REGISTERED NURSING ACADEMIC PROGRAM REVIEW

Written Fall 2020





This program review report for 2014-2020 is respectfully submitted by the members of the Grossmont College Nursing Department.

- Aliyev, Gabi
 DNP, MSN Ed, RNC
- Babini, Sarah MSN, RN
- Brooks, Peter EdD, MS, RN, CMSRN
- **Dyal, Andrea** MS, RN, CNE
- Falsetta, Joanne DNP, RN
- Harrison, Michelle MSN, RN
- Maloy, Lisa
 MSN, RN, CNS
- Morris,Rhonda MSN, RN
- Ngo-Bigge, Angela MSN, FNP-C
- Shadroff, Valerie DNP, RN, CCRN

TABLE OF CONTENTS

| Section 1: DEPARTMENT HISTORY & PREVIOUS PROGRAM REVIEW RECOMMENDATIONS | 5 |
|--|------|
| 1.1 | 5 |
| 1.2 | 7 |
| SECTION 2 - CURRICULUM DEVELOPMENT AND ACADEMIC STANDARDS | 9 |
| 2.1 | 9 |
| 2.2 | 10 |
| 2.3 | 11 |
| 2.4 | 12 |
| 2.5 | |
| 2.6 | 14 |
| 2.7 | 15 |
| 2.8 | |
| SECTION 3 – STUDENT LEARNING OUTCOMES (SLOs) | |
| 3.1 | |
| 3.2 | |
| 3.3 | |
| 3.4 | |
| 3.5 | |
| 3.6 | |
| SECTION 4 - FACILITIES AND SCHEDULING | |
| 4.1 | |
| 4.2 | |
| 4.3 | _ |
| | |
| 4.4 | |
| 4.5 | |
| 4.6 | |
| SECTION 5 – STUDENT EQUITY AND SUCCESS | |
| 5.1 | |
| 5.2 | |
| 5.3 | |
| 5.4 | |
| 5.5 | |
| 5.6 | |
| 5.7 | 39 |
| Students' reflections on how Grossmont College of Nursing has impacted their lives | |
| SECTION 6 - STUDENT SUPPORT AND CAMPUS RESOURCES | 44 |
| 6.1 | 44 |
| 6.2 | 47 |
| 6.3 | 52 |
| SECTION 7 – ON-CAMPUS/OFF-CAMPUS INVOLVEMENT | 59 |
| Chart of faculty's contributions to student success | 59 |
| 7.1 | |
| 7.2 | .112 |
| 7.3 | .113 |

TABLE OF CONTENTS

| IS114 |
|-------|
| 114 |
| 116 |
| 116 |
| 117 |
| 118 |
| 119 |
| 120 |
| 120 |
| 121 |
| 123 |
| 123 |
| 125 |
| 126 |
| 126 |
| 127 |
| 127 |
| 129 |
| 130 |
| 134 |
| |

NURSING DEPARTMENT ACADEMIC PROGRAM REVIEW

SECTION 1 – OVERVIEW. DEPARTMENT HISTORY & PREVIOUS PROGRAM REVIEW RECOMMENDATIONS

1.1 Introduce the self-study with a brief department history. Include changes in staffing, curriculum, facilities, etc. (You may wish to cut/paste your previous department history and then add to it). Additionally, please list degrees and certificates your department offers.

History of the Nursing Program

The School of Nursing is a part of the Allied Health & Nursing Division. The first two-year nursing students entered the Grossmont College Nursing Program in fall 1967. This class graduated 16 students in 1969. The LVN-RN Program was added in the summer of 1981 and graduated a class of 33 in 1982. Currently the two-year RN Program admits 40 students each in both the fall and spring, while the LVN-RN Transition Program admits a cohort of 10 students each spring if a cohort of 10 students has met the qualifications for acceptance to the Program. While in the Program, students affiliate with major health care facilities throughout the San Diego area. This broad exposure to a variety of settings provides the student with opportunities to observe and participate in the practice of nursing with a number of health care providers. In addition, students have the opportunity to develop multidisciplinary interactions when providing patient-centered care for patients across their lifespan.

Accreditation

The Nursing Program was first accredited by the National League for Nursing Accrediting Commission (NLNAC) in July 1989. In July 2007, the Program forfeited its accreditation due to an inordinate amount of faculty retiring or leaving the Program to relocate. The Program was reaccredited with the NLNAC in fall 2008. Since that time, the Program is fully staffed with ten full-time nursing faculty and 36 part-time faculty. Seven of the faculty is tenured and three faculty are currently in the tenure process. In October of 2013 the Accreditation Commission for Nursing Education (ACEN) formally the NLNAC, made a site visit and recommended a full eight-year accreditation. A two-year report was submitted in fall 2015 addressing areas of concern on the program's systematic program evaluation. The revised systematic program evaluation is due to be submitted to the ACEN in fall 2021. The nursing program is approved by the California Board of Registered Nursing and is scheduled for a continued approval site visit in spring 2021.

Support Staff

The Program is supported with one full-time nursing program secretary, one administrative assistant to the Senior Dean of the division, and two health science technicians responsible for configuring the nursing and health professions labs. The Assistant Director of the nursing program has 50% release time to support the daily activities required by both accrediting bodies. Full-time faculty is responsible for lecture and clinical. Part-time faculty serves as clinical faculty and, at times, lecture for the pharmacology course.

Director of Nursing Vacancy

There is a vacancy in the Director of Nursing (DON) position and the College has tried multiple times to recruit for this position with little success. A strategic hire had been submitted, the position was approved, and a committee was formed for interviews in spring 2020. However, due to COVID, it was disbanded. The current interim Dean has been in place since Summer 2019.

LVN-RN Transition Students

Due to a reduction in the number of LVNs applying to the nursing program, in spring 2012 the LVN-RN program was merged with the day program. LVNs seeking their ADN begin a three-week bridge course in second semester (NU 130) and once completed, they continue their clinical and lecture in the perioperative course (Nursing 130). From there the LVN-RN students take their remaining coursework in third and fourth semester. To provide the LVN-RN program, the College requires a cohort of ten students. To date this program has only run one time.

Faculty

Since the last program review in 2013, four full-time nursing faculty were hired to replace nursing faculty who either retired or left the program. Presently one of these new faculty members has completed the tenure process and three are in the fourth year of the tenure process. As previously mentioned, the program is presently supported by 36 part-time nursing faculty who are responsible for teaching the clinical component of the curriculum. All of the part-time nursing faculty have a minimum of a bachelor's degree in nursing, seven have their master's in nursing and one has their doctorate in nursing practice (DNP). All full-time faculty hold a master's degree in nursing with two full-time members having a DNP and one with a doctorate in education (EdD). All faculty have teaching experience and are outstanding nursing clinicians. All faculty are approved by the California Board of Registered Nursing (BRN).

Curriculum

All nursing course outlines were updated in 2020. The Student Learning Outcomes (SLOs) and Program Learning Outcomes (PLOs) were approved by the BRN and Accreditation Commission for Nursing Education (ACEN) in spring 2020. The SLOs are leveled from first to second year and all lead to the program outcomes.

Facilities

The nursing program has been housed in the state-of-the-art Health and Science complex since 2010. This building contains 52,000 square feet. Of the 52,000 square feet, 10,597 square feet is dedicated to the Nursing Program. The nursing rooms are contained on the second floor of this building. There are two high-fidelity simulation rooms with control rooms for a total of ten beds. All of the equipment for the simulation lab was obtained by grants.

Degrees

Upon the successful completion of the nursing program, students earn their Associate Degree in Nursing (ADN) and with approval from the California BRN can sit for their licensure exam to earn their license as a Registered Nurse (RN).

1.2 Your last program review contains the most recent Academic Program Review Committee Recommendations for the program. Describe changes that have been made in the program in response to recommendations from the last review including any activity proposals funded and what the results were. (Be sure to use the committee recommendations and not your own). Include the recommendations from the last program review in this section.

Program Review Recommendations from Previous Program Review:

1. Continue to reduce the Nursing Program attrition rate while maintaining high NCLEX pass rates.

We have continued to struggle at times with attrition rates, though our NCLEX pass rates have been well above the CA average for ADN programs and hit 100% in 2019. We continue to discuss attrition regularly at faculty meetings, reviewing reasons for any students leaving the program and attempting to find trends or correlations between students who choose to exit the program. We have a well-designed remediation plan for both course and clinical performance issues. These are developed in conjunction with our two Student Success Advisors (SSAs) who not only assist in the remediation process, but continue to meet with students even after the remediation plan is completed. The SSAs identify "at risk" students at the beginning of each semester and follow those students closely to help provide any needed resources. Faculty diligently plan their courses to fit a variety of learning styles to best serve students form diverse backgrounds and learning experiences. Each student who exits the program meets with the Dean or Assistant Director for an exit interview to explore the reasons for the departure, any interventions that could be put in place to prevent the departure, or pave the way for the student to re-enter the program at a later date. The Student Progression Committee communicates with students who have left the program with a wish to re-enter to ensure protocols and deadlines are met for successful re-entry.

2. Increase the return rate of employer and alumni surveys.

Our clinical placement coordinator has tried to personalize requests when sending out employer surveys. Also, faculty who are employed by our healthcare partners assist in personally requesting the return of surveys. Unfortunately, survey return rates remain low, though those that do return have favorable responses regarding our students. One reason for low return may be that if a problem arises during a clinical rotation, it is handled immediately. We have a very strong working relationship with all of our health care partners and we have many faculty who are also employed by these entities which allows for effective communication and understanding of policies and procedures. During the COVID-19 situation, faculty reached out to all recent graduates to maintain engagement and to check-in on these new nurses and their experiences of working in the field during the pandemic. Again, not all responded, but those that did were grateful for the personalized outreach. Having faculty assist in sending out alumni surveys may be an idea to look into for the future. As with the employer surveys, the alumni surveys that are returned are very positive.

3. Develop a succession plan for the Divisional Dean.

There is a vacancy in the Director of Nursing (DON) position and the College has tried multiple times to recruit for this position with little success. A strategic hire had been submitted, the position was approved, and a committee was formed for interviews in spring 2020. There were qualified applicants who applied for the position, however, due

to COVID, the committee was disbanded. An attempt to reorganize the nursing leadership from within the department was rejected by the college administration citing too much turnover in current college leadership. The current interim Dean has been in place since Summer 2019. This issue has been taken to the Staffing and Prioritization Committee where it was expected the job would be posted again early in 2021. As of the end of February 2021, this still has not occurred.

4. Continue to write grants for Program support.

In addition to funds from the college and Carl Perkins, the nursing department has received funds from the Enrollment Growth and Retention Grant, and the Grossmont Healthcare District. We continue to look for grant money where available to help support faculty development, purchase of supplies and equipment and software. During the COVID-19 situation we were able to get CARES funding to try out a new virtual clinical software program for our students.

5. Continue to hire part-time nursing faculty with their master's degree in nursing.

Currently 47% of our part-time faculty hold masters' degrees and one has their DNP. The department has been successful in recruiting and hiring well-qualified part-time faculty. These needs continue to grow due to state law limiting the number of clinical hours for part-time faculty to less than a semester length course, resulting in the need for additional faculty to be hired. Additionally, due to the COVID-19 situation, our clinical partners have greatly reduced (most by half) the number of students allowed in a clinical group. This had-required the department to hire nearly double the part-time faculty to cover the expanded number of clinical groups while also having to cover virtual clinicals as the number of clinical hours has also been restricted by the clinical agencies.

6. Examine curriculum for revisions.

This is the area in which we had the greatest success. The changes to the curriculum are outlined in Sections 2 and 3 of this document. In response to student course evaluations and lack of clinical placements for neurological nursing and precepted patient care, we undertook a reorganization of our curriculum. We looked at the curriculum from all of the other ADN programs in California, looking at how they structured their medical-surgical courses, pharmacology courses, specialty courses, leadership courses and whether they offered any additional courses in their programs. We decided to more closely align our medical-surgical courses to the progressions used in other programs, reordering some content to ensure placement at the appropriate times in the curriculum based on what types of patients students are seeing in clinical and how demanding the subject matter is in our novice to expert philosophy for leveling coursework and SLOs. We assimilated the neurology content into the other medical-surgical courses and added ambulatory care to the third semester curriculum, both to align with other programs as well as trends in local healthcare. We removed the preceptored patient care course and extended the Medical Surgical 3 course to include the content on nursing leadership. Due to the COIVD-19 situation, we have been delayed in implementing the change. To date, the new curriculum is being taught in the first-year courses. The implementation will be fully complete in the Spring 2022 semester.

SECTION 2 - CURRICULUM DEVELOPMENT AND ACADEMIC STANDARDS

2.1 Describe how your course offerings have changed since the last program review. Have you added or deleted courses since the last review? If so, why? Include new or deleted programs, degrees and certificates.

The Nursing Program began phasing in a revised/modified nursing curriculum in spring, 2020. Due to the inability of students to complete the courses as a result of the loss of clinical placements from the COVID-19 Pandemic, the phase-in has been delayed by one semester. This is the revised timeline for the phase in of the new curriculum.

The course numbers for the nursing courses will remain the same, but the course outlines have been modified, including the course titles. Students entering the nursing program in spring 2020 will be enrolling in the modified courses as they progress through the program. Students who entered the nursing program prior to spring 2020 will be enrolling in the original courses with the exception of Nursing 132. The primary change was a course title change, and beginning spring 2020, students will be taking the modified course.

```
Fall 2020 courses offered in the Nursing Program:
Nursing 118 - Nursing Pharmacology
Nursing 120 - Fundamentals of Nursing replacing Introduction to Nursing: Theory and Practice
Nursing 130 - Perioperative Nursing
Nursing 132 - Obstetric and Pediatric Nursing replacing Maternal/Newborn and Child Health Nursing
Nursing 220 - Nursing Management in Nutritional-Metabolic Disorders
Nursing 222 - Neurologic and Psychiatric Nursing
Nursing 230 - Nursing Management in Cardio-Pulmonary and Circulatory Disorders
Nursing 235 - Preceptored Patient Care Management
Spring 2021 courses offered in the Nursing Program:
Nursing 118 - Nursing Pharmacology
Nursing 120 - Fundamentals of Nursing
Nursing 130 - Medical Surgical Nursing I replacing Nursing 130 Perioperative Nursing
Nursing 132 - Obstetric and Pediatric Nursing
Nursing 220 - Nursing Management in Nutritional-Metabolic Disorders
Nursing 222 - Neurologic and Psychiatric Nursing
Nursing 230 - Nursing Management in Cardio-Pulmonary and Circulatory Disorders
Nursing 235 - Preceptored Patient Care Management
Fall 2021 courses offered in the Nursing Program:
Nursing 118 - Nursing Pharmacology
Nursing 120 - Fundamentals of Nursing
Nursing 130 - Medical Surgical Nursing I
Nursing 132 - Obstetric and Pediatric Nursing
Nursing 220 - Medical Surgical Nursing II replacing Nursing Management in Nutritional-Metabolic Disorders
Nursing 222 - Psychiatric and Community Health Nursing replacing Neurologic and Psychiatric Nursing
Nursing 230 - Nursing Management in Cardio-Pulmonary and Circulatory Disorders
Nursing 235 - Preceptored Patient Care Management
Spring 2022 courses offered in the Nursing Program:
Nursing 118 – Nursing Pharmacology
Nursing 120 - Fundamentals of Nursing
Nursing 130 - Medical Surgical Nursing I
Nursing 132 - Obstetric and Pediatric Nursing
Nursing 220 - Medical Surgical Nursing II
Nursing 222 - Psychiatric and Community Health Nursing
```

Nursing 230 - Medical Surgical Nursing III replacing Nursing Management in Cardio-Pulmonary and Circulatory Disorders

Nursing 235 - Preceptored Patient Care Management No longer offered

2.2 Describe your department's practice for determining that all course outlines reflect currency in the field, relevance to student needs, and current teaching practices.

The nursing faculty is responsible for the development, implementation, and evaluation of the nursing curriculum. The nursing program has a Systematic Program Evaluation tool which examines the curriculum and provides the basis for ongoing assessment and decision making within the Nursing Program. The Nursing Program is systematically and continuously reviewed for rigor and currency by the faculty as a whole and by each course instructor.

The curriculum is on the agenda of every faculty meeting, held monthly during the fall and spring semesters. The curriculum is reviewed in-depth yearly at our nursing faculty retreat each June. The nursing curriculum committee members include all nursing faculty members and are overseen by the Assistant Director of Nursing (ADON) and Dean of Allied Health and Nursing. Curriculum revision proposals are presented at faculty meetings and referred to the curriculum sub-committee for the proposal to be developed and college forms to be completed. These forms are then returned to the nursing curriculum committee as a draft for review and acceptance.

The faculty believes that rigor has always been a strong component of the Grossmont College Nursing Program. In support of this belief, data collection and analysis has continually provided the basis for decision making within the program. Course, clinical, employer, and alumni surveys provide feedback and data to support the rigor of the Program.

Through ongoing program and course assessment within the school of nursing, currency has always been recognized as a critical component of the nursing curriculum. At the course level, individual faculty members update content and disseminate information through revisions of course syllabi. Updates occur as part of the end-of-the course assessment process with student evaluations of the course. As previously mentioned, recent course outline revisions were approved by the College Curriculum Committee in September of 2020. Course outlines were updated to reflect new textbooks, student learning outcomes, and course objectives.

As part of currency, the role of high-fidelity simulation has played a large part in the nursing curriculum. All nursing students participate in high-fidelity simulation. The students begin their experience in the simulation lab in first semester and then continue with progressively more complex scenarios throughout their medical-surgical and specialty courses.

Textbooks are reviewed at the end of the spring semester. In fall 2017, faculty adopted a new medical surgical textbook which boasts that it provides the student with a resource that "delivers the complete nursing foundation students need in a format designed for the way they like to learn." It is written by expert clinicians, ensuring the content is clinically relevant and current. In addition, there is an ancillary package integrated which includes adaptive NCLEX-style review questions, video clips, a medical dictionary, evidence-based practice (EBP) journal articles, case studies, and virtual simulations "to help students explore essential patient care practices in real-world terms and gain a more practical understanding of how they'll apply what they've learned in practice." There is also a nursing drug book mobile application included in this package.

2.3 How does your department use student engagement strategies in the classroom? How are your faculty including current issues in course content? Consider environmental, societal, ethical, political, technological, and/or other issues when answering this question.

The last several years have brought the term "representation" into the lexicon and our consciousness. Representation means that everyone has a right to feel like they belong in our society—regardless of gender, ethnicity, sexual identity, or disability—and they need to be able to see themselves in all forms of media and learning material. The faculty has made concerted efforts to increase representation of different groups into their course materials. This means showing patients of all ages, ethnicities, and cultures. This means not having all stock photos of nurses be female. This means having discussions about LGBTQ+ issues in healthcare. Representation matters, and the nursing faculty is committed to it.

In the classroom, faculty use a variety of interactive teaching modalities to engage students with their learning including (but not limited to); case studies, concept maps, discussions, simulations (high-fidelity, low-fidelity, virtual), skills practice, NCLEX-style practice questions using i-Clicker, student presentations, guest speakers, and video clips. Each nursing classroom is equipped with a smart cart allowing instructors to easily display a variety of media from the computer, projector, and DVD player. Some faculty record lectures for future viewing by students or record and publish podcasts of course content. Canvas is used by all faculty as the course management system. All syllabi, course announcements and communications with students occur through Canvas. All exams are administered on Canvas. This provides the students with computer testing so that when they take their licensure exam they will be familiar with computerized examinations.

The content delivered in nursing courses is evidence-based. This means the content is dynamic, continually refined and validated by research. In each course there is an evidence-based assignment students must complete. This may be a written assignment, presentation, or both. This allows the students to see how research informs practice and the value of lifelong learning to remain current in the field and ensure they are giving the best possible care to their patients.

During Covid-19 all didactic instruction has shifted to emergency remote teaching in a virtual environment. Faculty utilize Zoom for synchronous and recorded lectures. Additional applications used in the remote learning environment include Flipgrid, Packback, and Proctorio. The global pandemic itself was integrated into courses through discussions about epidemiology, personal and patient safety, vaccine development and approval processes and vaccine willingness, and other related topics. The students completed clinical rotations in facilities treating Covid-positive patients, and though not in direct care of those patients, students got a first-hand look at healthcare and its challenges during a pandemic situation.

2.4 What orientation do you give to new faculty (both full- and part-time), and how do you maintain dialogue within your department about curriculum and assessment? What strategies do you have inplace that ensure consistency in grading in multiple sections and across semesters (e.g., mastery level assessment, writing rubrics, and departmental determination of core areas which must be taught)? Consider department practices, academic standards, and curricular expectations (i.e. SLOs and teaching to course outlines).

Orientation

Full-time faculty is oriented to the department by the ADON. They are provided a faculty orientation handbook that was developed by the nursing faculty and is updated each year. Full-time faculty is assigned a mentor which is typically the Chair of their tenure committee. They meet regularly with their mentor and Divisional Dean once per month for their first year of employment. During their first year of employment they are not required to serve on any departmental or campus wide committees. They are to focus strictly on teaching. New full-time faculty is also provided the curriculum which includes class content, course outlines, individual class objectives, and exams. They can modify the content as long as the content follows the course outlines and SLOs.

Part-time faculty is required to attend an on-campus part-time faculty meeting once a semester. They receive professional development hours for their attendance. All part-time faculty receive a copy of the part-time clinical faculty handbook which was developed by the nursing faculty. There is an experienced part-time faculty member assigned as a mentor to new and newer part-time faculty. Part-time faculty are also mentored by the lead instructor for the course for which they are teaching clinical. The lead instructor communicates with the part-time faculty member weekly and provides guidance and assistance where needed.

Curriculum and Assessment

Curriculum and assessment are on the agenda of each nursing faculty meeting (held monthly in Fall and Spring semesters) and in-depth discussion of these issues happens annually at our nursing faculty retreat each June. Faculty discuss exam weighting and exam blueprints (types of questions, rigor, styles of questions) ensuring the program is adequately preparing students for subject mastery The National Council Licensure Examination (NCLEX-RN).

Consistency

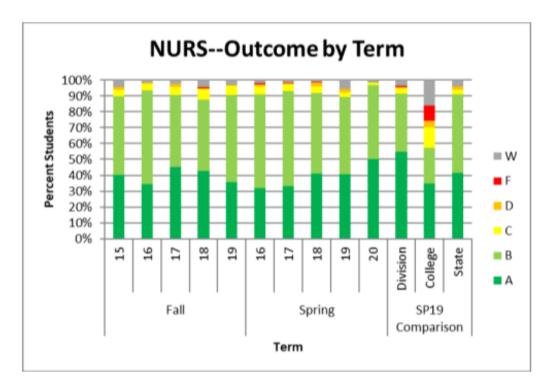
All sections for each course are taught by the same Lead Faculty and all sections of each course work under the same syllabus (apart from the course calendar and adjunct faculty/clinical facility information which may vary between sections). Therefore, all assessments and rubrics remain the same between sections. Core areas to be taught are determined by the requirements of the California Board of Registered Nursing (BRN), The National Council of States Boards of Nursing (NCSBN) and the licensing examination (NCLEX) test blueprint.

2.5 Referring to the Grade Distribution Summary graphs (see Appendix 1), comment on how your department patterns relate to the college, division and statewide patterns. For course-by-course graphs, provide an explanation for any courses with different grade/success patterns than others. This may relate to major's courses vs GE, first-year vs second-year or basic skills vs transfer. Please describe how the department handles any unusual grading patterns. If you have any information that allows calibration of your grading data to external standards (performance of your students on standardized tests or licensing exams, transfer and/or employment success) please provide those to us and explain the connection.

Grade Distribution

The majority of students entering the nursing program receive an A or B in their courses. Nursing students tend to be "overachievers." They wait a long period of time to get into the program, and once they are admitted, they work extremely hard to obtain good grades. In examining the grade distribution by course and faculty there are no apparent trends that are concerning (See Table 2.5).





2.6 If applicable, provide a comparison of the retention and success rates of distance education (online) sections (including hybrid) and face-to-face sections. What are your department policies on course delivery method? Is there anything in the data that would prompt your department to make changes?

Course Types

We do not have multiple section courses. There is currently only one course in the nursing curriculum that is approved for distance education (DE), NURS 118 Nursing Pharmacology. All first semester students are in the single section offered each semester. This course design is due to the rigorous schedule of the concurrent course, NURS 120 Fundamentals of Nursing which requires long hours both in on-campus lecture and lab as well as at the clinical site. The course was being taught in a hybrid format prior to COVID-19. Using DE modalities, including both synchronous and asynchronous class meetings and assignments, lends flexibility to the learner to complete the course around their already full learning schedule. There have not been any retention issues related to NURS 118 being delivered in a distance education or hybrid format.

The Preceptored Patient Care course (NURS 235) is offered in a hybrid format. This course is a preceptorship, which means the students work 96 hours, eight nursing shifts, alongside a practicing RN in a variety of clinical settings. Due to the nature of the preceptorship and the varying schedule of the hours the students work, it was often very difficult for students to come to class once a week after working a 12-hour night shift. Making this course into a hybrid format allows students who are working nights the flexibility of obtaining the majority of the content online. This course will be removed from the curriculum after the Fall 2021 semester.

Course Delivery Policy

Prior to Covid-19, the general policy for all classes apart from the two mentioned above was that they were delivered in person, twice weekly. Instructor illnesses or emergencies would have been the only exceptions. Beginning in March 2020, all classes took place on Zoom. Anecdotal evidence has shown that this has been a successful delivery method, and it will be continued into 2021. Future data analysis may give us a better idea of the effectiveness of online classes, which may prompt the department to make changes, but we expect to go back to face-to-face classes as soon as it is safe to do.

2.7 If *applicable*, include the list of courses that have been formally articulated with high schools. Describe any articulation and/or curricular collaboration efforts with K-12 schools.

This section is not applicable to the Nursing Program.

2.8 Please describe how the program ensures that articulations are current. Identify any areas of concern or additional needs that your department has about articulation with four-year institutions.

The nursing program has articulation agreements with San Diego State University, University of San Diego, Grand Canyon University and Point Loma Nazarene University.

In nursing, all courses are transferable to the California State University (CSU) schools. Any student who successfully completes these courses, can use the units as elective credit. Due to the nature of Nursing, there are no current course-to-course articulations with CSU or University of California (UC) schools. Additionally, the California Community Colleges prepare students to be admitted into Nursing programs at CSU and UC by offering and articulating lower division program prerequisites. These courses are typically found in other departments including English, Communication, Psychology, Chemistry and Biology. Consequently, the courses in Nursing are satisfactorily articulated.

The nursing department ensures course outlines and current textbooks are up-to-date, a requirement for facilitating articulations. We work closely with the college's articulation officer to satisfy requirements and address any questions that arise from students. We do not currently have any concerns regarding articulation with other institutions.

SECTION 3 – STUDENT LEARNING OUTCOMES (SLOs)

3.1 Over the course of the last Program Review cycle, how has your department used the results of course level (referred to as SLOs or CSLOs) and Program level (PSLOs) learning outcomes assessments? Please respond to both prompts below.

The nursing program has been responsible for assessing SLOS since its inception. The California Board of Registered Nurses (BRN) and Accreditation Commission for Education in Nursing (ACEN) require programs of nursing to track student learning outcomes (SLOs) and overall program outcomes. The nursing program is unique in that they have leveled their SLOs which are tied to the program philosophy and curriculum framework which supports a curriculum that progresses from simple to complex. The SLOs are reflected in the clinical evaluation tool and class objectives, and multiple measures of evaluating student success are in place. Additionally, students complete a course evaluation at the conclusion of each course throughout the program, evaluating both the didactic and clinical components of the course.

3.1a: How have you used the results of CSLO assessments to inform adjustments in courses? How have you assessed (or how will you assess) the success of these adjustments?

The nursing program evaluates their SLOs in fall for first-year nursing students and every spring for second-year students as recorded in TracDat. Data is reviewed and benchmarks are assessed each year at the faculty retreat and modified as necessary. With all SLO benchmarks being currently met, the faculty discussed the need to raise the benchmarks, but after discussion decided to leave them as they are in light of the extremely successful NCLEX pass rates of our graduates. The faculty view these benchmarks as realist and reasonable.

The nursing staff review the leveled SLOs and leveled clinical evaluations tool yearly at the faculty retreat.

Course evaluations are reviewed by lead faculty at the conclusion of each course offering. If any item receives 25% or greater dissatisfied or highly dissatisfied responses, an action plan is initiated by the faculty to remedy the situation. These action plans are kept by the department and all course evaluations and action plans are reviewed yearly at the faculty retreat to address any issues.

One issue brought to light by these evaluations was the lack of appropriate patients in the neuro clinical rotations. We were unable to secure neurology floors at the clinical sites due to the short nature of the neuro portion of NURS 222 only being four weeks and the two sections of the course did not run the neuro portions back-to-back. We were therefore left with what was available for clinical rotations for that course, usually general medical floors where the students might get to care for a post-stroke patient, and could practice neurological assessments on non-neurologically impaired patients, but it was not an ideal rotation to see the clinical symptomatology the students were learning about in class. We did increase the simulation

experiences and tried to find float experiences in the clinical sites for the course, but it did not cover the gap appropriately. This was one impetus for the change in curriculum the department is currently going through (outlined in Section 2). We researched the curriculum of all of the other ADN programs in CA and found they did not pull out the neurology course separate from their leveled med surg courses. Through an in-depth look at the content taught in each course, the faculty reorganized the med surg content, including the neuro content, into the newly renamed Nursing Fundamentals, Med Surg 1, Med Surg 2, and Med Surg 3 courses (previously Fundamentals of Nursing, Perioperative Nursing, Nutrition and Metabolic Nursing, and Cardiac Care Nursing). Additionally, NURS 222 added content in ambulatory care, meeting industry standard in much of the CA ADN programs' curriculum.

Due to the COVID-19 situation, the roll-out of the new curriculum has been delayed. To date, the new pharmacology, NURS 120, and NURS 130 curriculum has been implemented. Full implementation will be completed in Spring 2022. We will continue to collect and analyze course and clinical evaluations as well as SLO and PSLO data to validate changes and make additional adjustments as necessary. Due again to COVID-19, only the courses that ran in their entirety during the first 8 weeks of the semester were able to be completed. The remaining 8-week courses, along with the 12- and 16-week courses had to be suspended and were conducted in Fall 2020, so complete assessment data was not available in Spring 2020. Despite the challenges and postponements of the COVID-19 situation, the department did not see an increase in needed action plans for any of the courses taught in Spring 2020 or Fall 2020.

3.1b: How have you used the results of PSLO assessments to inform adjustments to degree and/or certificate programs? How have you assessed (or how will you assess) the success of these adjustments?

Discussion of current status of program outcomes occurs at each faculty meeting and in-depth discussion of any trends occurs at the yearly faculty retreat. Currently all PSLOs are being met and exceeded at set benchmarks (which are set higher than state averages). Yet we remain vigilant in looking for methods to help our students achieve expected outcomes. For instance, if it is noted in one of our meetings that a student has not taken their licensure exam within the few weeks after getting their authorization to test, one of the faculty members who had a good rapport with the student will reach out to see if there is anything the student might need.

3.2 What general trends or patterns do you see as you review your department's analysis of its SLO and PSLO assessments since your last program review? (NOTE: You may want to provide a synthesis of responses to question 3.3 in your Annual Unit Plans.)

The department has consistently met or exceeded benchmarks for SLOs and PSLOs since the last program review.

The one area in which we have dipped to just meeting the benchmark has been in retention/program completion rates. Our cohorts are small (maximum of 40 students) so the loss of even a couple of students during their program has a significant impact on our attrition rates. We have spent a significant amount of time in both faculty meetings and during faculty retreats examining this issue and brainstorming potential interventions. There are no specific trends in why students leave the program. Some are due to academic difficulties, some are due to students being admitted to a different program they had been waiting for after beginning our program, and others are from a wide variety of personal reasons that are not compatible with the rigorous schedule of clinical and classroom time, still others find the field is just not the right fit for them personally.

For those who were academic failures, we have gone back and analyzed admissions procedures from pre-requisite requirements to Test of Essential Academic Skills (TEAS) scores. Our admissions processes were found to be in line with local industry standard and are realistic and reasonable. Our Student Success Advisors (SSAs) keep detailed data reports and follow any admitted students that are identified as "at risk" due to test scores or prior academic performance. Those students have extra meetings with the SSAs at the beginning and throughout the program to ensure they have the support they need to maximize their potential in the program. Our 2 SSAs provide a full-time available schedule to all students in the program who may need assistance with issues anytime during their enrollment (academic, personal, financial, etc.).

SSAs are an integral component of our structured remediation program (students may be placed on a remediation plan for academic performance, professional conduct, or difficulty in clinical skills). These plans are put in place to identify and correct behaviors that threaten the student's standing in the program.

All students entering the nursing program attend a mandatory New Student Orientation which introduces them to the program expectations, ensures they understand all procedures for registering for courses, allows them to meet their first semester instructors, and exposes them to a panel of current students for a question-and-answer session. Additionally, the SSAs provide a one-day "bootcamp" to introduce incoming students to services such as financial aid, the Accessibility Resource Center (ARC), Gizmo's kitchen, tutoring, and other resources. SSAs can assist in referrals to the ARC at the beginning of the program to ensure students have resources and accommodations to help in their success in the program.

Any student who exits the program completes an exit interview with either the Director or Assistant Director of Nursing. The reason for the departure is discussed with the student as well as processes for re-entry if the student wishes to re-enter the program

in the future. These reports are kept in the department so we can analyze any trends leading to students exiting the program. **Table 3.1** illustrates program completion rates.

Table 3.1

| Program Com | pletion Rates |
|--|--|
| Benchmark: Program completion rates withing 6 se | emesters will be 80% or higher |
| Fall 2014/Spring 2015 | 83.7% |
| Fall 2015/Spring 2016 | 80.0% |
| Fall 2016/Spring 2017 | 84.0% |
| Fall 2017/Spring 2018 | 93.0% |
| Fall 2018/Spring 2019 | 88.0% |
| Fall 2019/Spring 2020 | Pending (no Spring 2020 graduates d/t COVID) |

3.3 What implications do these results have for your curriculum, both at the course and program level? What support (time, professional development, curriculum approval process, etc.) will you need in order to respond to these implications

We plan to continue to have our two full-time SSAs through the Enrollment Growth and Retention grant.

3.4 What changes has your department made to its SLO and PSLO assessment cycles (aka the 6-year plan) (e.g., changes in timing of assessments to accommodate curricular changes, addition/deletion/revision of SLOs/PSLOs, intentional delay or acceleration of the collection of assessment results, etc.)? (NOTE: these changes may be documented in section 3 of your Annual Unit Plans.)

At this time, the department has not made any changes to the assessment cycles.

3.5 Based on your answers to questions 3.1 – 3.4 above, what assessment cycle will your department follow to ensure that results of its SLOs and PSLOs are collected and available for use in planning? (Note: Grossmont's Outcomes Assessment Team strongly recommends collecting course outcomes data in the first semester the course is offered, or after a change is made, in order to have baseline data.)

The department will continue to measure SLOs for first-year courses at the end of the fall semesters and the second-year courses at the end of the spring semesters. We will continue to collect course evaluations and complete action plans (as needed) at the completion of each course. Our accreditation and licensing body require ongoing assessment of the program which is accomplished through meetings (alternating between accrediting bodies) at the conclusion of each faculty meeting and again at the yearly faculty retreat each June.

3.6 What do the results of your SLO work tell you about the progress you made toward your program goals? How will they inform your goals moving forward?

Through examination of our SLOs, PSLOs, and course and clinical evaluations, we were able to modify and enhance our curriculum to meet the current face of healthcare in the communities our graduates will serve. The faculty prides itself on matching the curriculum to current, evidence-based practices in the field of nursing.

Statistics of graduates' NCLEX pass rates affirm meeting the benchmarks of the SLOs is preparing our gradates for the licensure examination. Responses from graduate and employer surveys affirm that meeting the SLO and PSLO benchmarks prepares our graduates to be successful in the nursing field.

As we continue to fully implement this new curriculum, we will continue to examine SLO and PSLO data to ensure we are meeting the high standards expected of the nursing department and meeting the needs of students who will be entering a demanding workforce in a post-pandemic environment.

SECTION 4 - FACILITIES AND SCHEDULING

PURPOSE OF SECTION 4.1 - 4.4: To determine how departments utilize various campus services and the impact on student access (consider facilities, scheduling, campus resources and technology).

4.1 List the type of facility spaces your department/program utilizes for instruction. This can include on- campus, off-campus, and virtual.

The Nursing Program is located in Building 34, the Health and Science Complex, which opened in 2010. This building contains 52,000 square feet, of which 10,597 square feet is dedicated to the nursing program. The nursing classrooms and labs are contained on the second floor of this building. This building is shared with four other Health Professions programs. These include Cardiovascular Technology, Respiratory Therapy, Occupational Therapy Assistant, and Orthopedic Technology programs. Each program has dedicated classroom space.

Seven classrooms are available for nursing classes. These classrooms are spacious, air- conditioned and are adequate to meet the classroom needs. All classrooms have the following technology: "smart" carts with computers allowing projection onto large screens any type of audiovisual instructional aides, overhead projectors, high definition document cameras, projectors, I-clicker connections, tables with laptop connections for each student, and WiFi. Certain rooms have a document camera and a video camera for the recording of classes.

Since the COVID-19 pandemic, almost all of our class meetings have been managed via Zoom. All faculty have been given Zoom accounts with unlimited access through CCC Confer. Instructors set up their own classroom meetings, virtual simulations, and office hours through Zoom and students have no trouble accessing them. Students were surveyed prior to the initiation of classes offered through Zoom to identify any potential technology needs. Students were referred to Student Services for financial assistance through the CARES act as needed. Faculty are able to record classes so that if a student has an excused absence, they are able to access the recording so they don't miss any content.

There is a 10-bed fundamentals lab (Room 213) which is used for first semester skills lab. There are cameras placed strategically in the classroom and microphones above each bed for digital recording of students performing nursing skills. There is a 4-bed intensive care unit (Room 214) with high-fidelity mannequins and a digital recording system. In room 202 there is a 6-bed simulation lab with a control room. There is a phone in the control room where a faculty member is present to run the clinical scenario. Students are required to call the physician and simulate the clinical experience. The mannequins and simulators are widely used throughout the Nursing Program to teach numerous nursing skills as well as to practice simulated nursing care scenarios. There are two high-fidelity simulation labs for a total of ten beds. All students float to the simulation lab in each semester. The students participate in high-risk low-volume emergencies. The faculty coordinates with the Health Science Technicians for room scheduling and equipment setup. The facilities are more than adequate, and all labs are designed to replicate hospital rooms as closely as possible.

Limitations of Access: Clinical Facilities

While the campus facilities and equipment are more than sufficient, access to clinical sites is very limited. Hospitals are inundated with students Mondays through Sundays on both the day and

night shifts. We have had clinical relationships with Sharp Healthcare, Alvarado Parkway Institute, Kaiser, UCSD, Rady Children's, Alvarado, Kaiser, UCSD, and Scripps hospitals, as well as several outpatient clinics and facilities. Due to the limitation of hospital and clinic sites, program growth is limited. Presently the nursing program admits 40 students in both the fall and spring semesters.

Up until March 2020, we have always had stable clinical placement in facilities that enable the students to meet their clinical course outcomes. The nursing program is a member of the San Diego Nursing Consortium which is responsible for the request and placement of nursing students in clinical sites. The San Diego region is heavily impacted with a large number of nursing students and if this program were seeking a new clinical site, an impact on the current site would be assessed prior to placing the students. This, however, could be challenging as clinical sites in the San Diego region are very difficult to find. For example, for the 2019/2020 academic year, there were over 10,000 requests for clinical sites for Nursing and Allied Health students within the San Diego area, with close to 7,000 of the requests made specifically for nursing students. This includes requests for primary groups of 8-10 students as well as preceptorships placements.

The Nursing Program submits the request for clinical placement electronically through the Consortium website and the clinical facility notifies the school electronically if they are accepted or rejected for that placement. Currently there are 22 schools with health education programs and approximately 140 major health care facilities and other health care agencies in the Consortium. The system has been in place for more than 20 years in San Diego. It is because of the high number of nursing and other health-related students in this region that Grossmont College School of Nursing has no plans to expand the program.

Additionally, students entering the nursing program are required to have a criminal background check and drug screen. If a student has a criminal history, they may be denied a clinical placement by a facility, which may impact their ability to graduate from the nursing program.

Limitations of Access: COVID-19

The scarcity of clinical placements became especially evident during the COVID-19 pandemic. COVID-19 greatly impacted our students' access to learning as we were forced to suspend clinical rotations in mid-March 2020. Because the BRN requires that didactic and clinical components of all nursing classes run concurrently, we were forced to put our program on hold at that time. In other words, we could not proceed with online classes and plan to make up clinical hours later; they must take place at the same time. We had no choice but to suspend the program and not take in a new cohort in Fall 2020. This essentially held all current students back one semester. The second half of the Spring 2020 semester was completed in Fall 2020, when we were given very limited access to some of the facilities. Some students were able to get half of their clinical hours in at the hospitals and complete the rest via virtual simulations. Other students had to complete their direct patient care in non-hospital alternative clinical settings. In a great show of teamwork and sacrifice for the greater good, the first semester professors made the decision to give up their limited clinical spots to the fourth semester students so that they could get the hours in that they needed to graduate. Due to all these irregularities, the faculty is aware that our current students, while getting the minimum hours the BRN mandates, will not be getting the typical strong clinical education for which Grossmont College School of Nursing is known.

4.2 Are the spaces listed in 4.1 adequate to meet the program's educational objectives? Yes X No ___

- o If you checked 'yes', please explain how your department/program utilizes facility space so your department can meet its educational objectives. Please provide an explanation of specific facility requirements of your program, and how those requirements are being met.
- o If you checked 'no', please explain how your department/program is not meeting its facility space needs to adequately meet its educational objectives. Please provide an explanation of specific facility requirements of your program, and how those requirements are not being met.

The physical spaces on campus are more than adequate to meet the program's education objectives. The Nursing Program has six separate classes—one in both the first and fourth semesters, and two apiece in the second and third semesters. They are rarely all on campus on the same day, but even when they are, with seven classroom and lab spaces, there is plenty of room to accommodate all needs.

We have met frequently with representatives from the clinical facilities to arrange clinical rotations which enable the students to meet their educational objectives. As mentioned in 4.1, the limited clinical facility availability had been adequate up until March 2020. At that time we had to stay within the legal parameters set by the state BRN, combined with the impacted hospitals and the restricted college facility resources, (i.e. sim lab), which were set in place to protect the health and safety of students and faculty. Therefore, we had to put the entire program on pause in March 2020 until things could be resumed in the fall. Under normal circumstances, however, our spaces are adequate to meet the program's education objectives.

4.3 What proactive steps have you taken with regards to facility and scheduling to improve the ability of your department to meet the educational objectives of your program and ensure that students can complete their program in a timely manner?

Again, there are plenty of classroom and lab spaces for our students, so it is never an issue. Our Health Science Technicians and the Nursing Department Secretary help coordinate and schedule classroom spaces, and when a conflict arises (usually due to a special event), professors are flexible and are happy to switch rooms to accommodate others' needs.

Re: COVID-19 clinical placements, our Clinical Coordinator, Interim Associate Dean of Nursing, and Assistant Director of Nursing have been working tirelessly since March 2020 to find alternate clinical sites and to get back into the facilities with whom we have ongoing relationships. It has been very challenging, but we are hopeful that things will be closer to normal in the Spring or Fall semesters of 2021. However, healthcare is currently a very uncertain and frequently changing situation.

4.4 Identify and explain additional needed technological and equipment resources that could further enhance student learning in these spaces.

Several companies have been furiously working to get their virtual simulation products to market since the pandemic and we have all been inundated with their emails. All current students and faculty have access to V-Sim through The Point, which is part of our online textbook resources. This is what has been used for virtual clinical simulation in Fall 2020, and the faculty has been sampling various other vendors' offerings, like Kaplan's i-Human, Lippincott's DocuCare, and Laerdal's Online Simulation programs. As clinical conditions continue to be uncertain and changing, Nursing may need to purchase other programs or more account logons to accommodate the number of students who will need to access these offerings on a regular basis to complete the program.

Teaching and learning at home due to COVID-19 have presented certain technological challenges as well, such as a lack of adequate computer components, speakers, webcams, etc. Some students do not have adequate or sometimes any internet access. With libraries and other public places being closed in Fall 2020, students who may have used these for wireless access have been left at a disadvantage. This has been dealt with by getting grants to supply laptops, components, and signal boosters as needed to both faculty and students.

PURPOSE OF SECTION 4.5: To have departments determine, based on their review of waitlist data and student feedback, if their program could serve more students if it had more facility resources available and/or used them differently.

4.5 Are students trying to access your program impacted by the facility spaces listed in 4.1? Yes X No X

- o If you checked 'yes', please explain how students are being negatively impacted by unmet facility needs experienced in your department/program. Please provide some specific examples.
- o If you checked 'no', please explain how your department/program is actively managing its facility space needs to meet its educational objectives and provide student access to your program.
 - Please provide some specific examples.

This is tricky to answer because again, there are plenty of classroom and lab spaces for our students, so the issue is not with Grossmont College facilities. The limited clinical facility availability is completely out of our control, but that does have a limiting effect on our program. Representatives from our faculty are always at the nursing consortium meetings, making the case for Grossmont to be awarded clinical placements. However, there are only so many placements available to begin with, and there are far fewer now in the age of COVID-19. There are 22 schools in the county that are also vying for those slots, both nursing and other programs of allied health. The California Board of Registered Nursing (BRN) dictates how many clinical hours each student must have in each semester, so the number of students we can take in per semester is strictly governed by the number of clinical placements available. There is never a surplus of clinical placements.

Admission to the nursing program is based upon the Multi Selection Criteria from the State Chancellor's office. Students wishing to apply to the program must have science pre-requisites completed; have a grade point average (GPA) of at least 2.5 in the pre-requisite science courses, and obtain a minimum score of 62% on the Test of Essential Academic Skills (TEAS) test. There are two application periods per year for the nursing program. Each application period differs with those students applying so the total admission point range can be relatively higher or lower than the previous cohort. Thus, there is no minimum number of total points to guarantee admission to the program. We simply take the top 40 candidates out of hundreds of applicants. The number of applicants vary, but there have been record numbers in the last few years, mid-200s to mid-300s for 40 slots. Because of this system, there is also no waitlist. There is a new batch of applications each semester, and the top 40 candidates are accepted. The others are welcome to reapply later.

4.6 If applicable, please include any additional information you feel is important regarding facilities and scheduling that was not included above including non-classroom spaces such as offices, storage, preparation areas, open workspaces for students/tutoring, etc.

Classroom and preparation space are adequate, but storage space is at a premium. With all the programs housed in our building, each having their own supplies and equipment, some are having to be stored in classrooms. Office space is adequate. All full-time faculty and the Student Success Advisors have semi-private offices, shared with one peer. Down the hall from the full-time faculty offices there are open workspaces/cubicles that are available to part-time faculty members to use for their office hours to complete work or meet with students. Faculty frequently meet with students one on one or in groups in their offices for tutoring. The second-floor lobby of Building 34 serves as a meeting and study spaces for groups of students. They congregate there before classes or throughout the day to study together or work on group projects. They also have the computer lab for this, just off the main lobby. Overall, the facilities available to the Nursing Department are more than adequate.

SECTION 5 – STUDENT EQUITY AND SUCCESS

PURPOSE OF SECTION 5:

- To determine if student enrollment in your program is robust and if students are enrolling in your program in equal representation to the general Grossmont student population.
- To have the department examine student success and retention overall for your department and disaggregated by ethnicity, age, gender.
- To have departments explain what they have done to improve success for all students while maintaining academic rigor.
- 5.1 What are the identifiable patterns with regards to overall trends in enrollments in your department? Explain what is causing these trends (e.g. campus conditions, department practices). Once you have identified and explained your enrollment patterns, then address what your department has done/is doing to address identified issues. Examples of any changes you made to manage enrollment are encouraged.

The nursing program proudly serves a very diverse population, in terms of gender, age, and ethnicity. The following graphics and descriptions will show first our enrollment data by these categories. Further discussion on these variables will be offered when needed.

At the writing of this self-study (Fall 2020), there are 129 students enrolled in the nursing program. Normally, the program invites 40 students in fall and 40 students in spring. However, we do not always have a full cohort of 40 students because at times, incoming students change their mind a week before or a week into the program. To overcome this challenge, we have modified some of our processes to have as many students in a new cohort as possible. As a result, the enrollment/admission patterns for the program have remained relatively stable over the past five years. Table 5.1a demonstrates the annual and term-by-term nursing admission/enrollment patterns over the past five years.

Table 5.1a: Annual and Term-By-Term Nursing Admission/Enrollment Patterns Fall 2015-Spring 2020

| Cohort Groups | 2015 | 2016 | 2016 | 2017 | 2017 | 2018 | 2018 | 2019 | 2019 | 2020 |
|------------------|------|------|------|------|------|------|------|------|------|------|
| ADN | 36 | 36 | 40 | 39 | 38 | 38 | 39 | 38 | 40 | 40 |

Gender

The nursing program is predominately female and has admitted anywhere from 15% to 30% males over the last five years. The overall average is 23%, as seen in Chart 5.1b. While this is significantly lower than college-wide numbers, it is on par or better than national averages for men in nursing. In 2010, the American Association for Men in Nursing (AAMN) launched an initiative to increase the number of men in nursing programs and in the workforce to 20 percent by 2020. We are right on track with that, according to our admission data.

Gender - fa15-sp20

Male
23%
Female

Chart 5.1b: Admission Data by Gender, Fall 2015 to Spring 2020

Age

As seen in Chart 5.1c, the bulk of our students (67%) are admitted in their twenties, with 40% being 25 and younger. The percentages represented decrease with age with 25% being in their thirties, 7% in their forties, and just 1% in their fifties.

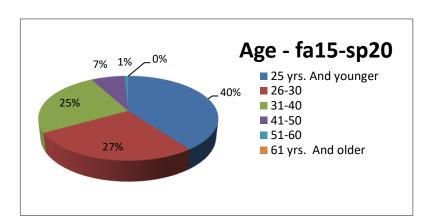


Chart 5.1c: Admission Data by Age, Fall 2015 to Spring 2020

Ethnicity

While the bulk of the nursing program remains Caucasian at 44%, Hispanic representation is high at 20%, with Filipino and Asian or Pacific Islander heritage following at 12% and 10% respectively. The demographics of the program have changed slightly over the past several years (Chart 5.1d). There has been a slight decline in the percentage of African American students enrolling in the program and a slight increase in the percentage of Filipino and Hispanic students. During outreach events, every effort is made to increase the diversity among students of the Grossmont College nursing program. The demographics of the program do, however, reflect the community at large in this area of San Diego County. As a result, we have seen an increase in the Arabic/Chaldean student population in the program, who commonly identify themselves as Caucasian/White.

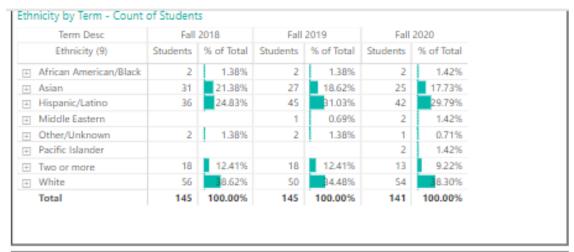
Ethnicity - fa2015-sp2020 African American 1% 2% 1% American Indian 0% 4% ■ Filipino 6% 12% ■ Asian or Pacific Islander 10% 20% 0% Asian Indian (new 2012fa BRN report) Caucasian ■ Hispanic 44% ■ Native Hawaiin (new 2012fa BRN ■ Mixed race (new 2012fa BRN report) Other Unknown

Chart 5.1d: Admission Data by Ethnicity, Fall 2015 to Spring 2020

Snapshots

Chart 5.1e shows a "snapshot in time" of what our student body looked like during the fall semesters of 2018, 2019, and 2020. It shows the breakdown by ethnicity, gender, and age during those times.

Chart 5.1e: Student Demographics, Fall 2018, 2019, and 2020



| Term Desc | Term Desc Fall 2018 | | Fall | 2019 | Fall 2020 | | |
|---------------|---------------------|------------|----------|------------|-----------|------------|--|
| Gender Desc | Students | % of Total | Students | % of Total | Students | % of Total | |
| Female | 116 | 80.00% | 113 | 77.93% | 107 | 75.89% | |
| Male | 27 | 18.62% | 31 | 21.38% | 33 | 23,40% | |
| Other/Unknown | 2 | 1.38% | 1 | 0.69% | 1 | 0.71% | |
| Total | 145 | 100.00% | 145 | 100.00% | 141 | 100.00% | |

| Term Desc | Fall 2018 | | Fall 2019 | | Fall 2020 | |
|---------------------------------|-----------|------------|-----------|------------|-----------|------------|
| Student Age at Snapshot - Band4 | Students | % of Total | Students | % of Total | Students | % of Total |
| 18-20 | 3 | 2.07% | 2 | 1.38% | | |
| 21-24 | 40 | 27.59% | 38 | 26.21% | 36 | 25.53% |
| 25-29 | 46 | 31.72% | 36 | 24.83% | 41 | 29.08% |
| 30-39 | 43 | 29.66% | 53 | 36.55% | 47 | 33.33% |
| I 40+ | 13 | 8.97% | 16 | 11.03% | 17 | 12.06% |
| Total | 145 | 100.00% | 145 | 100.00% | 141 | 100.00% |

5.2 Discuss trends in student success and retention overall in your department and explain these trends (e.g. campus conditions, department practices). Also examine the success and retention data disaggregated by gender, age and ethnicity. For any groups that have success rates in your department at lower or higher than college-wide describe what factors you think cause those patterns. Provide examples of any changes you made to improve student success/retention, especially for groups that have equity gaps. [Data and a summary of notable patterns will be provided by the Program Review Data Liaison]

In order to address equity gaps as early as possible within the program, all incoming students are evaluated on several factors during their initial appointment with Student Success Advisors (SSA). These areas include the number of hours worked per week, safety and security of home environment, support system, access to transportation, financial stability, and any need for on- or off-campus referrals. Any concerns in these areas are addressed and resources provided. Students who are identified as higher risk are recommended to meet regularly with SSAs for ongoing support.

Gender

In terms of success rates by gender, over the last five years men have had a course success rate of 95% in our program (See Chart 5.2a). That is just below the women's success rate of 96.3% and well above the national average. One factor that may have helped men's success in nursing school is having male faculty members who can serve as role models and are invested in their students' success. Since men and women learn and communicate differently, every effort should be made to recruit and retain male faculty members so that men in the program have professors who "speak their language" and can relate to some of the struggles they may have as a minority in the field.

In 2010, the American Association for Men in Nursing (AAMN) launched an initiative to increase the number of men in nursing programs and in the workforce to 20 percent by 2020. We are right on track with that, according to our admission data, which has averaged 23% over the last five years. The number of males admitted to the program increased and has stayed relatively consistent since Fall 2013, when faculty members Peter Brooks and Tom Oertel developed an AAMN San Diego chapter, which met monthly with guest speakers and discussions of issues especially important to men in nursing. The AAMN chapter played a role as a mentoring program that was active until Fall 2017. The chapter board worked hard to continue meetings, but as attendance declined, the group eventually disbanded. Dr. Oertel retired but Dr. Brooks remains and meets with all male students in his second semester class to get to know them, hear their concerns, and offer support and mentorship. The goal is to first assess why men tend to be less successful in nursing school nationwide and discuss strategies to promote their success. Many of them continue to meet with Dr. Brooks throughout the program and even after graduation. As a reflection of these efforts, more than 90% of the males entering the program have graduated.

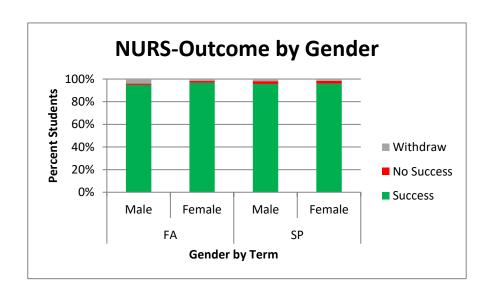


Chart 5.2a: Course Success Rates by Gender, Fall 2015 to Spring 2020

Age

Chart 5.2b shows the course success rate by age. In the past five years we have admitted only one student who was 19 years old or less, and they had a 100% success rate with all of their courses. Those who were aged 20 to 24 had a 96.9% success rate. The next two age groups, 25 to 29 and 30 to 49 had different admission and success numbers, but the exact same rate of success at 96.3%. The students in their fifties or higher had the lowest rate of success at 84.4%. There are few students in this age group and they typically struggle somewhat with technology, the speed of the program, and being a generation removed from the average student. The faculty does their best to support older students, but sometimes it is not enough. According to the data from 2015 to 2020, more withdrew than failed.

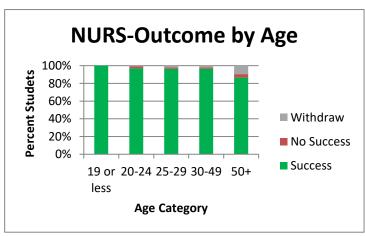


Chart 5.2b: Course Success Rates by Age, Fall 2015 to Spring 2020

Ethnicity

The success rates for all ethnicities have improved since fall 2015. The continued retention and increase in hours of our SSAs with grant funds has helped this effort. The nursing program continues to participate in outreach events for all groups. Course success rates vary by ethnicity, but all remain in the nineties for the nursing program (Chart 5.2c). Hispanic students have the highest overall success rate at 97.2%. Next are Mixed Race and Caucasian students at 96.7% and 96.4% respectively. African American students had a 92.2% rate of success. Per the college data, Filipino, Asian, and Pacific Islander students are lumped together as "Asian," and they have the lowest course success rate at 91.7%. Faculty has noticed that Asian students tend to struggle with English more than their Hispanic classmates. This may be due to the recency of their immigration or the fact that many Hispanic students have grown up bilingual. Faculty have worked with students of all ethnicities and cultures in terms of professional communication and pronunciation, sometimes referring them to additional resources to improve their speech such as Toastmasters or other English or Speech classes at the college.

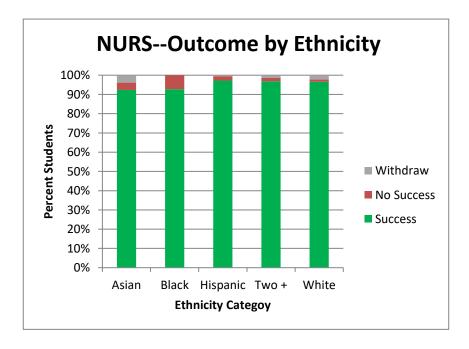


Chart 5.2c: Course Success Rates by Ethnicity, Fall 2015 to Spring 2020

It should be noted that not all withdrawals are due to failure and not all of these students should be considered "unsuccessful." In addition to academic difficulties, many students have made personal decisions regarding continuing in the nursing program, even though they have been successful from an academic standpoint. This may be due in part to the lack of knowledge about the role of an RN until they actually experience it in their first clinical rotation in the hospital setting. Many students come into the program thinking it is one thing and they soon find out it is another. Life events also happen such as a death or illness in the family or a spouse being transferred to another city. These events happen across age groups, genders, and ethnicities and do account for some of our so-called "unsuccessful" students.

5.3 Describe specific examples of departmental or individual efforts, including instructional innovations and/or special projects, aimed at encouraging students to become actively engaged in the learning process in their classes.

Nursing faculty teach using innovative teaching strategies. Students are responsible for reading the material prior to class. In some courses, a pre-class worksheet must be completed, or a podcast listened to prior to the beginning of the class period in an effort to engage the students in the material prior to class. Key elements from the content are discussed and students are then often assigned to a case study approach, small group work, or a simulated experience. Students are assigned at least one evidence-based project in every class and are required to do class presentations. Students are actively engaged in the classroom and their learning. Simulation also plays a critical role in teaching and learning. Pre-COVID-19, all students in every course experienced at least one day of simulated patient experiences. During COVID, it became upwards of four days in some classes. These methods of instruction promote learning for all types of learners.

Professors utilize podcasts, guest speakers, hands-on practice, role play, and lots of audiovisual material to reach all students in whatever their learning style. One of the biggest innovations our department has done to encourage active learning is IPE Day, which will be discussed in the next section.

5.4 Explain how the program incorporates opportunities for student engagement outside of class time and/or in collaboration with other departments (e.g. interdisciplinary course offerings, learning communities, internships, research projects, service learning, or participation in community events, tournaments, competitions, and fairs) to enhance student learning.

In association with the other Allied Health disciplines present in our division, the nursing program has developed an interprofessional education (IPE) advisory group which includes representatives from all the Allied Health programs. IPE allows students to learn with, from, and about each other. In this way, they understand what other members of the healthcare team do and learn how to efficiently and effectively organize care. IPE makes it easier for interprofessional teams to communicate and collaborate in the health care environment. It improves patient outcomes, leads to fewer preventable errors, reduced healthcare costs, and improved relationships with other professionals. This, in turn, leads to better understanding, increases knowledge, and leads to decreased workloads. Better interprofessional collaboration leads to better continuity of care and takes pressure off individual health care workers. Improving teamwork and collaboration in education leads to improvements in professional settings, which results in improved patient safety and outcomes. Better patient outcomes lead to greater patient satisfaction.

Best practice is to implement IPE early in healthcare education, so it is done on a small scale among the different programs we have. We are fortunate to have in our division programs for Cardiovascular Technology (CVT), Occupational Therapy Assistant (OTA), Orthopedic Technology (Ortho Tech), Registered Nursing (RN), and Respiratory Therapy (RT). The faculty's goals are to conduct and evaluate simulated interdisciplinary events so that all disciplines learn each other's roles and responsibilities and the value of teamwork. All programs have been involved in IPE on small and large scales since 2017. The RN students have taught the Ortho Tech students how to take blood pressure. The RN students also presented a class on the management of patients with multiple lines and tubes to the OTA students. The RN students have served as patients for OTA's scenario-based learning. RT students have taught the RN students how to identify adventitious breath sounds and the management of mechanical ventilation. Future plans include collaboration with the theater students for psychiatric mental health simulated experiences.

The most impressive thing that we have been able to do with IPE is our large-scale IPE Day. Since 2018 the IPE advisory group has annually produced a day-long simulation experience for students of all programs in their final semester or year of study. IPE Day provides different opportunities for students to practice the knowledge, skills, attitudes, and values necessary to demonstrate the four Interprofessional Education Collaborative (IPEC) domains of competency for IPE skills and knowledge development. These include (a) roles and responsibilities, (b) interprofessional communication, (c) teams and teamwork, and (d) values and ethics. The objectives for IPE Day run parallel to the IPEC guidelines: 1) Demonstrate interprofessional collaboration, and 2) Demonstrate specific discipline knowledge. Components of Objective One are met by exhibiting teamwork and communication, discussing and demonstrating values and ethics, and gaining knowledge of one another's roles and responsibilities. Components of Objective Two include showcasing one's discipline-specific skills, and then completing the proper documentation related to

what they had done.

One of the goals for IPE Day is to give healthcare students of one discipline the opportunity to become more comfortable with the other disciplines, and more confident when interacting with them as part of a united team. Students are randomly assigned in advance to teams with at least one member from each discipline. Their day begins with a thorough orientation, followed by team-building exercises, a values and ethics discussion, skills demonstrations, and a multidisciplinary live patient simulation. The students have the opportunity to work together during the team-building portion of the day, which consists of a series of games and activities designed to get the students used to working together and relying on each other. Later, they work as a multidisciplinary team in a real-world problem-based simulation, during which they also learn about each other's roles, responsibilities, and skills. The groups of students are given patient information during a briefing session. Two students in each group are selected to assume the roles of the standardized patient and family member, and faculty observe the interactions. The students negotiate time with the patient, sometimes combining their efforts and helping each other out where possible and appropriate. The scenario was designed to achieve the IPE goal of working collaboratively. The case is multi-phasic and unfolding in that some of the patient's behaviors and the standardized findings lead the team to discover that the patient's condition is declining. This sends the teams into varying degrees of chaos, causing them to change or abandon their plans, work together to figure out what is happening, and what they are going to do about it. Per their orientation instructions, the different disciplines are then expected to huddle together to summarize what they found from their assessments and treatments, discuss, problem-solve, and make a plan to move forward.

In a nutshell, IPE teaches real-world care and follow-through. Students look at the patient as a whole person as they see them through the lens of each of the different disciplines. At times this challenges their values and priorities, and what they think they know. IPE ultimately benefits patients by improving communication and teamwork, which optimizes patient outcomes, so this is a very important part of our program.

Nursing students also regularly participate in a multitude of community events. Students are required to complete four hours of community service each semester. The community service event must be approved by the nursing faculty and at many of the events nursing faculty participate as well. Examples of community service events include Operation Stand-Down, Kids Fest at the Grossmont Healthcare District, various blood pressure screening events, local health fairs, campus blood drives and flu and hepatitis vaccine clinics, to name a few. Community service provides students with the knowledge that once they become a Registered Nurse, they are expected to be involved in the community as part of the profession. The required community service is designed to meet the "lifelong learning" components of SLO number 7 and PLO number 4.

The nursing program has a very active California Nursing Student Association (CNSA) chapter that interfaces with the Associated Students of Grossmont College (ASGC). Club council meetings are attended by the officers of CNSA. As a group CNSA members participate in campus career and health fairs, blood drives, and are active members of the campus community. Some members attend the state CNSA conventions each year.

Students also participate in their own learning communities. The program provides open labs with Registered Nurses present for tutoring and peer-to-peer mentoring. Students interact with the English writing center, the Health and Wellness Center, the Accessibility Resource Center (ARC) and many other departments on campus. Many students participate in the Grossmont College School of Nursing Mentorship Program. With the adjustment to the nursing school environment, students entering the program are in need of mentorship from second year nursing students, which can also foster the collaborative nature of the nursing profession. All students entering first semester of the nursing program are assigned a second-year nursing student mentor. In the mentorship program, peers serve as facilitators of success. Both mentors and mentees achieve professional and personal growth while developing relationships with other nursing students. Mentees benefit from reduced anxiety, improved academic performance, and an expanded support system, while mentors develop leadership and professional skills and will receive recognition for their contributions to the program.

5.5 If state or federal licensing/registration examinations govern the program, please provide data and comment on student success trends.

All graduates of the nursing program must pass a National Council Licensure Exam (NCLEX-RN), developed by the National Council of State Boards of Nursing. Since Fall, 2015, greater than 95% of the Grossmont College nursing graduates have passed the exam on the first attempt. Since Fall 2017, 100% of the graduates have passed the exam on the first attempt. These outcomes are well above the national average and have been a noted strength of our nursing program.

5.6 If your program offers a degree or certificate in the college catalog, explain the trends regarding number of students who earn these degrees and/or certificates, including any changes that you have made to increase awards. Insert the "Degrees and Certificates" data table in this section. [This data table will be provided to you by the Program Review Data Research Liaison.]

The nursing program awards an Associate of Science in Nursing (ASN) degree. Presently the nursing program accepts 40 students each fall and spring semester for a total of 80 incoming students per school year. All graduates of the program in the last five years have received the ASN degree. If for some reason a student did not complete the requirements for the ASN degree, they may be able to get licensed, but they would not be able to obtain a higher degree in nursing or practice out of the State of California. Table 5.6 below shows the number of graduates per school year. Translating these numbers into percentages of incoming students who graduated with an ASN degree, in 2014-15 it was 87.75%, 2015-16 was 76.25%, 2016-17 was 72.5%, 2017-18 was 87.75%, and 2018-19 was 82.5%. The overall success rate for degrees for these five years is 79.75%. There was no graduating class in Spring 2020, and the Fall 2019 data is still pending.

Table 5.6: Degrees Awarded by School Year, Fall 2014-Spring 2019

| Department | Award | | 14/15 | 15/16 | 16/17 | 17/18 | 18/19 | 19/20 | Total |
|--------------------------------|--------------------------------|-----|-------|-------|-------|-------|-----------|-------------|-------|
| Cardiovascular Technology | Cardiovascular Technology | AS | 27 | 36 | 28 | 35 | 35 | * | 161 |
| | Telemetry/ECG Technician | COA | 26 | 0 | 0 | 11 | 12 | | 49 |
| Nursing | Nursing | AS | 67 | 61 | 58 | 67 | 66 | | 319 |
| Occupational Therapy Assistant | Occupational Therapy Assistant | AS | 22 | 19 | 21 | 21 | 20 | | 103 |
| Orthopedic Technology | Orthopedic Technology | AS | 29 | 23 | 14 | 33 | 24 | | 123 |
| | Orthopedic Technology | COA | 0 | 0 | 0 | 0 | 0 | | 0 |
| Respiratory Therapy | Respiratory Therapy | AS | 22 | 27 | 15 | 22 | 19 | | 105 |
| | Anesthesia Technology | COA | 0 | 0 | 0 | 0 | 0 | | 0 |
| AHN Division Totals | Associates | | 167 | 166 | 136 | 178 | 164 | | 811 |
| | Certificates | | 26 | 0 | 0 | 11 | 12 | | 49 |
| College Totals | Associates | | 1865 | 1972 | 2214 | 2609 | 2761 | | 11421 |
| | Certificates | | 1269 | 1198 | 1362 | 1492 | 1605 | | 6926 |
| | | | | | | | *Data not | yet availab | le |

5.7 If you have any information on what students who major in your department go on to achieve after they leave Grossmont, please share that with us. For example, where do they transfer and do they graduate on time? What careers do they pursue? What are starting salaries in the field? Do you know if they go on to employment in their field and professional success? What impact did Grossmont have on their lives?

As mentioned previously the School of Nursing has developed articulation agreements with secondary and post-secondary public and private schools in and out of California. Students are strongly encouraged to continue their education in pursuit of a Bachelor of Science in Nursing (BSN) or Master of Science in Nursing (MSN) degree. To assist the student at Grossmont College who wishes to progress to an upper division program, articulation agreements have been arranged by the College's Articulation Officer in the Counseling office between Grossmont College and several four-year colleges. Students are encouraged to only seek articulation with accredited schools of nursing. Both University of San Diego (USD) and San Diego State University (SDSU) offer advanced placement opportunities in the MSN programs for Grossmont College nursing graduates holding a bachelor's degree in an unrelated discipline. SDSU School of Nursing and Grossmont College have developed a partnership and an agreement which will facilitate guaranteed admission of qualified Grossmont graduates to SDSU's BSN program. A Pathway for Grossmont College nursing students is currently on both the program's website and SDSU nursing website. Many of the nursing students cross-enroll at SDSU during their time in the nursing program, meaning they are able to take some classes at SDSU before graduating from Grossmont.

Grossmont College also has an agreement with Point Loma Nazarene University (PLNU). In this agreement the nursing students can also "dual-enroll" in Grossmont and PLNU. All Grossmont College units will transfer to PLNU. Students will need an additional 36 upper division nursing units at \$500 per credit hour. They will receive credit for passing their NCLEX and complete their bachelor's degree in Nursing in 15 months. The total cost of the program including books will be \$18,000. PLNU provided a resource person on our campus Monday-Friday (pre-pandemic) and classes were held on the Grossmont campus one night a week. Currently they are all online like the majority of our partner schools. Many students are enrolled or have completed their BSN at PLNU.

Ohio University (OU) is dually accredited and also offers early enrollment to our students. Once Grossmont students complete their first semester, they may take up to two upper division nursing courses during the summer Early Start program. OU's 100% online RN to BSN tuition at \$243 per credit hour equates to \$7,533 for the required 31 units of upper level division nursing course work. Average program completion time is 10-24 months. Complimentary unofficial reviews are provided at the request of students to determine if additional general education or support courses are needed, which can all be taken at Grossmont College. OU has eight start dates per year and tuition is paid per class, rather than all up front or per six-month semester. This allows students to budget their education, and step in and out of the program as best fits their personal and professional needs. Many students are enrolled or have completed their BSN at OU and at least one is currently in a Family Nurse Practitioner (FNP) program there.

Students have also continued their education at many other universities around California, Arizona, Idaho, and Texas, among others.

The nursing program is a rigorous program with specific criteria for admission which was established by the State Chancellor's office in an effort to increase student success. The on-time completion rate for the nursing students since fall 2015 has ranged from a low of 77% in 2017/2018 to a high of 91% in 2018/2019. The on-time completion rate in fall of 2019 was 89%. In addition to academic difficulties, many students have made personal decisions regarding continuing in the nursing program, even though they have been successful from an academic standpoint. This may be due in part to the lack of knowledge about the role of an RN until they actually experience it in their first clinical rotation in the hospital setting. In an effort to help with this issue, the Student Success Advisors (SSA) offer a variety of informational sessions to students interested in pursuing a nursing degree.

Graduates of the nursing program have had a job placement rate of greater than 84% since the fall semester of 2015. The majority of graduates are employed in local health care facilities, although there are also some graduates who have moved to other states or cities within California and have been successful in obtaining jobs in those communities as well. The Grossmont College nursing program maintains a very positive reputation within the community, and many local healthcare systems are eager to hire our graduates. One of the deterrents to job placement has been the requirement from some hospitals that RNs have a BSN in order to meet the external optional credentialing criteria, "Magnet Status." As mentioned above, students are strongly encouraged to continue their education to obtain a BSN, and multiple resources have been made available to students, including an Education Fair organized by the department each semester with representatives from a wide variety of higher education organizations. The department also organizes an "Interview Day" each semester for the graduating class in which representatives from community clinical agencies as well as faculty and the SSAs conduct practice interviews with the students. The students prepare a professional portfolio in their final semester and present this to the interviewer while dressed in professional attire. The interviewer provides constructive feedback to the students in an effort to improve their interviewing skills and increase their confidence prior to their job search.

Nursing is one of the most diverse careers, so former students are working in all kinds of different environments. Some work in surgery, both in hospitals and outpatient surgery centers. Some care for patients after surgery on medical-surgical floors. A great number of our students, especially the men, tend to go to the ICU and emergency departments. Others work in hospice or long-term care facilities. Some work with the pediatric population and others with psychiatric patients. Nurses' opportunities are endless and our graduates take full advantage of them. Starting hourly wages in San Diego range from the mid-thirties to mid-forties, but can be higher or lower in different parts of the country.

The impact that Grossmont College of Nursing has had on students' lives is immeasurable and very different for everyone. A few graduates who were asked responded with the following quotes:

"Grossmont Nursing impacted my life in a positive way. It taught me the importance of safety, integrity, discipline, and prioritization. It helped me become a successful and safe nurse" ~ Lynette, Class of 2017.

"I would say it has had a great impact. In comparison to those who have their BSN, I would say I'm better equipped, with more nursing knowledge and better bedside care. I have my BSN now and I can safely say it hasn't really provided anymore knowledge than what I got from Grossmont" ~ Patrick, Class of 2019

"Although it is a rigorous and challenging program, I was able to get through it with much support from professors and Student Success Advisors. They helped me to network and learn what it is to be a professional and navigated me through my first career. Grossmont Nursing program has a special place in my heart" ~ Emily, Class of 2019.

"I come across a lot of people who are aspiring to be nurses and I tell them all the same thing. I felt like I got the best education at a fraction of the cost [of other programs]. I hear it repeatedly from leadership that Grossmont grooms the best nurses. We are not only prepared with knowledge, but we are prepared for the workload. Grossmont prepared me to be a better nurse. I made lifelong friends and I feel less stress because it did not cause me financial strain. I recommend Grossmont to any aspiring nurse" ~ Summer, Class of 2018.

"Grossmont College of Nursing had a large impact on my life, as it helped me feel more prepared for life as a nurse. There have been many times where there were things that we learned in school that other nurses didn't know. The professors taught me how to deal with difficult situations. I think I have been able to use something from every semester in my job so far" ~ Bradley, Class of 2019.

"The program at Grossmont prepared me to be confident in my analytical and practical skills. I also notice that compared to my peers that studied at other schools, my reports and communication with other disciplines are very strong (less scattered). The doctors where I work seem to really respect Grossmont Grads too" ~ Dani, Class of 2018.

"Grossmont has had a huge impact on my life by having an affordable nursing program that brought me into a career that has given me financial freedom. I have had many conversations with other nurses who have large financial burdens through their loans and are making the same amount of money I am. I feel that Grossmont has given me the tools and resources to be ahead of the curve in nursing care as a new graduate nurse" ~ Austin, Class of 2018.

"Grossmont College of Nursing literally changed my life! I was able to pursue my lifelong dream of becoming a nurse, even while being a mom of three. It prepared me for nursing in the real world. I passed my NCLEX with ease and within two years I

became a critical care nurse in the ICU. Also, the support, mentorship, and relationships made were like no other. Their program was one of the best decisions I ever made" ~ Wendy, Class of 2015.

"Grossmont had a big impact on me. I gained the knowledge to become a registered nurse and then was able to go out in the community and make a difference by saving lives" ~ Colleen, Class of 2016.

"Grossmont College of Nursing allowed me to finish nursing school with minimal loans and start my nursing career quickly. Having already had a bachelor's degree in another field, this was very appealing. Nursing is my lifelong career, so Grossmont has had a huge impact!" ~ Malia, Class of 2015.

"I genuinely believe that having Grossmont on my resume makes me look better to potential managers than many other schools. As far as how it changed my life, there are too many things to count. First, and most obvious, was the money. The near doubling of my monthly income was incredible but not the most important impact. Second was the fact that I actually felt (and still feel) like I am making a difference and genuinely seeing the difference I make when a patient gets to go home after coming to the hospital in really bad shape. I don't think any other job I have had truly gave me the feeling like I was making a difference because I never saw such immediate impact. Thirdly, I realized that I can go anywhere with the skills that I have and get a job in any major town if I were to move. That idea is really liberating, that my skills are (mostly) universal and that I could potentially go to other countries and work is amazing. Finally, and most importantly, I genuinely enjoy my job. This is my 4th career as an adult. This is also the first time in my life that I have honestly, deep down enjoyed what I do for a living. The fact that I can go to work, work 12, then come home at the end of my shift and not hate the idea that I have to go do it all over again is incredible. It is something that I never felt with any other job, and for that I am eternally grateful for being a nurse" ~ John M., Class of 2016.

"Grossmont education gave me more practical experience than other colleges, which was evident in my practice and was pointed out by my new grad mentor. The theoretical knowledge was up to date and given by professors who were leaders in the community. After three years, I still come across experiences or diagnoses that take me back to Grossmont. I catch myself saying, 'Oh, I remember Professor X talking about this!'" ~ Veronica, Class of 2016.

"Grossmont had a huge impact on my attitude towards excellence and high practice standards. It was a hard program, but I greatly benefitted from it" ~ Amu, Class of 2019.

"The impact is that I was able to learn every facet of nursing from the program. I was taught both the science and the *feeling* side of nursing while under the expectation of maintaining professionalism at all times, inside and outside of school, because from orientation they let us know that our actions have an audience. I felt as though we learned how to be every type of bedside specialty because of the rotations and the courses. For instance, many nursing schools don't teach about vents, chest tubes, or only have a one-day rotation and four-week course in OB/Peds. I feel that the impact

Grossmont made on me is that it made me a well-rounded nurse, which is something no one can take away from me!" ~ Jennifer, Class of 2014.

"Grossmont really prepared me for critical thinking. For instance, there have been plenty of times when I would remember things that I had learned in school and used them in real life situations" ~ Chris, Class of 2018.

"Grossmont College School of Nursing has completely changed my life. It provided hands-on experiences within the local hospitals that played a significant role in being hired. The learning model was challenging but extremely beneficial for preparing me to start as a new grad in the ICU. The education I received was noticeably superior to other schools whilst in the new grad program. I am so grateful I was accepted into the program and thankful I chose Grossmont over any other school" ~ Jeremiah, Class of 2018.

"Compared to BSN programs, I learned so much more at Grossmont, and with the amount of clinical hours we had, I felt more prepared than some of my other nursing friends who went to different schools. One of the biggest impacts it had on me is earning potential. I am now making more than twice what I was making before nursing school" ~ Michael, Class of 2016.

"Grossmont helped me build a strong foundation of clinical and critical thinking skills. Since I have been a nurse, I have always felt confident in my abilities. This has enabled me to serve the community and lead those that I work with to the best of my abilities" \sim John W., Class of 2015

"I feel like the program taught me strategies on how to gain the trust of my patient while not crossing ethical boundaries and how to be safe and competent. I also learned how to be a manager of care, how to coordinate successfully and respectfully with other disciplines by learning their roles as well as mine, as a team. I basically learned how to be a *professional* nurse instead of a *new* nurse. The program gave me the foundation I needed to take me through my career. When I train new nurses or students from other programs, the difference is obvious. The program gave me the confidence I needed to get through difficult patient care experiences with a level hard and how to conduct myself withing my scope of practice" ~ Kristina, Class of 2018.

"Grossmont College had an incredible impact on me professionally and personally. The small class size and the approachability of the professors created a powerful learning environment. The clinical professors gave me patient care insights that helped me develop a strong sense of responsibility and appreciation for the families I care for. As a new grad, I received many compliments on my clinical skills and level of confidence. I always gave credit where it was due, and replied, 'I attended Grossmont College, and it was an amazing education!" ~ April, Class of 2016.

The impact that Grossmont College of Nursing has had on students' lives is varied, and personal. The faculty knows that we are making a difference, not only to our students, but also to the thousands of patients each one of them will touch throughout their careers.

SECTION 6 - STUDENT SUPPORT AND CAMPUS RESOURCES

PURPOSE OF SECTION 6: To determine how departments utilize various campus services.

6.1 Are the college's student support services (Tutoring, Counseling, Health Center, Library, Financial Aid) adequate to meet your student's needs? Please elaborate on your answer.

All students are provided information on these resources as they enter the program. Representatives from many of these departments are available at the New Student Orientation (NSO) each semester. Within the program, each instructor presents the many resources available to students at Grossmont College to each class. This information is offered verbally, and well as in the syllabi. Faculty utilize and post on their classroom management platform (Canvas) the Student Services flier that lists a variety of campus support services for students. It is also available in Arabic and Spanish. Faculty also utilize the Announcements feature of Canvas to remind students about the various services and workshops that will benefit their outcomes, such as encouraging attendance at presentations by the Transfer Center and Financial Aid (grants and scholarship monies from a variety of sources including "bridge" grants for emergencies— Dreamkeepers). Many students make use of office hours to discuss not only academic issues, but personal and career issues as well. It is in this venue that students are also directed and encouraged to make use of programs such as Accessibility Resource Center (ARC), Extended Opportunity Programs and Services (EOPS), Mental Health services, Health and Wellness Center services, Counseling, and Gizmo's Kitchen, to name a few. Students are provided individualized referrals as necessary.

Tutoring

The nursing faculty refers students to the English writing center as needed. Students are required to write an evidence-based research paper in each class. This involves conducting a literature review which requires the student to be actively engaged with the library. The nursing program uses the American Psychological Association (APA) format for scholarly writing as this is a requirement in most nursing programs at all levels in universities. Because most English classes do not use APA, this is often a new writing style for students. The faculty teaches students APA and provides them with APA resources. First semester nursing students are strongly encouraged to utilize the English tutoring center for their written assignments. For math, the faculty mostly works with students individually, as ratio and proportion is the most common method used for dosage calculation math in nursing.

Instructional Media

With the current technology in the classroom the nursing students use the Health Professions Computer lab when needed (outside of the pandemic). There are 30 computers in the Health Professions computer lab. All students can use these computers for their projects and use them for exams. There is also a printer for the students to use, but students must pay for printed materials. All virtual simulated experiences and streaming videos can be accessed in the Health Professions Computer lab.

Counseling

All nursing majors are required to meet with a counselor to map out their education plan. The education plan provides the students with all the courses and sequencing of the courses for

the nursing major. In addition, the nursing website lists the course sequences. The Dean of Allied Health and Nursing meets with the counselors at Grossmont once a semester and with the Cuyamaca counselors yearly to provide updates on the Nursing Program. Students are advised to make an appointment with Counseling every semester to make sure they are on track for graduation.

Health and Wellness Center

The students' utilization of the Health and Wellness Center as patients is confidential, but they do use it for immunization needs and as a resource and a place to volunteer. In the past five years, students have volunteered with the Health and Wellness Center to do flu shot clinics each fall, and some did a hepatitis vaccine clinic in 2017. Students work with the Health and Wellness Center staff at information tables during health fairs or similar events on campus. The Health and Wellness Center provides many educational pamphlets, information, and resources for various health concerns in the waiting room.

Within the campus Health and Wellness Center are mental health counselors. The nursing faculty and Student Success Advisors (SSA) refer students there when they are dealing with various issues (anxiety, depression, loss of self-confidence, relationship crises, to name a few). For some, the issues sometimes become so overwhelming that they impact the student's ability to succeed in nursing school, even causing some to consider leaving the program. In addition to regular appointments, these resources provide access for students in crisis. Without fail, the mental health counselors have not only met our students' needs, they have gone above beyond expectations. If a student was in crisis, they were seen immediately. If a student needed ongoing sessions, they were scheduled. We have found the mental health services at the Health and Wellness Center to be much more than adequate. Mental Health counseling can make all the difference and along with other interventions, it contributes significantly to student success and retention. Students have provided positive feedback to SSAs specifically on personal mental health counseling and the student health services. Students at risk have demonstrated improved performance after use of these services.

<u>Library</u>

For several assignments throughout the program, students are required to conduct a literature review which involves them being actively engaged with the library. Several journal articles are needed to write papers, and if they cannot be found within the databases they have, interlibrary loan services may be requested, through which journal articles from another library can be sent to the students upon request.

Students also use the private rooms in the library for group study sessions. The library has several conference rooms with tables and whiteboards for which the students can sign up to use for an hour at a time. Prior to Covid-19, this was a great way for them study together to prepare for exams.

According to a report from librarian Nadra Farina-Hess, there are 772 titles in the library collection for nursing books. The classification of nursing books is broken down into surgery, gynecology and obstetrics, pediatrics, pharmacology, homeopathy, and other systems of medicine. To ensure that the collection is up to date, all medical titles published prior to five years ago are withdrawn from the collection on a regular basis. This project is done in collaboration between the library and nursing liaisons.

| Call Number | Subject | Number of Copies |
|-----------------|----------------------------|-------------------|
| RD99 – RD99.35 | Surgical nursing | 2 |
| RG1-RG991 | Gynecology and obstetrics | 337 (54 physical) |
| RJ245-RJ247 | Pediatrics | 16 (6 physical) |
| RM146-RM300.666 | Therapeutics. Pharmacology | 237 (38 physical) |
| RT1-RT120 | Nursing | 79 (1 physical) |
| RX1-RX681 | Homeopathy | 6 |
| RZ201-RZ999 | Other systems of Medicine | 25 (7 physical) |

All faculty have input for selection of learning resources and technology and selection is comprehensive, current, and accessible to students and faculty. Streaming videos are accessible to the students 24/7. E-books are available through the library. In the nursing department offices, there is a library of current textbooks available for students to check out on as needed or a semester basis for those that cannot afford to purchase the textbooks. The faculty library committee works continually with the librarians to delete older holdings, and to create a small collection of historically relevant materials.

The library offers a total of 677 Nursing and Allied Health periodicals. 293 of these journals are dedicated specifically to the nursing profession. Most of these journals are available via CINAHL Complete (Cumulative Index to Nursing and Allied Health Literature): The list of titles are available here:

http://ezproxy.grossmont.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true &db=edspub&bquery=&cli0=DISCIPLINE&clv0=LO+system.disnurs&type=44&searchMode=And&site=pfi-live

The library subscribes to Nursing Education in Video: An online collection of videos created specifically for the education and training of nurses, nursing assistants, and other healthcare workers. All the videos in the collection are regularly reviewed for accuracy, currency, and compliance with US Federal regulations from agencies such as OSHA and CMS. This collection currently contains 335 videos.

Financial Aid

Financial aid is available to students who qualify. Many of our students are dependent upon financial aid to pay for school and school-related expenses, especially since they are advised to work no more than part-time when classes are in session. The nursing students meet representatives from the department at their New Student Orientation, and they are invited to meet with them if they have need. Additionally, faculty and staff will send emails to students when they hear of a scholarship for which they might qualify.

6.2 What services do students in your department/program use most often or that make the most difference? Can you provide any examples where services have clearly improved student retention and success?

Overall, the services that students use the most are probably the Accessibility Resource Center (ARC), Tutoring, Financial Aid, the Health and Wellness Center (Mental Health specifically), and most importantly our department's Student Success Advisors (SSA). We have plenty of student stories/experiences where a student was at risk of failing and referral to these services made a huge difference (in addition to meeting with their professor and SSA). According to anecdotal feedback received from students, aside from the SSAs, ARC and Tutoring services (math and English) make the most differences for our nursing students.

Accessibility Resource Center (ARC)

The nursing program serves students that may have a disability. The ARC (formerly DSPS) serves approximately 10-20% of nursing students, providing accommodations for learning and testing. Carl Fielden, Learning Disability Specialist in the ARC who is the unofficial nursing program liaison, said that out of a class of 40 we can expect six to seven students on average to qualify for accommodations. The nursing department works closely with the ARC and in 2012 developed an Essential Functions or Essential Skills for the Nursing Student which was approved at the State level. Students with a learning disability who need time and a half or a distraction-free environment are provided those accommodations. The Dean of Allied Health and Nursing and ARC work closely together and should an unusual accommodation be requested faculty and the Dean readily communicate regarding the accommodation.

Student Success Advisors (SSA)

Many students entering the nursing program qualify for referrals to student services on and off-campus including the Accessibility Resource Center, Mental Health Services, Financial Aid, and Scholarships, the Writing Center, Health and Wellness Center, child care, social services, housing, food, counseling, among others. Efficiently identifying their qualifying status and providing a timely referral can have a major influence on achieving a positive program outcome for individual students. The SSAs provide support to the nursing student population with the goal of identifying the resources necessary to assist students in successfully completing their educational plan. This includes establishing pre-program contact points, coordination of a comprehensive system of early identification of "at risk" students, remediation with students, and ongoing support and mentoring in the areas of academic success, professionalism, and accountability.

Nursing school presents unique challenges to students. Previous levels of personal preparation, time management, and organization, which demonstrated a high level of effectiveness in pre-requisite courses must be elevated to meet the standards and rigor of a nursing program. Additionally, students' study skills and test-taking skills must adapt to the National Council Licensure Examination (NCLEX) testing style used throughout the program, which is established in the highest tiers of question construction. Students find that their overall approach to material must be altered to be successful in nursing school. All students can benefit from advisor guidance, which can suggest the most effective strategies and approaches that have been effective through years of student data.

Prior to entering the program, informational sessions on nursing program application procedures, program expectations, and career outlook are presented by the SSAs. This serves as the program's first direct point of contact with prospective students. Students who are accepted into the nursing

program receive pre-program instruction on strategies for success and have multiple contact points with an SSA before beginning the nursing program. The Test of Essential Academic Skills (TEAS) data of accepted students is analyzed to identify students who may be at risk based on low scores in one or more areas. These students are offered one on one guidance prior to their program start date to establish foundational preparation for the rigors of nursing school.

SSAs meet with first semester students individually to discuss their level of preparation for nursing school. One-on-one SSA appointments with all nursing students at the beginning of the program create an opportunity for discussion on topics of preparedness, time management, organization, study skills, and support systems. The SSAs also attempt to identify barriers to success including financial hardship, working too many hours, social problems, learning disabilities, English as a second language, and issues with transportation, childcare, mental health/substance abuse, culture, safety, and other concerns. Individualized success plans are created with every student. Many other factors are addressed, including test-taking skills, personal preparation, learning styles, and professionalism. Action plans are implemented as necessary and these action plans are reviewed and adjusted as needed to ensure student success throughout the program.

Another function of the SSAs is to manage the Grossmont College School of Nursing Mentorship Program. With the adjustment to the nursing school environment, students entering the program are in need of guidance from people who have been there. Therefore, all students entering first semester of the nursing program are assigned a second-year nursing student mentor. Mentorship can also foster the collaborative nature of the nursing profession. In the mentorship program, peers are able to serve as facilitators of success. Both mentors and mentees achieve professional and personal growth while developing relationships with other nursing students. Mentees will benefit from reduced anxiety, improved academic performance, and an expanded support system, while mentors develop leadership and professional skills and will receive recognition for their contributions to the program.

Students struggling within the program benefit from remediation that evaluates the specific issues leading to an exam failure, an unsatisfactory clinical evaluation, or other course concerns. Students benefit from the support of faculty and SSAs who assist in the identification of issues, and work collaboratively with the student to address these issues with recommendations and action plans containing strategies that are proven effective through student tracking and feedback. An intensive remediation process is in place for students who score less than 75% on any exam while in the nursing program. Students in need of remediation at any time in the program will meet with an SSA to identify and discuss issues and concerns (academic or personal) and develop an action plan. Student then return to their SSA after implementation of the strategies within the action plan to evaluate effectiveness, to sign off on the completion of remediation, and to pursue further strategies if necessary. SSAs also participate in ongoing follow up with all students who previously sought their services.

In terms of community outreach, SSAs consistently circulate volunteer opportunities to the nursing student body. These include opportunities in the community, on campus, with facility partners, and within the Nursing Program itself. This allows students a myriad of options to volunteer and give back to the community at large and exposes students to the nurse's ever-expanding role in varying career pathways. This collaboration also allows students to form networks of outreach, to promote public health, and to satisfy program volunteer requirements.

Prior to program application, prospective students need information and outreach to provide for a pathway into the nursing program, so SSAs provide an *Introduction to Health Professions* presentation at middle schools, high schools, vocational schools, and medical facilities throughout San Diego County. The SSAs also host Nursing Program Previews on our campus to inform prospective students about the program, its application process, and the nursing profession.

After program completion, many students intend to advance to a bachelor's degree program. Students need points of contact with BSN programs early on, and throughout the program. Crossenrollment programs are available and advanced planning is necessary for students to effectively transition to a BSN program immediately after graduation. The SSAs provide information on degree advancement to students during individual appointments. Additionally, the SSAs help facilitate a Continuing Education Fair held twice a year at which representatives from RN-to-BSN programs attend to provide students with information about enrollment. Both local and national universities are present, offering a wide variety of options to the student body. Students have several additional points of contact with RN-to-BSN programs including our partner school PLNU, which offers an RN-to-BSN program on Grossmont College's campus. With the increasing demand for bachelors-prepared nurses, this provides for the encouragement of degree advancement for all Grossmont Nursing graduates.

For those who wind up exiting the program due to academic or personal reasons, SSAs maintain contact with these students by scheduling regular meetings to ensure they are on the correct path for return to the program and have a re-entry plan in place. Once re-entered into the program, these students continue to meet with the SSAs regularly to maintain adherence to the identified action plan and provide a place for students to express their concerns. SSAs also maintain walk-in availability for all students, especially for students in crisis. Records of all student appointments are kept via paper progress notes and electronic data tracking.

Resource referrals are made as necessary to on-campus and off-campus services. Students' needs for resource referrals are first identified prior to program start through evaluation of TEAS scores and/or any students who self-identify a need. As SSAs meet with students individually at the beginning of the program, further needs are identified and referrals are made. Referrals can be to on- and off-campus resources as necessary throughout the program via professor referrals, SSA evaluation, or students self-identifying a need.

The SSAs notify nursing students of available scholarships, from Grossmont College, the community, nursing associations, as well as state-wide and national scholarships. Students are provided details and application information via email, the student association website, and one-on-one appointments. Additional individualized scholarship information and guidance is offered at the students' request or when the SSA identifies a need. Several students in the department have also gotten funding via Dreamkeepers or a private nursing scholarship fund. These scholarships and other sources of funding have allowed many students to finish the semester or program when they might not have otherwise done so.

The SSAs carry out all the above while establishing rapport with students and maintaining a safe and confidential atmosphere. They have made the most positive difference to our students and faculty and have they increased student satisfaction and retention which will be discussed next.

Student Satisfaction

Students are surveyed at the end of the program regarding their satisfaction with the physical facilities, the program in general, supportive departments, and other components of their nursing education. Outside of the nursing program, the students' needs are met with the assistance of the Library, Admissions and Records, Counseling, Financial Aid, the Accessibility Resource Center (ARC), English and Math writing centers, the Health and Wellness Center, and multiple computer labs.

In the student evaluation of facilities, students have expressed some dissatisfaction with Counseling and Financial Aid services. The campus is in process of completing a large construction project that temporarily limits campus parking, so this issue is most likely self-limiting. Regarding Counseling, students have expressed that campus counselors sometimes give misinformation about nursing course requirements. To help address this, we created a satellite counseling office in the nursing building. A dedicated counselor who was knowledgeable of the nursing program provided nursing students with counseling and transcript evaluations services until her retirement in 2019. The Counseling department met with the Nursing faculty and administration in Spring 2020 to discuss new procedures in completing the general education plans required for graduation. The Nursing faculty created a new procedure in Spring 2020 to track the general education plan within the department to ensure no student is missing courses at the end of the program, and all students are able to graduate on time. Additionally, representatives from the Counseling department are available at each NSO to review general education plans, answer any student's questions, and assist in making appointments for more involved issues.

Regarding Financial Aid, many students who are second-degree students do not qualify for financial aid. These students are guided in the process of appealing to Financial Aid and are strongly encouraged to apply for scholarships. Representatives from the Financial Aid department also attend the NSO to give a presentation, answer students' questions, and make appointments as necessary.

Table 6.2 shows the cumulative results from Student Satisfaction Surveys from Fall 2015 to Spring 2019. Data for the 2019-2020 school year are still pending. As this table is cumulative, data semester by semester can be seen in Appendix 6.2.

Table 6.2 Student Satisfaction with Student Services Departments, Cumulative, 2015-2019

| Totals, 2015- 2019 | Very Satisfied/ Satisfied | Neutral | Dissatisfied/ Very Dissatisfied | Not Applicable |
|-----------------------|------------------------------|---------|------------------------------------|----------------|
| Library | 83.21% | 5.27% | 1.68% | 8.76% |
| Technology Mall | 72.04% | 8.19% | 0.45% | 17.80% |
| Nursing on- | | | | |
| campus labs | 97.90% | 1.34% | 0.76% | 0.00% |
| ARC | 47.42% | 12.64% | 0.00% | 37.98% |
| Counseling | 65.67% | 10.32% | 7.82% | 14.32% |
| Student Health | | | | |
| Services | 75.50% | 5.93% | 0.37% | 16.64% |
| Testing and | | | | |
| Assessment | 70.47% | 8.34% | 5.22% | 18.81% |
| Financial Aid | 63.42% | 13.45% | 8.04% | 13.47% |
| Student Success | | | | |
| Advisor | 92.93% | 4.01% | 2.30% | 0.76% |
| Nursing dept. | | | | |
| staff | 96.72% | 1.65% | 0.00% | 0.00% |
| Technology used | | | | |
| in class | 98.46% | 1.15% | 0.00% | 0.00% |

Fiscal, physical, and technological resources are sufficient to meet the needs of faculty and students engaged in alternative methods of instructional delivery. Surveys of the students over the past five years indicated a very high level of satisfaction with technology, nursing department staff, Student Success Advisors, and on-campus nursing labs. Greater than 98% of students are very satisfied or satisfied with technology used in the classrooms. All of our classrooms are equipped with a SmartCart and professors incorporate many audiovisual and other technological teaching aids into their lessons.

Over the past five academic years trends in data analyses demonstrated that over 92% of the students are very satisfied or satisfied with the SSAs, for all the reasons outlined in this section above. They have had a massive impact on our students and faculty. The Nursing department staff had a satisfaction rating of over 96%. All of our faculty and staff, including our outstanding Health Sciences Lab Technicians go above and beyond expectations every day for our students, so it is rewarding to see this recognition. Nearly 98% were very satisfied or satisfied with the on-campus nursing labs. We pride ourselves on the state of the art equipment we have, as well as the top-notch staff that keeps the labs clean, stocked, and ready for the students to practice and learn.

At first glance, the ARC has what appears to be a low satisfaction rating with only a 47.42% share, but upon further investigation, one finds that nearly 38% rated it as "Not Applicable," and 12.64 percent checked "Neutral." The NA rating is almost certainly from people who have never had occasion to utilize the ARC, and the majority of the Neutral responses are likely in this category as well. Therefore, the ARC was actually rated as Satisfied or Very Satisfied by the great majority of its users.

6.3 Are college support services adequately supporting your faculty and staff? Consider the following support services: IT, Instructional Operations, Business Services, Printing, Bookstore, Maintenance, CAPS, and any other support services important to your faculty and staff.

Our faculty and staff expressed satisfaction with all our support services. The following was written from their comments on and experiences with the services listed.

Information Technology

The nursing students are all actively engaged in the use of technology. The tables in the nursing classrooms all have outlets, giving the students the ability to plug in an electronic device. There is WiFi in each classroom. The majority of nursing students bring a laptop or tablet to class for note taking. There are ten high-fidelity mannequins and seven low-fidelity mannequins in the Simulation Lab. With the high-fidelity simulations labs, electronic medical records, and electronic medication dispensing system in the lab, students are exposed to a great deal of technology on a weekly basis. This ultimately prepares them for the technology they are required to use in clinical practice.

A total of 95 laptops are available for student classroom use and testing. Additional new laptops were purchased in Spring 2020. There is also a digital recording system for recording of simulation experiences or classroom sessions. Presently, there are 175 computers in the open area in the LTRC.

The IT department is always helpful when the students call for help with computer access, email problems, or WiFi service. With the recent changes related to working from home, the IT department has been very helpful in meeting the needs of both faculty and staff. Many faculty members needed to borrow a laptop or webcam, and most report their interactions with IT to be exemplary. Whether it was having difficulties gaining access to software on the loaner computer, or just meeting to get the equipment, the IT technicians have reportedly been very patient and kind, helping the faculty through the process in a timely manner.

Instructional Operations

The Nursing Department works closely with the Instructional Operations (IO) office in a variety of areas. The IO office is responsible for assigning classrooms and appropriate times for the Nursing courses which are published in the schedule of classes. This is where the schedule is built every semester along with input of faculty load and any schedule changes. The nursing students rely upon this information to properly register for their classes. The Nursing courses are dependent upon clinical placements at healthcare facilities in the community, and often require delayed changes to the posted schedule. The employees of the IO office are always flexible and understanding in assisting with these changes. The IO office also publishes the College Catalog and solicits input from the Nursing department regarding updates on an annual basis. They are also responsible for making the changes to Course Descriptions once the Course Outlines have been approved by the Curriculum Committee. The work done by the IO office is critical to the Nursing department as the department prepares for accreditation visits by the Board of Registered Nursing (BRN) and the Accreditation Commission for Education in Nursing (ACEN). Faculty also turn in copies of their final exams to IO every semester so that they have them on file.

Business Services

District Business Services Division is comprised of several departments that will be discussed below individually. As an overview, the office is open during extended times to allow students to submit homework/paperwork to their instructor. This is where the main switchboard is to the college, the mailroom where we receive and send correspondence outside of the college and interoffice, where all travel activity requests filter through for budget verification, non-contract hourly employee hire forms are submitted throughout the semester for budgetary purposes, access card and key distribution and maintenance.

Business Services/Budget Fiscal Operations: The Nursing Department has the fiscal resources to support their unique curriculum. The Administrative team works closely with the budget operations office to ensure that the resources are available.

Purchasing, Contracts, and Ancillary Services: The utilization of clinical agencies requires affiliation agreements/contracts in order to be able to provide opportunities for our students. The Contracts office is the liaison between the nursing department and the clinical agencies in the approval process for the Affiliation Agreements. Their support has been invaluable during the Covid-19 pandemic, as multiple new affiliation agreements were necessary to provide clinical opportunities for our students when our traditional clinical sites were not able to accommodate students. Nursing courses require a number of supplies and specialized equipment. Our Health Sciences Technicians work closely with the purchasing department to keep the nursing classrooms and labs stocked with adequate supplies and updated equipment.

Public Safety: The safety of students and employees on campus is universally accepted as a priority. The campus policies related to public safety have helped to provide a safe campus environment. We have representatives in the department responsible for ensuring the safety of our students and employees during emergency situations. We have scheduled safety seminars including "active shooter drills" to properly prepare for emergencies. CAPS is supportive and responsive whenever a call is made for assistance. The department is responsible for distribution and approval of faculty parking passes, patrolling all parking areas for illegally parked cars, missing parking passes, and assisting with student and faculty needs. They support the local sheriff station when a call is made for support, anything out of the ordinary, and suspicious behavior throughout the campus. They are accessible to disarm alarm systems in offices and classroom/lab areas and unlock classroom doors. If needed, they may also accompany faculty and staff to their cars when asked.

Facilities Planning, Development and Maintenance: With the specialized classroom and labs in the Health Sciences Building, the facilities are of critical importance to the Nursing Department. We have worked with the facilities and maintenance employees to help with the set-up required for special events in the building, as well as routine maintenance. Maintenance and Facilities ensures offices, classrooms, labs, restrooms, and common areas are clean and safe. Maintenance requests, including event set-ups and repairs, are routinely fulfilled in a reasonable time.

Printing

The Printing Department supplies and prints faculty and staff business cards, program letterhead, student handouts, exams, and department fliers. The Nursing department faculty primarily uses Canvas for coursework and student handouts and the program office provides student information electronically whenever feasible, cutting down on excess paper products. The Printing Department also stocks frequently used office supplies, which are made easily available to all faculty and staff. Faculty are completely satisfied with the professional appearance and the prompt, cheerful, and accurate work provided by the staff.

Bookstore

Our students mainly buy their digital textbooks directly from Lippincott Wolters Kluwer (LWW), so there is likely little utilization of the Bookstore. The Bookstore does carry folders, writing implements, testing materials, college wear, and snacks and drinks. Students may utilize the Bookstore for supplies for projects, for their portfolios, or anything that is forgotten prior to coming onto campus.

Accessibility Resource Center (ARC)

The nursing program serves students that may have a disability. The ARC (formerly DSPS) serves approximately 10-20% of nursing students, providing accommodations for learning and testing. The nursing department works closely with ARC so that students with a learning disability are provided the accommodations for which they qualify. Faculty have been able to observe many students before using ARC accommodations versus after using accommodations. These services have helped them achieve higher grades on exams, which in turn keeps them in the program. Anecdotally, the number of students who use ARC services has increased in the past cycle (perhaps due to better awareness and removal of stigma) and students greatly benefit from their accommodations.

Table 6.3 Student Satisfaction with Student Services Departments, by Term

| | Very Satisfied/ | Neutral | Dissatisfied/ | Not Applicable |
|----------------------------|-----------------|---------|-------------------|----------------|
| Year | Satisfied | | Very Dissatisfied | |
| 2015 Fa | | | <u> </u> | T . |
| Library | 82.14% | 10.71% | 3.57% | 3.57% |
| Technology Mall | 78.57% | 7.41% | 3.57% | 10.71% |
| Nursing on- campus labs | 89.29% | 10.71% | 0% | 0% |
| ARC | 42.85% | 7.14% | 0% | 50% |
| Counseling | 60.71% | 10.71% | 17.86% | 10.71% |
| Student Health Services | 78.57% | 3.57% | 0% | 17.87% |
| Testing and Assessment | 67.86% | 7.14% | 35.70% | 21.43% |
| Financial Aid | 53.58% | 10.71% | 21.43% | 14.29% |
| Student Success Advisor | 85.72% | 3.57% | 10.71% | 0% |
| Nursing dept. staff | 100% | 0% | 0% | 0% |
| Technology used in class | 100% | 0% | 0% | 0% |
| 2016 Sp | | | | |
| Library | 78.12% | 15.62% | 0% | 6.25% |
| Technology Mall | 78.13% | 12.50% | 0% | 9.38% |
| Nursing on- campus labs | 96.88% | 0% | 3.12% | 0% |
| ARC | 40.63% | 15.62% | 0% | 43.75% |
| Counseling | 62.50% | 18.75% | 9.38% | 9.38% |
| Health Services | 78.12% | 12.50% | 0% | 9.38% |
| Testing and Assessment | 68.76% | 9.38% | 3.12% | 18.75% |
| Financial Aid | 59.38% | 12.50% | 15.17% | 12.50% |
| Student Success Advisor | 96.87% | 0% | 0% | 3.12% |
| Nursing dept. staff | 96.88% | 3.12% | 0% | 0% |
| Technology used in class | 96.88% | 3.12% | 0% | 0% |

| 2016 Fa | | | | |
|----------------------------|--------|---------|--------|---------|
| Library | 95.65% | 4.35% | 0% | 0% |
| Technology Mall | 82.61% | 8.70% | 0% | 8.70% |
| Nursing on- campus labs | 100% | 0% | 0% | 0% |
| ARC | 43.47% | 26.09% | 0% | 30.43% |
| Counseling | 65.21% | 17.39% | 4.35% | 13.04% |
| Health Services | 73.91% | 17.39% | 0% | 8.70% |
| | 75.91% | 17.59% | 0% | 8.70% |
| Testing and Assessment | 65.22% | 13.04% | 0% | 21.74% |
| Financial Aid | 65.22% | 21.74% | 4.35% | 8.70% |
| Student Success Advisor | 91.30% | 4.35% | 4.35% | 0% |
| Nursing dept. staff | 100% | 0% | 0% | 0% |
| Technology used in class | 100% | 0% | 0% | 0% |
| 2017 Sp | | | | |
| Library | 56.66% | 6.67% | 3.33% | 33.33% |
| Technology Mall | 43.34% | 10% | 0% | 46.67% |
| Nursing on- campus labs | 100% | 0% | 0% | 0% |
| ARC | 33.33% | 23.33% | 0% | 43.33% |
| Counseling | 53.34% | 16.67% | 13.33% | 16.67% |
| Health Services | 60% | 6.67% | 0% | 33.33% |
| Testing and | 00% | 0.07/0 | 070 | 33.33/0 |
| Assessment | 50% | 23.33% | 0% | 26.67% |
| Financial Aid | 50% | 23.33% | 6.67% | 20% |
| Student Success Advisor | 83.34% | 13.33% | 3.33% | 0% |
| Nursing dept. staff | 83.33% | 6.67% | 0% | 0% |
| Technology used in class | 96.67% | 3.33% | 0% | 0% |
| 2017 Fa | | | | |
| Library | 85.19% | 7.41% | 0% | 7.41% |
| Technology Mall | 62.96% | 22.22% | 0% | 14.81% |
| Nursing on- campus labs | 100% | 0% | 0% | 0% |
| ARC | 51.85% | 18.52% | 0% | 29.63% |
| Counseling | 63% | 11.11% | 11.11% | 18.52% |
| Health Services | 81.48% | 7.41% | 0% | 11.11% |
| Testing and | 92.59% | 3.70% | 0% | 3.70% |
| Assessment Financial Aid | 70 27% | 22 220/ | 2 700/ | 2 700/ |
| Financial Aid | 70.37% | 22.22% | 3.70% | 3.70% |

| Student Success Advisor | 96.30% | 3.70% | 0% | 0% |
|----------------------------|--------|---------------------------------------|-------|--------|
| Nursing dept. staff | 100% | 0% | 0% | 0% |
| Technology used in class | 100% | 0% | 0% | 0% |
| 2018 Sp | | | | |
| Library | 89.35% | 5.88% | 2.94% | 8.82% |
| Technology Mall | 73.53% | 2.94% | 0% | 23.53% |
| Nursing on- campus labs | 97.06% | 0% | 2.94% | 0% |
| ARC | 52.94% | 11.76% | 0% | 35.29% |
| Counseling | 70.59% | 8.82% | 2.94% | 17.65% |
| Health Services | 67.65% | 8.82% | 2.94% | 20.59% |
| Testing and Assessment | 76.47% | 8.82% | 2.94% | 11.76% |
| Financial Aid | 58.82% | 11.76% | 5.88% | 23.53% |
| Student Success Advisor | 97.06% | 0% | 0% | 2.94% |
| Nursing dept. staff | 97.06% | 2.95% | 0% | 0% |
| Technology used in class | 94.12% | 5.88% | 0% | 0% |
| 2018 Fa | | | | |
| Library | 89.29% | 3.57% | 0% | 7.14% |
| Technology Mall | 71.43% | 7.14% | 0% | 21.43% |
| Nursing on- campus labs | 100% | 0% | 0% | 0% |
| ARC | 50% | 3.57% | 0% | 46.43% |
| Counseling | 67.86% | 10.71% | 0% | 21.43% |
| Health Services | 75% | 0% | 0% | 25% |
| Testing and Assessment | 64.29% | 7.14% | 0% | 28.57% |
| Financial Aid | 67.86% | 10.71% | 7.14% | 14.29% |
| Student Success Advisor | 96.43% | 3.57% | 0% | 0% |
| Nursing dept. staff | 96.52% | 3.57% | 0% | 0% |
| Technology used in class | 100% | 0% | 0% | 0% |
| 2019 Sp | | | | |
| Library | 89.29% | 3.57% | 3.57% | 3.57% |
| Technology Mall | 85.71% | 7.14% | 0% | 7.14% |
| Nursing on- | 100% | 0% | 0% | 0% |
| campus labs | | • • • • • • • • • • • • • • • • • • • | | |

| Counseling | 82.15% | 7.14% | 3.57% | 7.14% |
|----------------------------|--------|-------|-------|--------|
| Health Services | 89.28% | 3.57% | 0% | 7.14% |
| Testing and Assessment | 78.57% | 3.57% | 0% | 17.86% |
| Financial Aid | 82.15% | 7.14% | 0% | 10.71% |
| Student Success Advisor | 96.43% | 3.57% | 0% | 0% |
| Nursing dept. staff | 100% | 0% | 0% | 0% |
| Technology used in class | 100% | 0% | 0% | 0% |

SECTION 7 - ON-CAMPUS/OFF-CAMPUS INVOLVEMENT

PURPOSE OF SECTION 7: The purpose of this section is for your department to showcase the most meaningful outreach, engagement and retention work that you do, both on and off campus. We are interested in learning what the faculty and staff in your department do to maintain/enhance their status as professionals in their field and as instructors, how you represent the college in the community/region, interact with other departments around campus, serve the college and your students, and participate in campus life.

The following table outlines some of the things our part-time and full-time faculty members have done over the last five years to serve our students, our campus, and our community. Many of these activities help the faculty stay current on information and skills in the healthcare setting, and others improve performance in the classroom. All these activities contribute to student success as outlined in column four. Most of our adjuncts are real practicing nurses, and in this time of Covid, they did not respond to requests to fill in the table. However, they are all doing annual competencies at their hospitals, maintaining continuing education units (CEU) to be licensed by the state of California, and many are certified in their specialty areas. All that also contributes to student success.

TABLE 7.1: Faculty's Activities to Foster Student Success (Full-Time followed by Part-Time)

| Faculty | Activity/Committee | Year(s) | Value to Student Success |
|-------------|--------------------|---------|--|
| Gabi Aliyev | AWHONN 2020 | 2020 | AWHONN is a professional nursing organization |
| DNP, RNC, | Convention | | for RNs taking care of Gyn, OB, and Neonatal |
| Associate | | | Patient Populations. A Professor teaching OB |
| Professor | | | Nursing course should be up-to-date with all |
| | | | Evidence-Based practice updates and changes in |
| | | | order to prepare future nurses to be ready to |
| | | | provide safe and up-to-date pt. care. In addition, |
| | | | this year's Convention was dedicated to |
| | | | dismantling racism in healthcare in general, and |
| | | | within these specific pt. populations. It's |
| | | | important to convey to students how racism is |
| | | | intertwined in healthcare delivery. It is also |
| | | | crucial to educate them how to be an antiracist. |
| | Beyond Prozac: | 2020 | Many students have a Hx of Mental or |
| | Natural Therapies | | Phycological challenges, which, at times becomes |
| | or Treating | | more appearant as they progress through the |
| | Depression and | | rigorous nursing program. Having knowledge on |
| | Anxiety, 1 CEU | | alternative therapy options could be helpful |
| | | | when advising students to seek help, since many |
| | | | of them hesitant taking meds while in the |
| | | | program. Having this knowledge provides tools |
| | | | that help to reiterate to students importance of |
| | | | taking care of their mental health. |

| Getting Ready for the Next Generation NCLEX (NGN) Developing Clinical Judgement Skills, 5 CEUs | 2019 | NCLEX is a licensure examination that all students have to take to become RNs. This Exam is going to have a new types/formats of questions that are geared towards assessing graduates' clinical judgement. Professors should have a solid understanding of those changes |
|---|------|---|
| May the Force be With You! 2 CEUs | 2019 | As an Interim Associate Dean of the Program, getting regular updates from the governing bodies is essential in assuring compliance of the program, maintenance of the accreditation, as well as the successful progression and graduation of students, so they are eligible to seat for the NCLEX exam. |
| AWHONN: Spinning Babies, 1.5 CEUs | 2019 | Information learned on this event is used in the classroom to prepare nurses for OB pt. care with improved OB and Neonatal outcomes. |
| AWHONN: Best Practices for Perinatal Loss, 1.5CEUs | 2019 | Information learned on this event is used in the classroom to prepare nurses for OB pt. care in regards to the challenging cases of fetal demise. |
| AHA/APA: NRP skills, 4CEUs | 2019 | This course is a requirement for RNs who take care of neonates; the information learned in this course is being introduced in the classroom to students. |
| AWHONN: Liability Focus'& Lessons Learned: Perinatal Nursing,1.5 CEUs | 2019 | Information learned on this event is used in the classroom to prepare nurses in providing safe pt. care |
| AAP: Neonatal Resuscitation Program (provider course), 11 CEUs | 2019 | This course is a requirement for RNs who take care of neonates; the information learned in this course is being introduced in the classroom to students. |
| AWHONN: Nursing resilience; Placenta Percreta, 1 CEU | 2018 | Information learned on this event is used in the classroom to prepare nurses for OB pt. care with improved OB and Neonatal outcomes. |
| SHARP: Safe pt. mobilization, 2 CEUs | 2018 | Information learned on this event is used in the classroom to prepare nurses to provide safe pt. care in OB pt. care setting |
| AWHONN: Human Trafficking is Real! How Nurses Can Help, 1.5 CEUS | 2018 | Information learned on this event is used in the classroom to prepare nurses for OB pt. care with improved OB and Neonatal outcomes. |
| AWHONN: Neonatal Abstinence Syndrome- Shortening | 2018 | Information learned on this event is used in the classroom to prepare nurses for OB pt. care with improved OB and Neonatal outcomes. |

| Length of Stay, 1 CEU | | |
|---|------|--|
| Disabilities and Accommodations: How to Help Students with Special Needs, 1.25 CEUs | 2018 | Many of the students have a HX of Disability and approved Accommodations. Faculty should be aware of the related information to be able to support these students in their unique needs in order to be successful. |
| Saving Lives: Preventing Preeclampsia with low-dose Aspirin, 1.5 CEUs | 2018 | Information learned on this event is used in the classroom to prepare nurses for OB pt. care with improved OB and Neonatal outcomes. |
| March of Dimes Caring for the Caregiver: Resiliency for the Healthcare Professional, 1.25 CEUs | 2017 | Information from this course is shared with students to teach about importance of self-care and it's relation to pt. safety and outcomes. |
| AHNA Medicinal Use of Cannabis, 1 CEU | 2017 | Information learned on this event is used in the classroom to prepare nurses for safe OB and Neonatal care. |
| Understanding human trafficking, 1 CEU | 2017 | Information learned on this event is used in the classroom to prepare nurses for OB pt. care with improved OB and Neonatal outcomes. In addition, preparing students to face a reality of this devastating surge that is prevalent in the SD county. |
| AWHONN Diabetes in Pregnancy, 2 CEUs | 2017 | Information learned on this event is used in the classroom to prepare nurses for safe OB and Neonatal care and improved pt. outcomes. |
| National Mother Baby Nurses Conference, 18.5 CEUs | 2017 | Information learned on this event is used in the classroom to prepare nurses for safe OB and Neonatal care and improved pt. outcomes. |
| Barcoding for safety: Infusions, 2 CEUs | 2017 | Information learned on this event is used in the classroom, simulation, and clinical settings to prepare nurses for safe pt. care |
| Sepsis Standard Work: Improving Compliance with Early Recognition and Management of Perinatal Sepsis1 CEU | 2017 | Information learned on this event is used in the classroom to prepare nurses for safe OB and Neonatal care and improved pt. outcomes. |

| | Edition NRP ovider Course, 11 Us | 2017 | This course is a requirement for RNs who take care of neonates; the information learned in this course is being introduced in the classroom to students. This course has to be taken every two years, hence, students are being taught up-to-date information. |
|-----------|--|------|--|
| AH CE | A AAP NRP, 4 Us | 2017 | Information learned on this event is used in the classroom to prepare nurses for safe OB and Neonatal care and improved pt. outcomes. |
| Ass | ARP Newborn sessment Review urse, 2 CEUs | 2016 | Information learned on this event is used in the classroom to prepare nurses for safe OB and Neonatal care and improved pt. outcomes. |
| of · | VI The Other End the Stethoscope- i CEUs | 2016 | Information learned on this event is used in the classroom to prepare nurses for a compassionate pt. care, which is an important component of the nursing practice. |
| | H Rashes in egnancy-1 CEU | 2016 | Information learned on this event is used in the classroom to prepare nurses for safe OB and Neonatal care and improved pt. outcomes. |
| Pre | H Injury evention ogram-1 CEU | 2016 | Information learned on this event is used in the classroom to teach students about self-safety and injury prevention at the clinical sites. |
| | aking End-of-Life nazing1.5 CEUs | 2016 | Information learned on this event is used in the classroom to teach students about pt. care during challenging end-of-pt-life care. |
| Me Re: | arp Research eeting Human search Protection n-1 CEU | 2016 | Information learned on this event is used in the classroom to teach students about vulnerable OB and Neonatal pt. populations through the nurse-researcher perspective. |
| Ph: | C Basic armacologic nciples of Action, CEUs | 2015 | Information learned on this event is used in the classroom to prepare nurses for safe OB and Neonatal care and improved pt. outcomes. |
| | C Postpartum mplications, 5 Us | 2015 | Information learned on this event is used in the classroom to prepare nurses for safe OB and Neonatal care and improved pt. outcomes. |
| | C Post Cesarean re, 5 CEUs | 2015 | Information learned on this event is used in the classroom to prepare nurses for safe OB and Neonatal care and improved pt. outcomes. |
| NR CE | P exam/skills-13 Us | 2015 | Information learned on this event is used in the classroom to prepare nurses for safe OB and Neonatal care and improved pt. outcomes. |
| | arp Safe Patient ndling /IPP-2 Us | 2015 | Information learned on this event is used in the classroom to prepare nurses for safe OB and Neonatal care and improved pt. outcomes. |

| Test construction and Item-Writing Workshop-3 CEUs | 2015 | Information learned on this event is used in test preparation to assure students' success when taking NCLEX. |
|---|---------------|---|
| Attend the annual San Diego Joint Nursing Advisory Meeting. | 2015- 2019 | Assesses needs of the healthcare partners and shares successes of our graduates to aid transition of the graduates to the RN workforce and help with the job finding opportunities. |
| Member of the leadership team on the SD AWHONN chapter. | Ongoing | This helps to provide students interested in pursing career in OB and Neonatal Nursing with relevant education. Also, to aid transition of the graduates to the RN workforce and help with the job finding opportunities, as well as with students' networking with the representatives from the local healthcare partners. |
| As Interim Associate Dean, overseeing SSAs' (student success advisors) community outreach, including local high schools. | Ongoing | SSAs help identify, prevent, and resolve student related issues to assure students' success. |
| As Interim Associate Dean and Associate Professor, involved with inviting health care reps from local healthcare organizations to participate in graduating students' mock interviews | Ongoing | Helps students with networking, prepares students for real-life interviews to be successful in finding jobs as new grads. |
| Attended numerous conferences, conventions, and events for professional development | | Information was shared with peers; incorporated the teaching material into classroom, clinical, simulation settings. |
| Have participated in writing for Enrollment Growth and Retention and Nursing VATEA grants. | Ongoing | Helps provide funds for continued efforts in student success. |

| | Participated on IPE (Interprofessional Education) events in AHN, as well as collaborated with AHN peers Work closely with | Ongoing | Enhances students' learning opportunities in the classroom and clinical settings. Helps prevent/resolve student related issues to |
|---|---|---------|---|
| | SSAs, Counseling, Student Services | | assure students' success. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Sarah Babini, MSN, RN, Full- time Faculty | Getting Ready for the Next Generation NCLEX (NGN) Developing Clinical Judgement Skills, 5 CEUs | 2019 | This conference taught me about the latest in NCLEX test items, and how to improve our exams, which I brought back to my classes. |
| | Medical Music Therapy, 1CEU | 2019 | This was holistic nursing continuing education. This information directly applies to my class's content. |
| | B.O.N.E.S. 2019,7.5 CEUs | 2019 | I learned about the latest evidence-based practices in orthopedics, which I bring back to my classes & clinicals. |
| | CNE Prep Course, 12 CEUs | 2019 | I learned about Nurse Educator best practice which I bring back to my classes. |
| | ACLS Certification Course, 8 CEUs | 2019 | This certification keeps me current with emergency practice in case it ever arises in clinical. |
| | Nursing Science Conference, 17.73 CEUs | 2019 | At these conferences I learn about the latest evidence-based practices in nursing practice and nursing education, which I bring back to my classes. |
| | CNE Prep Course, BRN# CEP 284, 12 CEUs | 2019 | I learned about Nurse Educator best practice which I bring back to my classes. |
| | Alzheimer's Disease and Dementia Care Seminar CEP: 15590, 6 CEUs | 2018 | I learned about nursing care for the dementia patient which I brought back to my classes. |
| | AMSN Convention BRN: CEP 5387, 13 CEUs | 2018 | At these conferences I learn about the latest evidence-based practices in the perioperative environment, which I bring back to my classes. |
| | Holistic Nursing BRN: 13975, 1 CEU | 2017 | This was holistic nursing continuing education. Concepts reviewed in this course are applicable to patient care. |

| Cleft Lip and Palate Team Skills BRN: RP 2325, 8 CEUs | 2017 | I keep my skills up as a nurse by providing direct patient care in a volunteer capacity. During the weekend this continuing education was offered which includes best practice that I brought back to class and clinical. |
|--|------|---|
| Nurse Educator Institute-NAPHE Conference, 15.75 CEUs | 2017 | I learned about Nurse Educator best practice which I bring back to my classes. |
| Caregiver Ethics in Healthcare BRN: 13975, 1 CEU | 2017 | This information directly applies to my class's content. |
| Promoting Advanced Directive BRN: 13975, 1 CEU | 2016 | This information directly applies to my class's content. Specific to the Hispanic population. |
| Other End of the Stethoscope BRN: CEP65, 1.5 CEUs | 2016 | This was a continuing education course about the patient perspective. I brought the nursing assessments & interventions I learned back to my classroom. |
| Flipped Classrooms BRN: CEP65,4 CEUs | 2016 | This conference taught me about hw to structure a flipped classroom which I brought back to my classes. |
| Transforming Healthcare Education: IPE BRN: 00488, 3 CEUs | 2016 | I learned about Nurse Educator best practice which I bring back to my classes. |
| Making End of Life Amazing BRN: CEP65, 1.5 CEUs | 2016 | This information directly applies to my class's content. |
| Acupuncture and Health BRN: 13975, 1 CEU | 2016 | This was holistic nursing continuing education. This information directly applies to my class's content. |
| Alcohol Use Disorder BRN: 13975, 1 CEU | 2015 | This information directly applies to my class's content. |
| NLN - National League of Nursing Conference CEP: 13722, 11.5 CEUs | 2015 | At these conferences I learn about the latest evidence-based practices in the patient care and nursing education, which I bring back to my classes. |
| The Art of Legal Nurse Consulting BRN: 13975, 1 CEU | 2015 | This was legal nursing continuing education. I brought concepts learned back to my classroom. |
| Cerner NHT Scenarios BRN: CEP #70, 6 CEUs | 2015 | I learned current documentation practices and guidelines which I brought to clinical. |

| | Test Construction and Item-Writing workshop BRN: 03813, 3 CEUs | 2015 | This conference taught me about the latest in NCLEX test items, and how to improve our exams, which I brought back to my classes. |
|-------------------|---|------------------|---|
| | Coordinator of Interprofessional Education (IPE) Committee | 2015- present | Plan annual IPE event to allow students of different health disciplines to learn about, from, and with each other. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Peter Brooks, | Orthopedic Trauma | 2020 | I learned about the latest evidence-based |
| EdD, MS, RN, | Insights from | | practices in orthopedic trauma, which I brought |
| CMSRN, | Behind the Red | | back to my classes. |
| Full-time Faculty | Line. 1 CEU, Provide | | |
| | #195, Palomar | | |
| | Medical Center | | |
| | Robotic Spine | 2020 | I learned about the latest evidence-based |
| | Surgery | | practices in spine surgery, which I brought back |
| | Intraoperative | | to my classes. |
| | Perspectives. 1 | | |
| | CEU, Provide #195, | | |
| | Palomar Medical | | |
| | Center | | |
| | Advances in Total | 2020 | I learned about the latest evidence-based |
| | Hip Arthroplasty: | | practices in hip surgeries, which I brought back to |
| | From Surgery to | | my classes. |
| | One Year Later. 1 | | |
| | CEU, Provide #195, | | |
| | Palomar Medical | | |
| | Center | 2020 | The additional leavaine and assessing a distance |
| | Earned Doctor of | 2020 | The additional learning and experience gained |
| | Education in | | from obtaining a higher degree benefits the |
| | Leadership and Learning from | | students by having more things to teach them, |
| | Aspen University | | and learning new methods of teaching and |
| | Student/Staff | 2019 | assessment. Illustrates the connectiveness that nursing has |
| | dodgeball | 2013 | among gender and age. Allows students to |
| | tournament for | | interact with peers and learn teamwork, which is |
| | Gizmo's Kitchen | | a valuable skill for practicing nurses. |
| | Academy of | 2019 | At these conferences I learn about the latest |
| | Medical-Surgical | | evidence-based practices in the perioperative |
| | Nurses (AMSN) | | environment, which I brought back to my classes. |
| | National | | |
| | Convention, 16.25 | | |
| | CEUs* | | |
| | Importance of | 2019 | This is a topic directly addressed in my class, so |
| | Perioperative | | getting the latest EBP was helpful to me and my students. |

| Nutrition in Wound Healing, 1.5 CEUs* | | |
|--|------|---|
| UCSD Health, Dept. of Nursing Education, Development, and Research. BONES (Bonafide Orthopedic Nurse Education Symposium), 7.5 CEUs* | 2018 | I learned about the latest evidence-based practices in orthopedics, which I brought back to my classes. |
| NCLEX Camp for Nurse Educators, 11 CEUs | 2018 | This conference taught me about the latest in NCLEX test items, and how to improve our exams, which I brought back to my classes. |
| Health Workforce Initiative, Men in Nursing Conference 2016 – "Strength Through Diversity", 11 CEUs | 2017 | Men in Nursing conferences help me support the men in our program, which is a minority group that faces challenges from both inside and outside the profession. |
| Academy of Medical-Surgical Nurses (AMSN) National Convention, 12.75 CEUs* | 2017 | At these conferences I learn about the latest evidence-based practices in the perioperative environment, which I brought back to my classes. |
| Health Workforce Initiative, Men in Nursing Conference 2016, "Changing a Culture Through Healing" 11 CEUs | 2016 | Men in Nursing conferences help me support the men in our program, which is a minority group that faces challenges from both inside and outside the profession. |
| UCSD Health, Dept. of Nursing Education, Development, and Research. BONES (Bonafide Orthopedic Nurse Education Symposium), 7.5 CEUs* | 2016 | I learned about the latest evidence-based practices in orthopedics, which I brought back to my classes. |

| Shifting the Tides, Promoting Diversity and Inclusivity in Nursing, AAMN Annual National Conference, 8 CEUs | 2016 | Men in Nursing conferences help me support the men in our program, which is a minority group that faces challenges from both inside and outside the profession. |
|---|------|---|
| Health Workforce Initiative, Men in Nursing Conference 2015 – "Strong Minds, Healing Hands, Compassionate Hearts", 8.5 CEUs | 2015 | Men in Nursing conferences help me support the men in our program, which is a minority group that faces challenges from both inside and outside the profession. |
| UCSD Health, Dept. of Nursing Education, Development, and Research. BONES (Bonafide Orthopedic Nurse Education Symposium), 7.5 CEUs* | 2015 | I learned about the latest evidence-based practices in orthopedics, which I brought back to my classes. |
| Academy of Medical-Surgical Nurses (AMSN) National Convention, 14.25 CEUs* | 2015 | At these conferences I learn about the latest evidence-based practices in the perioperative environment, which I brought back to my classes. |
| Medical Education Resources (MER) Orthopedic Conference: Rheumatology and Musculoskeletal for Primary Care, 11 CEUs* | 2015 | I learned about the latest evidence-based practices in orthopedics, which I brought back to my classes. |
| Association of Perioperative Registered Nurses (AORN) National Conference, 24.5 CEUs* | 2015 | At these conferences I learn about the latest evidence-based practices in the perioperative environment, which I brought back to my classes. |

| F F a A t | AORN Pharmacology, Pathophysiology, and Physical Assessment: Keys to Unlocking the Mysteries of the Acute Abdomen and Shock, 7 CEUs* | 2015 | At these conferences I learn about the latest evidence-based practices in the perioperative environment, which I brought back to my classes. |
|--|---|---------------|---|
| (9 | Certified Medical Surgical Registered Nurse (CMSRN) | 2015 | Being nationally certified in my specialty area helps me stay current and demonstrates my authority on the subject matter. |
| 5 | Attend the annual San Diego Joint Nursing Advisory Meeting. | 2015- 2019 | The advisory committee consists of nursing faculty, service representatives from local clinical facilities, local Deans and Directors from other schools of nursing, community representatives, and current and former students. The Advisory Committee provides feedback for program improvement and is viewed as a valuable asset to the Program. |
| r r F 2 | Academy of Medical-Surgical Nurses (AMSN) – Pacific Partnership 2015: A Nursing Perspective, 1 CEU* | 2015 | At these local meetings I learn about the latest evidence-based practices in the perioperative environment, which I brought back to my classes. |
| E F C C C C C C C C C C | Presented "Interprofessional Education: Fostering greater communication and collaboration among health professions students" at international patient safety conference | 2020 | This was supposed to be a live conference in Prague, but due to COVID-19, it was a webinar. Still, it had an international audience of medical professionals and I got to share what we are doing with interprofessional education here. |
| 1 t | The Other End of the Stethoscope, | 2016 | This was a dynamic guest speaker who taught me and the students about having greater empathy towards patients as he told his amazing life story of being blinded and gravely injured in a car accident at age 18. He shared about some of the most meaningful interactions he has had with medical teams. |

| Making End of Life Amazing-1.5 CEUs* | 2016 | This was an AAMN year end banquet featuring an amazing speaker who spoke about overcoming his early life of abuse and becoming a healer and someone who helps people die with dignity. |
|---|------------------|--|
| Kaplan Test Construction and Item-Writing Workshop, 3 CEUs | 2015 | This conference taught me about the latest in NCLEX test items, and how to improve our exams, which I brought back to my classes. |
| Academy of Medical-Surgical Nurses (AMSN) Kidney Transplant Evaluation & New Allocation Policy, 1.5 CEUs* | 2015 | At these local meetings I learn about the latest evidence-based practices in the perioperative environment, which I brought back to my classes. |
| Academy of Medical-Surgical Nurses (AMSN) — Nursing Fact or Fiction: Let the evidence be your guide, (EBP) 1 CEU* | 2015 | At these local meetings I learn about the latest evidence-based practices in the perioperative environment, which I brought back to my classes. |
| Coordinated, staffed, and supervised annual flu clinics for faculty, staff, and students | 2012- Present | Gave nursing students the opportunity to practice giving injections and talking to patients, gave campus community influenza immunity. |
| Coordinated, staffed, and supervised hepatitis A vaccine clinic for faculty, staff, and students | Spring 2017 | Gave nursing students the opportunity to practice giving injections and talking to patients, gave campus community hepatitis A immunity. |
| Board member for American Association of Men in Nursing, San Diego Chapter | 2014- 2017 | Being a part of Men in Nursing organizations help me support the men in our program, which is a minority group that faces challenges from both inside and outside the profession. |

| Committee member for annual Young Men in Nursing Conference on our campus. Planned and organized event, found speakers, coordinated panels and volunteers, and presented programs for high school students interested in Allied Health careers. | Fall 2015- 2018 | Outreach to mostly male students in SD and Imperial Counties. Introduced Nursing as a viable and valid career choice for them. |
|---|-----------------------|--|
| Member of Interprofessional Education (IPE) Committee | 2017- Present | Plan annual IPE to allow students of different health disciplines to learn about, from, and with each other. |
| Assisted in planning, coordinating, and delivering annual IPE Days for all Allied Health Students | 2017- Present | Gives students a real-world perspective of working together with a diverse healthcare team. |
| Created online surveys for IPE and analyzed data | 2017- Present | Helped the committee to see strengths and weaknesses of the IPE Day program and make minor changes each year to give the students a better experience. |
| Participate in our 4th semester's Interview Day | 2013- Present | This event gives our senior nursing students an opportunity to present themselves in professional attire and practice interview skills to prepare for upcoming job interviews. |
| Help to plan and participate in annual "Haunted Hospital" night for nursing students and their family members. | 2017- 2019 | Allowed for students and their family members to come together and enjoy a social activity. |
| Attended 10-20 hours of PD workshops each semester | 2012- Present | Various offerings have led to improvements in teaching, testing, technology, student relations, and cultural awareness. |

| | Presented "Podcasting as a Tool for Distance Education" | Fall 2020 | Helped other faculty members help their students by giving them another method to reach students. |
|---|---|---|---|
| | Presented "Best First Day Ever" | Fall 2018, Spring 2018, Fall 2017 | Helped other faculty members help their students feel more welcome by learning their names, and showing they care about them as individuals. |
| | Safe Zone Training | 2017 | Training to increase awareness and support for the LGBTQ community at Grossmont. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Andrea Dyal, MS, RN, CNE, Full-time Faculty | "Stand Down"- Veteran's Village | 2017 | Supervised nursing students at the volunteer experience for homeless veterans. |
| | Nursing Science & Education Conference | 2019 | I learned about the latest evidence-based information on a variety of topics related to both nursing care and nursing education that I took back to my students and incorporated into my class |
| | AMSN 2018 Convention,10 CEUs | 2018 | At these conferences I learn about the latest evidence-based practices in the medical-surgical nursing environment, which I bring back to my classes. |
| | National League for Nursing Education Summit, 5 CEUs | 2017 | At these conferences I learn about the latest best practices nursing education environment, which I bring back and incorporated into my classes. |
| | CNE certification | 2015- 2020 | Certification as a Nurse Educator tells students that I follow evidence-based practices in my teaching. This helps to ensure the best learning environment for my students. |
| | Assisted to coordinate, staff, and supervise flu clinics for students through a community organization. | 2020 | Gave nursing students the opportunity to practice giving injections and talking to patients. |
| | Attend annual San Diego Joint Nursing Advisory Committee meetings. | 2017- 2020 | The advisory committee consists of nursing faculty, service representatives from local clinical facilities, local Deans and Directors from other schools of nursing, community representatives, and current and former students. The Advisory Committee provides feedback for program improvement and is viewed as a valuable asset to the Program. |

| 4th | rticipate in our n semester's erview Day | 2020 | This event gives our senior nursing students an opportunity to present themselves in professional attire and practice interview skills to prepare for upcoming job interviews. |
|-----------------------|--|------|--|
| | ente Mentor ogram | 2018 | I mentored a freshman college student (her interest is ultimately in the nursing program) |
| Pre Tre | eventing and eating HIV: The ate of the Science | 2020 | I learned about the latest evidence-based practices for HIV, which I bring back to my classes. |
| Pro Stu | sessing and omoting udents' Clinical rformance, 1 CEU | 2020 | I learned about the latest evidence-based practices for assessing my student's clinical performance, which helps me to accurately evaluate their progress towards learning outcomes. |
| Ot Re Ho Pro | nulations and her Strategies to place Clinical ours for Student ogression and aduation, 1 CEU | 2020 | I learned about the latest practices to replace clinical hours which assisted me to incorporate effective virtual simulation clinical experiences when we had to leave hospital sites due to Covid-19. |
| Ho it i an | ncept Mapping II: ow to Incorporate nto Class, Lab, d Clinical periences, 1 CEU | 2020 | I learned about how to incorporate best practices for concept-mapping, which I use in both the flipped classroom and clinical post-conference environments. These learning techniques engage the student's attention and focus on application of nursing care. |
| the Ge (No | etting Ready for e Next eneration NCLEX GN) Developing nical Judgement ills, 5 CEUs | 2019 | Helps me develop appropriately challenging exam items so students are better prepared to take their licensing exam (NCLEX-RN) |
| Ор | ute Pancreatitis- pening Pandora's x, 1.15 CEUs | 2018 | I learned about the latest evidence-based practices for pancreatitis, which I bring back to my classes. |
| Fo | st Blueprints: A rmula for ccess, 1.25 CEUs | 2017 | Allows me to apply best-practice to exam development, which will help my students to be effectively evaluated on the outcomes |
| | riatric Nursing inciples, 30 CEUs | 2015 | Demonstrates professional competence in area of subject matter taught. This helps to ensure my students are receiving accurate knowledge related to geriatric nursing care principles. |
| in | aluation Methods Health Care, 3 edits | 2015 | Demonstrates professional competence in ability to effectively evaluate nursing students. |

| Teaching/Learning Strategies, 3 credits | 2015 | Demonstrates professional competence in ability to effectively apply best teaching and learning strategies for nursing students. |
|--|---------------|---|
| Curriculum Development, 3 credits | 2015 | Demonstrates professional competence in ability to effectively apply best curriculum development strategies for nursing students. |
| Created a presentation describing the Interdisciplinary Education day and presented it at an International Nursing Science Conference | 2019 | Allows students to see professional role- modeling of their faculty furthering knowledge related to the nursing profession |
| I took the lead in planning, setting up, organizing, and evaluating the third semester's "IV Start Lab", where students practice intravenous starts on each other. | 2019- 2020 | The "IV Insertion Lab" will be now be incorporated into the third semester lab course. |
| Help to plan and participate in annual "Haunted Hospital" night for nursing students and their family members. | 2017, 2019 | Allowed for students and their family members to come together and enjoy a social activity. |
| Member of Interprofessional Education Committee (IPE) | 2018- 2020 | Plan annual IPE day to allow students of different health disciplines to learn about, from, and with each other. |

| | I coordinated a professor from the Nutritional Science department to be a guest speaker in my class, and I helped facilitate a Certified Registered Nurse Anesthetist to come and speak at our Nursing Student Association meeting (although both had to be postponed due to the Covid19-related campus closure). | 2020 | Allows students to learn about what other health professionals do, so they ultimately end up providing more comprehensive & holistic patient care. |
|---|---|---------------|---|
| | Assisted in planning, coordinating, and delivering annual IPE Days for all Allied Health Students | 2018- 2020 | Gives students a real-world perspective of working together with a diverse healthcare team. |
| | Team-Based Learning Workshop Attendance | 2018 | Learned how a team-based approach can be incorporated into classroom learning. I actually ended up using "Collaborative Quizzes" in my class, which is a learning technique that has been very beneficial to my students. |
| | Attended 10-20 hours of PD workshops each semester | 2017- 2020 | Various offerings have led to improvements in teaching, testing, technology, student relations, and cultural awareness. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Allison Michelle Harrison, MS, RN, Full-Time Faculty | Pediatric Nursing Care: Best Evidence-Based Practices, Section A, 15 CEUs* | 2019 | This online module taught me about new treatment medical conditions in the Peds population which I incorporated into my lectures. |
| | Pediatric Nursing Care: Best Evidence-Based Practices, Section B, 15 CEUs* | 2019 | This online module taught me about new treatment modalities in the Peds population which I incorporated into my lectures. |
| | Mental Health First Aid USA, 8 CEUs | 2019 | This seminar taught me how to assess and assist with patients having mental health crises. I was |

| | | able to pass this knowledge on to my students during Peds clinicals |
|--|------|---|
| 21st Annual SD Pediatric School Health Conference, 6 CEUs* | 2018 | This conference focused on trends in nursing for the school age patient population which I incorporated into my lecture and PowerPoints. |
| Intersections: Preventing Harassment & Sexual Violence, 1 CEU* | 2018 | I brought the knowledge I learned in this online module to my clinical virtual simulations and taught students to recognize if someone is being inappropriate in the workplace. |
| Keys to Supporting Students in the School Setting, 7.75 CEUs* | 2018 | I often use knowledge that I learned in this web based seminar to provide examples and references to my students during lecture. They learn how to further support/assess children who have disabilities. |
| Webinar on Handling Strangulation Cases at the Front Lines, 2.5 CEUs* | 2018 | I used the knowledge I learned in this seminar in class to provide examples of how to assess a child who has been a victim of child abuse (strangulation) since nurses are mandatory reporters. |
| The Other End of the Stethoscope, 2 CEUs | 2017 | This lecture series discussed how to assess and support a patient who has suffered a traumatic injury. I use the book and examples from this program in class and clinical. |
| Introduction to Teaching in Canvas, ? | 2017 | I learned how to create PowerPoints and provide my students with online learning which I have incorporated into both class and clinical |
| Flipping the Classroom: A Magical Approach to Learning Part 1, 1.25 | 2017 | I have used the methods I learned here to make my lecture materials more adaptable to those with all learning techniques. |
| Flipping the Classroom: A Magical Approach to Learning Part 2, 1.25 CEUs | 2017 | I have used the methods I learned in this online module to make my classroom more interactive among students. |
| Interprofessional Seminar in HIV- HCV Co-infection for Practitioners in Federal and Public Health, 3 CEUs* | 2016 | I have used the education I received at this seminar to educate my students on the difficulty Pediatric patients have if they or their parents have these diagnoses. |

| | Interprofessional Seminar in HCV for Practitioners in Federal and Public Health Settings, 3 CEUs* California Emergency Nurse's Association Course, 6.25 CEUs* | 2016 | I have used the education I received at this seminar to educate my students on the difficulty Pediatric patients have if they or their parents have these diagnoses and what treatment modalities are available. I often use the materials or references I received at this conference in lecture to provide my students with knowledge learned from the community and emergency nurses. |
|---|---|---------|---|
| | Bridges: Building a Supportive Community, 1 CEU* | 2016 | N/A |
| | Identifying Pain in Children, 1.5 CEU* | 2016 | I have incorporated the pain scales and assessments I learned in this online module during lecture and clinical. |
| | Preventing Bloodborne Infections: Bloodborne Viruses, 0.5 CEU* | 2016 | The knowledge received in this module is used during clinical to assist and reinforce precautions when in clinical with my students. |
| | Preventing Bloodborne Infections: Transmission, Protecting Yourself, 0.5 CEU* | 2016 | The knowledge received in this module is used during clinical to assist and reinforce precautions when in clinical with my students. |
| | Clinical Compliance Skills (Maxim Healthcare), 2.31 CEUs* | 2016 | This course helped me to renew assessment skills as a pediatric nurse which I use during class and clinical. |
| | The Code of Conduct, 1 CEU* | 2016 | I used knowledge gained in this course to teach examples of professionalism to my students. |
| | Spanish for Medical Professionals, 24 CEUs* | 2015 | I used these course materials to provide examples of reading/understanding medical materials written in Spanish during clinical. |
| | Teaching Men of Color in the Community, 1.5 CEUs | 2015 | This course helped me to better understand and support the male students who are enrolled in the Grossmont nursing program. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Lisa Maloy MSN, RN, CNS, Clinical Coordinator | Retention and Success: Creating a Student-Centered Culture | 2015 | This workshop was specifically focused on retention and student success. |

| Clicks: How to Bring the Classroom to Life | 2015 | Methods to help students engage in the classroom, leading to student success. |
|--|---------------|--|
| Demystifying Nursing Education Accreditation | 2016 | Nursing Accreditation leads to more opportunities for students, contributing to their success. |
| Comprehensive Nursing Update Course | 2019 | Updating nursing content helps to deliver current information to students to ensure their success. |
| Yearly Joint Advisory Meetings | 2015- 2020 | Meeting with community partners to gather feedback helps to improve the nursing program, leading to better opportunities for students. |
| San Diego Nursing Education Consortium | 2015- 2020 | Working collaboratively with education and clinical partners in the community helps to create conditions for optimal clinical experiences to ensure student success in the clinical setting. |
| Alumni Contacts re: jobs | 2015- 2020 | Connecting alumni to job opportunities in the community helps with their successful employment. |
| Alumni Practice Interviews | 2015- 2020 | Providing opportunities for graduating students and alumni to practice interviewing skills leads to successful employment. |
| Alumni Networking Events | 2014- 2016 | Connecting current students to Alumni allowed students to see positive role models, and provided opportunities so share success stories. |
| 50th Anniversary Event for Nursing Program | 2017 | Working to strengthen ties with the community, including Alumni, provides role models for students to help them be successful in school and upon graduation. |
| Escape Fire CEU event for Community Nurses | 2015 | CEU event allowed opportunity for students to connect with nurses in the community, helping the students see positive role models participating in "life-long learning" opportunities. |
| RN-BSN/MSN Education Fairs | 2015- 2020 | Collaboration with Education partners helps the students be successful in continuing their education leading to a higher level of success in obtaining jobs in the field. |
| Interprofessional Education Day Facilitator | 2017- 2020 | Participating in Interprofessional Education events for students enables then to develop skills which help them be successful in the community. |
| Liaison between Evaluations staff and nursing department in preparing students for graduation. | 2015- 2020 | Assisting graduating students in completing all necessary requirements for graduation including proper paperwork leads to success in graduating on time. |

| | Attending 10-20 hours of Professional Development offerings each semester. | 2015- 2020 | Participation in Professional Development activities on campus helps to keep up-to-date to ensure students have the most current information to be successful in completing their program of study. |
|------------------|--|--------------------|---|
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Angela Ngo- | Simulation | 2020 | Applied various techniques learned from this |
| Bigge, MSN, | Intensive Course, | | simulation conference to my class to promote |
| FNP-C, Full-time | 22.5 hrs. | | skills and critical thinking for first semester |
| Faculty | _ | | students. |
| | NCLEX Camp for | 2018 | This conference taught me about the latest in |
| | Nurse Educators, 11 | | NCLEX test items, and how to improve our |
| | CEUs | | exams, which I brought back to my classes. |
| | Advanced Practice | 2020 | I was able to teach the students new treatment |
| | Nurse CE | | guidelines for a variety of disorders. |
| | Correspondence | | |
| | Package | | |
| | CNSA | 2012- | As an advisor, I help promote collaboration and |
| | | present | community involvement for all students. |
| | Controlled | 2019 | I used this information to obtain DEA License to |
| | Substance Schedule | | prescribe medications and to teach |
| | II, CANP 10985, 3 | | pharmacology to the students. |
| | hours | | |
| | Flu Forum, AANP | 2019 | I applied the information regarding |
| | 19073809, 1.25 | | pathophysiology and treatment of influenza to |
| | hours | | teach the students about infection control |
| | | | practices. |
| | CNE Prep Course, | 2019 | I applied teaching strategies learned from this |
| | 12 hours | | conference to promote student success in my |
| | | | class. |
| | Earned Family | 2019 | The additional learning and experience gained |
| | Nurse Practitioner | | from obtaining a higher degree benefits the |
| | Degree from | | students by having more things to teach them, |
| | Bradley University | | and learning new methods of teaching and |
| | | | assessment. |
| | Alzheimer's Disease | 2018 | This information helps students prepare for |
| | & Dementia Care | | potential disasters. |
| | Seminar, 8 hours | | |
| | 2018 AMSN | 2018 | I applied fundamental nursing information from |
| | Convention, 13 | | this conference to my class's content. |
| | hours | | , |
| | Disaster | 2017 | This information helps students prepare for |
| | Preparedness, 1 | | potential disasters. |
| | hour | | |
| | Pressure Ulcers and | 2017 | This information directly applies to my class's |
| | Skin Care, 5 hours | · - - • | content. |
| | S.Mir Care, 5 Hours | | - Controller |

| | Low Back Pain, 15 | 2017 | This information directly applies to my class's |
|-----------------|------------------------|-----------|--|
| | hours | | content. |
| | Irritable Bowel | 2017 | This information directly applies to my class's |
| | Syndrome, 10 hours | | content. |
| | GeroFocus NGNA | 2016 | To maintain geriatric expert capability and also |
| | Conference, 13.5 | | teach principles of nursing care for geriatric |
| | hours | | patients to the students. |
| | Osteoporosis: | 2016 | This information directly applies to my class's |
| | Diagnosis and | | content. |
| | Management, 5 | | |
| | hours | | |
| | Analgesic Overdose, | 2016 | This information directly applies to my class's |
| | 5 hours | | content. |
| | Aging and Long- | 2016 | This information directly applies to my class's |
| | term Care, 3 hours | | content. |
| | PTSD, 15 hours | 2016 | This information directly applies to my class's |
| | | | content. |
| | Clinical care of the | 2016 | This information directly applies to my class's |
| | transgender | | content. |
| | patient, 10 hours | | |
| | Alzheimer's | 2016 | This information directly applies to my class's |
| | Disease, 15 hours | | content. |
| | Attend the annual | 2012- | The advisory committee consists of nursing |
| | San Diego Joint | present | faculty, service representatives from local clinical |
| | Nursing Advisory | | facilities, local Deans and Directors from other |
| | Meeting. | | schools of nursing, community representatives, |
| | | | and current and former students. The Advisory |
| | | | Committee provides feedback for program |
| | | | improvement and is viewed as a valuable asset |
| | | | to the Program. |
| | New Student | 2019- | Organized joint orientation event for nursing, RT, |
| | Orientation | present | and OTA programs for 100+ students. |
| | Member of | 2019- | Plan annual IPE to allow students of different |
| | Interprofessional | present | health disciplines to learn about, from, and with |
| | Education (IPE) | | each other. |
| | Committee | | |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Valerie | San Diego Annual | 2017- | I teach cardiac topics, including heart failure. I |
| Shadroff, DNP, | Heart Failure | present | incorporate evidence-based information learned |
| RN, CCRN, Full- | Symposium | (attend | during these symposia in my classes. |
| time Faculty | | annually) | |
| | Nursing Etching | 2015 | 3-day conference provided the EBP information |
| | Institute and Critical | | about critical care and nursing management of |
| | Care exposition | | patient of high acuity. This information was |
| | | | incorporated in class teaching. Students learned |
| | | | the latest EBP for critical care. |

| Biomarkers in HF and ACS: Diagnosis, Treatment and Devices, 6.25 hour Medication Errors: A CASE-BASED | 2018 | Implemented in cardiac classes to increase students' understanding of heart failure and acute coronary syndrome and improve nursing care of these patients. Implemented this EBP material in class and in clinical setting to teach students about safety of |
|--|------------------|--|
| REVIEW, 6 hours | | medication administration. |
| Soft Skills Train-the- Trainer Workshop, 1.5 hours | 2017 | Used soft skills concepts in leadership class and in preparation of students for a nursing job interview session. |
| Distance Education (DE) certification online Canvas course | 2017 | Learned and implemented in class the key points in teaching a hybrid and online course. I was able to transfer two nursing courses to a fully online format during Covid-19 pandemic. |
| NURS 230 and NURS 235 orientation | 2013- present | Developed and implemented a through orientation to both nursing course. This ensures students understand the course objectives, the grading system, and other requirements for each course. Emphasis is on nursing role as a manager of care, time management and clinical success to avoid "failure to rescue" clinical situations. |
| Rapid Response Day | 2013- present | Developed the curriculum for a simulation, "Rapid Response Day'. Students learn how to identify critical changes in patient status and implement emergency nursing interventions. |
| Interview Day | 2013- present | Developed and implemented The Interview Day for NURS 235 students to help them learn how to successfully participate in a nursing job interview. Students learn how prepare an Elevator speech, answer nursing-specific questions, and present their soft skills to a potential employer. |
| Member of American Association of Critical-Care Nurses | 1997- present | Evidence-based practice information gained through this membership is applied in each of my classes, labs, and sim. Students learn the latest in nursing care of patients with high acuity. |
| Evidence-based practice CE activities utilizing AACN webinars and publications | 1997- present | I select each webinar or article that aligns with the topics of my nursing courses. The new information is always included in teaching to enhance student learning and meeting class objectives. |

| Faculty | Activity/Committee | Year(s) | Value to Student Success |
|---|--|-----------|---|
| Leah Apatan, MSN, RN, Adjunct Faculty | Suicide Prevention Training for Healthcare Professionals, 6 CEUs | 2019 | This information helped me gain more knowledge in suicide prevention which I share with students when appropriate in clinical. |
| | Substance Abuse, 8 CEUs | 2019 | This information helped me gain more knowledge in caring for patients with substance abuse disorders which I share with students when appropriate in clinical. |
| | Patient Safety and Assessment: Safe Use of Assistive Devices, 2.5 CEUs | 2019 | This information reinforced my knowledge that I share with students when appropriate in clinical. |
| | KP SCAL Case Management On-Site Training, 21 CEUs | 2019 | This conference enhanced my knowledge and skills as a case manager. Any information that is useful in sharing with students in discharge planning I incorporate into teachings during clinical. |
| | ACLS, 6 CEUs | 2017 | Enhance my skills in patient care that can be shared with students especially in the critical care setting. |
| | BLS Skills Check, 1 CEU | 2017 | Enhance my skills in patient care that can be shared with students especially in the acute care setting. |
| | Clinical Event Team Training, 4 CEUs | 2015 | Training that enhanced my skills as a nurse in team communication and working with a code team. Lessons learned shared with students. |
| | Case Management On- Site Training 21 CEUs | 2015 | This conference enhanced my knowledge and skills as a case manager. Any information that is useful in sharing with students in discharge planning I incorporate into teachings during clinical. |
| | Schwartz Rounds: "What do you mean I can't live in the hospital?", 1 CEU | 2015 | This lunch and learn discussed patients who stay in the hospital long periods of time such as >30-365 days and how to approach this type of long length of stay patients. |
| | Schwartz Rounds: " I won't let Daddy die- Turmeric and Faith will Heal Him.", 1 CEU | 2015 | This lunch and learn discussed patients who stay in the hospital with different ways of healing. This case study helps this instructor teach students the reality and different types of patients students will potential care for in the future. |
| | Attend Adjunct Faulty meetings to be current with nursing program, | 2016-2020 | Faculty meetings assist instructor to be informed and equipped with tools necessary to teach in the clinical setting. |

| | curriculum, and BRN updates. | | |
|---|--|-----------|--|
| | Volunteered at Southwestern College open house for Allied Heath Services Program. | 2016-2017 | Assisted nursing students in organizing events for the community. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Erin Becklund, MSN, RN, Adjunct Faculty | Clinical Nurse | 2019 | Continuing to work as a clinical nurse keeps me up to date with current clinical practices. This allows me to aid students in learning best practice in the hospital setting. |
| | Maternal Newborn Nursing Care Course, 72.5 CEUs | 2018 | Advanced my clinical knowledge in a new specialty. I gained tremendous new knowledge that can be passed on to my students. |
| | PCU Advanced Concepts Program, 10 CEUs | 2017 | Attended a course teaching advanced concepts in progressive care nursing which is valuable to me a clinical instructor. It enables me to give provide more in depth information for my students in clinical. |
| | Safe Patient Mobilization, 2 CEUs | 2017 | I am able to assist my students with safe mobilization practices in the clinical setting. |
| | Master's Project, 1 Credit Hour | 2017 | This experience of preparing a master's project aided me in evaluating a hospital unit for improvement projects. This has helped me to teach my students critical thinking in regards to why we do the things we do as nurses, and how to recognize and suggest areas for improvement. |
| | Yellow Belt Workshop, 6.5 CEUs | 2017 | Six Sigma Yellow belt training program to critically evaluate healthcare processes and how they can be improved/streamlined. I bring these skills to my clinical group as I teach them to critically examine the practices on the unit. |
| | DNH Skills Fair, 2 CEUs | 2016 | Presented a research poster on the benefits of skin to skin contact of the newborn and mother in the operating room after cesarean section. I am better able to guide my students in their research projects for clinical. |

| | Volunteered to serve as interim unit educator. | 2019 | Assisted with orientation of nursing students to the unit. Gained advanced skills in the most effective way to present new information for staff retention, which easily translates to teaching students in the clinical setting. |
|---|--|---------|---|
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Gary Bigge, FNP, MSN, RN, Adjunct Faculty | Primary Health Care Clinical, 2 credits | 2018 | Applied medical-surgical knowledge learned from this class to teaching Nursing 120 students |
| | Comprehensive exam, 1 credit | 2018 | Helped to teach Nursing 120 students head- to-toe assessment skills and critical thinking skills. |
| | Alzheimer's Disease and Dementia Care Seminar | 2018 | Improved ability to teach about care management for this patient population |
| | PHC of Adult/Aging Family, 6 credits | 2017 | Improved ability to teach about care management for the older adults. |
| | PHC of Young Family, 6 credits | 2017 | Improved ability to teach about care management for families with children. |
| | PHC of Childbearing Family, 4 credits | 2017 | Improved ability to teach about care management for families with children. |
| | Psychosocial PHC Adult/Aging, 4 credits | 2017 | Information learned from this class helped improve instructor's knowledge of care management of older adults. |
| | Bioethics and Health Care Policy, 3 credits | 2016 | Improved ability to teach about knowledge of the healthcare system |
| | Spiritual Concept Analysis, 3 credits | 2016 | Information learned from this class helped improve instructor's knowledge of providing spiritual care to all patients |
| | Advanced Pathophysiology, 3 credits | 2016 | Helped me to teach Nursing 120 students pathophysiology of common disorders. |
| | Pharmacology/Advanced Practice Nursing, 3 credits | 2016 | Helped me to teach Nursing 120 students pharmacology knowledge and critical thinking skills. |
| | Advanced Health Assessment & Promotion (theory), 3 credits | 2016 | Helped me to teach Nursing 120 students head-to-toe assessment skills and critical thinking skills. |
| | Advanced Health Assessment & Promotion (lab), 3 credits | 2016 | Helped me to teach Nursing 120 students head-to-toe assessment skills and critical thinking skills. |
| | Research/Theory Advanced Practice Nursing, 4 credits | 2015 | Improved ability to teach about advanced nursing care for a variety of patient population |

| | Pharmacologic Management of Asthma | 2020 | Improved ability to teach about nursing care for patients diagnosed with asthma |
|---|--|---------|---|
| | Communication in Healthcare | 2020 | Improved ability to teach about communication techniques to promote safe and quality patient care. |
| | Preventing Elder Abuse | 2019 | Improved ability to teach about potential and actual elder abuse problems, to promote safe and quality care for this patient population |
| | Bloodborne Pathogen Safety | 2019 | Improved ability to teach about infection control practices |
| | Recognizing Domestic Violence | 2019 | Improved ability to teach about potential and actual domestic violence problems and how to report these problems |
| | Confidentiality | 2019 | Improved ability to teach about HIPPA to protect patients' medical information |
| | Palliative Pain Management | 2019 | Improved ability to teach about providing pain management for patients receiving palliative and hospice care. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Dazel Mary Brebner, MSN, RN, Adjunct Faculty | Nursing Grand Rounds, 1 CEU | 2020 | Increase knowledge around current practices/research in infection control |
| | Excel Training | 2019 | improved instructor organization/ content creation for students |
| | Hospital-Wide Clinical Practice Council | | Receive and deliver up-to-date and relevant research/ clinical practice to students studying the field |
| | ANPD certification preparation and review 16 CEs | 2020 | reinforce foundational learning theories and teaching strategies used in class |
| | ANPD Member | 2019 | Raise standards of professional presence. Reinforce foundational learning theories and teaching strategies used in class |
| | Nursing Grand Rounds, 1 CEU | 2019 | Articles to review provided prior to rounds and discussed as a group. Increase knowledge around current practices/research in infection control |
| | Leadership Development, 7 CEUs | 2019 | improved instructor communication skills, organization and student engagement in learning |
| | Essentials of Advanced Nursing Practice, Field Experience, 2 Units | 2018 | reinforce foundational learning theories and teaching strategies used in class |

| Policy, Politics & Global Health Trends, 3 Units | 2018 | Receive and deliver up-to-date and relevant research/ clinical practice to students studying the field |
|--|-----------|--|
| Foundations of Nursing Education, 3 Units | 2018 | reinforce foundational learning theories and teaching strategies used in class |
| Facilitating Learning in the 21 st Century, 2 Units | 2018 | reinforce foundational learning theories and teaching strategies used in class |
| Future Directions in Contemporary Learning & Education, 2 Units | 2018 | improved instructor communication skills, organization and student engagement in learning |
| Nurse Educator Capstone, 2 Units | 2018 | Topic of capstone project was emphasizing the importance of nurse to nurse communication and improved hand-off report utilizing simulation |
| Pathopharmacological Foundations for Advanced Nursing, 3 Units | 2017 | This is a topic directly addressed in my preconference and during concept mapping. There are a lot of questions from students during debrief and post-conference as well. |
| Comprehensive Health Assessment for Patients & Populations, 3 Units | 2017 | This is a topic directly addressed in my preconference and during concept mapping. There are a lot of questions from students during debrief and post-conference as well. |
| Contemporary Pharmocotherapeutics, 2 Units | 2017 | This is a topic directly addressed in my preconference and during concept mapping. There are a lot of questions from students during debrief and post-conference as well. |
| Organizational Leadership & Interprofessional Team, 3 Units | 2016 | Improved instructor communication skills, organization and student engagement in learning |
| Communicate employment opportunities to nursing students | 2020 | provide paid opportunities for students to get a foot in the door to a major hospital system. |
| ANPD certification preparation and review 16 CEs | 2020 | reinforce foundational learning theories and teaching strategies used in class |
| ANPD Member | 2019 | Raise standards of professional presence. Reinforce foundational learning theories and teaching strategies used in class |
| Worked with class professors and co- instructors to create applicable and | 2013-2020 | Working as a team instead of in educational silos enhances the student experience. |

| | comprehensive student experiences | | |
|--|--|-----------|--|
| | Worked with class professors and co-instructors to create applicable and comprehensive student experiences | 2013-2020 | Working as a team instead of in educational silos enhances the student experience. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Rachelle Camerino, BSN, RN, Adjunct Faculty | Safe Patient Mobilization, 2 CEUs | 2019 | Reinforces the importance of safe patient handling thereby improving patient health outcomes while ensuring the safety of caregivers. |
| | PALS Renewal, 6 CEUs | 2019 | Increased knowledge on the latest knowledge and skills available to pediatric patients to ensure the best possible outcomes. |
| | NIHSS Renewal, 3 CEUs | 2020 | Increases knowledge of assessment, scoring and possible intervention on patients having a stroke. |
| | Statewide Disaster Drill, 4 CEUs | 2019 | Having the knowledge on how to respond to disaster emergencies, understanding individual roles, and being able to identify gaps, thereby providing opportunities on improving. |
| | Heart and Vascular Conference, 10 CEUs | 2018 | Increased knowledge on knowing the latest diagnostic tools, procedures, and medication management on cardiovascular system. |
| | Obesity Crisis Conference, 6.5 CEUs | 2018 | Increased knowledge on knowing that not all patients are the same and some require special handling, equipment, while reinforces the safety precautions to be taken by caregivers. |
| | San Diego ENA 911 Course, 6.5 CEUs | 2018 | Increased knowledge on current treatment available for drug dependent patients and how to assess without judgement. |
| | Non-violent Crisis Intervention, 4 CEUs | 2020 | Teaches de-escalation techniques to help prevent harm for both patients and caregivers. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Priscilla Chavez, MSN- Ed, RN, PHN, | Safe Patient Handling, 2 CEUs | 2015 | Learned safe ergonomics which I share with my students |

| PCCN, Adjunct Faculty | | | |
|--------------------------|---|------|--|
| | Stroke Code TPA Competency Drill-1.5 CEUs | 2016 | Share with my students the importance of early recognition of FAST and protocols during a stroke code in an inpatient setting |
| | Leadership Development, 4 CEUs | 2016 | System developments and different leadership styles which I share with my students |
| | Sharp Grossmont Hospital Injury Prevention Program, 2 CEUs | 2016 | Importance of proper body mechanics which I share with students |
| | Sharp University Leadership Development, 3.5 CEUs | 2016 | System developments and different leadership styles which I share with my students |
| | Sharp University Leadership Development, 4 CEUs | 2016 | System developments and different leadership styles which I share with my students |
| | Stroke Code TPA Competency Drill, 2 CEUs | 2017 | Share with my students the importance of early recognition of FAST and protocols during a stroke code in an inpatient setting |
| | Preventing the Acute-to- Chronic Pain Transition, 0.5 CEU | 2017 | Importance of quantitative and qualitative findings and managing pain. EBP shared with students |
| | Noninvasive Positive Pressure Ventilation, 0.5 CEU | 2017 | I cover this content with my students during my simulation scenario when a patient becomes septic and requires higher oxygenation and reducing the work of breathing |
| | Alcohol and Opiate Withdrawal: Is Your Patient at Risk? 0.5 CEU | 2017 | Evidenced based practice which I share with students |
| | Leadership Development Sharp, 3.5 CEUs | 2017 | System developments and different leadership styles which I share with my students |
| | Injury Prevention Program Safe Patient Mobilization, 2 CEUs | 2017 | Learned safe ergonomics which I share with my students |
| | Barcoding for Safety Infusion Suite, 2 CEUs | 2017 | Evidenced based practice which I share with students |
| | CERP B Leadership Development, 3 CEUs, | 2017 | System developments and different leadership styles which I share with my students |

| HRO Training 3.5 CEUs | 2017 | High reliability organizations and how it relates to nurse satisfaction. |
|--|------|---|
| Recognize Subtle Stroke Signs: Quick Action Saves Brain, 0.75 CEU | 2017 | Share with my students the importance of early recognition of FAST and protocols during a stroke code in an inpatient setting |
| Heart Failure Guidelines: New Treatment Options, 1 CEU | 2017 | Evidenced based practice which I share with students |
| Delirium Challenge: Assessing, Managing in Acute/Critical Care, 0.5 CEU | 2018 | Evidenced based practice which I share with students |
| Owning your Future: Building Personal Resiliency in Times of Burnout and Challenging Environments, 1 CEU | 2018 | Evidenced based practice which I share with students |
| Support for the Second Victim, 0.75 CEU | 2018 | Evidenced based practice which I share with students |
| Renal Disease & Failure, 10 CEUs | 2018 | Evidenced based practice which I share with students |
| Leadership Development, 3.5 CEUs | 2018 | System developments and different leadership styles which I share with my students |
| Treatment of Heart Failure: An Update, 10 CEUs | 2018 | Evidenced based practice which I share with students |
| Clinical Management of Atrial Fibrillation, 10 CEUs | 2018 | Evidenced based practice which I share with students |
| Asking is the Answer: Mentoring Staff Nurses to Feel Empowered to Create Change in their Unit, 1 CEU | 2018 | Evidenced based practice which I share with students |
| Giving Safe, Sensitive Care to LGBTQ Patients & Families, 0.75 CEUs | 2018 | Evidenced based practice which I share with students |
| In-House Stroke Code, 3 CEUs | 2018 | Share with my students the importance of early recognition of FAST and protocols during a stroke code in an inpatient setting |
| Acute Coronary Syndrome, An Overview for Nurses, 15 CEUs | 2018 | Evidenced based practice which I share with students |

| | EPIC-3 IP Clincdoc Rover Core, 1 CEU | 2018 | Importance of informatics and rendering safe patient care. Shared with students |
|---|---|--------------------|---|
| | Value by Design for Leaders, 3 CEUs | 2018 | Leadership efficiency and staff engagement to include the new graduate RN. |
| | Inpatient Nurse Manager Core, 35 CEUs | 2018 | Importance of informatics and rendering safe patient care. Shared with students |
| | Legal Issues for Health Care Workers Scripps Mercy San Diego 4 CEUs | 2019 | Importance and relevancy for bedside nurses to include new graduate nurses on the importance of standards of practice and following policy and procedure. Including proper documentation in the patients EMR. |
| | Strategies for Management of Sepsis, 1 CEU | 2019 | Covered sepsis content to include pathophysiology, diagnosis, treatment, to include sepsis bundles in the simulation laboratory with a patient that became neutropenic. Critical that nursing students understand early recognition of sepsis and how to intervene. |
| | ACLS/BLS Renewal, 8 CEUs | 2015 | Helpful content to share with my simulation scenario as my patient requires a RRT event. |
| | ACLS Renewal BLS Renewal 6 CEU | 2019 | Helpful content to share with my simulation scenario as my patient requires a RRT event. |
| | Member of AACN and NLN | 2010 to present | Certified as a PCCN RN, share the importance of certification in promoting quality care to patients and promoting continued growth in education. |
| | Keeping Me Safe Avoiding Workplace Violence | 2019 | Importance of early recognition of patient behaviors and measures to de-escalate behavior and use of appropriate resources. Shared with students in simulation. |
| | Discharge Planning for Homeless Patient Population | 2019 | Discussion with students the importance of a safe discharge of a patient and the legal obligations of the care provider. Utilize all available resources for a safe patient discharge. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Colleen Gilhooly, RN, Adjunct Faculty | SICU Neuro Class, 2 CEUs | 2019 | Implemented the EBP information during clinical shifts and clinical conferences for senior nursing students. |
| | Problem Solving Strategies, 2 CEUs | 2019 | I attend webinars and conferences that provide me with the latest information in |
| | ART Critical Care RN, 4 CEUs | 2019 | critical care. I use this information to teach my students in clinical settings. This assures |
| | Advanced Resuscitation Training-Critical Care, 4 CEUs | 2019 | that students are well prepared to provide excellent patient care upon graduation. |

| AACN Adult CCRN, CCRN-E, CCRN-K Certification Review Course, 19.50 CEUs | 2018 | Certification in critical care nursing helps me to better teach nursing students the critical care topics and better prepares them for safe and competent patient care. |
|--|------|--|
| Emergency Care Conference, 7 CEUs | 2018 | I attend webinars and conferences that provide me with the latest information in |
| PALS Update/Renewal, 6 CEUs | 2018 | critical care. I use this information to teach my students in clinical settings. This assures |
| Neuro Pharmacology, 2 CEUs | 2018 | - that students are well prepared to provide excellent patient care upon graduation. |
| Trauma, Critical Care and Acute Care Surgery, 22.5 CEUs | 2018 | |
| ART Critical Care RN, 4 CEUs | 2018 | |
| Cardiac Boot Camp, Day 2, 6 CEUs | 2018 | |
| Cardiac Boot Camp, Day 1, 6 CEUs | 2017 | |
| Advanced Burn Life Support, 7 CEUs | 2017 | |
| Critical Care Transport of the Patient with ICP, 1 CEU | 2017 | I attend webinars and conferences that provide me with the latest information in critical care. I use this information to teach |
| Responding to Inflight Medical Emergencies, 1 CEU | 2017 | my students in clinical settings. This assures that students are well prepared to provide excellent patient care upon graduation. |
| CPR for the Soul, 1 CEU | 2017 | |
| Vasoactive Medications in Pediatrics, 1 CEU | 2017 | |
| Respect the Airway, 1 CEU | 2017 | |
| Unlearning what you think you know about Cardiac Arrests, 1 CEU | 2017 | Lattend webiness and conferences that |
| Pediatric Traumatic Brain Injury, 1 CEU | 2017 | I attend webinars and conferences that provide me with the latest information in |
| 10 th Annual Nursing Inquiry and Innovations, 7 CEUs | 2017 | critical care. I use this information to teach my students in clinical settings. This assures that students are well prepared to provide excellent patient care upon graduation. |
| Family-Centered Care, 2 CEUs | 2017 | - excenent patient care upon graduation. |
| Neuro A Course, 4 CEUs | 2017 | |
| B.O.N.E.S., 7.5 CEUS | 2016 | |

| | Rapid Response Day | 2017-2020 | Participate in the curriculum development and implementation for a simulation, "Rapid Response Day." Students learn how to identify critical changes in patient status and implement emergency nursing interventions. |
|--|--|-----------|--|
| | NURS 230 team meeting | 2017-2020 | All faculty teaching senior nursing course participate in the team meetings to develop and implement the course and clinical material that is evidence-based and up to date with the latest information in nursing. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Miranda Grieshaber, RN, Adjunct Faculty | Worked with class professors and co-instructors to create applicable and comprehensive student experiences | 2015-2020 | Working as a team instead of in educational silos enhances the student experience. |
| | NIH Stroke Scale training and certification, Group A, 2 CEUs | 2018 | I learned about the latest evidence-based practices in stroke assessment, which I bring back to my clinical instruction. |
| | ACLS Provider certification, 14 CEUs | 2018 | ACLS courses provide the knowledge and skills needed to evaluate and manage the first 10 minutes of an adult cardiovascular emergency. Providing me with up-to-date evidence-based practice that I can share with my nursing students during clinical instruction. |
| | ACLS and BLS Provider certification renewal, 6 CEUs | 2020 | ACLS courses provide the knowledge and skills needed to evaluate and manage the first 10 minutes of an adult cardiovascular emergency. Providing me with up-to-date evidence based practice that I can share with my nursing students during clinical instruction. |
| | Nursing-Leading Future Nurses with Pride, 1 CEU | 2018 | Reinforcement to advocate and to pass on my knowledge to nursing students. The aim of this program is to serve as a guide for nurses to enhance and optimize their nursing students experiences. |
| | Safe Patient Mobilization, 2 CEUs | 2015 | Reinforces and increases knowledge around current practices in safe mobilization of patients including use of specialized equipment to prevent injury, which I bring back to my clinical instruction. |

| Safe Patient Mobilization, 2 CEUs | 2016 | Reinforces and increases knowledge around current practices in safe mobilization of patients including use of specialized equipment to prevent injury, which I bring back to my clinical instruction. |
|--|------|---|
| Safe Patient Mobilization, 2 CEUs | 2017 | Reinforces and increases knowledge around current practices in safe mobilization of patients including use of specialized equipment to prevent injury, which I bring back to my clinical instruction. |
| Safe Patient Mobilization, 2 CEUs | 2018 | Reinforces and increases knowledge around current practices in safe mobilization of patients including use of specialized equipment to prevent injury, which I bring back to my clinical instruction. |
| Safe Patient Mobilization, 2 CEUs | 2019 | Reinforces and increases knowledge around current practices in safe mobilization of patients including use of specialized equipment to prevent injury, which I bring back to my clinical instruction. |
| Safe Patient Mobilization, 2 CEUs | 2020 | Reinforces and increases knowledge around current practices in safe mobilization of patients including use of specialized equipment to prevent injury, which I bring back to my clinical instruction. |
| Geriatric Assessment 1.5 CEU's | 2020 | Learned how to tailor the nursing assessment of the older person when collecting information about your patients health history, conducting the physical exam, and assessing laboratory data. I also explored pharmacologic management and the relevant nursing responsibilities. Which I will include during my clinical instruction. |
| Heart Failure- HealthStream 1.0 CEU | 2020 | This course provided me with up-to-date and relevant heart failure research/clinical practice that I share with my students during clinical instructions. |
| Fluids and Electrolytes- HealthStream 1.0 CEU | 2020 | In this course, I learned about the fluid compartments within the body, fluid gain and loss, and solutes in body fluids. I also learned about electrolytes, passive and active transport, and the process of osmosis. Providing me with up-to-date and relevant information that I share with my students during clinical instructions. |

| Precepting with Pride, Class 2018, 7 CEUs | 2018 | This class helped me to be an effective teacher, professional role model, time manager, evidenced based practice champion, critical thinker, & effective communicator |
|--|------|--|
| Pressure injury Overview- A National Problem 1.0 CEU | 2020 | This module provided up-to-date and relevant research/ clinical practice initiatives from various organizations that have been developed to help healthcare professionals understand how to reduce or prevent the occurrence of pressure injuries along with Barriers that exist in implementing these guidelines that I will share with students. |
| Diabetic Foot Wounds - Manage the risk 1.0 CEU | 2020 | I learned about the latest evidence-based practices in appropriately caring for patients who develop diabetic foot wound, which I bring back to my classes. |
| Pressure Injury Prevention Programs: Planning and Considerations 1.0 CEU | 2020 | I was taught the most up to date information needed to build and implement a facility-wide pressure injury prevention program. Providing me with the most up-to-date and relevant research/ clinical practice that I will share with students during my clinical instruction |
| Sensitive and Dignified Care for the Bariatric Patient 1.0 CEU | 2020 | This is knowledge that I bring back to my clinical instruction that directly relates to what 1st semester nursing students are learning about. |
| Pressure Injury Risk Assessment 1.0 CEU | 2020 | This is knowledge that I bring back to my clinical instruction that directly relates to what 1st semester nursing students are learning. |
| Respiratory Depression in the Postoperative Patient: Monitoring for prevention 1.0 CEU | 2020 | This program provides nurses and respiratory professionals with the most upto-date knowledge they need to reduce the incidence of postoperative respiratory depression. This is knowledge that I bring back to my clinical instruction. |
| Cardiovascular Assessment - HealthStream 1.5 CEU | 2020 | This course prepared me to assess the cardiovascular and peripheral vascular systems by employing proper and up-to-date techniques for inspection, palpation and auscultation. Providing me with up-to-date and relevant information that I share with my students during clinical instruction. |

| Boundary for Safety- Inpatient Suite, 2 CEUs | 2017 | Receive and deliver up-to-date and relevant research/ clinical practice to students studying the field |
|---|-----------|---|
| Nurse Mentor Mentee Orientation, 2.5 CEUs | 2017 | This orientation program provides an introduction to the mentoring role for new nurse mentors within Sharp Healthcare it teaches how to facilitate successful role transition, social enculturation and professional development of the newly hired nurse. All of which will helped me to do the same with my nursing students as students on the unit in the clinical setting and when they transition into nurses after completion of the program This program improved instructor communication skills, organization and student engagement. |
| Nurse Mentor and Mentee Coordinator | 2017-2018 | I managed and helped develop a nurse mentor and mentee program on the nursing unit I worked on. I helped monitor the nurse mentors and ensure adherence to the structure, process and outcomes of the SHC nurse mentor program. I encouraged my coworkers to participate in the program and monitored all of their progress. This provided me with an increased ability to help facilitate the successful role transition, social enculturation and professional development of the nurses. It increased my organizational ability and grew my communication skills all of which I apply to my role as an instructor, increasing student engagement and helping them with the transition into new roles as a new nursing students in the clinical setting and when they transition into nurses post graduation. |
| Train and worked at Barnhart Cancer Center | 2020 | Expanded my knowledge and expertise into a new area of nursing. Increased my knowledge of caring for cancer patients and learning about radiation therapy. All of which I can share with my students to make them aware of the diverse nursing opportunities available for employment and further develop their knowledge regarding caring for Cancer patient and patient receiving radiation. |

| Trained and worked in the preanesthesia department doing laboratory testing for COVID and MSSA | 2020 | Expanded my knowledge and expertise into a new area of nursing. Increased my knowledge of preanesthesia services, addressing the needs of patients in the outpatient setting and learning about the opportunities available for employment in the outpatient setting which will help expand the students knowledge of the diverse nursing opportunities available for employment. |
|--|-----------|---|
| Trained and worked in the Family Resource Center | 2020 | Working collaboratively with various disciplines to create a new department and work flow to help provide holistic care for the patient and their family during a pandemic when family members are not allowed to visit the family. Improving instructor communication skills and working relationship with different disciplines providing the students with a more well rounded clinical experience and better learning opportunities. |
| Trained and worked for Worksite Wellness | 2019-2020 | Provided wellness screenings for patients in an outpatient setting. Provided patients with their results and educated them on lifestyle changes to help improve their health. This provided me with personal clinical experience in an out patient setting that I will share with students while instructing them in the clinical setting. |
| Trained and worked as IR coordinator | 2020 | This provided me with a unique opportunity to learn about Interventional radiology, the services they provide and the knowledge necessary to prepare patients for their procedure. It also allowed me to develop professional relationships with a different department opening the door for potential float opportunities for my students. |
| Pop warner Cheerleading Assistant coach | 2019-2020 | Provided a platform as a role model in the community to encourage hard work, positive life choices, teamwork, respect, commitment and strong values. Served as a positive influence for the girls to respect and look to as a role model Reinforced my communication, motivational and organizational skills and those of my team. All of which helps me to be a better instructor and role model for my students. While serving as a role model for them and |

| | | | encouraging them to give back to them community. |
|--|---|---------|--|
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| David Halpern, NP, RN, Adjunct Faculty | Diabetes & Stroke, 2 CEUs | 2018 | Assists with providing APRN diabetes knowledge and condition management to increase students understanding. |
| | Pathophysiology: The Respiratory System, 15 CEUs | 2018 | Aids in demonstrating and applying physiologic aspects of the respiratory system during class. |
| | Responsible Opioid Prescribing, 3 CEUs | 2018 | Learned current guidelines for prescribing controlled substances, which can be discussed with class. |
| | Low Back Pain, 15 CEUs | 2017 | Learned various etiologies of low back pain, treatment options which can be shared with students. |
| | Pressure Ulcers & Skin Care, 5 CEUs | 2017 | As pressure ulcers are encountered in vast clinical settings, learning updated clinical guidelines will aid ability to provide proper techniques in clinical care for nursing students. |
| | Post-Traumatic Stress Disorder, 15 CEUs | 2016 | As more attention is given to mental health, understanding both pharmacological and nonpharmacological management techniques for PTSD establishes an awareness to an often overlooked condition. |
| | Analgesic Overdose, 5 CEUs | 2016 | Reinforced foundational understanding of the signs/symptoms/treatment options in the analgesic overdose patient which is extremely relevant as there is a continued analgesic overdose epidemic. |
| | Clinical Care of the Transgender Patient, 10 CEUs | 2016 | Understanding the clinical care of the transgender patient is extremely important to nurses / nursing students as they encounter this growing patient population. Having an awareness to diverse cultures/groups will assist in developing well rounded nursing skillsets. |

| | AANP, UNAC | 2020 | Helps me support nurse unions and understanding of clinical competencies which then can be shared with students to aid in developing a more interlocked nursing culture. |
|--|---|---------------------|---|
| | Family Nurse Practitioner Certification | 2017 | Being nationally certified in my specialty area helps me stay current and demonstrates my authority on the subject matter. |
| | Preceptor: FNP student | 2018 | Provided APRN student the opportunity to gain hands-on experience in Family Medicine and Urgent Care, provided me a contiguous opportunity to develop a variety of educator techniques. |
| | Gave safety talk on germ prevention and hand hygiene to kindergarten class. | 2019 | Outreach opportunism for K-12 allows students to know how important community health nursing is and gives awareness that children are an integral part of the health of communities. |
| | Student/Staff dodgeball tournament for Gizmo's Kitchen | 2019 | Illustrates the connectiveness that nursing has among gender and age. Allows students to interact with peers and learn teamwork, which is a valuable skill for practicing |
| | | | nurses. |
| Faculty | Activity/Committee | Year(s) | |
| Faculty Vanessa Hochreiter, MSN, RN, Adjunct Faculty | Activity/Committee Promoting & Preserving Health in a Diverse Society, 4 credits | Year(s) 2019 | nurses. |
| Vanessa Hochreiter, MSN, RN, | Promoting & Preserving Health in a Diverse | | nurses. Value to Student Success Educated in how to promote health among a diverse society as is reflective of our |
| Vanessa Hochreiter, MSN, RN, | Promoting & Preserving Health in a Diverse Society, 4 credits Advanced Pathopharmacology & Physical Assessment for the Nurse Educator, 4 | 2019 | nurses. Value to Student Success Educated in how to promote health among a diverse society as is reflective of our nursing program and community Improved and fine tuned physical assessment techniques using Shadow Health online simulation program. Nursing students use different types of simulation programs so as a nursing educator I need to know how to use these programs for the |

| ACLS Update/Renewal Course, 6 CEUs | 2018 | Maintains ACLS certification by instruction on any changes and being up to date with the latest protocols by the American Heart Association. This ensures safety of the students and the patients in case of emergency situations on campus or in the clinical setting. |
|---|------|--|
| Integrating Theory & Research for Evidence- Based Practice, 4 credits | 2018 | Educated in incorporating foundational and updated theories and using evidenced based research in order to provide better patient outcomes. Students benefit by their instructor incorporating those theories and the use of the latest reliable information. |
| Advanced Nursing Practice, 4 credits | 2018 | Educated in learning theories and teaching strategies that are the foundation of nursing in order to educate students and lay the foundation for their education. |
| Healthcare Informatics & Technologies, 4 credits | 2018 | I am able to use informatics and technology to improve educational delivery to my students and also educate them on using data and informatics to guide their nursing education and subsequent practice |
| Policy & Politics in Nursing & Healthcare, 4 credits | 2018 | Educated on the importance of policy making and involvement in politics in order to advocate for nursing education and the nursing profession |
| Pediatric Nurse Certification Review Focused CE Series, 29.50 CEUs | 2017 | Comprehensive review of pediatric anatomy, disease, and care specific for pediatric populations according to ages and development. This education is shared with students to educate and possibly encourage them to be interested in the specialization. |
| Chemotherapy & Biotherapy Provider Course Renewal Program, 2 CEUs | 2016 | Renewed the certification in order to provide the safest most up to date care for patients receiving chemotherapy and biotherapy. Reviewed latest developments in stem cell and bone marrow transplants. This information is beneficial to students for them to be able to knowledgeable about chemotherapy, biologics, and educate patients on side effects of the different therapies. |
| PALS Update/Renewal Course, 6 CEUs | 2016 | Maintains PALS certification by instruction on any changes and being up to date with the latest protocols by the American Heart Association. This ensures safety of the students and the patients in case of |

| | ACLS Update/Renewal Course, 6 CEUs | 2016 | emergency situations on campus or in the clinical setting. Maintains ACLS certification by instruction on any changes and being up to date with the latest protocols by the American Heart Association. This ensures safety of the students and the patients in case of emergency situations on campus or in the |
|---|---|------------------|--|
| | Phone banking for candidate for San Diego County Supervisor | 2020 | clinical setting. Volunteered by making phone calls to elderly or at risk adults after first stay at home orders due to Covid-19. We asked questions regarding having food, medications, and provided resources for delivery of essential goods. This is modeling for students to become active in times of need to their community. |
| | National Association of Hispanic Nurses- Health Fair in conjunction with Family Health Centers of San Diego | 2019 | Participated as one of the lead RN's at a health fair promoting resources available to the Barrio Logan community. Glucose, blood pressure, and hematocrit and hemoglobin point of care testing provided for free and education and resources for follow up provided. I supervised nursing students, MA's, CNA's, and LVN's with the testing. This models the importance of volunteerism and community involvement to the students |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Chrissy Manthorpe BSN, RN, Adjunct Faculty | Neuro Stroke Clinical Coordinator, Hospital wide committee | 2015- present | Increase knowledge around hemorrhagic and ischemic strokes and nursing interventions for both. |
| | Renal Disease and Failure, 10 units | 2020 | Pathophys teaching on different types of renal disease and interventions in an inpatient setting. |
| | Pressure Ulcers and Skin Care | 2020 | Able to teach students what to look for in pressure ulcers and preventative treatments. |
| | Diabetes and Stroke, 10 units | 2020 | Teachings that provide me the ability to teach students about the relationship between diabetes and the risk of a stroke. |

| | Care of the Pediatric Trauma, 15 units | 2019 | Teachings that provide me the evidence based practice to teach students about pediatric traumas. |
|--------------|---|-----------------------|---|
| | ACLS/Pals | Completed Annually | Advance cardiac life support for adults and children. The ability to review the crash cart with students. |
| | Precept with Pride | 2016 | Recognition for precepting students, staff, and new grads to the intensive care unit. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Amy McVeigh, | Student Progression | 2016- | Interprets and enforces academic policies |
| Nursing | Committee | Present | related to students' academic standing. |
| Student | | | Thoroughly reviews student status to |
| Success | | | provide re-entry after program exit. |
| Advisor | | | Addresses student needs by recommending |
| | | | resources and support services upon re- |
| | | | entry. |
| | Nursing Program | 2016- | Monthly sessions connect prospective |
| | Previews | Present | nursing students with the nursing program. |
| | | | Session provides an overview of the nursing |
| | | | program, application process, career outlook, degree advancement, and |
| | | | expectations. Includes a Q&A session. |
| | | | Exposure to in depth program information |
| | | | informs students on their pathway toward |
| | | | application. |
| | Interdisciplinary | 2016- | Twice-monthly sessions provide an |
| | collaboration: Intro to | Present | overview of all Allied Health and Nursing |
| | Health Professions | | programs at Grossmont College, including |
| | | | the application process, career outlook, |
| | | | degree advancement, and expectations. |
| | | | Includes a Q&A session. Presents the |
| | | | necessary information for students to |
| | | | decide which health professions program to |
| | | | pursue. Representatives from the |
| | | | counseling department are in attendance to |
| | | | answer questions and encourage |
| | Nursing Student Sugges | 2010 | development of an ed plan. |
| | Nursing Student Success Bootcamp | 2018- Present | One-day bootcamp for incoming cohort after their acceptance and prior to their first |
| | Dootcamp | FIESEIIL | day of the nursing program. Assists students |
| | | | in preparing for the rigor of the nursing |
| | | | program. Focuses on on-campus and off- |
| | | | campus resources, habits of success, test- |
| | | | taking, study skills, ethics, professionalism, |
| | | | time management, and organizational skills. |

| | QPR (Question, Persuade, Refer) Gatekeeper Training for Suicide Prevention | 2017 | Suicide prevention. Trained to use the QPR method to de-escalate a mental health crisis and get students connected with mental health services. |
|---|--|------------------|---|
| | AB540 Ally Training | 2017 | Trained to create and maintain a welcoming and supportive environment for undocumented students and to understand the needs and issues of undocumented students and their families. Button placed on office window to make allyship known to students. |
| | Safe Zone Ally Training | 2018 | LGBTQ+ Allyship. Trained to understand the vocabulary, promote inclusive practices, and identify ways our organization can continue to be a more safe and inclusive space for students. Safe zone sticker placed on office window to make allyship known to students. |
| | Military Ally Training | 2019 | Awareness of the unique cultural and social background of students in the military community (veterans, active, and dependents). |
| | Sexual Harassment and Discrimination Prevention Training | 2020 | Trained to recognize and address occurrences of sexual harassment and sexual discrimination. |
| | Culturally Responsive Evidence-Based Practices for Engaging with Communities of Color Training | 2020 | Promoted understanding of terminology, factors impacting disparities in mental healthcare, and strategies for addressing mental healthcare disparities. |
| | Mental Health First Aid Provider Training and Certification | 2016 & 2020 | Trained to recognize and assist students in crisis who may be experiencing a psychiatric emergency. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Judy Medina, MS, RN, Nursing Student Success Advisor | Student Progression Committee | 2014- Present | Interprets and enforces academic policies related to students' academic standing. Thoroughly reviews student status to provide re-entry after program exit. Addresses student needs by recommending resources and support services upon reentry. |
| | Nursing Program Previews | 2014- Present | Monthly sessions connect prospective nursing students with the nursing program. Session provides an overview of the nursing program, application process, career outlook, degree advancement, and expectations. Includes a Q&A session. |

| | | | Exposure to in depth program information informs students on their pathway toward application. |
|----------|---|------------------|---|
| co | nterdisciplinary ollaboration: Intro to ealth Professions | 2014- Present | Twice-monthly sessions provide an overview of all Allied Health and Nursing programs at Grossmont College, including the application process, career outlook, degree advancement, and expectations. Includes a Q&A session. Presents the necessary information for students to decide which health professions program to pursue. Representatives from the counseling department are in attendance to answer questions and encourage development of an ed plan. |
| V | et Net Ally Training | 2015 | Assists in understanding veteran's experience in the classroom, military postservice culture, & veterans issues in higher education. |
| | uestion Persuade Refer QPR) Training | 2015 | Suicide prevention. Trained to use the QPR method to de-escalate a mental health crisis and get students connected with mental health services. |
| Sa | afe Zone Ally Training | 2017 | LGBTQ+ Allyship. Trained to understand the vocabulary, promote inclusive practices, and identify ways our organization can continue to be a more safe and inclusive space for student. Safe zone sticker placed on office window to make allyship known to students. |
| | ursing Student Success ootcamp | 2018- Present | One-day bootcamp for incoming cohort after their acceptance and prior to their first day of the nursing program. Assists students in preparing for the rigor of the nursing program. Focuses on on-campus and off-campus resources, habits of success, test-taking, study skills, ethics, professionalism, time management, and organizational skills. |
| CC Pi | nterdisciplinary ollaboration: resentations in the ounseling department. | 2019- Present | Worked with the counseling department to schedule Allied Health and Nursing presentations at their meetings once per semester. Promotes close communication between the counseling and AH&N departments to ensure accuracy of up-to- |

| | | | date info on program application & advising. |
|--|---|---------------|---|
| | Mental Health First Aid Provider Training and Certification | 2020 | Trained to recognize and assist students in crisis who may be experiencing a psychiatric emergency. |
| | Sexual Harassment & Discrimination Prevention Training. | 2020 | Trained to recognize and address occurrences of sexual harassment and sexual discrimination. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Michele Olive BSN, RN, Adjunct Faculty | Advanced Life Support | 2018, 2020 | Maintains ACLS certification by instruction on any changes and being up to date with the latest protocols by the American Heart Association. This ensures safety of the students and the patients in case of emergency situations on campus or in the clinical setting. |
| | Pediatric Advanced Life Support | 2018, 2020 | Maintains PALS certification by instruction on any changes and being up to date with the latest protocols by the American Heart Association. This ensures safety of the students and the patients in case of emergency situations on campus or in the clinical setting. |
| | Evidence Based Practice - 3 Units | 2020 | Helped me teach students to utilize the latest research and evidence based protocols to improve clinical practice and patient outcomes. |
| | Principals of Research in Nursing - 3 Units | 2020 | Helped me teach students nursing research to find the latest research and evidence based practices. |
| | Nursing Theory - 3 Units | 2020 | Helped me teach students to understand the role of nursing, patient assessment, interventions and overall patient care. |
| | Safe Patient Mobilization, 2 hours | Yearly | Helped me teach students proper body mechanics to avoid injury. |
| | Disaster Drill, 4 hours | 2019 | Helped me teach students to understand the role of triage in disaster situations and to prioritize care in emergent situations. |
| | Pediatric Clinical Skills Workshop, 4 hours | 2019 | Helped me teach students advanced assessment and interventions for the pediatric population. |
| | Trauma Nursing Core Course, 17.65 hours | 2018 | Helped me teach students advanced assessment skills for emergent situations. |

| | Advanced Concepts, 7 | 2017 | Helped me teach students advanced nursing assessment and care of the critical patient. |
|--|---|-----------|---|
| | Do no Harm Skills Fair, 2 hours | 2016 | Helped me teach students the importance of patient safety. |
| | SGH Injury Prevention Program, 2 hours | 2016 | Helped me teach students proper body mechanics to avoid injury. |
| | Precepting with Pride, 7.5 hours | 2016 | Instruction on how to properly precept nursing students and new graduate nurses. Helped me teach students prioritization, head-to-toe assessment, medication administration, critical thinking, nursing interventions, evaluations on interventions, patient teaching, etc. |
| | Management of Disruptive Behavior, 2 hours | 2015 | Helped me teach students how to effectively manage patients that are escalating, including body stance, eye contact, reassuring words, and offering comfort. |
| | PCU Advanced Concepts, 7 hours | 2015 | Helped me teach students advanced nursing assessment and care of the progressive care patient. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Cassie Paulsen, MSN, RN, Adjunct Faculty | Pathophysiology: The CNS, 15 hours | 2019 | At this conference I learned the latest evidence-based practice related to the central nervous system and share this knowledge with my students in the clinical setting |
| | Certified Emergency Nurse Exam Preparation Course, 16.25 hrs. | 2019 | At these conferences I learn the latest evidence-based practice related to emergency care and share this knowledge with my students in the clinical setting |
| | 12 Lead Interpretation Course, 6 hours | 2018 | The patients we care for require students to interpretate 12 lead EKG's. This class provided me tips to bring back to the students in the clinical setting. |
| | PALS Renewal, 8 hours | 2018 | Required course for teaching in the clinical setting |
| | Advanced Cardiovascular Life Support Instructor Renewal, 6 hours | 2018 | Required course for teaching in the clinical setting |
| | NIH Stroke Scale Training, 3 hours | 2018 | This course provided the latest evidence-based practice regarding stroke care, which I bring back to the clinical setting to my students. |
| | MSN in Nursing Education, 490 hours | 2017-2018 | To help develop and implement nursing education to students. Also to serve as a |

| | | | role model to my students to obtain a higher level of education in Nursing. |
|---------|---|-----------|--|
| | Post-traumatic Stress Disorder, 15 hours | 2017 | This course provided information on Post-traumatic Stress Disorder and how to care for the patient in the hospital setting, which I bring back to the clinical setting to my students. |
| | Certified Pediatric Emergency Nurse Review Course, 14.33 hours | 2017 | At these conferences I learn the latest evidence-based practice related to emergency care and share this knowledge with my students in the clinical setting |
| | Analgesic Overdose, 5 hours | 2016 | At this conference I learned the latest evidence-based practice related to analgesic overdose and share this knowledge with my students in the clinical setting |
| | Medical Marijuana and Other Cannabinoids, 5 hours | 2016 | This course provided information on medical Marijuana and other Cannabinoids, which I bring back to the clinical setting to my students. |
| | Bacterial Resistance: Are We Running Out of Antibiotics?, 5 hours | 2016 | This course provided the latest evidence- based practice regarding antibiotics, which I bring back to the clinical setting to my students |
| | Clinical Care of the Transgender Patient, 10 hours | 2016 | This course provided information on how to care for transgender patients, which I bring back to the clinical setting to my students. |
| | Critical Event Team Training, 8 hours | 2016 | This course provided the latest evidence-based practice regarding caring for a critical patient, which I bring back to the clinical setting to my students. |
| | Ischemic Stroke, 10 hours | 2015 | This course provided the latest evidence-based practice regarding stroke care, which I bring back to the clinical setting to my students. |
| | Chronic Pain: Current Concepts and Treatment Strategies, 15 hours | 2015 | At this conference I learned the latest evidence-based practice related to chronic pain and how to manage pain in the acute phase for these patients and share this knowledge with my students in the clinical setting |
| | Kaiser Education & Research Committee | 2017-2018 | To provide education to nurses based on the latest evidence-based practice in patient care to decrease hospital acquired infections, errors, falls and pressure ulcers in the hospital setting. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |

| Hannah Wevodau MSN, RN, MICN, CEN, Adjunct Faculty | Earned MSN from Western Governors' University | 2017-2020 | Improves instructor's overall Nursing knowledge, communication, and writing. Emphasizes the importance of life long learning. Increases adherence to evidence-based practice. |
|--|--|-----------|---|
| | Advanced Concepts, 7 hours | 2018 | Increase knowledge around current practices/research in critical care Nursing |
| | Management of disruptive behaviors, 2 hrs. | 2018 | Increases knowledge in areas of neurological and physiatry nursing and management of disruptive behaviors. |
| | Pediatric Trauma, 1.5 hour | 2018 | Increases knowledge of the trauma patient, specifically pediatric traumas. |
| | Trauma Triage/Burns, 1.5 hours | 2018 | Increases knowledge of critical care and emergency nursing. Reinforces critical thinking. |
| | Best Practices for Evaluation and Treatment of Agitation, 4 hours | 2018 | Increases knowledge in areas of neurological and physiatry nursing and management of disruptive behaviors. |
| | Cerner New Hire Training, 7 hours | 2017 | Improved instructor's knowledge regarding a new EMR system. Orientation of Cerner charting and training will be improved with an instructor familiar with the system. |
| | HeartMate II & III & Heart Ware Class, 6 hrs. | 2017 | Increases knowledge of VAD patients. Will be able to emphasize current best practice of care. |
| | EBHR MICN Training | 2017 | Receive and deliver up-to-date and relevant research/ clinical practice to students studying the field |
| | Stroke Certified RN, 4 hours | 2017 | Increases knowledge of Neurological conditions and stroke identification. Competency in NIHSS scale which students will see in the clinical setting. |
| | UCSD FCA, Snake Bites, New 2017 SD County Protocols, 6 hours | 2017 | Receive and deliver up-to-date and relevant research/ clinical practice to students studying the field |
| | FCA/Protocol Updates | 2017 | Receive and deliver up-to-date and relevant research/ clinical practice to students studying the field |
| | California Emergency Nurses Association, 6.25 hours | 2016 | Raise standards of professional presence. Reinforce foundational learning theories and teaching strategies used in class |
| | Annual Skills Competency, 7.5 hours | 2016 | Allows for updates on current best practice. Increased knowledge of any changes in practice for skills that will be seen in the clinical setting |

| | The Other End of the Stethoscope, 1.5 hours | 2016 | Eye opening discussion about a patient's experience with healthcare. Allows for instructor to help students remember the reason they went to Nursing school and to emphasize relationships. |
|---|--|---------------|--|
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| James Zapf, MSN, FNP, Adjunct Faculty | Azusa Pacific University, 675 hours Granted degree of MSN, Family Nurse Practitioner. | 2015-2018 | This allowed me to bring more advanced nursing concepts and knowledge to students. I am able to help share experiences from the field of advance practice nursing with students, introducing them to future career development possibilities early on. Also, advanced teaching concepts and study habits acquired while pursuing MSN allows me to share these strategies with students now. I am able to increase students' motivation to further their education and careers as a result of these skills and experiences from obtaining my MSN |
| | UCLA First Assistant Course, 120 hours | 2019 | learned skills and knowledge required to become a perioperative nurse. These skills have been used to educate and inspire students about the possibilities that exist in the role of perioperative nurses |
| | Men in Nursing conference | 2015, 2018 | Men in Nursing conferences help me support the men in our program, which is a minority group that faces challenges from both inside and outside the profession. |
| | Grossmont Nursing Skills lab | 2018 | This allowed me to gain experience assisting students with assessment and other nursing skills, sharing with them my years of nursing experience. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Pat Murray, Specialty Lab Technician IV | Grossmont College Technology Committee Co-Chair | 2018-2020 | Allied Health and Nursing programs are always on the cutting edge with technology. Serving on this leadership committee helps bring all perspectives to the policy and decision-making table and helps keep all employees informed about college technology initiatives. Since Public Stay at home orders this year, technology has been a pivotal part of student progress. Having a connection with software needs and exposing disparities, our programs have been equitable for all students to have what they need to succeed. Especially through |

| | | | support from CARES and foundation funding. |
|--|---|---------|--|
| | Hazmat Waste Generator Training Title 22 4-hour training certificate | 2020 | Because our labs generate hazardous waste, the technicians take special responsibility to handling sharps and biological waste in coordination with our facilities management. |
| | Working remotely to set up virtual simulation experiences during Covid. | 2020 | Due to lack of clinical facilities, students needed to do virtual simulations to get their clinical hours in. |
| | Being an essential worker on campus to set up occasional simulation experiences during Covid. | 2020 | Due to lack of clinical facilities, students needed to practice skills and do simulated patient care to get their clinical hours in. |
| Faculty | Activity/Committee | Year(s) | Value to Student Success |
| Dan Lopez, Specialty Lab Technician IV | Working remotely to set up virtual simulation experiences during Covid. | 2020 | Due to lack of clinical facilities, students needed to do virtual simulations to get their clinical hours in. |
| | Being an essential worker on campus to set up occasional simulation experiences during Covid. | 2020 | Due to lack of clinical facilities, students needed to practice skills and do simulated patient care to get their clinical hours in. |
| | Lab Technician, Building Marshall | 13 | Support the students and faculty, ensuring a safe environment to study. |
| | Purchasing of supplies for off-campus use. | 2020 | To make sure we have adequate supplies in stock to make supply kits for nursing students to take home during the pandemic. |

| Provide on-campus technological support to faculty and students during lectures, computerized exams and simulation labs. Assist in the use of computers, smart boards, camera systems, and Med stations. Help record nursing simulation and skill testing. | 2019 | These services help make the students more comfortable with technology and prepare them with the tools they will need in todays nursing careers. |
|--|---------------|--|
| All required training by our College and District, including California title 22 hazardous waste. | 2020 | Keeping current as a lab technician helps me better assist students with their needs during on site labs. |
| Building Marshall | 2019, 2020 | Maintains a safe environment for the students during on-campus activities. |
| Nursing Family Day, Nursing Orientation, Nursing Transfer Day, Hospital Day. Nursing Pinning Ceremony, | 2015-2020 | A well-planned event will help the students get the most out of each day. |
| Commencement Ceremony | 2019 | Volunteering at commencement shows the student we care about their education from start to finish. |
| Coordination of Care with Respiratory Therapy | 2019 | During simulation, I worked with the Respiratory Therapy department to have students provide a brief review of oxygen delivery devices and review of non- invasive BIPAP delivery devices. Promoting working with the interdisciplinary team and coordination of care. |

7.1 Referring to the above table, what activities contributed most to student success?

Student success is at the forefront of what all faculty do at the college. Many full-time faculty members have attended workshops, conferences, and seminars on how to improve teaching and learning strategies. These have contributed to student success by helping them challenge students' critical thinking skills, which is the basis for The National Council Licensure Examination (NCLEX) that they will take upon graduation from our program. Part-time faculty spend more time in workshops and conferences that keep their bedside skills up to date with the latest evidence-based practice. This serves our students by ensuring that they are being taught current practices in their clinical rotations. This contributes to student success by making the students more knowledgeable, impressive, and marketable when it comes to their job search. The faculty's breadth and depth of knowledge and experience makes it impossible to pick out one or two activities that contribute the most to student success. It is at the heart of all we do.

7.2 Please provide an overall reflection on your department's activity displayed in your table.

Due to the requirements for continuing education by the Board of Registered Nursing (BRN) of 30 CEUs every two years, all faculty members frequently attend meetings, trainings, and conferences to keep current with nursing knowledge and skills. While not all of these trainings are directly related to Student Success, it does show a commitment to the discipline, which in most cases directly translates into better, more current teaching for the students. Additionally, our full-time faculty members regularly participate in professional development activities related to teaching and learning put on by the Department, the Division, and the Professional Development Office. Faculty has also participated in a number of discipline-specific professional development activities. These courses, conferences, and seminars have helped improve teaching in the classroom and clinical environment; enhanced the use of technology in the classroom and clinical environment; and enhanced NCLEX item writing for examination questions to name a few.

Part-timers participate in fewer on-campus events, but their commitment to Student Success is also high, as evidenced by the number of hours they put in working with the students and preparing to do so by attending meetings and seminars aimed at translating their years of experience into successful methods of teaching and learning. In addition to the 30 CEU requirement of the BRN, content experts are required to attend 240 hours of continuing education over the past three years in their specialty area.

The nursing program is actively engaged in the community. Many of the community events and educational seminars listed in Table 7.1 are attended by both faculty and students, which sets a strong example for the students of giving back and lifelong learning. These include veteran events like Operation Stand Down, health fairs on campus and in the community, vaccine clinics, outreach events to local high schools, career advancement outreach at local hospitals, and nursing specialty organizations' meetings and workshops to name a few.

Faculty have presented at professional conferences on campus and off, as part of their professional commitment to nursing and the community. The nursing faculty is also engaged with other disciplines on campus. They work closely with the Biology and English faculty, as well as that of all the Allied Health Division to foster greater interprofessional education (IPE). The contributions the nursing faculty make as a member of the campus community have been significant. They are highly engaged and want to make a difference.

| 7.3 | Are your overall faculty professional development needs sufficient to ensure students are successful in your program? |
|-----|--|
| | Yes <u> X</u> No |
| | Yes, we have plenty of professional development opportunities through our Department, Division, the Professional Development Office, our hospital partners, Health Workforce |

Initiative, and the dozens of nursing specialty organizations to which we all belong.

SECTION 8 – FISCAL & HUMAN RESOURCES

PURPOSE OF SECTION 8: To assess if the college is meeting the resource needs of your department and if your department is using those resources efficiently.

Fiscal Resources

| | FA15 | FA16 | FA17 | FA18 | FA19 |
|------------------|---------|---------|---------|---------|---------|
| Earned Enroll | 420 | 427 | 457 | 463 | 421 |
| Max Enroll | 402 | 420 | 463 | 466 | 445 |
| % Fill | 104.48 | 101.67 | 98.70 | 99.36 | 94.61 |
| Earned WSCH | 2791.41 | 2992.56 | 3284.49 | 3224.98 | 3198.27 |
| Total FTEF | 15.98 | 15.54 | 19.07 | 19.32 | 22.91 |
| Earned WSCH/FTEF | 174.68 | 192.57 | 172.23 | 166.92 | 139.60 |
| | | | | | |
| | SP16 | SP17 | SP18 | SP19 | SP20 |
| Earned Enroll | 438 | 465 | 492 | 456 | 324 |
| Max Enroll | 421 | 476 | 510 | 475 | 327 |
| % Fill | 104.04 | 97.69 | 96.47 | 96.00 | 99.08 |
| Earned WSCH | 2754.58 | 3176.77 | 3460.71 | 3140.02 | 2319.32 |
| Total FTEF | 17.18 | 16.81 | 19.47 | 19.82 | 16.77 |
| Earned WSCH/FTEF | 160.34 | 188.98 | 177.75 | 158.43 | 138.30 |
| | | | | | |
| | SU15 | SU16 | SU17 | SU18 | SU19 |
| Earned Enroll | 7 | 10 | 7 | 16 | 1 |
| Max Enroll | 0 | 0 | 5 | 16 | 3 |
| % Fill | n/a | n/a | 140.00 | 100.00 | 33.33 |
| Earned WSCH | 14.00 | 20.00 | 52.00 | 130.80 | 2.00 |
| Total FTEF | 0.12 | 0.11 | 0.70 | 1.07 | 0.01 |
| Earned WSCH/FTEF | 116.67 | 181.82 | 74.29 | 122.24 | 200.00 |

8.1 Describe any patterns in enrollment; maximum enrollment and % fill in the program since the last program review. What are typical section maximum sizes (capacity) for your courses and what dictates those caps? Have you changed the number of sections offered and/or section sizes in response to changes in demand? If so, what effect has it had?

The maximum enrollment numbers for the nursing program are dictated by our ability to secure clinical placements for clinical hours required by the accrediting and licensing bodies. Our maximum enrollment per cohort is 40 students. This is comprised of both new students and re-entering students (when applicable). When new students are admitted into the program, a waiting list is kept of alternate candidates in the event a student declines their invitation or decides to withdraw before classes start. Every effort is made to fill vacated seats to start the cohort with a full 40 students. We typically receive between 250-300 applications per application period and have more qualified applicants than we can admit each cohort. We do not roll over waiting lists to the following semester. If a candidate is unsuccessful in securing a seat in the program, they are able to reapply in the following application period. Long wait times to enter nursing programs are, unfortunately, an industry-wide problem.

The maximum enrollment for first semester courses is 40 students. There is only one section of each course. In second and third semester, two sections of 20 students each is the cap for enrollment. In the 4^{th} semester, there is only one section for the courses and the enrollment cap is 40 students. Actual numbers of students in each course fluctuates due to attrition and re-entry students. If a student exits the program, they can petition to re-enter the program within one year into the semester/course they withdrew from. So, it is possible, at times to have more than the cap enrolled in a course.

We are unable to increase caps at this time due to limited clinical experience opportunities. During the COVID-19 situation, we had to suspend classes in Spring 2020 due to clinical sites not allowing students to continue in their scheduled rotations. The Board of Registered Nursing (BRN) stipulates the clinical component of each course must occur concurrently with the didactic instruction; therefore, we were not able to continue the courses still in progress.

We were unable to invite a cohort for Fall 2020 as suspended courses from Spring 2020 had to be moved to the fall.

8.2 Describe and explain any patterns in Earned WSCH, FTEF and Earned WSCH/FTEF since the last program review. Please explain changes in FTEF due to changes in faculty staffing levels. For courses/sections with low Earned WSCH/FTEF explain their importance in the program and measures the department/program has taken/plans to take to improve efficiency and/or balance low and high efficiency offerings and/or maximize course % fill.

Our program routinely fills cohorts entering the program to maximum capacity. There is some decline due to attrition during the program, however, due to the nature of the program, students cannot enter the program at any point other than first semester (rare exceptions occur and are evaluated on a case-by-case basis). Attrition is discussed in Section 3. Our full-time (FT) faculty staffing decreased in Fall 2019 by one to a total of nine when one FT faculty member (Clinical Placement Coordinator) reduced to part-time (PT) status in preparation for retirement which will occur at the end of the Spring 2021 semester. We are seeking replacement for this FT position through the Staffing and Prioritization Committee at the college. We require a full complement of ten FT faculty to support maximum enrollment and to be in compliance with our accrediting bodies.

8.3. For money that you get from the college and/or from Perkins funds as part of your budget, is this amount adequate? What is this money used for to operate your department? If it is not adequate, please explain how additional funds would be used to improve student learning and success.

Grossmont College provides the financial resources necessary to ensure the solvency and consistency of the college's total education programs, including the nursing department. The nursing program budget accounts for approximately 2%-3% of the general budget. The Program also receives Carl Perkin's VATEA funds, which are designed to support faculty development, and the purchase of supplies, equipment, and software. The fiscal resources for the nursing educational unit are sufficient to meet the educational outcomes of the program.

8.4 If your program has received any financial support or subsidy outside of the college budget process (grants, awards, donations), explain where these funds are from, how they are used, and any other relevant information such as whether they are on-going or one-time.

The program has received assessment grants and funding from Grossmont Healthcare District which are designed to support faculty development, and the purchase of supplies, equipment, and software.

A variety of equipment has been purchased and upgraded since the last accreditation based on faculty and students input, as well as changes seen in the clinical facilities. The faculty recommends equipment purchases that are currently used in the community to provide up-to-date clinical instruction and/or to improve clinical skills. Examples of recent purchases are a third medication dispensing machine (PYXIS), updated Alaris infusion pumps, two ICU Medical Plum 360 IV Infusion Pumps newly in use at Scripps hospitals, a Braun infusion pump used at Alvarado hospital system, a CADD Solis Infusion Pump used at Kaiser hospital, a transportation gurney, multiple sequential compression devices (SCD), and four new laptops exclusively for student use.

The Enrollment Growth grant funds the FT Student Success Advisor positions.

The fiscal resources for the nursing educational unit are sufficient to meet the educational outcomes of the program.

Human Resources

| | FA15 | FA16 | FA17 | FA18 | FA19 |
|------------------|--------|--------|--------|--------|--------|
| FT Faculty Count | 9 | 7 | 8 | 9 | 9 |
| PT Faculty Count | 20 | 23 | 28 | 29 | 33 |
| Full-Time FTEF | 9.36 | 7.05 | 8.55 | 9.21 | 9.12 |
| X-Pay FTEF | 0.44 | 0.25 | 0.13 | 0.23 | 0.55 |
| Part-Time FTEF | 6.18 | 8.24 | 10.39 | 9.88 | 13.25 |
| Total FTEF | 15.98 | 15.54 | 19.07 | 19.32 | 22.91 |
| FT Percent | 61.33% | 46.98% | 45.52% | 48.86% | 42.21% |
| Permanent RT | 1.05 | 1.00 | 1.00 | 1.00 | 1.00 |
| Temporary RT | | | | | |

8.5 Describe the roles and responsibilities of FT versus PT faculty in your department. If any trends or changes are apparent in the past six years, please explain the reasons for them.

The faculty are responsible for development, implementation, and evaluation of the curriculum and student performance. Nursing 120, Nursing 132 and Nursing 230 are team taught. All other courses are taught by an individual faculty member. FT faculty are the primary resource for the development and revision of curriculum, although the PT faculty do have input into the process.

The lead instructor for each course works with the faculty on their team (each course has one to four PT faculty assigned to cover the clinical groups), including all the PT faculty to determine the effectiveness of the curriculum during the current semester, and what needs to be improved upon, deleted, or revised. All developments and revisions are brought up at the annual faculty retreat for discussion and approval.

FT and PT faculty conduct formative and summative evaluations of the students every semester. At the beginning of each semester or rotation, the lead course instructor ensures that all members of the teaching team have a full understanding of the evaluation tool so that there is congruence across the varied clinical groups or course sections in regard to evaluating and grading. In addition, grading rubrics have been developed for course assignments.

One course, Nursing Pharmacology, (no clinical component) has had a PT instructor teach the didactic lectures for the past two semesters. Historically, this course would be added to a FT faculty's teaching load, but at this time all FT teaching faculty have a full load and cannot take on the pharmacology course without going over load.

FT faculty also comprise departmental and divisional committees needed to keep the department running smoothly. Both FT and PT faculty are encouraged to join college committees as their schedules and expertise allow.

During the COVID-19 situation all FT faculty, as well as the PT faculty teaching the pharmacology course completed Emergency Remote Teaching (ERT) training to provide instruction in the remote environment so the program could continue despite the closure of the campus.

8.6 Are the current levels of staffing of faculty adequate? Discuss PT vs. FT ratios and issues surrounding the availability of PT instructors as well as duties and responsibilities of FT faculty members that influence their loads (such as reassigned time and use of overload).

There are nine FT teaching faculty and 36 PT faculty. As previously mentioned, the Clinical Placement Coordinator position was reduced to a PT position over the last year in anticipation of retirement of the faculty member in that position. This is an invaluable position that needs to be refilled with a FT faculty member and we are seeking this position through college procedures.

The Assistant Director of Nursing (ADON) is one of the faculty and has 50% time for instructional duties and 50% release time for her duties as the ADON. The program utilizes approximately 36 PT faculty every semester. The number of PT faculty has increased since the last accreditation. This is in response to California law AB 1061 which now limits the number of hours PT faculty can work per semester. Effectively, PT faculty cannot teach more than 12 weeks of clinical a semester. Grossmont College's semester is 16 weeks long, often split into 8-week courses, so PT faculty rotates through to allow for their maximum involvement with the program, while maintaining maximum hours allowed by law.

The nursing program recruits excellent PT faculty. Approximately 47% of PT faculty is Masters prepared. One PT faculty holds a DNP.

During the COVID-19 situation many of the clinical partners have decreased the group size allowed at the clinical sites. This has required us to hire even more PT faculty to cover the increased number of student clinical groups. This has resulted in overload for some PT and FT staff. We do not yet know if this will continue to be the trend once COVID numbers decrease. Will have to wait and assess as our clinical partners modify their protocols post-pandemic.

8.7 If staffing levels are not adequate, give a justification of your request for increased FT faculty based on how this position would contribute to basic department function and/or the success, retention and engagement of students in the program.

The department is currently in need of a FT clinical Placement Coordinator and a FT Associate Dean of Nursing. The current interim Associate Dean of Nursing is also a FT teaching faculty. A nursing faculty stepped up after the departure of the previous Associate Dean of Nursing and that position has yet to be permanently refilled. It had been posted, but was taken down due to the COVID-19 situation and other turnovers in the college administration. Both positions have been presented to the Staffing and Prioritization Committee for approval and hiring as soon as possible. Previously, when we have dipped below the ten FT faculty level, we have lost accreditation for the program. Luckily, at that time, we were able to quickly hire for the needed position and accreditation with an alternate body was established. If we lose accreditation again, however, it put the program at risk of being shut down as there is not another option for an accrediting body.

8.8 In the table below, list non-faculty positions that are responsible to your program (by title rather than by individual name). This list should include classified staff as well as work study and student workers.

Indicate the FTE/hours and where funding comes from for these positions. Add or delete rows to the table as needed. If you have questions on how to complete this table, please contact the Program Review Committee Chair.

| Position | Funding | FTE/Hours | | | | | |
|---|---|--|---|--|--|--|---|
| | | YR 1 | YR 2 | YR 3 | YR 4 | YR 5 | YR 6 |
| Health Professions Specialist | Classified Employee | 1 | 1 | 1 | 1 | 1 | 1 |
| Health Science Technicians (2) | Classified Employee | 1 (33% allocation to nursing for each) | 1 (33% allocation to nursing for each) | 1 (33% allocation to nursing for each) | 1 (33% allocation to nursing for each) | 1 (33% allocation to nursing for each) | 1 (33% allocation to nursing for each) |
| Student Success Advisors (2) | Enrollment Growth and Retention Grant | 1@32hrs/ week | 1@32hrs/ week 1@32hrs/ week(1 semester) | 2@32hrs/ week | 2@32hrs/ week | 2@32hrs/ week | 2@32hrs/ week |
| Administrative Assistant to Senior Dean AHN | Classified Employee | 1 | 1 | 1 | 1 | 1 | 1 |

8.9 Briefly describe the duties for each position. Include a discussion of any changes in terms of non-faculty staffing and describe the impact on basic department function and/or the success of students in the program. Are current staffing levels adequate in non-faculty positions? If not, give a justification of your request for increased resources.

The Health Professions Specialist is an instrumental face of the nursing department. She is responsible for collecting and initial review of student applications. She fields all initial questions from potential students about the nursing program. She keeps records for all courses to be in compliance with the college and accrediting bodies. She is present as a secretary at all faculty meetings and prepares meeting minutes. She works closely with the pinning ceremony committee to ensure ordering of pins for graduates and coordination of the event. She maintains and updates the department website in collaboration with leadership. When on campus, she greets office visitors and answers telephones, screens and refers calls, schedules appointments and meetings, or takes messages as appropriate. She also performs a host of other clerical duties and is a support to all faculty.

Two FT **Health Science Technicians** maintain the classrooms, labs, and computer lab. They assist with simulation set ups and purchasing the equipment and supplies and maintain the functionality of current equipment. They maintain schedules of classroom and labs for instructional support. During COVID-19 they have managed the AHN division campus access calendar, ensuring approved on-campus activities are able to be socially distanced, disinfected, and safe for students and faculty. The Health Science Technicians are shared within the AHN division.

The Student Success Advisors (SSA) work with students from the beginning to the end of their nursing education. They meet prospective students through nursing program previews, "Intro to Health Professions," on and off-campus, during high school outreach, high school and community tours, transferfairs, jobfairs, and career days. The Test of Essential Academic Skills (TEAS) is a standardized admissions test used by many nursing schools to evaluate potential candidates for possible acceptance into their program. The TEAS exam assesses knowledge and skills in reading, math, science and English language use. The SSAs analyze TEAS assessments of students entering the program, identify students at risk, and implement interventions to help them succeed. For current students they collaborate to provide a nursing student success bootcamp, and they conduct introductory appointments individually with all incoming students. They are able to then refer students to on and off-campus resources. They continue ongoing monitoring and assessment of student progress, create individualized nursing student success plans, setting goals with student and faculty input, and follow up with remediation for exam scores <75%. The SSAs engage in personal advising, update students on volunteer and scholarship opportunities, and keep appointments with students working on re-entry requirements. The SSAs have walk-in availability for students in crisis when on campus, now available via Zoom, phone, Facetime during COVID-19.

The SSAs are essential in identifying barriers to success: financial hardship, working too many hours, social problems, learning disabilities, ESL, transportation issues, childcare issues, mental health/substance abuse issues, and cultural issues, among others.

They teach test-taking strategies, study skills, personal preparation, time management, organization, professionalism, and ethics. They collect, synthesize, and maintain data on TEAS scores, academic performance, and attrition. They help with mock interviews for those about to graduate, and participate

in the pinning ceremonies which celebrate the success of our students.

The Administrative Assistant to the Senior Dean of AHN calculates full and part-time instructor loads from information available and prepares hire letters for the nursing department. She assists in coordinating classroom assignments and facilities requests for special events. She compiles information and data for reports and assists in the preparation of reports as required.

SECTION 9 – SUMMARY AND RECOMMENDATIONS

PURPOSE OF SECTION 9: The purpose of this section is to demonstrate how your department/programs ties in to the college's 2017 – 2022 Strategic Plan targeted goals of Outreach, Engagement and Retention.

9.1 Summarize program strengths in terms of:

Outreach

The program has established various methods of outreach to Grossmont College students, and the community at large. Nursing Program Previews are held monthly and provide a detailed overview of the program, its requirements, application procedures, the nursing role, job outlook, and advancement. Similar presentations are provided to biology classes at Grossmont College for those entering the health professions. The program also participates in on-campus and off-campus career fairs, as well as high school career days, and various additional outreach opportunities as they arise. Nursing students are also provided opportunities to participate in outreach by hosting booths, participating as speakers in student panels, and attending other outreach events with a program representative.

Engagement

Opportunities for student feedback are provided throughout the program. Students complete course evaluations at the end of each semester, and are invited to attend monthly faculty meetings to provide feedback or discuss any concerns. A mentorship program is in place, where those in their second, third, or fourth semester can mentor students in their first semester of the program. Mentors are student volunteers who provide guidance and provide peer-to-peer support. The program also has a very active California Nursing Student Association (CNSA) chapter that participates in outreach, fundraising, food drives and food basket donation to students with food insecurities, development and distribution of care packages to the homeless, and various other community service activities. The CNSA also acts as the collective voice of the student body with representatives from each cohort attending faculty meetings. The CNSA recruits and hosts speakers from various nursing specialties to present at each of the chapter's meetings. Additionally, nursing student volunteers visit biology classes on campus to provide information and guidance to pre-nursing majors from the student perspective. One example of a major change resulting from student feedback is a change in the scrub company with which the students contract. This resulted from students expressing dissatisfaction with the quality and durability of the products as compared with the cost. Another example is the change in policy allowing students to start IVs on each other after students presented a well backed factual argument on the importance of this skill.

Retention

The program has established a multilayered system of support in order to improve retention. Upon acceptance to the program, all students attend an extended orientation introducing them to the program, its requirements and expectations, the resources available on and off campus, and they meet their first semester professors, Student Success Advisors (SSA), the program Director and Assistant Director, and representatives from support services. Prior to their first day of the nursing program, all students attend a Nursing Student Success Boot Camp that provides students with study tips, time management and organizational techniques, discussion on ethics and professionalism, and an extended introduction to available resources. During their first three weeks of the program all students will meet with a Student Success Advisor for an introductory appointment to discuss their individual needs, level of preparation, any potential barriers to success, and individualized resource referrals will be provided.

A process of early identification of "at-risk" students allows for early intervention and follow up throughout the program. A detailed remediation process is in place for students who do not achieve a passing score on an exam at any time in the program. Students will develop a remediation action plan in concert with their professor and an SSA to address any concerns leading to the unsatisfactory score. Follow up occurs with these students to ensure the action plan is completed. The program also has a thorough re-entry process. Students who exit the program complete an exit interview with the program director and have follow-up exit maintenance meetings with an SSA while out of the program in order to maintain connection, and to ensure the student has the support and resources they need for a successful return and completion.

The COVID-19 situation brought many challenges in transitioning to remote learning environments for both didactic and clinical learning. Despite these challenges, the students remained engaged due to the dedication and creativity of the faculty in building alternate learning experiences in the virtual environment. We held town hall style meetings with the students to better understand their challenges and expectations in the remote environment. Faculty and SSAs ensured contact with any students who reached out for help or appeared to be struggling academically or personally.

Despite the challenges of COVID-19, only two students exited the program for pandemic-related reasons (needing to go back to work full-time to support their family). Though we struggle in this area, we have met our benchmark for program completion. Having the two SSAs, structured remediation protocols, a dedicated faculty, and meeting individually with students who are considering exiting the program aids in retention and program re-entry for those that do chose to leave the program.

9.2 Summarize program weaknesses in terms of:

Outreach

Evaluation surveys identified student concerns with the counseling department's advising on prenursing general education. To remedy this concern, a representative from the nursing department attends counseling department meetings at least once per semester to reinforce nursing program requirements and to provide any updates. Counselors are also invited to Nursing Program Previews to discuss general education requirements with prospective nursing students. This is planned with the goal of improving consistency and communication between nursing, counseling, and the students.

Engagement

There was a learning curve as we were forced to move to remote learning environments due to COVID-19. The hardest transition is for virtual skills labs and virtual simulations. We are piloting some new software for virtual simulation. We had one platform from the publishers of the medical surgical textbook, but the included scenarios are limited in scope. Additional platforms as well as networking with other ADN programs for innovations in virtual skills and simulation should be prioritized. Despite these challenges, the students remained engaged due to the dedication and creativity of the faculty in building alternate learning experiences in the virtual environment.

As previously mentioned, response rates from employer and alumni surveys remain low. We will continue to brainstorm ideas for increasing the response rates, though notably, the responses we do receive are overwhelmingly positive. During the COVID-19 situation the faculty attempted to contact all recent graduates from the past four cohorts by personal email to assess how they are managing as new nurses during the pandemic. Not all responded, but those who did were grateful for the outreach and had compelling stories of their experiences as well as some happy and sad personal experiences since graduating form the program.

Retention

The program continues its attempts to improve fluctuating attrition rates by developing or expanding programs to address the varying contributors to attrition. Faculty tutoring, early identification of at-risk students, and a detailed remediation process have been expanded to address academic issues. The Nursing Student Success Boot Camp and program orientation attempt to provide a good foundation for success to address personal concerns. Outreach detailing the role of the nurse, as well as subsequent reinforcement at program orientation attempt to address attrition due to a misunderstanding of the nursing role or program expectations, which is a cause of student exits within the first few weeks of the program.

9.3 Describe any concerns that may affect the program before the next review cycle such as retirements, decreases/increases in full or part time instructors, addition of new programs, external changes, funding issues etc.

As previously mentioned, the absence of a permanent Associate Dean of Nursing is a priority. We are hopeful the college staffing committee will approve this position to be posted in the first quarter of 2021. Also mentioned is the retirement of our Clinical Placement Coordinator which reduces our full-time staff by one. We are also hoping the staffing committee will see fit to post this position in the first half of 2021 as to not jeopardize our program's accreditation status.

The uncertainty of the future related to the COVID-19 situation is sure to impact the nursing department. At present, our clinical hours are reduced, our clinical group sizes are reduced, all didactic learning is happening remotely, and we have access to campus for only the most critical hands-on skills learning. We are likely to continue to need software support for virtual simulation labs. We are likely to need to keep increased numbers of part-time faculty to cover the increased number of clinical groups and virtual learning activities. This will also require increased funding.

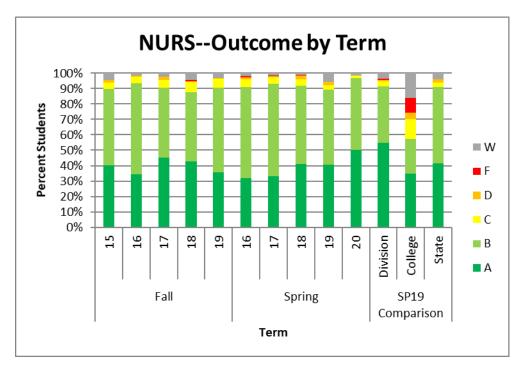
We have been working with members and leadership from the Science Department at the college on amendments to the offerings and unit assignments of prerequisite science courses. Our accrediting body has tasked us with reducing our overall credit hour requirements, specifically as related to science prerequisites. The goal is to align with other ADN programs and compliance measures of the Board of Registered Nursing (BRN).

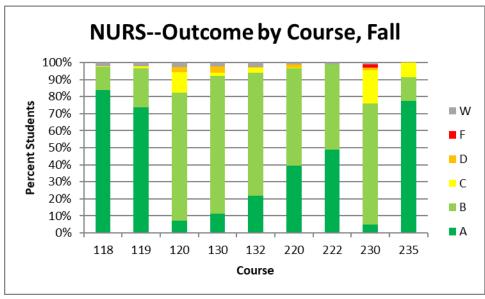
9.4 Make a rank ordered list of program recommendations for the next six-year cycle based on the College's new Strategic Plan which includes outreach, engagement, and retention.

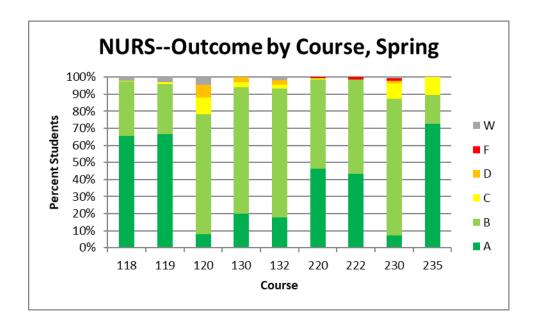
Program Review Recommendations:

- 1. Develop a succession plan for the Departmental Dean.
- 2. Continue to reduce the Nursing Program attrition rate while maintaining high NCLEX pass rates.
- 3. Continue to explore platforms for virtual learning for skills labs and simulation.
- 4. Continue to write grants for Program support.
- 5. Continue to work with the Science Department to modify required science units to be in compliance with recommendations from our accrediting bodies.
- 6. Increase implementation of interdisciplinary education activities.

Appendix 1
Grade Distribution Summaries

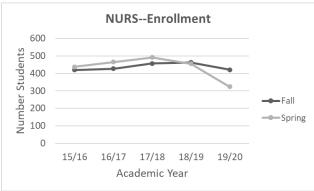






Appendix 2 Enrollment Data

Total Enrollment



Disaggregated Enrollment Data

| Term Desc | Fall | Fall 2018 | | Fall 2019 | | Fall 2020 | |
|------------------------|----------|------------|----------|------------|----------|------------|--|
| Ethnicity (9) | Students | % of Total | Students | % of Total | Students | % of Total | |
| African American/Black | 2 | 1.38% | 2 | 1.38% | 2 | 1.42% | |
| + Asian | 31 | 21.38% | 27 | 18.62% | 25 | 17.73% | |
| | 36 | 24.83% | 45 | 31.03% | 42 | 29.79% | |
| | | | 1 | 0.69% | 2 | 1.42% | |
| Other/Unknown | 2 | 1.38% | 2 | 1.38% | 1 | 0.71% | |
| Pacific Islander | | | | | 2 | 1.42% | |
| | 18 | 12.41% | 18 | 12.41% | 13 | 9.22% | |
| White | 56 | 8.62% | 50 | 34.48% | 54 | 38.30% | |
| Total | 145 | 100.00% | 145 | 100.00% | 141 | 100.00% | |

| Term Desc | Fall | 2018 | Fall | 2019 | Fall | 2020 |
|---------------|----------|------------|----------|------------|----------|------------|
| Gender Desc | Students | % of Total | Students | % of Total | Students | % of Total |
| Female | 116 | 80.00% | 113 | 77.93% | 107 | 75.89% |
| Male | 27 | 18.62% | 31 | 21.38% | 33 | 23,40% |
| Other/Unknown | 2 | 1.38% | 1 | 0.69% | 1 | 0.71% |
| Total | 145 | 100.00% | 145 | 100.00% | 141 | 100.00% |

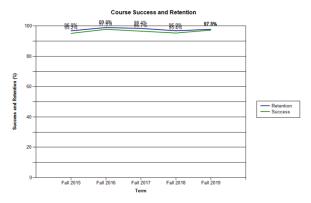
| Term Desc | Fall | 2018 | Fall | 2019 | Fall | 2020 |
|---------------------------------|----------|------------|----------|------------|----------|------------|
| Student Age at Snapshot - Band4 | Students | % of Total | Students | % of Total | Students | % of Total |
| ⊞ 18-20 | 3 | 2.07% | 2 | 1.38% | | |
| ⊉ 21-24 | 40 | 27.59% | 38 | 26.21% | 36 | 25.53% |
| ± 25-29 | 46 | 31.72% | 36 | 24.83% | 41 | 29.08% |
| | 43 | 29.66% | 53 | 36.55% | 47 | 33.33% |
| ± 40+ | 13 | 8.97% | 16 | 11.03% | 17 | 12.06% |
| Total | 145 | 100.00% | 145 | 100.00% | 141 | 100.00% |

Appendix 3 Student Retention and Success Data

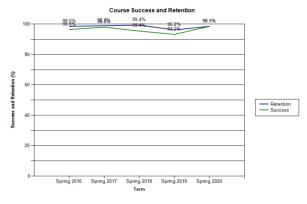
College 5-YR Averages: Success 69% and Retention 84%

College Targets: Success 75% and Retention 85%

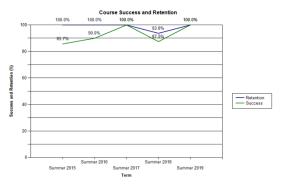
All Students: Fall



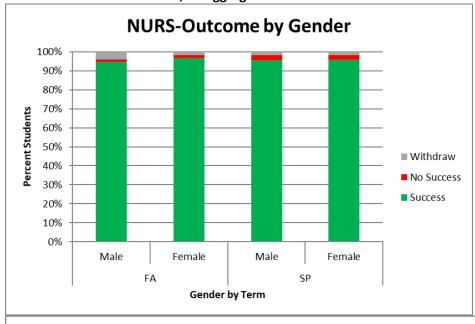
All Students: Spring

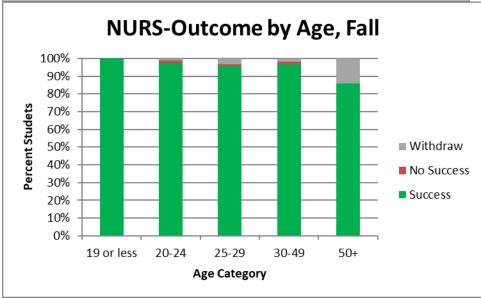


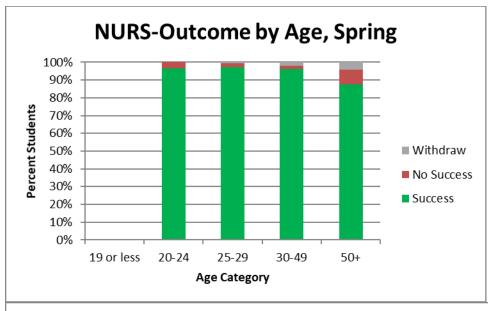
All Students: Summer

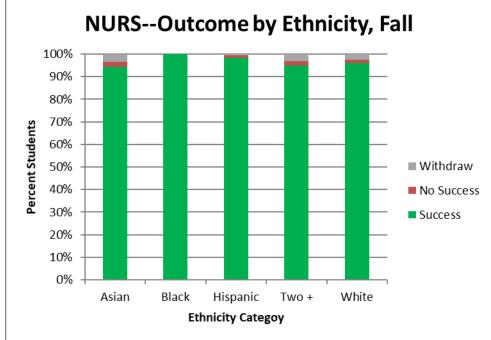


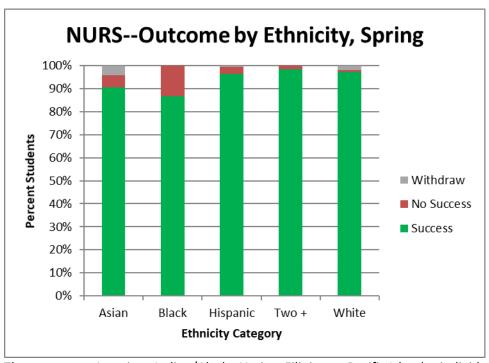
Student Success & Retention, Disaggregated











There were no American Indian/Alaska Native, Filipino or Pacific Islander individuals in the data set so these categories are not shown.

Appendix 4 Checklist Documentation

a. SLOs

PROGRAM STUDENT LEARNING OUTCOMES (End of Program Outcomes)

Upon completion of the nursing program, the nursing graduate will:

- 1. Provide caring, patient-centered, safe, and holistic care that is culturally sensitive and utilizes critical thinking within the framework of the nursing process and evidence-based principles (SLO 1, 2, 3, 4).
- Communicate effectively when providing care for multicultural patients and effectively promote patient advocacy for patients and families with integrity (SLO 5).
- 3. Safely implement the professional nursing role as defined by the California Nursing Practice Act and the American Nurses Association principles of ethical practice (SLO 6).
- 4. Engage in the life-long learning as part of the professional commitment of the Registered Nurse role (SLO7).

PROGRAM OUTCOMES

- 1. NCLEX-RN pass rates will be at or above the national mean.
- 2. Program completion rates within 6 semesters will be at least 80% or higher.
- 3. At least 85% of graduates, alumni, and employers will indicate satisfaction with the Grossmont College AND program.
- 4. At least 75% of graduates will be employed as an RN or enrolled in an advanced degree program within 12 months of graduation.

STUDENT LEARNING OUTCOMES (SLOS) LEVELED BY FIRST AND SECOND YEAR

SLO #1 - First Year: Demonstrate knowledge of nursing practice utilizing biopsychosocial theories and concepts in the performance of the registered nursing role by:

a. Utilizing the nursing process to develop a plan of care for patients using biopsychosocial theories and concepts in the implementation of patient care in the registered nursing role.

SLO #1 - Second Year: Integrate knowledge of biopsychosocial theories and concepts when providing patient care by:

- a. Applying knowledge of nursing practice utilizing biopsychosocial theories and concepts in performing the professional nursing role.
- b. Formulating a holistic comprehensive plan of care for acute and chronic patients utilizing the nursing process, principles of health promotion and illness prevention, patient teaching and end-of- life care for patients throughout their lifespan.

SLO #2 - First Year: Demonstrate the skills and attitudes necessary to perform as an associate degree nurse in the professional nursing roles of:

- a) Provider of Care
- b) Manager of Care
- c) Member within a Discipline by:

Satisfactorily performing the basic clinical competencies of a first-year student in the categories of Provider of Care, Manager of Care, and Member within a Discipline.

SLO #2 - Second Year: Integrate the skills and attitudes necessary to perform as an associate degree nurse in the professional nursing roles of:

- a) Provider of Care
- b) Manager of Care
- c) Member within a Discipline by:

Satisfactorily performing the complex roles, skills, and responsibilities of a second-year student in the categories of Provider of Care, Manager of Care, and Member within a Discipline.

SLO #3 - First Year: Demonstrate critical-thinking skills in the implementation of the nursing process while providing safe patient care and meeting the needs of culturally diverse patients within multidisciplinary health care systems by:

a. Applying the knowledge and critical-thinking skills developed to safely provide basic patient care.

SLO #3 - Second Year: Implement critical-thinking skills in the implementation of the nursing process while providing safe patient care and meeting the needs of culturally diverse patients within multidisciplinary health care systems by:

a. Intervening competently and safely for groups of health care consumers in complex patient care situations within a multidisciplinary healthcare system.

SLO #4 - First Year: Utilize evidence-based research to provide quality health care, initiate change and improve nursing practice by:

a. Utilizing evidence-based research in the planning and implementation of basic nursing care.

SLO #4 - Second Year: Select evidence-based research to provide quality health care, initiate change and improve nursing practice by:

- a. Implementing evidence-based research in the planning and implementation of complex nursing care for individuals, families, and groups of health care consumers.
- b. Evaluating the importance and effectiveness of evidence-based research in nursing practice.

SLO #5 - First Year: Employ the use of informatics and effective communication skills to manage and coordinate care for the health care consumer in collaboration with other health care professionals by:

- Utilizing communication skills (verbal, nonverbal, interpersonal, and communication technology) as he/she learns to practice the professional registered nursing role.
- Applying principles of time management and priority setting to provide care for patients in collaboration with other members of the health care team across the lifespan.

SLO #5 - Second Year: Effectively employ the use of informatics and effective communication skills to manage and coordinate care for the health care consumer in collaboration with other health care professionals by:

- a. Integrating communication skills (verbal, nonverbal, interpersonal, and communication technology) into the practice of the professional registered nursing role.
- b. Collaborating with other health team members to organize, manage, delegate, and coordinate patient care for the health care consumers and family members across the lifespan.

SLO # 6 - First Year: Implement the role of the professional nurse as defined by the California Nursing Practice Act and standards of nursing practice by:

a. Acting as a patient advocate and recognizing and adhering to the responsibility and accountability as a nurse in accordance with the role of the professional nurse.

SLO #6 - Second Year: Distinguish the role of the professional nurse as defined by the California Nursing Practice Act and standards of nursing practice by:

- a. Assuming responsibility and accountability for the student's nursing action(s) as they undertake the role of the professional nurse.
- b. Making complex clinical decisions that support health care consumer advocacy based upon the ethical and legal principles as described in the California Nursing Practice Act and the American Nurses Association Code of Ethics.

SLO #7 - First Year: Demonstrate the importance of life-long learning and quality improvement as part of their professional commitment to the nursing profession by:

a. Promoting collaboration and the development of lifelong learning skills as they begin the role of the professional registered nurse.

SLO #7 - Second Year: Support the importance of lifelong learning and quality improvement as part of their professional commitment to the nursing profession by:

a. Assuming responsibility and commitment for lifelong learning in the areas of evidence-based healthcare, informatics, practice-based learning, self-reflection, and assessment as the student undertakes the role of the professional registered nurse.

b. Instructional Operations



Hi Rhonda,

Thank you for your email. For your program review task, here is the information you are seeking from the list of Course Outlines Approved by the Governing Board as of December 2020:

| December 2018 |
|---------------|
| December 2018 |
| December 2018 |
| December 2018 |
| December 2016 |
| December 2016 |
| December 2019 |
| December 2019 |
| December 2018 |
| December 2018 |
| December 2016 |
| |

The full list can be found in the link shared above.

Let me know if you have any questions.

Thank you, Krista

Krista Ames-Cook, MA Ed.

Interim Supervisor
Instructional Operations (IOPS)
Grossmont College
Phone: 619-644-7153
Krista.Ames-Cook@gcccd.edu





Transforming Lives Through Education

Working remotely - correspondence via email preferred.

c. Articulation Officer

Date: October 20th, 2020

To: Peter Brooks, Department Faculty
From: M. Denise Aceves, Articulation Officer
Re: Nursing ● Program Review Checklist

The process of articulation is two-fold. First, transferability must be established. A transferable course is one that is taken at a community college and can be used for unit credit at a university. The next step is the articulation of courses deemed transferrable. Articulation is the formal, written agreement that identifies courses on a "sending" campus that are comparable or acceptable in lieu of specific course requirements at a "receiving" campus. Thus, articulation identifies courses that a student should take at community college to meet university degree requirements.

In response to your request for articulation information, in Nursing, all courses are transferable to the California State University. Any student who successfully completes these courses, can use the units as elective credit. Due to the nature of Nursing, there are no current course to course articulation with CSUs or UCs. Additionally, the California Community Colleges prepare students to be admitted into Nursing programs at the CSU and UC by offering and articulating lower division program prerequisites. These courses are typically found in other departments including English, Communication, Psychology, Chemistry and Biology. Consequently, the courses in Nursing are satisfactorily articulated.

The CSU transferability designations are listed at the end of each course description in the Grossmont College Catalog. The courses with CSU transferability will appear on the CSU transferability list that can be found on *ASSIST.org*. **Once ASSIST is fully operational, the department is encouraged to review the transferability list on <u>ASSIST.org</u> and work with me, the Articulation Officer, to correct any inconsistencies.**

Articulation is facilitated with current, concise and thorough course outlines. It is imperative that the outlines and text books listed be current. The requirement that course outlines be updated every 5 years through the Grossmont College Curriculum process is vital. Below I have listed the link to *The Course Outline of Record: A Curriculum Reference Guide Revisited*, a document adopted by the Academic Senate for California Community Colleges in Spring 2017, as well as the latest standards for CSU GE Breadth and IGETC.

Curriculum Resources

- The Course Outline of Record: A Curriculum Reference Guide Revisited
- Guiding Notes for General Education Course Reviewers

You are welcome to contact me directly at <u>mariadenise.aceves@gcccd.edu</u> with any questions regarding this report.

d. SLO Coordinator

Re: Program review email needed

Felicia Kalker <felicia.kalker@gcccd.edu> Wed 3/3/2021 3:25 PM To: Rhonda Morris <Rhonda.Morris@gcccd.edu>

① 1 attachments (595 KB) SLO Report NURS 030321.pdf;

Hi Rhonda, so sorry for the delay! Here is the Nursing SLO Report (attached). Nursing is current with SLO Assessments. Thank you, Felicia Kalker

e. Library





Hi Rhonda

Here's what we have in the library for support of the Nursing program:

Subscription to the streaming Video Database "Nursing Education in Video" An online collection of videos created specifically for the education and training of nurses, nursing assistants, and other healthcare workers. All of the videos in the collection are regularly reviewed for accuracy, currency, and compliance with US Federal regulations from agencies such as OSHA and CMS.

152 Nursing periodicals available through EbscoHost CINAHL Complete, Elsevier, EbscoHost Health Source Nursing Academic Edition, EbscoHost Academic Complete, and Gale Academic OneFile

521 Nursing books within the subjects of nursing, surgical nursing, gynecology and obstetrics, pediatric nursing, pharmacology, and homeopathy.

The Reserves collection carries textbooks for Nursing 118, 120,132. We were able to purchase an unlimited user license to access the electronic version of the textbook <u>Davis's drug guide for nurses</u> which is being used in Nursing 130, 132, 120, 118, 135, 155, 156, 210, and 220.

To maintain standards for Nursing accreditation, in 2019 Sarah Babini, Angela Ngo, and I went through all electronic and print books for nursing and discarded all items that were over 5 years old.

Please let me know if there is further information needed.

And congratulations on finishing up Program Review. Our department is just starting this term!

Nadra

Nadra Farina-Hess Librarian Grossmont College 8800 Grossmont College Dr. El Cajon, CA 92020 Office: Room 70-157 Phone: 619.644.7283



Ask me how to improve your Resource List

Academic Program Review-Follow-up Questions

After reading each report the program review committee develops a list of follow-up questions. This allows us to get a deeper understanding of your department's operations and guides our commendations and recommendations for the next program review cycle (6 years). We have tried to make these questions clear and very specific to minimize this effort. Please email the answers to the questions below to joyce.fries@gcccd.edu and Kelly.menck@gcccd.edu by: April 30, 2021 Thank you!!

| Section/Page | Question | Response |
|--------------|---|--|
| 1.1 | Is the LVN-RN program viable? | We evaluate on a case-by-case basis for the LVN-RN program, there's no long a "cohort" program for this option. There simply was not enough demand from potential students. We have created a workshop-style transition experience for LVNs who are accepted into the program. And they are assimilated into the second half of the second semester of the program. |
| 2.2 | Can you provide a little bit more details on how your Systematic Program Evaluation tool is utilized? | The SPE is utilized as a formative evaluation tool. It is a requirement of our accrediting body and helps provide a framework for data analysis related to end of program learning outcomes (and by extension our leveled student learning outcomes throughout the program) as well as our program outcomes. We discuss different aspects of the SPE on a rotating basis both at faculty meeting and our yearly nursing faculty retreats. It helps inform decisions on curriculum and assessment for the department. |
| 2.6 | Why is NUR 235 going to be removed after fall 2021? | It will be removed as a part of our revised curriculum. It was becoming increasingly difficult to secure clinical placements form this course and healthcare partners were telling us that they were no longer going to accept these individual clinical placements. SO the decision was made by the faculty during the curriculum reorganization to take it out and expand NURS230 to incorporate the leadership content as well as traditional group clinical experiences. It will not affect the overall number of clinical/lab hours the students will experience. This is in line with many other community college ADN programs (and more are making the same change for the same reason). During the COVID-19 pandemic we |

| | | ere forced to use a group clinical experience format as no preceptor slots were granted by our healthcare partners for one semester and only about 5 placements were granted the following semester. The group format is having good success and student evaluations have not shown dissatisfaction by the students with the revised experiences. |
|-----|---|---|
| 4.6 | Re: limited storage space - are there any security issues with storing equipment in classrooms? | It may not be ideal, but the faculty and lab techs have been diligent about keeping rooms locked when not in use. We have not been made aware of anything going missing. |
| 5.1 | What efforts are made to recruit non-white students to the program? | The Student Success Advisors are responsible for hosting tours of the program, going to community outreach events and local high schools to showcase the program. They provide nursing program previews and Introduction to Health professions and have been doing virtual presentations throughout the pandemic. |
| 5.2 | What efforts are made to support success for older students (50+)? | Extra support is usually needed by the few students we get that are 50+, usually in terms of computer skills. The faculty spends as much extra time with them as possible. Any students who may have specific needs are identified by and followed up by the Student Success Advisors. The SSAs and faculty work together to get the support needed for students and refer to ARC as appropriate. |
| 5.5 | How have you evaluated the benefits of the Mentorship Program? | This is addressed in the final program evaluations which re reviewed on a semester basis and discussed in-depth at the nursing faculty retreat if there are any areas of concern. |

GROSSMONT COLLEGE SPRING 2020 Nursing

PROGRAM REVIEW COMMITTEE SUMMARY EVALUATION

The committee recommends <u>maintaining</u> this program. Following are the committee's specific commendations and recommendations.

The Program Review Committee commends the department for:

- 1. 100% pass rate for NCLEX for 2019
- 2. Implementation of Student Success Advisors to assist in remediation and student follow up to combat attrition rates
- 3. Meeting SLO benchmarks at levels higher than the state
- 4. Finding alternative clinical placements and teaching strategies among a global pandemic
- 5. Offering dual enrollment in BSN programs in a variety of schools (local, fully online, etc.)

Committee recommends the following:

| Continue to review available virtual clinical simulation programs and consider purchasing if a need is determined Continue efforts in recruitment and retention of students of color | | | | | | | |
|---|-----------------------------|-------------------------------|--|--|--|--|--|
| | | | | | | | |
| College President | Program or Department Chair | Academic Program Review Chair | | | | | |

NURSING

| Academic | Fall | | Spring | |
|----------|--------|-----------|--------|-----------|
| Year | % Fill | WSCH/FTEF | % Fill | WSCH/FTEF |
| 2015-16 | 104.5 | 174.7 | 104.0 | 160.3 |
| 2016-17 | 101.7 | 192.6 | 97.7 | 189.0 |
| 2017-18 | 98.7 | 172.2 | 96.5 | 177.7 |
| 2018-19 | 70.3 | 166.9 | 96.0 | 158.4 |
| 2019-20 | 94.6 | 139.6 | 99.1 | 138.3 |