

LMC Program Review Year 3 Update 2019-2020

Instructional Unit Name: REGISTERED NURSING

Introduction

In 2017-2018, all departments/programs completed a Comprehensive Program Review (CPR), in which goals were set for the 2017-2022 program years. Los Medanos College (College) is now in year three of a five-year review cycle. New to this program review cycle is the passage of the State's [Vision for Success](#) plan which establishes system-wide goals that can only be attained by each department contributing to college-level goals aligned with the state plan. Toward that end, the [Contra Costa Community College District Strategic Plan \(CCCD Strategic Plan\)](#) adopted by the Governing Board at its June 2019, meeting, aligns with the *Vision for Success* and plans are underway to ensure that the *Los Medanos College Educational Master Plan (LMC EMP)* also supports college and state goals. The intent is to direct College efforts toward a singular and coordinated set of goals.

The *Vision for Success* directs each college to increase degree and certificate completion and increase student transfers, improve time to completion, increase job placement in field of study, narrow achievement gaps and establishes targeted goals in five primary areas as follows:

Goal #1 Increase by 20 percent the number of CCC students annually who acquire associates degrees, credentials, certificates, or specific skill sets that prepare them for an in-demand job.

Goal #2 Increase by 35 percent the number of CCC students' system-wide transferring annually to a UC or CSU.

GOAL #3 Decrease the average number of units accumulated by CCC students earning associate's degrees, from approximately 87 total units (the most recent system-wide average) to 79 total units—the average among the quintile of colleges showing the strongest performance on this measure

GOAL #4 Increase the percent of exiting CTE students who report being employed in their field of study, from the most recent statewide average of 69 percent to an improved rate of 76 percent—the average among the quintile of colleges showing the strongest performance on this measure in the most recent administration of the CTE Outcomes Survey.

Goal #5 Reduce equity gaps across all of the above measure through faster improvements among traditionally underrepresented groups as identified by the college.

The College can only meet its local and state goals with the contribution of each department's efforts. As noted, the intent is to direct College efforts towards a singular and coordinated set of goals to garner greater efficiencies and avoid duplication of effort.

The *Program Review Year 3 Update* includes five components with specified timeframes (not in chronological order) for draft and completion:

Item 1. Program Update (October 1 – October 31)

Provide an update to the department’s 2017-18 CPR

Item 2. Setting the Vision for Success Goals 2021-22 (November 1 – November 27)

Department/program alignment of goals, action steps, timeline, responsible party and next steps – all tied to the *Vision for Success* indicators. For ease of reference, the *Vision for Success* indicators are included in this section.

Item 3. Assessment Date and Effectiveness (August 26 – September 30)

Status report on the review and assessment of courses and next steps

Item 4. Course Outline Updates (August 26 – September 30)

Status report on the review and assessment of Course Outline of Records and next steps

Item 5. Resource Needs (February 1 – February 28)

Resource needs to meet goals, if any.

The table below shows a list of the above components in chronological order. The intent is to complete sections of Program Review by these dates to better assess and inform the process.

Date	Program Review Update Component
August 26 – September 30	Item 3. Assessment Date and Effectiveness Status report on the review and assessment of courses and next steps.
August 26 – September 30	Item 4. Status report on the review and assessment of Course Outline of Records and next steps.
October 1 – October 31	Item 1. Provide an update to the department’s 2017-18 CPR
November 1 – November 27	Item 2. Department/program alignment of goals, action steps, timeline, responsible party and next steps – aligned with the <i>Vision for Success</i> indicators.
February 1 – February 8	Item 5. Resource Needs

1. Program Update (Oct 1 – Oct 31)

1a. Provide any important changes or updates within your program since your last CPR. (New degrees, new curriculum, staffing changes, etc.)

Associate Dean of Nursing resigned at the end of the spring 2019 semester, currently we have an Interim Director of Nursing and an Assistant Director (faculty positions with load). We hired a new full-time, tenured-track RN Instructor (Maryanne Hicks). A new Instructional Skills Lab Specialist was hired.

1b. Please address the following enrollment data provided for your program.

1.b.1. What are the enrollment trends over the past 3 years, beginning with Fall 2017? (Please address census enrollment, census fill rate, and productivity (Ftes/Ftef))

The enrollment data (including census enrollment, fill rate, and productivity) remains static due to the capped number of enrollments in the RN Program. Due to number of faculty and clinical placements we can only accept 32 students in first year (RN-22, RN-23, RN-24) and no more than 40 in second year (RN-31, RN-33, RN-34).

1.b.2. What does the data suggest in terms of future needs/directions?

If we were able to increase the number of full-time and adjunct faculty, and increase the number of clinical placements; we could grow the program and expand the number of enrollments.

1c. Provide a brief update of your program’s goals as listed in your (CPR) 2017- 2018. Given these goals, please provide a brief update on: (a) Goals completed since their submission in 2018, and the impact of that completion on program effectiveness; (b) Goals abandoned with an explanation of why they were abandoned and (c) Goals still in progress or modified to be achieved by 2021-2022. Please include action steps, timeline, and responsible parties.

Goals	Completed/ Abandoned/ In Progress/ Modified	Impact/ Explain/ Action Steps	Timeline/ Responsible Parties
Goal 1: Increase training and professional development for new and continuing nursing faculty	In Progress	We have hired new faculty who need to complete Nexus and require mentoring. We will be sending some new RN faculty to the COADN. All faculty are encouraged to participate and continue involvement in Flex and other professional development activities.	Fall 2022/ Joanne Bent, Colin McDowell, all faculty
Goal 2: Increase number of online, hybrid and/or content captured courses	Modified	Due to clinical rotations, skills requirements, and content it is not possible to offer online or hybrid in the core program classes. However, we will be looking at changing RNURS-001 from a one-day instructor face-to-face led class to an online course.	Fall 2022/ Joanne Bent, Colin McDowell
Goal 3:	In Progress	RN Students have participated in Stand Down at the Delta (Veteran’s health fair and clinic) and in the John Muir Health Mobile Clinics. We have partnered with La Clinica in	Fall 2022/ Joanne Bent, Colin McDowell

<p>Increase more community health content to curriculum including more robust clinical placements</p>		<p>preceptorship placements and as part of our Advisory Board. We are now a member of CCPS a state-wide clinical placement system which allows us to request clinical and preceptorship placements months in advance, thus leading to more robust clinical placements</p>	
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For CTE programs only:

1c. Community and Labor Market Needs (Link Ed Code [78016](#), Title 5, [51022](#))

Statewide there will be approximately a 9% increase in Registered Nurse job openings, as compared to a nationwide increase of approximately 7%. It is noted that Contra Costa County will be one of the counties in the area to see an increased demand of 8.9% for more RN's in our County.

1d. Advisory Board Update and Analysis (CTE related only) Include dates of Advisory Board meetings in 2018-2019, and those completed or planned in 2019-2020.

LMC Nursing Clinical Facilities Advisory Committee meets annually in the spring semester and in 2019, the Advisory Committee met on May7, 2019 from 3to 4:30 pm. The purpose of the Advisory Committee is to get input from our clinical and community healthcare partners, local industry, educational partners, and our students and staff. We also inform the Board of current data, updates to the program and in legislature as well as changes in job market, curriculum, equipment, funding and facilities. The next LMC Nursing Clinical Facilities Advisory Committee will meet on May 5, 2020.

Dave Wahl from LMC Workforce Development presented these trends on May7, 2019:

- *In the next five (5) years (2019-2024) we are anticipated to see a 9.6% increase in the number of jobs for RNs and LVNs in Contra Costa County.*
- *For an RN in CCC the hourly wages (or earnings) are currently between \$42.87/hr. and \$69.72/hr. with the Median Earning placing at \$56.25/hr.*
- *For an LVN in CCC the hourly wages (or earnings) are currently between \$24.06/hr. and \$30.94/hr with the Median Earning placing at \$27.51/hr.*
- *In 2018 approximately 12% of the Nurses in CCC were male and approximately 88% were female.*
- *In 2018 35-44 was the largest population in the Nursing Profession in CCC, with 45-54 being the second largest, and 55-64 the third largest. The smallest population in the profession in CCC was 19-24.*
- *In 2018 Caucasian/White and Asian population were among the largest in the Nursing profession in CCC. Hispanic/Latino and African-American Nurses were the third and fourth largest populations in the profession in CCC.*
- *In 2019 General Medical & Surgical Hospitals had the largest number of nursing positions in the healthcare field, with HMO Medical Centers placing second. Hospitals (Local Government) and Skilled Nursing Facilities placed third and fourth respectively. Additionally, the data shows that Hospitals and HMO Medical Centers will continue to grow in the number of available Nursing jobs in the industry.*

2. Setting Vision for Success Goals for 2021-22 (Nov 1—Nov 27)

The *Vision for Success* directs each college to increase degree and certificate completion and increase student transfers, improve time to completion, increase job placement in field of study, narrow achievement gaps and establishes targeted goals in five primary areas. The College can only meet its local and state goals with the contribution of each department’s efforts. As noted, the intent is to direct College efforts towards a singular and coordinated set of goals to garner greater efficiencies and avoid duplication of effort.

2a. The following table lists the *Vision for Success* indicators that we must align to as a college and as a district. Please look at your program data (Tableau) for each of the following *Vision for Success* indicators. Please address all indicators that are relevant to your program, set your program goal, indicate the action steps, timeline and responsible parties to achieve program goals.

Vision for Success Indicators and ACCJC Indicator	Program Set Goals for 2021-2022	Action Steps	Timeline	Responsible Parties	Notes
Course Success	93.9%	Student Mentors, Peer Tutors, Success Plans, Office Hours, Student semester clinical evaluations	Spring 2022	All Faculty	
Degrees (AA, AS, ADT)	AS-100%	Can’t increase above 40 ADNs due to capped program enrollment	Spring 2022	All Faculty/ Staff	
Certificates of Achievement	N/A				
Unit Reduction	79	Unable to reduce unit for program completion due to requirements of BRN and CCCC. However, the prerequisite courses required to complete before student applies to program, will have a reduction	Spring 2022	All Program Faculty, Counselors	

		in units due to the implementation of ENGL-095 & MATH-029 (accelerated courses).			
CTE Jobs	76%	Connect students while in program with job opportunities with our clinical partners; Resume and mock interview workshops are incorporated into the program; We host an annual Healthcare Job Fair and a RN-Program specific College Fair annually.	Spring 2022	Colin McDowell, Joanne Bent, Erika Messenger, Workforce Development	

2b. The Vision for Success Goal 5—Equity. The College has identified three disproportionately impacted (DI) populations: African-American, economically disadvantage students (low income), and foster youth students. The College’s goal is to reduce the equity achievement gap on course success for disproportionately impacted (DI) student populations. Please look at your program data (Tableau) for each of the following DI population. Please pick one or more DI populations that are relevant to your program, set your program goal, indicate the action steps, timeline and responsible parties to achieve program goals.

Course Success by DI Population	Program Set Goals for 2021-2022	Action Steps	Timeline	Responsible Parties	Notes
African American	83.2%	Encourage weekly mentoring, study partners, the FAM program, Be 1 Support 1 Nurse Mentoring Program, National Black Nurses Association.	Spring 2022	All Faculty, Roberta Baumgartner, Veronica Turrigiano	
Low Income	93.1%	Encourage EOP&S participation, referrals to Financial Aid & Scholarships; referral to Food Pantry, Grant-funded gas cards	Spring 2022	All Faculty, Counseling, BethAnn Stone, Erika	

		and uniform vouchers, Foundation HOSTS & Emergency Fund referrals as needed; CalWORKs referrals; Increase awareness to students of above programs; referral to Child Study Center as needed		Messenger, Student Services	
Foster Youth	87.5%	Referral to Foster Youth program, study partners/groups, FAM program, student mentors, peer tutors, scholarships as needed, clinical carpools, refer to EOP&S, Counseling Department referrals as needed	Spring 2022	All Faculty, Erika Messenger	

3. Assessment Update and Effectiveness (August 26-Sept 30)

- a. Please review the data provided on assessment status of courses in your discipline in Cycle 2 (2017/18-2020/21), if there were any courses that were not assessed in Cohorts 1 and 2, please (a) list them, (b) explain why they were not assessed, (b) when are you going to assess them, and (c) who is going to assess them.

Course	Reason course was not assessed	When course will be assessed	Faculty Responsible for Course Assessment
RNURS 22	Assessment in progress. Not assessed due to understaffing	Spring 2020	Jeremy Weed
RNURS 23	Assessment in progress	Spring 2020	Julie O'Brien
RNURS 24	Assessment in progress. Not assessed due to understaffing	Spring 2020	Maryanne Hicks
RNURS 28	Assessment in progress. Not assessed due to understaffing	Spring 2020	Jeremy Weed Spring 2020
RNURS 38	Assessment in progress. Not assessed due to understaffing	Spring 2020	Cherice Avila
RNURS 39	Assessment in progress. Not assessed due to understaffing	Spring 2020	Colin McDowell

- b. Discuss the results of any outcomes assessments (e.g. CSLO) performed this year. What changes, if any, are planned to improve student success?

4. Course Outline of Record Updates (August 26 – Sept 30)

Please review the data provided on the status of COORs in your discipline. (Note: These data do not reflect courses submitted after May 2019. For each COOR that has *not* been updated since May 2019, please indicate the faculty member responsible for submitting the updated COOR to the Curriculum Committee by **November 1, 2019**.)

Course	Faculty Responsible for COOR Update
RNURS 39	Colin McDowell
RNURS 22	Jeremy Weed
RNURS 23	Julie O'Brien

Impact of Resource Allocation

If you have received funding via the Resource Allocation Process, you will be asked by the Office of Business Services how the resource helped you in achieving your program goals.

5. Resource Needs (Feb 1 – Feb 28)

Resource needs to meet goals, if any. If there are no requests, this section may be skipped.

Faculty/Staff Resource Request			
Department/Unit Goal - Reference #		Strategic Goal and/or Objective - Reference #	
Department/Unit Name		Position Name/Classification	FTE
Registered Nursing			
Position Type	Funding Duration	Funding Source	Est. Salary & Benefits
<input checked="" type="checkbox"/> Faculty R/T <input type="checkbox"/> Classified <input type="checkbox"/> Manager <input type="checkbox"/> Student	<input checked="" type="checkbox"/> On-going/Permanent <input type="checkbox"/> One-time	<input type="checkbox"/> Operations (Fund 11) <input type="checkbox"/> Other <input type="text"/>	
Justification:			

Operating Resource Request		
Department/Unit Goal - Reference #		Strategic Goal and/or Objective - Reference #
		GOAL #4 Increase the percent of exiting CTE students who report being employed in their field of study
Department/Unit Name		Resource Type
Registered Nursing		<input checked="" type="checkbox"/> Equipment <input checked="" type="checkbox"/> IT Hardware/Software <input type="checkbox"/> Supplies <input type="checkbox"/> Facility Improvement <input type="checkbox"/> Service/Contract <input type="checkbox"/> Other
General Description		Est. Expense
New Computer and Software to run the medical Simulation robot.		One to 3 thousand dollars
Justification:		

The current computer and software is outdated and we cannot update our medical simulation robot without new equipment. A medical simulation robot gives nursing students opportunities to practice acute nursing skills in a safe and supported environment. Therefore students who can practice their nursing skills in a computerized simulation lab will be better prepared to care for patients in a real medical situation and will be better prepared and more employable as competent nurses able to safely practice skills.

Professional Development Resource Request	
Department/Unit Goal - Reference #	Strategic Goal and/or Objective - Reference #
Department/Unit Name	Resource Type
	<input type="checkbox"/> Conference/Meeting <input type="checkbox"/> Materials/Supplies <input type="checkbox"/> Online Learning <input type="checkbox"/> IT Hardware/Software <input type="checkbox"/> Other
General Description	Est. Expense
Justification:	