

# LOS ANGELES COUNTY COLLEGE OF NURSING AND ALLIED HEALTH

## ANNUAL PROGRAM EVALUATION REPORT

ACADEMIC YEAR: 2014-2015

REPORTING COMMITTEE: School of Nursing

### PART I: EVALUATION OF ANNUAL GOALS AND COLLEGE ASSIGNMENTS AS APPLICABLE

Evaluation of annual goals from the preceding academic year

#### 1. Maintain all course thresholds above 3.5

- Overall course ratings were above threshold for Semester 1, 2, 3, & 4.
- In the fourth semester's N242 course two survey items were below threshold for spring 2015. During that same period N243L course had one survey item that was below threshold. Will continue to monitor the progress of the plan of improvement with the expectation to seeing success in reaching goal.

#### 2. Implement all recommendations from the Program Review Workshop

- Summer Electives: An Ad Hoc Committee was assigned regarding peer learning and instructor guides and advises to go over concept maps, labs, and prep sheets. Members J. Teal, J. Anderson, M. Najera, Z. Ivory, M. Webster, & P. Major
- The SON Didactic Course Evaluation was updated to include "Tutoring" to item 1.4 and added item 1.8 to state "Answer only if you attended tutoring" to the statement "Tutoring has facilitated my understanding/learning of the course content and objectives."
- Planned Intersession Activities:
  - Simulation Lab Preparation during the intersession
  - Case Review Series
  - Clinical Enrichment
  - Refresher Course in Anatomy and Physiology
- Faculty will continue to review and discuss the SON and course expectations with students at the beginning of each semester and throughout the semester to solidify the expectations.
- Faculty to continue to encourage students to utilize the skills lab for enhancement of their learning.
- Use higher cognitive domains in developing test items to ensure that students are able to comprehend more difficulty questions in preparation for transitioning to the more advance medical-surgical course and in preparation subsequently for passing of the NCLEX exam.
- Faculty will continue to implement the early intervention plan. If the student receives <70% on the first exam/quiz the student will need to see their clinical instructor.
- Continue scheduled tutoring. Each semester will designate schedule tutoring time. The schedule will be announced on the first day of class and placed on the bulletin board. Each semester will schedule tutoring once a week and track usage (sign in roster). The findings will be reflected in minutes and the Program Review. The schedule will be placed on the semester bulletin board. An announcement will be made the first day of class.

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### Implementation of recommendation to and from Committees/other Programs including status (If applicable):

#### Curriculum Committee

- *Change in DD&C Textbook. The Pickar textbook was reported as having more information in the reading assignment than necessary for testing and application in the clinical setting. Students assigned pharmacology textbook by Kee was sufficient and decreased the extraneous information and reading. The Kee pharmacology textbook as a replacement was implemented starting in the spring 2015.*
- *Shadow Health an electronic program that provides students a safe virtual environment for students to practice assessment with multigenerational clients will be implemented fall 2015. The program is an electronic resource that allows student access on and off campus and gives them the ability to practice assessments, use ISBARR and practice giving report to multiple healthcare personnel. The program can be used to accentuate student remediation plans, case studies, and alternative assignments. The purchase of the electronic program was placed on the required textbook list for incoming students.*
- *Quality and Safety Education for Nurses (QSEN): An adhoc from Curriculum committee was formed after much discussion of the best methods to incorporate QSEN into Student Learning Objectives (SLO's), course objectives, and into the Clinical Evaluation Performance Surveys. Each semester will continue to research methods to integrate the QSEN framework. The Curriculum Committee will continue to monitor to ensure the consistency in language and implementation of QSEN throughout the curriculum. Status : Ongoing*

#### Admission and Promotion

- *The Admission/Promotions Committee investigated the benefit of the increase in recency for sciences courses from 5 years to 7 years. The actual 7 year recency start in fall 2015 and only affects LVN-RN students who have been out of school for an extended period of time. Status: Ongoing*
- *ADN to BSN collaborative with California State University, Los Angeles: 8 students from the LACCONAH participated in the first cohort and 8 students in the second cohort. There is must discussion about writing a proposal to establish a 2+2 BSN program. B. Collier (Dean) will discuss the faculty interest in an ADN to BSN program with the Board of Trustees.*
- *Student Log Contact hour calculation: The goal is to have consistency in calculating hours spent with students. Contact hours will be based upon clock hours rather than the number of students. Calculation for hours will reflect whether the instructor met with one student or three students for one hour it is calculated as one hour.*

#### Semester I:

- *There were no specific recommendations from the workshop for the AY 2014-2015.*

#### Semester II:

- *Curriculum Committee recommended that the Semester Coordinator review and discuss semester II schedule to address student concerns regarding scheduling of classes, content covered per exam, and time needed for students to engage in clinical research of their selected patients.*

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### Semester III:

- Curriculum Committee concurred with semester II regarding the transfer of medications treating Myasthenia Gravis being transferred from pharmacology N231 to medical-surgical nursing N243.

### Semester IV:

- In the spring 2015, the Curriculum Committee recommend that the Content Experts and Semester Coordinator review teaching methodologies, assignments, and exam questions in N242 identified by student feedback due to items 1.3 & 1.7 falling below threshold. The committee also recommended that due to item 1.6 falling below threshold to review the written competencies. For the fall 2015, the 4<sup>th</sup> semester reviewed and revised the grading rubric for N242 written assignment, the Community-Based Nursing Model was presented in a lecture format. The N243L management-leadership competencies were reconfigured and assigned to faculty. Status: Awaiting feedback from course evaluations

### LVN-Transition, N125

- An adhoc committee reviewed the N125 course and implemented recommended changes, such as adding new case studies, change clinical dates to Tuesday & Wednesdays to improve communication and preparation time. There are no other recommendations for improvement at this time.

### Report on functions (To be completed by Programs only as applicable):

1. Maintained a relationship with the administrative structure of the College by participating in governance meetings and discussing school accomplishments and program needs.
2. Maintained formal and informal communication between local, state, regional agencies and cooperating institutions and their representatives. Maintain a partnership with California State University ADN to BSN Collaboration for community college students enrolled in the Los Angeles County program.
3. Promote an effected decision making process with regards to planning, implementing, and evaluating educational policies by allowing for expression and exchanged of opinions and information by faculty at all Faculty Organization meetings and through maintaining an open door policy.

## PART II: STUDENT PERFORMANCE EVALUATION

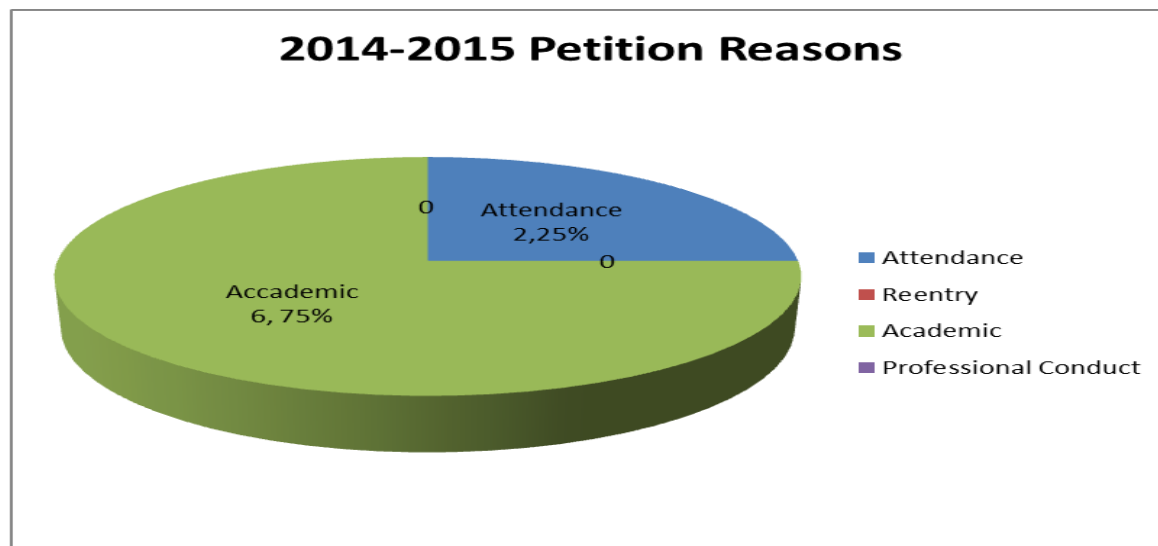
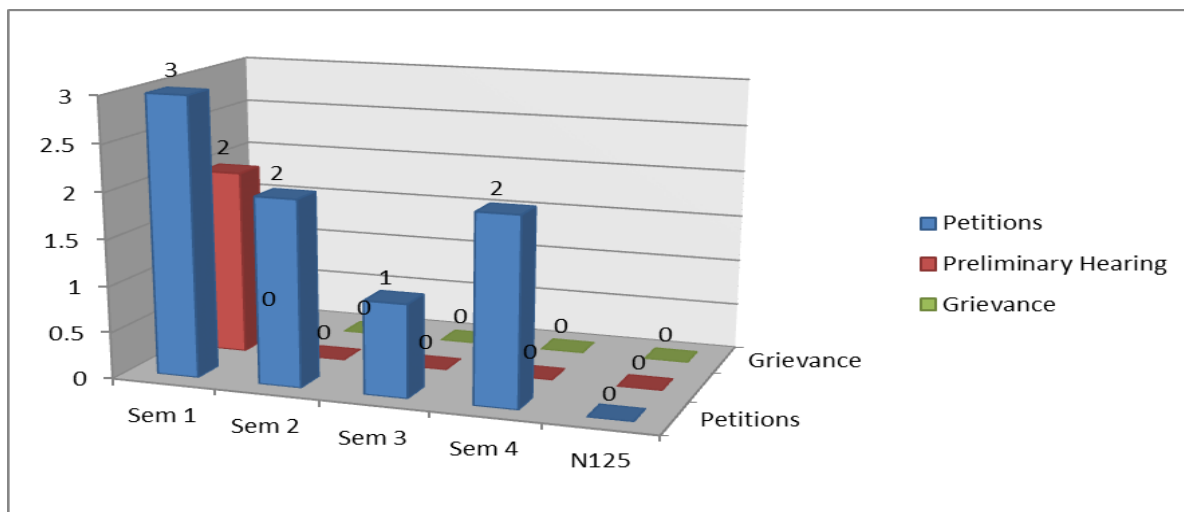
### Student related problems as applicable (include # of students):

Discuss any issues relating to Complaints, Petitions, Grievances, Withdrawals, Dismissals, Failures, and any others as applicable.

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There were a total of 4 Petitions and 1 Grievances for AY: 2014-2015

2014-2015	Semester I	Semester II	Semester III	Semester IV	N125
<b>Petition</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>0</b>
<b>Preliminary hearing</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Grievance</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



**Faculty /staff intervention to improve student learning:**  
All semester intervened to improve student success

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## Semester One

*Faculty is proactive in identifying and addressing problems students encountered in the theory and clinical courses. Remediation plans were formulated and implemented in collaboration with the students. If appropriate, students were referred to the Dean of Student Services for additional guidance. Written documentation of the student progress was specific and descriptive in nature. For the 2014-2015 AY, the attrition rate was 16.67 % due to withdrawals for personal/family reasons and failures from academic and clinical courses. Faculty was consistently available to students and conferences with them covered such areas as study habits, professional accountability in the clinical area, test review, and review of theory with clinical applications. Surveys rating of the instructors were very high, well above the 3.5 threshold. Faculty logged in their contact hours with the students however a totally accurate and clear picture of time spent with the students is difficult to quantify as teaching nursing is inherently a hands-on, direct contact type of profession especially in the clinical area. In addition, short frequent contacts with students via telephone, text messages, and emails during the weekdays and weekends are difficult to quantify in minutes to have exact cumulative contact hours.*

*Several strategies to enhance student success have continued with some newer approaches as well to include:*

- 1. Scheduled tutoring sessions.*
- 2. Simulation sessions using the High Fidelity Manikin for each clinical group.*
- 3. Continued use of Concept Mapping for clinical preparation.*
- 4. Intravenous Skills Workshop in Week 11 (1st Semester) so students were able to apply these skills in the clinical area.*
- 5. Nursing Care Plan and Physical Assessment Workshop day devoted to giving the students the opportunity to review care plan development with use of a case study and to practice head to toe assessment techniques and documentation of assessments in the electronic health record to prepare them for performing and documenting assessments in the clinical area.*
- 6. Student Success Workshops (student attendance optional) were offered to the students. E.g.: Critical Thinking Workshop and Lab Interpretation Workshop. Laboratory interpretation will be integrated into the N113L Lab sessions.*
- 7. Implementation of electronic program to enhance student learning. The Shadow Health program provided a virtual environment for students to practice a basic interactive head-to-toe assessments and communication with health care personnel in the care of a virtual client.*

## Semester Two

*The total hours spent with students during the fall semester was approximately 15-20 hours per instructor for the fall for an estimated total of 75-100 hours and the spring semester was approximately the same. These are estimated figures, although realistically it is probably much higher since students often talk with faculty outside of their office and the time spent is not always logged in. Faculty provided tutoring, counseling for educational and personal issues, test review, and general advisement.*

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Many students are referred to the Skills Lab Coordinator for remediation before starting clinical, after a break in their program, or after a failure of a psychomotor skills competency. Faculty work with the students when the skills lab coordinator is unavailable. Faculty worked closely with the Skills Lab Coordinator to put together clinical scenarios that can be utilized for a Simulation Clinical Experience (SCE). The scenario is formulated to include current skills learned and provide a safe environment for students to gain insight in a team setting. The students have found this to be a very positive learning experience as indicated in the SCE survey. The course has been able to provide this experience each semester to each clinical group in the Medical-Surgical clinical course. We will continue to do this as a post conference activity.

The semester continues to have students with personal issues that impact their ability to be academically successful. Faculty and the Semester Coordinator meet with the students for advisement regarding their classes, and they are referred to the Dean of Student Services for any additional help.

### Semester Three

- **During the academic year the semester III instructors spent an average of 30 hours per semester providing student services e.g. counseling, and assisting students with their needs to achieve educational goals. This does not include the scheduled tutoring sessions each session.**
- **The continuation of Early Intervention in N233 helped identify poor performers. The Early intervention also revealed a need to improve individual study habits for those who were identified as poor academic performers. Students who needed to join a study group an existing study groups which were willing to accept additional members were identified and matched to facilitate peer learning.**

### Semester Four •

	N242	N243	N243L
<b>Student Contact</b>			
<b>Test Review</b>	<b>8</b>	<b>2014 II: 78 2015 I: 72</b>	<b>Comp Review:17</b>
<b>Assignment</b>	<b>92 contacts 9 hours</b>	<b>N/A</b>	<b>42 contacts</b>
<b>Advisement</b>	<b>27 contacts</b>	<b>2014 II: 26 2015 I: 21</b>	<b>11 hours</b>
<b>Tutoring</b>	<b>4 hours</b>	<b>38.5 hours</b>	
<b>Student Referrals</b>	<b>None</b>	<b>2014-II: 4 @015 I : 2</b>	<b>2014 li: 5 2015 I : 2</b>
<b>Remediation</b>			<b>Summer 2015= 66hrs</b>

- In the N242 & N243 courses, lecturers encouraged students to contact faculty to discuss any concerns pertaining to the courses. Students are to make appointments with the faculty to review test and discuss content as needed. The students' studying

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methods, content, and time management, and any problems encountered regarding didactic content are reviewed and discussed with the student. For students performing below satisfactory in N243L a plan for success is established and agreed upon by both faculty and student. Timelines are established and referrals are made, then the student is evaluated for progress toward goal.

- To assist the returning and poor performing students in the correlation of didactic and clinical, the 4th semester faculty developed a three-part remediation plan. The remediation plan is implemented during the summer and the winter break of each semester. Students are required to complete two parts of the plan prior to admission to the semester and the third part of the plan concurrent with the ongoing semester. Students are required to complete 12 hours in the skills lab, perform a head-to-toe assessment with documentation; complete 5 days in the patient care area. During the summer it is recommended that students attend five selected from N125 to enhance their learning.
- •During orientation of N243 both the fall 2014 and spring 2015 a Test-taking Strategies presentation was given. Different types of multi-choose questions were dissected and students given guidelines on how to approach a question utilizing critical thinking/deductive reasoning. Students were given practice questions and were encouraged to contact the instructor via phone, person-to-person or via e-mail if they had any questions or needed assistance.
- •Lecture topics were rearranged to balance the complexity of the lecture content. Students were encouraged to contact faculty for clarification of content, test review, and tutoring.
- 2- hour tutoring sessions are schedule each Monday and is offered to all students by faculty. Students are also encouraged to contact instructors' in-person, via phone, or electronically to arrange an appointment to assist them in clarification of content or expectations.
- Continue to encourage students to prepare/read prior to lecture, so they have a good understanding of etiology and pathophysiology.
- *Continue to encourage questions and class participation during lecture for clarification of content.*

### PART III: PROGRAM PERFORMANCE EVALUATION

**Problems experienced/changes relating to courses/service /structure/process:** (e.g. with content, scheduling, location, staffing, materials, class cancellations, policy changes etc.):

Irregular temperature control in Carlson classroom had been a recurrent problem reported to School Office and LAC Building Maintenance. Efforts were made by building management personnel to fix and reset temperature control.

#### **SON Program Evaluation Survey Results: Classes of 2014-II and 2015-I**

Overall, the seven program objectives and all items pertaining to theory and clinical teachings were above the 3.5 threshold. Specific data for semester 1, Program Objective #1: *Demonstrates awareness and respect for diverse values and beliefs*, received average rates of 4.59 (n = 49) for fall 2014 and 4.38 (n = 39) for spring 2015.

#### **Main themes:**

**“Need for technology”**

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On both program surveys, students pointed out the need for advanced technology as part of teaching methodologies to enhance their learning and student's portal for registration, access to grades, etc.

This need has been addressed by Administration and faculty. It is a work in progress. In spring 2015, semester 1 students were given online home assignment (i.e. Alexander Press Video) pertaining to physical assessment. The goal in fall 2015 is to continue incorporating information technology (through Shadow Health) in clinical course to strengthen knowledge and skills of students on physical assessment, communication, and decision-making.

### **Need for enhanced supportive learning environment"**

Students had provided mixed comments on their clinical and classroom learning environment. A good number of students were appreciative of the efforts and support of instructors; others had negative feedback and perceptions during interactions with specific instructors.

This is an ongoing issue discussed in faculty organization meetings. Self-awareness through faculty discussion, personal or one-on-one meetings conducted by the Dean of School of Nursing, and seminar on "Bullying" among other things has seemingly created more introspective view of individual self and how faculty interact with students. Again, it is another significant work in progress; however, positive outcome is projected as long as strong and dynamic leadership with faculty support would consistently ingrain this concept in the School's culture and work on the challenges of improving supportive learning environment.

### **Semester Two**

- *Semester II continues to be challenged with the scheduling of classes. The semester has six courses. We have two core medical surgical courses – N123 with clinical and N124 with clinical. The number of lecture hours requires that we use two different days for classes and this can cause a conflict for space with the other semesters. The second semester has a minimum of 6 hours a week for four theory courses. The semester has selected to shorten the courses so students do not have to juggle the work for four classes at the same time. The pharmacology course in 7 weeks followed by Professional Role course in 7 weeks. They both end before the semester is completely over. The Medical-Surgical course is 2 hour per week over 18 weeks, and Maternal-Child course is 3 hours a week over 12 weeks. There is also 15 hours per week of clinical time each week with preparation time outside that. There are only three large classrooms to accommodate more than 50 students at one time. The semesters take turns having the morning hours or the afternoon hours for our classes on Mondays and Thursdays since clinical days are Tuesday and Wednesday.*
- *The semester continues to use LAC+USC and Olive View in Semester 2 for all clinical experiences. In the pass academic year pediatrics clinical was at Olive Medical Center (OVMC) since the census at LAC+USC had dropped dramatically and the facility was unable to accommodate more than one clinical group. It has been challenging since the pediatric census at OVMC is minimal at best, however the instructor assigned there is very creative utilizing the clinics, and works very hard to be sure all the students have an optimal experience and are able to meet their*



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*clinical objectives. continue to experience a low census in the obstetrical portion of Maternal-Child clinical courses and comment that the time spent in OB is too short. Students continue to experience a low census in the obstetrical portion of the Maternal Child clinical course and comment that the time spent in OB is too short. They have just 7 full days in OB and 7 full days in Pediatrics. We make the most of the time we have and are utilizing the OB units at Olive View very successfully, which eliminated the need to put two clinical groups in a very low census area at LAC+USC.*

### Semester Three

- Learning environment is problematic for the following reasons:
  1. Malodorous classrooms
  2. Extreme temperature variances
  3. Classroom overcrowding not conducive to testing
- The sewage smell in room 105 of the Administration Building and temperature variances were reported to office staff on multiple occasions. Air freshener was frequently applied by faculty prior to class.
- Classroom size and the correlation with student enrollment by semester was discussed in the Coordinator group. An additional classroom was reserved for test days. Additional procedures were applied to allocate students into two classrooms. An additional faculty was assigned to proctor each exam to adhere to testing standards.
- Challenges with staff shortage continue to exist in Semester 3 for this academic year. Over enrollment of students poses challenges in the clinical setting. The LAC+USC clinical site can accommodate 11-12 students, but Harbor-UCLA site limits the number of students to 10 per clinical group. The need for an additional clinical instructor was discussed with the Program Director.
- Lack of needed supplies/equipment at the skills lab. This issue was discussed with J. Anderson (Director of Education Resource Center). Arrangements were made to add trach care kits (Fall 2014) and central line care (Spring 2015) to the students skills bags.

### Semester Four

#### Student Academic Performance:

- Faculty identified that there is a vast improvement in the student's understanding and exam scores covering the lecture content in N243. All students were successful in N243 except for one student in the fall 2014 whose score was below 70%. The student was unable to achieve a score above 70% on any exam and was placed on early intervention with an academic remediation plan and was provided counseling throughout the course.
- All students were successful in N242.
- Two students from the fall 2014 and one student from the spring 2015 were unable to meet clinical objectives safely.

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### Course Attrition Rate:

- The attrition rate for the AY 2014-2015 has been below 15 % threshold for action for all courses.

### Survey Items

- Fall 2014 all survey items were above threshold. In spring 2015 the N242 course had two survey items that fell below threshold and N243L had one survey items below threshold. With continued implementation of the 2014-2015 plans to improve student learning there will also be continued improvement in the survey scores.

### Tutors and Counselors:

- The lack of tutors and counselors limited the amount of assistance available to facilitate some student academic outcomes and their coping with personal stressors. However, during the academic year, a pilot project with Kaiser Foundation provided a Social Work student to provide one on- one and group counseling to students.
- Clinical Sites:
- There are increased restrictions on student activity in non-LAC+USC sites. The students have been able to meet all their clinical learning objectives. However, the restrictions have required the faculty to increase their creativity to ensure that the students meet their SLOs.

### **Effectiveness of curriculum/services rendered:**

- Based on the following data the faculty believes that the curriculum met the School of Nursing and the College's mission and the needs of the public we serve.
- The student pass rate and student survey comments, course content was appropriate and met student learning outcomes. Concerns and issues regarding areas for improvement have been forwarded to administration via discussion and the SLO reports.
- Student rating of the Program Objectives were above threshold. This data can be used to attest the effectiveness of the School of Nursing curriculum in producing a graduate prepared to practice in the community.

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### **Class 2015-I NCLEX Pass Rate**

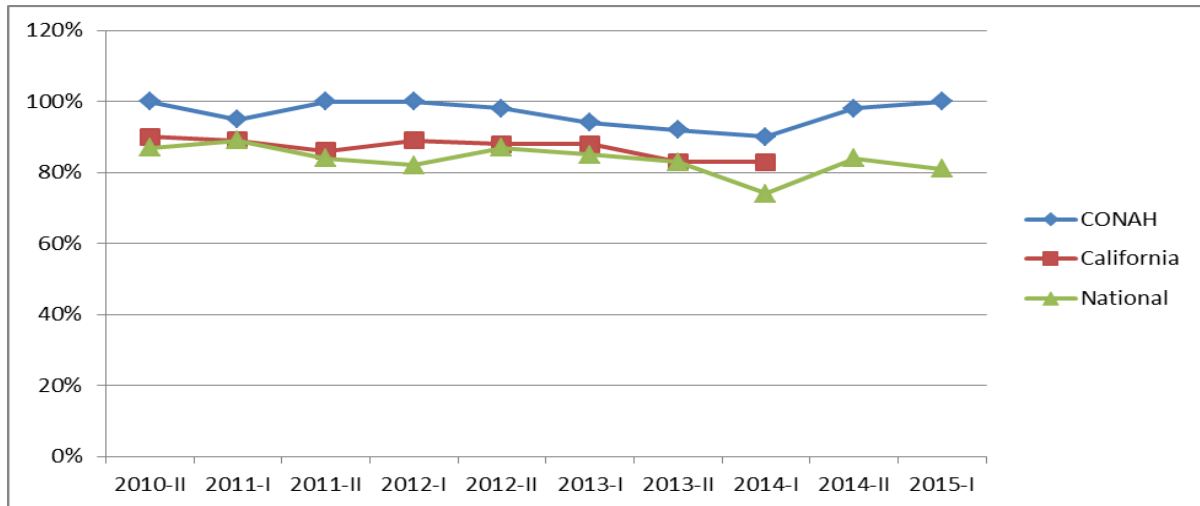
- The NCLEX first time pass rate is 40/43 or 93 %. At this time of the report three students have no record of taking the NCLEX for the class of 2015-I

### **Class 2014-II NCLEX Pass Rate**

- At the time of this report the first time rate is 46/48 at 95.8 %with two documented failures of the NCLEX exam. There are three students from the class who have not taken NCLEX exam at this time.

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The College continues to be above the State and National averages for NCLEX Pass Rates



**Policies & Protocols:** All approved policies for the academic year were reviewed and revised.

All faculty are members of standing committees that review policies and procedures for the college. Policies were updated every three years and this period all committees had three to five policies to review, revise and update for the school. Once revised, information was discussed in faculty organization meeting, approved and forwarded to the planning committee for approval.

## PART IV: PROGRAM STATUS AND RECOMMENDATION

### Accomplishments of the Program:

- IE.1: Recruit and maintain a diverse student body, faculty and staff
  - Attended student recruitment activities
  - Added student activity photos to website
- IIA.1: Implement increased use of technology in teaching and learning
  - Simulation lab experience with High Fidelity Manikin
  - Use of DVD/video within the PowerPoint, including photos and animation.
- IIB.1: Increase the availability of clinical success plan
  - Improved the student remediation plan to individual 1:1 student time.
- IIB.2: Provide student tutoring
  - Identified one instructor for student tutoring

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- All semesters faculty individualized remediation plans and extra tutoring for students in small groups and one on one.

IIB.4: Implemented methods to improve student on time program completion

- Addition of new classes in student success workshop
- Incorporated use of simulation manikin in clinical experience
- Content experts review of all test
- Review of files by Admission/Promotion committee members.

IIC.2: Maintain articulation agreements with BSN programs

- Met with Chamberlin University regarding starting an articulation agreement.

IID.4: Continue with student and graduate tracking in regards to hiring and retention in DHS

- Graduate surveys for 2013-II and 2014-I were e-mailed
- Continued to notify graduates when jobs are available in the DHS.

IIIA.1: Expand clinical rotations to DHS facilities

- Used Augustus Hawkins for Psych and Olive View for OB.

IIIB&V.C: Identify potential partnerships

- Dean as member of the COADN attended conferences and participated in projects
- Remained on the Scholarship Committee.

IIIC: Maintain partnerships with WDP

- WDP students enrolled in program: Generic RN and LVN-RN option 1 and 2.

V.C.1: Attend conferences to develop skills necessary to further the objectives of the College

- Faculty attended teaching conferences for QSEN materials
- One faculty member presented at the International Nursing Conference in Australia.

V.D: Track, trend and evaluate student data for comparative studies

### **Status to date:**

Continue with all plans including student success workshops, critical thinking classes, remediation plans, increased tutoring by instructors, and extended skills lab hours for competency testing.

Continue to interview and hire competent faculty to increase student success.

Support graduates in finding DHS jobs when hiring is available,

### **Quality improvement plans (If applicable):**

All semester faculty are committed to:

- Maintaining a ParTest bank of questions
- Reviewing all exams two week prior to administration to administration
- Following testing and grading policies for all exams
- Content expert continuing to review all exam items for clarity

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- Continuing to improve on line]course and graduate surveys

### Goals for upcoming academic year:

Maintain all course thresholds above 3.5

Implement all recommendations from the Program Review Workshop.

Increase simulation activities by all semesters in the simulation lab with debriefing

Evaluate the use of simulation as a student success workshop activity

Continue with action plans to improve student tutoring and decrease attrition rates by improving patient experiences in the clinical areas.

**PART V: ACCOMPLISHMENTS TO THE STRATEGIC PLAN** (Programs only. Please use the new strategic plan (SP) for 2010-2015 now in effect. Identify which goal, objective and strategies. SP is posted on Team Services)

### PART VI: CONTRIBUTORS TO REPORT

**CIO**

**Dean, School of Nursing**

**Research Director**

**Semester Coordinators**

**Faculty**

### PART VII: DATA SOURCES

2010-2015 Strategic Plan

2014-2015 Program Evaluation Surveys

2013-2014 Annual Program Evaluation Reports