenario. Again instructors emphasize problem solving, critical thinking, patient safety, patient teaching, communication, teamwork and evidence based practice.

The COM RN Program is a highly successful program based on course and program retention, NCLEX pass rates (95% 2008/2009) (http://www.rn.ca.gov/schools/passrates.shtml) and employment of students in entry level registered nursing positions in Bay Area hospitals and other health care facilities. Pre nursing students contribute to college enrollment by taking many prerequisite and co requisites courses on campus. In Fall 09 the BRN evaluated our nursing program, gave us high marks in all areas and granted us continuing approval.

Success in our program can be attributed to dedicated, hard working faculty, assistant director, director and administrative support persons and resources provided from grant funding. On course evaluations, program completion surveys and post graduation surveys Students report: "The teachers want you to succeed", "Dedicated, knowledgeable and enthusiastic staff."

Our high course and program retention is attributed to our dedicated faculty and our student success plan. Faculty continually assess student progress and implement early remediation strategies to facilitate student success. Faculty members are assisted by the grant funded HI Risk Student Mentor. The HI Risk Student Mentor assists in articulating the remediation plan and coordinates the grant funded tutors. Depending on need tutors work with students on theory, test taking skills, study skills, clinical and clinical nursing skills. Our Simulation Coordinator and simulation scenarios are an integral part of the remediation plans. The 2007-2008 BRN Annual School Report states that 96.6% of schools report student success strategies as a documented and effective method used to increase student retention.

http://programreview.marin.edu/PSReport.jsp
We start to prepare students for the NCLEX examination in the 1st semester. The NCLEX exam plan changes every 3 years. Faculty keep apprised of the changes, the program utilizes the Assessment Technology Institute Content Mastery Series. It reflects content tested on national exams. This product has review books, and proctored and non proctored computer assessments. The web based portion of the program helps students review content, identify weak areas and define a focused content reviews. Faculty analyze ATI statistics of class wide assessments. This helps nursing faculty identify program content areas that need to be strengthened. In previous years, money from the Hamilton Endowment was used to purchase this product for the students. This year students had to pay out of pocket. We administer the ATI NCLEX RN Predictor Assessment in the 4th semester. Results are analyzed and a grant funded NCLEX Mentor identifies at risk students and develops individualized remediation plans for them. Additionally grant money is used for faculty to teach NCLEX review sessions.

Our monthly faculty meetings, extensive Total Program Evaluation Plan, Advisory Committee, and student surveys provide an organized framework for evaluating program strengths and weaknesses. Our program is updated yearly based on findings from all the stated sources.

In Fall 2008 and Spring 2009, we did an extensive self study for our BRN Approval visit. In Fall 2009 and Spring 2010, we are doing another extensive self study for our upcoming NLNAC Accreditation visit fall 2010.

Nursing faculty completed an extensive curriculum revision between 2004 to 2006. The new curriculum was implemented in Fall 2006. The new curriculum reflected a change in the program’s philosophy and organizing framework. Courses were consolidated and unit allocations were changed. Since the new curriculum has been implemented NCLEX pass rate and student retention has risen. Lower scoring areas in the curriculum include critical thinking and physical assessment. Once faculty has completed the in progress NLNAC self-study, we will turn our attention to revising the “new curriculum”. Faculty has not reached a consensus of program changes at this time. Pediatrics, mental health and physical assessment are content areas that will be considered for revision.

A major problem continues to be faculty dissatisfaction over high workload and low reimbursement rates for the amount of time that all faculty members spend keeping knowledge and certifications up to date; teaching; planning and implementing the clinical portion of our program; and doing the extensive and continual program review and curriculum modifications.

A number one issue is the lower rates of reimbursement for clinical and skills lab. All nursing courses are directed towards meeting our Leveled Student Learning Outcomes. Extensive preparation, knowledge and expertise are required to teach all nursing courses. Delivering content in a way that emphasizes problem solving, critical thinking, patient safety, patient teaching, communication, teamwork and evidence based practice occurs in all of our courses. We urge the college to support us in achieving 1:1 reimbursement for all our courses.

II. Program Resources (Responsiveness)

Briefly summarize examples of key resources required for your program to meet or exceed the college goals (as cited in this review).

1. In order to meet COM Goal #3 Faculty and Staff Excellence, faculty request to revise clinical and skills lab course descriptions to emphasize theory component in an effort to raise the reimbursement rates to 1:1 seminar rates. **Rationale:** The College reimbursement rates for practicum courses and skills lab are at a lower rate than theory courses. Practicum and skills lab teaching require significant planning, expertise, currency, and instructor time. Low reimbursement rates make these courses difficult to staff. The highest rates of staff turnover and part time faculty are in skills lab and practicum courses. This faculty request is supported by the most recent BRN recommendation and vetted through discussion with Dean Nanda Schorske, "to explore, modifying course descriptions to raise college reimbursement rates for simulation and clinical lab courses to the level of reimbursement rates for theory courses.

2. In order to meet COM Goal #2 Academic Excellence, and in order to identify and address workforce development needs, faculty request continued funding and support for simulation, i.e. the retention of Simulation RN Coordinator (now grant funded), funding for KTD & IVC simulation facility and continued funding for faculty development in the use of simulation as a valued alternative clinical experience (e.g. make up assignment, pediatric rotation). **Rationale:** Integrating clinical simulation into nursing curriculum increases critical thinking & prepares student for workplace. According to the 2007-2008 BRN Annual School Report, 70% of schools report that simulation training is one of the
In order to meet COM Goal #3 Faculty and Staff Excellence, faculty request continued funding of current NE positions: Administrative assistant, Hi Risk Student Advisor, Faculty Mentor, Simulation RN Coordinator (these are all presently grant funded.) **Rationale:** High-risk nursing students in the program are identified, counseled and directed to appropriate resources. In the 2007-2008 BRN Annual School Report, 96.6% of schools report student success strategies (e.g. mentoring, remediation, tutoring) is a documented and effective method used to increase student retention. High Risk Faculty Mentor identifies students who do not meet the ATI 65% benchmark and provide remediation to assure student success in passing NCLEX-RN. Simulation RN Coordinator provides simulation scenarios in a high tech simulation environment. Administrative assistance provides much needed assistance to transcribe monthly departmental meeting minutes. [http://www.rn.ca.gov/pdfs/schools/prelicensure.pdf](http://www.rn.ca.gov/pdfs/schools/prelicensure.pdf)

4. In order to meet COM Goal #3 Faculty and Staff Excellence, faculty request continued funding of current NE course offerings, the elective Open Skills Lab. **Rationale:** Many students need extra instruction to master nursing skills and develop confidence and proficiency. In 2008-2009 an elective course offering, Open skills labs were added and have been well attended.

5. In order to meet COM Goal #3 Faculty and Staff Excellence, faculty request continued support of 5 Coordination units. **Rationale:** Past Program Reviews and Program Eval both consistently reports nursing workload as the number one faculty issue. Inherent demands of a nursing program include duties outlined in CBA. For example, participate in curriculum development, written reports for BRN and NLNAC. Participate in the development and the implementation of the Program Evaluation Plan. Participate in clinical and preceptorship assignments, and coordinate the Nursing Skills Lab.

6. In order to meet COM Goal #3 Faculty and Staff Excellence, faculty request a dedicated Administrative Assistant for the Nursing Department and one for ECE, EMT, Phlebotomy, Medical Assisting and Dental. These programs will be moving to Indian Valley Campus as part of the campus modernization. All health science disciplines report the need for more secretarial assistance. Nursing Administrative Assistant duties would include the day to day assistance needed to run the program. Joan’s duties to the nursing department are extensive and listing them here is prohibitive. They include preparing ongoing materials for each clinical agency experience. This includes sending agreements, collecting student forms, and sending rosters and letters to agencies; taking minutes for monthly meetings, assisting with admission of the incoming class, sending paperwork to the BRN for our graduating class, formatting syllabi/student handbook, and reports, updating the nursing website and answering numerous phone calls related to the nursing program.

The IVC Administrative Assistant would serve four coordinators and 4 state approved programs. State reports are required by 3 programs. Grants in ECE and Dental Assistance require administrative assistance with reporting data. Ongoing materials are prepared for each clinical agency experience. This includes sending agreements, collecting student forms, and sending rosters and letters to agencies. Each program is required to hold Advisory committees and keep minutes of these meeting. In addition in fall 2010 the Dental Assisting program will be compiling the accreditation report for the Association of Dental Examiners. This will require additional administrative assistance to compile this report.

7. In order to meet COM Goal #3 Faculty and Staff Excellence, faculty request a dedicated Director of Nursing. BRN regulations require a Director of Nursing for program approval. Currently, the Health Science director administers ECE, EMT, Phlebotomy, Medical Assisting and Dental. When the health sciences with the exception of Nursing move to the IVC campus. It is a natural time to split the director duties. The Nursing Director administrated grants, is familiar with BRN regulations and State Education Code, and is responsible for the day to day running of the program.

8. In order to meet COM Goal #2 Academic Excellence, faculty, hospital agencies and student evaluations consistently report the need for smaller clinical group size. **Rationale:** Hospital contracts limit student assignment on units and limit preceptorship placement. There are documented downward trends in the bay area contributing to insufficient number of clinical sites, as a result of competition with other programs, low patient/pediatric census. This year we temporarily lost patient units, lost 2 weeks of placements due to new computerized systems and Sutter plans for turnover.

9. In order to meet COM Goal #3 Faculty and Staff Excellence, faculty request reimbursement in the form of reassigned time/stipend overload for maintaining clinical expertise. **Rationale:** BRN requires faculty members to be academically and experientially qualified to teach. [1424 h BRN]. Nursing faculty must maintain clinical certifications, i.e. BCLS, ACLS, and PALS. In this rapidly changing field, nursing faculty must attend educational institutes/academic conferences and must attend mandatory hospital training, i.e. computerized training.

10. In order to meet COM Goal #5 Diversity, District to continue with entrance requirement, such as the Community College Chancellor’s Formula and entrance exam, specifically ”Test of Essential Academic Skills” TEAS® to promote educational preparedness and maintain low student attrition rates. **Rationale:** Class of 2009, Chancellor’s Formula was added as an admission requirement. The formula requires that students complete all course prerequisites with a score
III. Moving Forward Objectives (Planning)

Please summarize any data-driven coordinated planning has your department done to improve enrollment, student learning, access and success?

1. After major curriculum revision from fall 2006, faculty plans to make minor data driven revisions to the curriculum reflecting current data. Data that correlates NCLEX pass rates to ATI practice tests will form the basis for this revision. Faculty to address the low ATI assessment scores in assessment, since assessment course was integrated into present course offerings. This identified goal addresses student success.

2. Faculty plans to consider the expansion of simulation to meet pediatric clinical objectives and revisiting past and present pediatric placements. This identified goal addresses student success. There are a number of internal and external issues with the pediatric clinical rotation. Student course evaluations report "not enough to do in pediatric clinical rotation." Pediatric scores from ATI in 2008 scored at 67% versus 80% the previous year. Faculty chronically notes an established low census in the pediatric units and there is a competition to securing pediatrics in the acute care settings.
3. Faculty needs to consider the integration and the standardization of simulation activities leveled across the nursing curriculum. Student evaluations report simulation as a highly effective learning tool. During BRN approval visit, consultants recommended standardizing simulation. This identified goal addresses student access to simulation.

4. According to departmental curriculum meeting minutes, there is a documented reduction in preceptorship placements, caused by competition and hospital mandates. As well, there are well-documented problems with CCPS preceptorship placements. Based on the discussion during Advisory committees and recent trends, faculty must consider alternative clinical placements. This identified goal addresses student access to preceptorship placement.

5. As per department's December curriculum committee meeting minutes, faculty discussed pros and cons of reducing student enrollment, based on bay area trends responding to insufficient number of clinical sites, competition with programs, increasing hospital limitations, i.e. size constraints, low census and/or threatened loss of placements due to competition with other nursing schools and internal healthcare facility changes such as Marin General Hospital changing owners. This is a topic for future departmental meetings and addresses student enrollment. Not all faculty agree on decreasing enrollments.

6. As per the results of faculty discussion, (12/10/09 faculty meeting minutes) clinical class size needs to be reduced to reflect the bay area average clinical size, accommodate recent clinical agency requirements; and low census. This is a topic for future departmental meetings and addresses student access & success.

7. As per the 2009 BRN report, consultants recommended faculty to "review and modify curriculum" for clear inclusion of the Nursing Practice Act with regulations and related statutes into the curriculum with specific reference to Section 2725-Scope of Regulation, and Section 1443.5-Standards of Competent Performance. As well, BRN consultants recommended faculty to standardize nursing care plans. These identified goals addresses student success.

8. As per the 2009 BRN report, consultants recommended faculty to "explore the usefulness of modifying course descriptions to reflect that clinical and simulation courses promote synthesis and integration of complex theoretical concepts". This identified goal addresses student success.

9. As per the Program Evaluation calendar, faculty to discuss items
scheduled for 2010 and faculty to generate a Self Study document for the upcoming 2010 NLNAC accreditation visit.

IV. Assessment of 2008 Program Reviews:
1. What resources have you been granted from your previous program reviews?
2. Please assess how these resources have been used to improve access, learning outcomes and student success in your program?
3. What changes have you implemented based on previous program reviews?
4. What results have you found?

1. Last year we requested 7 computers to replace outdated computers in faculty offices and the skills lab. These were approved.

2. Outdated computers do not work efficiently or run current programs. Computers are an integral part of the nursing program.

3. Program Review helps the Nursing Department analyze our program in regard to College Learning Outcomes. The first four outcomes are articulated in our learning outcomes. Outcome #5 Information Literacy is a part of all of our courses. The Program Review process will cause us to better articulate this SLO and incorporate it more fully into our courses. The Nursing Program has an extensive Total Program Evaluation Plan which is consistent with the requirements of BRN and NLNAC. We have implemented current student success strategies and course revisions based on our evaluation plan. Numerous example of changes implemented because of our review process can be found in our BRN Continuing Approval Visit Report Fall 2009.

V. Fall 2009 Requests Summary:
1. Please summarize the main requests you have made in this program review in order of your priority starting with the most important one.
2. Summarize briefly why you want each one.
3. Summarize your overall rationale.

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3. In order to meet COM Goal #3 Faculty and Staff Excellence, faculty request continued funding of current NE positions: Administrative assistant, Hi Risk Student Advisor, Faculty Mentor, Simulation RN Coordinator (these are all presently grant funded). Rationale - High-risk nursing students in the program are identified, counseled and directed to appropriate resources. In the 2007-2008 BRN Annual School Report, 96.6% of schools report student success strategies (e.g. mentoring, remediation, tutoring) is a documented and effective method used to increase student retention. High Risk Faculty Mentor identifies students who do not meet the ATI 65% benchmark and provide remediation to assure student success in passing NCLEX-RN. Simulation RN Coordinator provides simulation scenarios in a high tech simulation environment. Administrative assistance provides much needed assistance to transcribe monthly departmental meeting minutes. http://www.rn.ca.gov/pdfs/schools/prelicensure.pdf

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   **Rationale:** Past Program Reviews and Program Eval both consistently reports nursing workload as the number one faculty issue. Inherent demands of a nursing ?program? include duties outlined in CBA. For example, participate in curriculum development, written reports for BRN and NLNAC. Participate in the development and implementation of the Program Evaluation Plan. Participate in clinical and preceptorship assignments, and coordinate the Nursing Skills Lab.

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10. In order to meet COM Goal #5 Diversity, District to continue with entrance requirement, such as ?Community College Chancellor?s Formula? and entrance exam, specifically ?Test of Essential Academic Skills??TEAS? to promote educational preparedness and maintain low student attrition rates. **Rationale:** Class of 2009, Chancellor?s Formula was added as an admission requirement. The formula requires that students complete all course prerequisites with a score of at least 72%. The score is determined by a formula which takes into account: (a) overall college GPA in the last five years, (b) the grade received in English 120 or 150, (c) the GPA in core biology courses (Anatomy, Physiology, and Microbiology prerequisites), and (d) course repetition in core biology courses. Class of 2010. Test of Essential Academic Skills (TEAS) with passing score of 67 was added as an admission requirement. Students who do not meet the 67% benchmark are offered remediation.

11. In order to meet COM Goal #5 Diversity, District to continue to collect data on demographics, attrition, enrollment & graduation and NCLEX-RN rates, course & alumni evaluations. **Rationale:** Statistics needed to make evidence based decisions/action plan in future Program Review, Program Evaluation Plan and professional accreditation reports. Grants from the Chancellor?s office & our Program Evaluation Plan require tracking data on students.

12. In order to meet COM Goal #3 Faculty and Staff Excellence, District to offer competitive faculty salary, since offering non competitive salaries is the number one barrier to recruiting and retaining nursing faculty. **Rationale:** 82.6% of nursing schools report non competitive salary as the number one barrier to recruiting faculty. The BRN consultant reports the greatest asset to a successful nursing program is seasoned faculty. The BRN Approval Visit
VI. Other concluding remarks.

Summary Success: The College of Marin Department of Nursing Education is a highly successful program.

- Once in the program, our classes consistently have 96% or greater retention rates and 96% or greater successful completion of all courses taken. Greater than 90% of our students complete the nursing program.
- and over the last five years nursing students represent 10.7% of all students receiving AA degrees at the college.
- Our students do well on the nursing licensure exam NCLEX RN with an average of 85% passing rate on the first attempt.
- Many of our students are employed as Registered Nurses in medical centers and health care facilities in Marin county, San Francisco county and Alameda County.
- Enrollment: We admit students once a year in the Fall. Through the Chancellor's Office Capacity Grant and other grants, we have increased our total program size from a base of 72 students to 92 students, an increase of 22%. While enrollments in the college have fallen over the years, nursing turns away many qualified applicants due to lack of seats.
- Our program size is limited by faculty shortages and funding shortages and clinical placements.
- Enrollment: Nursing Education is an anchor program at COM. Greater than 50% of our students report taking Nursing Education prerequisites including math, science, English and communication courses at the College of Marin. Improving Retention and Student Success: Through grants from the Chancellor's office, we have instituted a student Retention and Success program. This includes identifying at risk students and providing tutoring for students in clinical, skills lab and theory classes. Through scholarships we are able to help students financially. For Fall 08 we can boast 96% retention rate and 96% successful completion of courses.
- Improving NCLEX Pass Rates: Using grant funds, we have purchased the Assessment Technology Institute Content Mastery Series for all students in the class of 2009. We are utilizing these review modules and on line proctored and non proctored tests to prepare students for the NCLEX exam. In 2009, we are hoping to improve our NCLEX passing rate was 94%.
- Clinical Simulation: Through grant funds, we have purchased 3 human patient simulators and hired a simulation coordinator. Faculty members have received training in this new teaching modality and we are in process of incorporating simulation in all of our clinical courses.

13. In order to meet COM Goal #2 Academic Excellence, faculty request continued purchase & utilization of ATI Comprehensive NCLEX-RN® Predictor proctored and non-proctored assessment exams for students. Rationale: The ATI Comprehensive NCLEX-RN® Predictor assessment results provides benchmark for our student learning outcomes. These benchmarks are integrated into our Program Evaluation Plan and in 2009; Critical thinking results did not meet the program benchmark. The results of the ATI Comprehensive NCLEX-RN® Predictor results also provide a sensitive indicator of NCLEX-RN pass rate. Our four-year average, from 2006-2009 is an 86.5% NCLEX pass rate, higher than 85.8% state of California average but lower than 88% national average in 2009.

(http://www.rn.ca.gov/schools/passrates.html)
- **Workload Issues**: Clinical faculty coordinate clinical rotations, maintain currency in a rapidly changing field, maintain clinical expertise, travel to clinical sites, and participate in annual program review and accreditation self-studies for BRN and NLNAC. Workload is further increased by the archaic system of assigning lower units to clinical and skills lab classes requiring nurse educators to have a large number of student contact hours to make a full load.
- **Administrative Issues**: The program student body has increased 22% and we are now heavily dependent on grants to run our program. The Director of Health Sciences and the Health Sciences Administrative Assistant covers Nursing Education, Dental Assisting, Early Childhood Education, Medical Assisting and Emergency Medical Technician Program. Nursing needs a director and secretary dedicated to our program.
- **Conclusion**: We have a highly successful Registered Nursing program. Many of our other operating expenses, open skills labs, noncredit Review of Nursing Care course, equipment and supplies are funded from VETA, Chancellor's Capacity Grant Funds and other grants.
- **Our most serious problem is workload issues. We need the college's support and resources to solve these problems. Nurse Educators teach a combination of theory classes, clinical and skills lab. The student contact hours for a theory class are 1:1 or 16 hours = 1 unit. Clinical is calculated at 1:0.83 so that it takes 19.2 hours of the instructor's time to make 1 unit. When a nursing instructor teaches skills lab the rate is 1:0.73 so that it takes 21.9 hours of the instructor's time to make 1 unit. In order to make a full load of 15 units per semester; nursing instructors must work excessive hours. Nursing faculty members concur with the studies that, "time is our most precious commodity." This system is archaic and negates the amount of training, expertise and liability it takes to supervise a group of nursing students in an acute care hospital. In skills lab, students practice starting intravenous catheters on each other, again teaching this requires intensive supervision, expertise and liability.
- **Recommendation**: Immediately Increase Reimbursement for clinical and skills lab to 1:1.
- **Workload and Reassigned Time**: Nursing Education prepares students to work in a rapidly changing healthcare industry. New additions of nursing textbooks are printed every two years. Nurse Educators must constantly update our curriculum, syllabi and lesson plans to stay current. This adds to nursing faculty workload. Nursing faculty must maintain their clinical expertise. This includes practicing clinical skills, maintaining clinical certifications and mastering new technologies.
- **Recommendations**: Offer reassigned time or stipends for nursing instructors to maintain clinical expertise and update curriculum and syllabi.
- **Workload and clinical supervision**: Nursing faculty must coordinate their clinical groups. This includes orienting to a health care facility and becoming updated on new policies and procedures, meeting with hospital educators and managers, and arranging external placements in community health care facilities. The process of clinical advisement for struggling students is very time consuming.
- **Recommendations**: Offer reassigned time to each clinical instructor for orienting to the clinical facility and coordinating clinical groups.
- **Institute Program review recommendations to decrease workload. Administrative Support**: The College of Marin Nursing Program has a Health Science Director. Her duties include administering the following departments: Nursing Education, Dental Assisting, Early Childhood Education, Medical Assisting and Emergency Medical Technicians. The Health Science Director's work has increased over the last 5 years. The following has added to the workload: 1) The Chancellor's office and the state legislature had mandated new admission requirements (TEAS test, Chancellor's formula). 2) Program size has increased 22%. 3) Open full time faculty positions require the director to hire, orient, mentor and evaluate many new part time faculty members. 4) The incorporation of clinical simulation into our curriculum. 5) Continued grant writing and grant administration is now integral to the
success of our program.
Recommendation: Create a Director of Registered Nursing Position Administrative Assistant Support:

- Recommendation: Create a Director of Registered Nursing Position Administrative Assistant Support: The Administrative Assistant duties include secretarial support for the following departments: Nursing Education, Dental Assisting, Early Childhood Education, Medical Assisting and Emergency Medical Technicians.

- Recommendation: Assign an administrative assistant dedicated to Registered Nursing.
- Funding: ongoing expenses are not accounted for in the nursing budget. New expenses include fee for CCPS clinical placements (995), hazardous waste disposal (300 per year).
- A onetime cost for the site visit coming up on 2010 by the NLNAC will require additional budget of 6010 for the cost of the visit to the college. The program will be requesting addition funds for this in the 09-10 budget year.
- As mentioned above the program needs a full time program director and a full time administrative assistant- these will require funding.
1. Please make any comments on the Five Pathways, Student Access and Success, Facilities, Curriculum and SLO sections.

The RN Program received approval by the Board of Registered Nursing. The RN Program wishes to keep its National accreditation by the National League for Nursing. The faculty is working in a self study for a Fall 2010 visit. This will allow the program to maintain its excellent reputation in the state and nation.

We are proud to boast extraordinary student success in program completion and passing rates on the licensing examination.

We base our curriculum on seven student learning outcomes and refining and updating the curriculum is our ongoing mission.

2. Please comment on the instructional equipment requests, technology requests and other instructional materials requests sections. Please comment especially on any specific priorities without which this program cannot function.

I am only commenting on funding that is not currently funded in the RN Program budget.

Our budget been supplemented by state grants for the past several years. In addition augmentations from the general fund have been made in order to accommodate growing needs of the program. Consideration should be made to the following requests.

<table>
<thead>
<tr>
<th>Equipment and Supplies</th>
<th>timeframe</th>
<th>Reason</th>
<th>Current funding</th>
<th>cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Warranties</td>
<td>yearly</td>
<td>Computerized simulators require yearly warranties.</td>
<td>Capacity grant paid for this but the grant monitor indicated that this cannot be an ongoing grant expense. Grant funding is decreasing in 2010.</td>
<td>$9280</td>
</tr>
<tr>
<td>Skills lab supplies</td>
<td>yearly</td>
<td>Our skills lab budget has been augmented by the Capacity grant for the last several years. The grant funding will be reduced at by almost half next year.</td>
<td>College Grants have paid about 5,000 each year for supplies.</td>
<td>5197</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other expenses</th>
<th>reason</th>
<th>Current funding</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>NLNAC 2010accreditation costs mandated cost 2010</td>
<td>Visit in 2010 by NLNAC pays for visitor expenses and fees to NLNAC.</td>
<td>Cabinet approved costs associated with maintaining national accreditation for the RN Program.</td>
<td>$5010</td>
</tr>
<tr>
<td>CCPS mandated cost</td>
<td>In order to place students in clinical facilities in the Bay area the program is required to use CCPS.</td>
<td>College augmentations for</td>
<td>$995 yearly</td>
</tr>
</tbody>
</table>
3. Please comment on the faculty and staff sections.

<table>
<thead>
<tr>
<th>Faculty and Staff</th>
<th>Faculty</th>
<th>Staff</th>
<th>Reason</th>
<th>Current funding</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Simulation coordinator</td>
<td>x</td>
<td></td>
<td>The coordinator currently runs the simulations at Kentfield and this offsets the large clinical groups in the hospital. Without this position the program would need to decrease the size of all clinical groups resulting in the need for more sections or decreasing the number of admitted students. IVC cannot handle the volume of students.</td>
<td>Capacity grant</td>
<td>$42,000 per year</td>
</tr>
<tr>
<td>Administrative assistant</td>
<td>x</td>
<td></td>
<td>The work of the Health Science assistant is too voluminous for one person. Currently grant money pays for .4 for additional nursing assistance. Grant funding will be reduced next year and may not pay for this person. With the move to IVC of all allied health but nursing, assistant will be needed on this campus.</td>
<td>New FT requested</td>
<td>$40,000</td>
</tr>
<tr>
<td>Admissions Staff: GPA calc Transcript evaluator Calculate formula for RN applicants</td>
<td>x</td>
<td></td>
<td>Provide all admission tasks for nursing: GPA calculation, evaluate transcripts and calculate formula. Either the college recognizes this need and includes this as part of job requirements of technicians in A and R or funds a new person</td>
<td>VTEA</td>
<td>$1000 plus See below</td>
</tr>
</tbody>
</table>
Note:

In addition to the above items the program wishes to continue to receive the 5 coordination units for the RN Program.

If grant funding is drastically cut, we would also request funding for 1 TU each semester for the high risk student advisor.

It is of note that the clinical group size of 12 is too high for current clinical agency contracts. There is no school in California above 10 and most have changed to 8 in each clinical group. The only way that we are maintaining the 12 is through the use of simulation. Some faculty wish to reduce the size of the clinical groups.

<table>
<thead>
<tr>
<th>Role</th>
<th>Units</th>
<th>Description</th>
<th>Funding Request</th>
</tr>
</thead>
<tbody>
<tr>
<td>FT RN Counselor</td>
<td>x</td>
<td>RN program admission and graduation is complex. New collaboration with SSU requires careful advisement of students.</td>
<td>College funds counselors but does not designate program. $70,000</td>
</tr>
<tr>
<td>Allied Science Chair or Director</td>
<td>x</td>
<td>With the move to IVC the ongoing management of the program will require an onsite person. The RN program requires a full time administrator at Kentfield.</td>
<td>New request for part time Chair or director.</td>
</tr>
<tr>
<td>Faculty training stipends</td>
<td></td>
<td>RN faculty are required to attend clinical agency training that may be outside of the regular workweek. There needs to be a budget set aside for these training needs.</td>
<td>Augmentation was needed this year. Stipend rate times hours of training.</td>
</tr>
<tr>
<td>Clinical and skills lab reconfiguration</td>
<td>x</td>
<td>BRN recommended that the faculty revise skills lab to be recognized as theory classes as the clinical decision making that is taught and virtual clinical scenarios require lecture preparation of faculty. This project has not started yet but will be undertaken.</td>
<td>This will involve increased pay rate if approved. 4-1 unit labs 9 -.5 units labs TU are currently at .7. The faculty will be revising them for 1.0.</td>
</tr>
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4. Other comments
1. Please make any comments on the Five Pathways, Student Access and Success, Facilities, Curriculum and SLO sections.

The extraordinary success rate for the nursing program is a reflection of many factors, including excellence in instruction, pedagogy, robust funding, exemplary leadership, focused and well-prepared students. The nursing program is at risk in maintaining this level of excellence unless support requested is provided.

2. Please comment on the instructional equipment requests, technology requests and other instructional materials requests sections. Please comment especially on any specific priorities without which this program cannot function.

The following is a summary presented in the Dept Chair?s (Director?s) comment section:

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<thead>
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<td>1. Warranties</td>
<td>Yearly</td>
<td>Simulators too costly not to cover by warranties</td>
<td>Chanc Office Capacity grant-reduced in FY 10-11</td>
<td>$9,280</td>
</tr>
<tr>
<td>2. Skills lab supplies</td>
<td>Yearly</td>
<td>Req?d for run lab</td>
<td>Chanc Office Capacity grant-reduced in FY 10-11</td>
<td>$5,197</td>
</tr>
<tr>
<td>3. NLNAC</td>
<td>Every 8 yrs</td>
<td>Accreditation required to maintain national standing</td>
<td>Previously funded out of VP?s budget</td>
<td>$5,010</td>
</tr>
<tr>
<td>4. CCPS</td>
<td>Yearly</td>
<td>Required expense for clinical placements</td>
<td>Previously funded out of VP?s budget</td>
<td>$995</td>
</tr>
<tr>
<td>5. Pinning</td>
<td>Yearly</td>
<td>Required for o/t for Fine Arts staff</td>
<td>VTEA-ongoing expense that should not be cover by VTEA</td>
<td>$600</td>
</tr>
</tbody>
</table>

The total request of $21,08 is required to maintain the current program. Although grants enabled the purchase and launch for the technology now required in nursing program instruction, the district is expected to maintain the equipment and instruction that was seeded by the Chancellor?s office.

The requirement for NLNAC accreditation is what provides national recognition for the nursing program and assures employability for graduates of CoM?s nursing program.

The costs itemized here have been funded through multiple sources in previous years and should result in minimal cost to the district to sustain the return on investment.

3. Please comment on the faculty and staff sections.

The following is a summary presented in the Dept Chair?s (Director?s) comment section:

<table>
<thead>
<tr>
<th>Simulation</th>
<th>Yearly</th>
<th>Required to</th>
<th>Capacity grant</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Yearly</td>
<td>Required to</td>
<td>Capacity grant</td>
<td>$42,000</td>
</tr>
</tbody>
</table>
I recommend priority consideration be given to items #7, #10 and #11, totaling $85,000. The workforce dean will continue to work with the Health Sciences Director to identify other sources of funding as needed for the operation of the Health Sciences Department.

Items #7, #10 and #11 are essential to support the operation for a population that more than doubled in enrollment in the combination of Nursing, ECE, Medical Assisting, Dental Assisting (moving to IVC in Spring 2011) and EMT.
Substantial external funding has been raised and managed by the program Director and Dean over the last four years to expand these programs to this level of success. As the Dean of these programs, I urge the district to support these requests in order to maintain these exemplary program improvements.

4. Please itemize expenses currently covered by external funds that may revert back to general funds.

See items #2 & #3.

Each year the nursing program has expended all general and external funds to support the program. Approximately $4200 in lottery and Perkins funds have provided support. In addition to the Supplies, Equipment and Staffing details above, $4200 should be included in funds that could revert back to the general funds.

5. Other comments

The nursing students represent not just students from the nursing programs, but fill the ranks of many general education classes and provide a base to our full-time student body. The college is well-served by this program that contributes to our good success measures and standing in the community.

Requests for support in this program review should be seriously considered as requests that will impact the entire college district?s continued success and reputation for excellence.