

**Spring 2019 PSC Type B Leave Final Report
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1. Describe the focus of the work proposed and completed during your leave.

The goal of this proposal was to evaluate course and program outcomes of the new concept based nursing curriculum. This activity completed the multi-phase nursing curriculum project which had been critically needed and generously supported by the College over the past several years.

2. What was accomplished as a result of your leave?

The concept based nursing curriculum was evaluated and each of the outlined objectives was investigated. For each of the objectives, findings were discussed and further teased out into strengths and recommendations. The evaluation report has been included at the end of this final report (pp. 3-19).

3. Explain how the work completed during your leave relates to ARC's goals and focus areas, and to the state's professional development guidelines.

As stated in the proposal, accomplishment of this project promoted many of the objectives of the Los Rios District including State Professional Development Guidelines, ARC Goals and Focus Areas, Institutional Learning Outcomes (ISLO), and Educational Master Plan (EMP/VTEA) as identified below.

State Professional Development Guidelines C: Program and course curriculum or learning resource development and evaluation. The newly implemented project needed to be evaluated to determine if it had met its intended outcomes.

ISLO 3: Utilize a variety of methods to communicate effectively. Integrating QSEN into the curriculum was planned to assist students in skills, knowledge, and attitudes necessary to communicate with healthcare team members. This project sought to evaluate whether the curriculum attained this goal.

ISLO 4: Employ strategies to work cooperatively and effectively with others. Integrating QSEN into the curriculum was targeted to assist students in the skills, knowledge, and attitudes necessary to work cooperatively with patients and healthcare team members. Cooperation and effectiveness are key components of patient care in today's healthcare interactions. This project sought to evaluate whether the curriculum attained this goal.

ISLO 5: Locate and critically evaluate information from a variety of sources, including those accessed through technology, to create informed responses to issues, problems, and challenges. Integrating QSEN, national competencies, and NCLEX into the curriculum was planned to assist students in the skills, knowledge, and attitudes necessary to critically think,

evaluate information that either influences practice or patient teaching/action, as well as using prioritization in today's complex healthcare environment. This is particularly critical as most information is web-based, and documentation for patient interactions is via an electronic health record. This project sought to evaluate whether the curriculum attained this goal.

VTEA Outcome – Strengthening the academic, and career and technical skills of students participating in CTE programs through the integration of academics with CTE programs.
Nursing Discipline Outcome – Integrate Assessment Technology Institute's (ATI) Test of Essential Academic Skills (TEAS) into student placement and continued assessment. Results from HESI assessments, which include all content areas, and readiness to take the licensing exam (NCLEX) were utilized to guide evaluation of program outcomes as they relate to the field of nursing.

VTEA Outcome – Provide services & activities that are sufficient size, scope, and quality to be effective. Nursing Discipline Outcome – Utilize the committee structure, faculty meetings, and faculty web site to communicate clearly and ensure consistency within the Nursing Program. This proposal supports the committee structure and faculty meetings to provide effective, clear communication. The purpose is to ensure consistency in program implementation, which will provide the requisite quality and effectiveness for a program of this size and scope.

4. As a result of your leave, what will you take back with you to your current assignments and/or to the college as a whole?

The results will continue to shape and form future curriculum direction, particularly as it relates to further development of the curriculum into areas such as clinical experience and potentially future national accreditation (ACEN).

5. How did you, or do you plan to share the results of your study, project, or activity with colleagues, the college, and the community, where appropriate?

The entire evaluation project was shared with the nursing faculty and area dean both in written (email and print) and verbal methods (at 2 faculty meetings). The report will soon be shared with our Nursing Educational Consultant (NEC) at the Board of Registered Nursing.

2019 Curriculum Evaluation

Submitted by D. Aucoin-Ratcliff and L. Nowicki

This project evaluated course and program outcomes of the new concept based nursing curriculum which began with a first semester group in Spring 2017. Two cohorts have completed the entire curriculum, finishing in Fall 2018 and Spring 2019. Specific courses which were evaluated included NURSE 400, NURSE 410, NURSE 420, NURSE 430, and NURSE 305. The overall program was evaluated in several ways including a review of program outcomes, posted curriculum, and feedback from students and faculty. Two faculty were allotted PD Leave time to conduct the analysis.

New curriculum development and implementation has been supported by the College. The faculty were able to develop and implement the curriculum in all four semesters, when other schools have been unsuccessful. Faculty persisted in implementation despite the absence of a permanent director and a frequent turnover/shortage of adjunct faculty.

Of note, only 14 of 36 students in the Fall 2018 semester completed the End of Program Evaluation, while all 39 students in the Spring 2019 semester completed the evaluation. After the poor response in Fall 2018, the N430 Faculty required completion as a passport for entry to the final exam, which improved the response rate. The End of Program Evaluation percentages do not include those students who did not respond.

Objectives and Outcomes

Objective 1: Evaluate the concept based philosophy – is it in operation in teaching-learning activities and assessment methods?

Evaluation Method

- Compare new philosophy with class, course, and program teaching learning activities and assessment methods
- Team Survey items 1 and 10

Findings

The teaching-learning activities and assessment methods are consistent with the philosophy. Faculty cited examples of active learning, reflection, and noted that each concept is aligned with KSA's. A further discussion of assessment methodology can be found under Objective 8 which follows.

Of note, there are some clinical agency concerns regarding the focused direct patient care experience in Pediatrics and the integrative practicum experience (preceptorship) which are components of the program's philosophy. As of Spring 2019, there are no pediatric acute care facilities available to us in the Sacramento area*. Kaiser Roseville has recently stated that they cannot continue to support all assigned N430 students from ARC in a preceptorship arrangement (rather 5-6 instead of 10 students).

** Update for Peds clinical: August 1, 2019 we have confirmation for 3 clinical pediatric sites to include; Shriners, ARC Child Development Center, and Mark Twain School District.*

Although most faculty were aware of the Nursing Program Philosophy and knew where to locate it, not all faculty were. This posed a challenge when initially answering the question on philosophy. All program documents can be found on the Faculty Canvas site.

Discussion

Strengths

Every seminar incorporates some aspect of the basic assumptions of self-direction, utilization of adult experience, problem and activity centered learning. Content includes evidence based nursing theory and practice. Some laboratory and clinical experiences are structured to allow application of concepts and principles learned from classroom experience. The courses build upon previous learning and provide opportunity for students to experience intentional learning, develop critical thinking and problem solving skills, to understand connections among concepts, and to make sound decisions. In clinical, students are encouraged to view each patient as a unique, multidimensional, and significant being who possesses inherent value and worth with dynamic physical, psychosocial, cultural, spiritual, and development needs that contribute to health, quality of life, and achievement of potential. First semester faculty felt that a stronger emphasis on culture and spirituality could be made. Students are guided to see that the patient is at the center of any nursing activity and are required to utilize the Nursing Process.

Recommendations

1. Further develop clinical experiences and learning activities that are aligned with the concept based curriculum.
2. Continue to work on finding acute pediatric facilities with the assistance of Julie Holt, HWI Regional Director; development of acute pediatric simulations; open communication with BRN NEC regarding challenges and any needed adjustments to the curriculum/hours/experiences.
3. Work to ensure that clinical agencies continue to allow preceptorships. The integrative practicum experience in the curriculum is dependent upon clinical agency support of this activity.
4. Involve community stakeholders in problem-solving pediatric and preceptorship rotation. This includes faculty who can network with nurses to acquire new Peds adjunct faculty.
5. Ensure that the nursing program mission and philosophy, as well as other structural documents are easily accessible by faculty and students and access is part of new faculty orientation.

Objective 2: Evaluate the new curriculum outcome statements – are they appropriate to the Associate Degree level of nursing education, consistent with the College, and relevant to the health care context?

Evaluation Method

- Survey faculty, graduate students
- Feedback from community stakeholders
- Review accreditation standards of the CA BRN
- Team Survey items 2 and 10
- Comparison of Institutional SLO's to Program SLO's

Findings

Faculty feel the outcome statements are appropriate to the level of education and relevant to the health care context. Community stakeholders (Advisory Committee) were notified of the curriculum change and were asked for feedback during the development process. Stakeholders verbalized support for the concept based change. At this time, we do not have feedback from employers about graduate performance as the surveys are sent out one year after program completion.

Given that the Institutional SLO's have changed since the nursing curriculum was developed, outcome statements were reviewed for consistency. Program and Institutional SLO's continue to be in alignment (refer to Table imbedded under Objective 3 discussion).

Discussion

Strengths

Outcome statements are relevant.

Recommendations

1. Review the employer survey to assure it is capturing data regarding graduate performance particularly as it relates to outcomes of the concept based curriculum.

Objective 3: Evaluate the new curriculum design – how well do the curriculum components fit together? Does the design reflect the philosophical foundation and curriculum goals? Is it congruent with the environment of the program? Are the courses logically sequenced?

Evaluation Method:

- Survey of faculty and students
- Comparison of philosophy with curriculum goals
- Comparison of philosophy with college goals
- Review attrition data to compare with prior levels
- End of Program Surveys
- Team Survey items 3-8

Findings

Faculty felt that the curriculum components fit together for the most part and reflect the philosophical foundation and curriculum goals. The curriculum moves from simple to

complex in theory, clinical, and skills. There was consistency among the semester faculty reporting that they felt students did come to their semester with the desired level of theory, however, they did not come with the expected clinical expertise.

Several things that might have contributed to the lack of clinical performance include N400 and N410's change to no prep at the same time that the new curriculum was implemented; and multiple different faculty in N400 and N410 clinical in all rotations.

N400 faculty expressed the desire for students to come into the program with medical terminology, CNA experience, and a basic understanding of the role and scope of the profession.

Regarding the curriculum design and the environment of the program, the original design was to have wellness focused OB & Peds in N410 followed by acute/illness focused OB & Peds in N430. Unfortunately, this design has not been supported by area agencies, specifically OB and Peds clinic locations and acute Peds units. This has necessitated combining wellness and illness OB in N410 as well as wellness and illness Peds in N430. Furthermore, due to clinical site unavailability in the acute setting, Peds is planned to move to N410 in Fall 2019*. At this time, this design does not align with the planned clinical hours for wellness and illness in either OB or Peds. Objective driven simulations have been developed to assist students in meeting outcomes.

** Update: OB rotations will remain in N410 and Peds is currently being taught out in N430 but will be evaluated for a possible move to N400.*

Each semester is using the assigned skills lab time differently, with all using some lab time to present related content prior to the skill. N400 faculty were using assigned skill lab time to present content unrelated to the skill, although it is unknown if this practice is continuing. N400 faculty were also not initially following the design for hours of actual patient care and was substituting clinical skills lab for this time. Adjustments were made to bring the scheduled units/hours into alignment.

End of Program surveys revealed that students understood the knowledge, skills, and attitude objectives (KSA's) and they contributed to the learning process. Many reported a continued inconsistency between the formatting, implementation, and required homework for the KSA's. Some students reported that some faculty are only using lecture format rather than an active learning format.

Attrition data were reviewed and yielded no significant change after starting the new curriculum, although it did decrease slightly. For the three-year period prior to new curriculum implementation (2014-2017), attrition averaged 3.9% (range 1%-6.8%). For the two-year period after new curriculum implementation (2017-2019), attrition averaged 1.9% (range 1%-2.8%).

Listed below is a comparison table of Program and Institutional SLO's, which have changed slightly since curriculum implementation. The program SLO's and philosophy are consistent with those of the college.

Comparison of 2019 Institutional SLO's, Program SLO's and Program Outcomes

ARC Institutional SLO's	Program SLO's	Program Outcomes that support Institutional SLO's
Demonstrate personal and professional readiness for career and/or academic advancement.	7. Adhere to standards of practice within legal, ethical, and regulatory frameworks of the professional nurse.	Graduates are eligible for licensure as a Registered Nurse upon meeting state requirements and successful completion of the NCLEX-RN exam.
Demonstrate skills and behaviors which contribute to inclusive and respectful communication of diverse ideas and beliefs.	4. Coordinate, collaborate, and communicate with diverse patients, families, and the interdisciplinary healthcare team to plan, deliver, and evaluate care that promotes quality of life.	The curricular core concepts of "patient centered care" and "teamwork & collaboration" support the outcome.
Utilize a variety of methods to communicate effectively.	2. Use information and technology to communicate, manage knowledge, and mitigate error. 4. Coordinate, collaborate, and communicate with diverse patients, families, and the interdisciplinary healthcare team to plan, deliver, and evaluate care that promotes quality of life.	The curricular core concept of "communication" supports the outcome.
Work cooperatively and effectively with others.	5. Demonstrate delegation, management, and leadership skills that integrate systems thinking, communication, and change processes.	The curricular core concept of "teamwork & collaboration" supports the outcome.

<p>Use various technologies to collect information and solve problems.</p>	<p>2. Use information and technology to communicate, manage knowledge, and mitigate error.</p>	<p>The curricular core concepts of “informatics & technology” and “quality improvement” support the outcome.</p>
<p>Critically evaluate information to develop informed perspectives on a variety of issues, problems, and challenges.</p>	<p>3. Participate in quality improvement activities to measure patient outcomes, identify hazards and errors, and to improve care. 6. Demonstrate behavior that reflects the values of the nursing profession including self-awareness, a spirit of inquiry, leader, ethical comportment, effective communicator, clinical judgment and competence, and mentor.</p>	<p>The curricular core concepts of “professionalism” and “evidence based practice” support the outcome.</p>
<p>Contribute to society using personal knowledge, resources, and skills.</p>	<p>1. Use clinical reasoning and knowledge based on the nursing program of study, evidence based practice outcomes, and research based policies and procedures as the basis for decision-making and delivery of comprehensive, safe, patient centered care.</p>	<p>The curricular core concept of “professionalism” supports the outcome.</p>
<p>For students earning degrees, demonstrate an understanding of basic content and methodology for the major areas of knowledge: arts and humanities, mathematics, natural sciences, and social sciences.</p>	<p>1. Use clinical reasoning and knowledge based on the nursing program of study, evidence based practice outcomes, and research based policies and procedures as the basis for decision-making and delivery of comprehensive, safe, patient centered care.</p>	<p>The curricular core concepts of “patient centered care”, “evidence based practice”, and “safety” require knowledge of arts and humanities, quantitative thinking, the natural sciences, and the social sciences to administer safe patient care.</p>

Discussion

Strengths

Faculty and program demonstrate flexibility to ensure student outcomes are met. Attrition is minimal. The design supports the college SLO's.

Recommendations

1. Assure that N400 clinical rotation begins week 6 with skills completed in weeks 1-5.
2. Continue to explore and secure clinics and acute facilities that will provide desired clinical experiences to meet outcomes. In addition, develop rich simulation experiences to fill in gaps in experience.
3. Work to maintain consistency amongst faculty with KSA design.
4. Ensure that skills lab related content directly matches the skill for the day e.g. unrelated seminar content should not be taught during the assigned skill lab time.
5. Work to assure each seminar incorporates active learning as per the Nursing Philosophy. (The Nursing Program Philosophy states "The curriculum is conceptually based and founded on principles of adult and collaborative learning. Basic assumptions include self-direction, utilization of adult experience, problem and activity-centered learning" *pg. 1* and "Teaching and learning is an interactive process between teacher and learner" *pg. 2*).

Objective 4: Evaluate curriculum outcomes – is there evidence that students are achieving desired program outcomes? How successful are program graduates in their positions?

Evaluation Method:

- Review of course and program evaluations (summative assessment – may be limited in concept based curriculum as multiple data points are necessary)
- Small group meetings or formative evaluation moments with students (formative assessment of knowledge, skills, and attitudes)
- Review of *Nurse of the Future Nursing Core Competencies* (NOFNCC) – specifically, which knowledge, skill, and attitude objectives did our students meet – all or just some? Determine how this data is/ is not being collected.
- Review of graduate surveys regarding employed positions (may be difficult to obtain this close to program completion)
- Review NCLEX-RN pass rates
- Compare HESI product summative evaluation data with NCLEX-RN test results for consistency and predictability
- End of Program Surveys

Findings

Students are achieving the desired program outcomes and are feeling prepared for the RN role (98.5%). NCLEX-RN pass rates remain strong and greater than 90%. Most students verbalize appreciation for their learning experience at ARC and reported understanding the steps to achieve the outcomes.

Students participated in formative evaluation in several of the courses. N420 Faculty utilized surveys on Canvas and N430 Faculty utilized weekly evaluation feedback forms. Data was used by faculty to improve seminars and course materials.

A review of available Course Evaluation Summaries (N400 F17-Sp18 and N410 Fa17) were completed. Some summaries have not yet been posted to the Canvas site and one set of evaluations for N410 Sp18 was lost due to an IT issue.

The first group of students involved in the new curriculum responded with this feedback for N400: wanted more time for computer training, clinical preparation, and clinical (only 12 responses), multiple suggestions for concept-based curriculum: introducing clinical paperwork earlier, posting KSA's two or more weeks in advance, and increased practice time in the skills lab. The second group of students for N400 gave this feedback: wanted to go to the hospital sooner, more electronic health record training, starting at clinical sooner and rotating students to different units; felt KSA objectives were appropriate and KSA passports for entry were overall realistic. They reported some repetitiveness and over-use of some activities, but overall stated group activities were helpful and very useful.

N410 students in the new curriculum reported that some did not like small group work, student presentations, or the classroom environment. Overall however, students felt objectives, expectations, syllabus, concepts in classroom, and KSA's were all helpful and useful; the exams tested objectives, and that they were graded fairly in clinical. Students wanted more time in specialty areas, especially OB and Peds, and thought the spinout-rotations were valuable experiences. Students did express that there was not consistency among instructors, and that it was difficult to prepare for class due to KSA's being posted last minute by some instructors. Some students expressed concern about the difficulty of second semester (which is a common statement due to content and clinical expectations

End of Program surveys and comments were reviewed. Although all students felt prepared for the RN role, meeting the program outcome, there were multiple comments, especially from the N430 Sp19 group regarding the implementation of the curriculum. The N430 Fa18 group (n=14) had overall positive ratings regarding active learning, concept based curriculum enhancing their learning, KSA's being helpful, and exams aligned to the KSA's. The N430 Sp19 group (n=42) had overall less positive ratings for the prior points and verbalized dissatisfaction with feedback on assignments, busy-work KSA's, inconsistencies among faculty, and a couple requested the professor to "teach more."

Graduate and Employer Surveys will not be available for review until after the summer of 2020 as they are sent out one-year post completion.

The Nurse of the Future Nursing Core Competencies (NOFNCC) document was intended to be utilized by a student throughout the program with self-reporting of KSA objectives met via documentation on a master NOFNCC document as well as use in

self-evaluation of clinical performance. It was found that the NOFNCC document was inconsistently distributed and collected from students starting in Fall 2018. Starting Fall 2018 grads were given a copy of the document and asked to review it and identify any objectives that were not met during the program. Twenty-two of the 36 students responded. Less than 1% of students felt that any specific objective was not met. While reviewing the Table 3 NOFNCC document found in the Faculty Handbook on the Canvas site, it appeared that the table posted was not the complete NOFNCC Table.

The HESI RN Exit exam was evaluated for both Fall 2018 and Spring 2019 graduates. Overall, the Mean HESI score improved from 850 (below National score) to 891 (above National score) between Fall 2018 and Spring 2019. Resulting data was organized by specialty areas, sub-specialty areas, and concepts. The majority of areas were at the “Acceptable” or “Recommended” levels. When organized by specialty area, 9/10 areas were at “Acceptable” or above. When organized by sub-specialty area, 24/34 areas were at “Acceptable” or above. When organized by concept area, 47/58 areas were at “Acceptable” or above. Detailed data is available on the EVOLVE HESI website.

Discussion

Strengths

N430 students feel prepared to enter the workforce. Graduates felt that the NOFNCC objectives were met. The HESI RN Exit results are positive and provide direction for further evaluation. Students readily participated in formative evaluation when offered as in N420 and N430.

Recommendations

1. Establish a process to collect student self-report data for NOFNCC KSA objectives met during the program.
2. Review course evaluation summaries when completed by faculty teams for Fall 18 and Spring 19.
3. Assure that Table 3 – Educational Student Learning Outcomes and Core Competency document contains all the desired KSA’s from the NOFNCC document.
4. Provide the opportunity for faculty to participate in a guided review of HESI results.
5. Individual faculty or faculty teams should review specific question/content areas with low scores on HESI each semester or each year. A comparison of problem areas should be made with Table 4 “Organization of Concepts and Exemplars by Course” to assure that all Table 4 exemplars are incorporated into seminars. If the specific content of the HESI questions are not part of the curriculum, notify the Curriculum Committee for further evaluation.

Objective 5: Evaluate courses – are course goals congruent with curriculum goals? Are learning activities consistent with the philosophical framework and goals? Is course content current, evidence-based, and logically sequenced?

Evaluation Method:

- Methodical review of current course descriptions in Socrates, program materials, and Canvas.

- Comparison of course content with master plan for the selected concepts and exemplars
- Review of Socrates course information to assure consistency with any changes made since initial implementation
- Team Surveys
- End of Program Surveys
- Course Canvas sites

Findings

A methodical review was conducted comparing the course descriptions in Socrates, the Faculty Handbook, the Student Handbook, and the Syllabus as posted to course Canvas sites. Course descriptions were consistent in Socrates, the Faculty Handbook, and the Student Handbook for N400, N410, N420, and N430. The course descriptions on Canvas for N420 and N430 were not labelled as such and had additional verbiage. The N305 course description in Socrates has a couple of inconsistencies with what is posted to the Faculty Handbook, the Student Handbook and the course Canvas site. N400 does not have a syllabus nor course description on the Canvas site. On the syllabus tab for N400 and N305 data other than the syllabus shows up.

Faculty felt the course goals were congruent with curriculum goals. All felt that courses were logically sequenced, however, the N400 team felt that their course calendar needed to be re-sequenced. For textbook information that was outdated, faculty reported using current information. Current practice and evidence based research is incorporated into the seminars. Many faculty utilize new clinical site practices to inform currency in the classroom.

Review of selected course KSA Seminar's found that all faculty are utilizing KSA formats in posted seminar materials. Overall, the two areas of Attitude and Evaluation on the seminar KSA forms are not always present nor consistently included. For instance, the Attitude section is either missing, or has no content related to attitude, or is missing attitude objectives from Table 3 NOFNCC. For Evaluation, it is either missing or incomplete on some seminar KSA forms. N400 and N305 had inconsistencies with including the NCLEX Test Plan Categories and Related Concepts Diagram. Additionally, in N400, some of the exemplars do not align with Table 4 Organization of Concepts and Exemplars by Course. Other isolated findings included excessive number of objectives and formatting inconsistencies.

Overall, student surveys indicated satisfaction with the courses in the program. Students felt the concept based curriculum enhanced their learning, KSA's helped them prepare for seminar and contributed to learning success. Most students felt that the active learning classroom enhanced their learning experience. Some student surveys did indicate dissatisfaction with consistency of formatting of KSA's, which may be related to missing sections, inconsistency with implementation, inconsistency with required homework for the KSA's, and timely posting of KSA's.

The philosophy of the program states that “Opportunities are provided to observe and participate in both simulated and actual patient centered learning experiences. High-fidelity simulation provides high-impact low-risk learning situations.” High-fidelity simulation is not provided in all courses.

Discussion

Strengths

New curriculum development and implementation has been completed by the faculty and supported by the College. Course goals are congruent with curriculum goals. Learning activities are consistent with the philosophical framework and goals. Course content is current, evidence-based, and logically sequenced.

Recommendations

1. Make changes to the N305 course description as posted to the Faculty and Student Handbooks, as well as the description posted to Canvas to assure all are the same and follow Socrates.
2. Make changes to the N420 Canvas site and label the course description as such. Additionally, remove additional wording that is not part of the course description to a separate entry.
3. Make changes to the N430 Canvas site and label the course description as such. Additionally, remove additional wording that is not part of the course description to a separate entry.
4. Add syllabus including course description to the N400 course Canvas site.
5. Correct the content showing up under “syllabus” tab on the N400 and N305 Canvas sites.
6. Review with faculty, the KSA template and content/format to be included. All KSA’s need to include the NCLEX Test Plan Categories, Related Concepts Diagram, objectives should be clear and concise, attitude objectives from Table 3 NOFNCC with attitude learning activities, and Evaluation methods.
7. Faculty to determine a consistent time frame for posting of KSA’s across the curriculum.
8. Utilization of high-fidelity simulation should be incorporated in all courses.

Objective 6: Evaluate teaching-learning methods – are teaching strategies congruent with the philosophical framework? Do they assist students to achieve course and curriculum goals? Do they respect student diversity? How do students respond to the selected teaching methods? Are students satisfied with the quality of teaching?

Evaluation Method

- Survey of students and faculty
- Review of student perceptions regarding diversity respect
- Comparison of teaching strategies with philosophy of concept based curriculum
- Review individual units/seminars – specifically KSA inclusion, objectives, and teaching methods for alignment

Findings

Students reported that the concepts built on each other from semester to semester, the concept based curriculum enhanced their learning, and that the KSA's helped them prepare for the seminar and contributed to learning success. Forty-two percent of students felt the active learning classroom enhanced their learning, while 40% were neutral and 18% felt it did not help. Faculty perception of student engagement with active learning was somewhat different in that the Fall 2018 group was resistant to it in N400 and N410, but later engaged positively.

Some students individually commented that KSA and seminar formatting was inconsistent and they suggested that faculty work together to provide feedback to each other to become more effective.

Faculty reported that the new curriculum improved lesson planning and updating of pre-existing content of seminars. There was an increase in active learning in seminar. Faculty felt there was a small increase of active learning in the clinical setting with a higher increase of critical thinking (although faculty also reported students were not as strong clinically as they expected). Faculty also reported that students were more prepared for seminar, more engaged in the classroom, and participated in more active and reflective learning.

We were unable to evaluate whether the teaching methods respect student diversity from the perspective of the student as this question was not asked in student evaluations. Faculty perceived that student diversity is respected and respectful behavior is modeled. Teaching methods model respect for diversity by incorporating diversity in case studies (gender, ethnicity, age, sexual orientation, culture, spiritual), clinical patient assignments, and written clinical work. Patient centered care is introduced in N400 and is a primary focus throughout the curriculum.

We were unable to evaluate all seminars for teaching-learning methodology as very few lesson plans were posted, however, for seminars that were observed, most utilized active learning.

Discussion

Strengths

Teaching strategies are congruent with the philosophical framework for the most part and they assist students to achieve course and curriculum goals. Overall, students were satisfied with the quality of teaching.

Recommendations

1. Work to incorporate concept based curriculum in clinical activities. A Flex activity has been planned for this summer to assist faculty with this.
2. Add question(s) on respecting student diversity to the end-of-program evaluation for data collection.

3. Faculty to review passports for entry and seminar activities to assure that active learning is directly tied to KSA objectives and facilitates deep learning.
4. Consider discussion, or posting, or faculty presentation to share the variety of active learning methods used.

Objective 7: Evaluate curriculum fidelity – how well did the faculty follow the established curriculum standards and teaching methods?

Evaluation Method:

- Faculty survey
- Review individual units/seminars – specifically KSA inclusion, objectives, and teaching methods for alignment

Findings

The majority of faculty followed the established curriculum standards, including specified concepts, exemplars, and KSA objectives. The reader is referred to Objective 5 for further discussion of KSA's. N400 faculty identified that they were not following the assigned hours on Table 4 "Organization of Concepts and Exemplars by Course", nor the assigned breakdown of skills and actual patient care labs and have worked to address this.

Passports for entry and reflection activities are varied in depth, breadth and level of evaluation.

Discussion

Strengths

Faculty have worked diligently to design and implement the planned curriculum.

Recommendations

1. N400 Faculty to align content hours and clinical practice hours with the curriculum.
2. All faculty to discuss any needed changes with the Curriculum Committee/Faculty prior to implementation.
3. With continued readjustments to hours and curricular content, faculty need to assure they are teaching the correct concepts, exemplars, and hours each semester.
4. Ensure that every KSA has a passport for entry.
5. Continue to evaluate the amount of student work required for each passport.
6. Assure that each seminar has a reflection activity.
7. Assure that each seminar has a listed method of evaluation.

Objective 8: Evaluate student achievement assessment methods – what assessment methods are being used throughout the curriculum? Are assessment approaches congruent with the philosophy of a concept based curriculum? Do assessment approaches integrate knowledge, skills, and attitudes? Do the achievement methods provide for a demonstration of all relevant types of learning? Do they accommodate students' diverse learning styles, need for formative and summative feedback, and

desire for input into the process? Do they accommodate faculty members' expertise, preferences, and academic workload?

Evaluation Method:

- Faculty and student surveys
- Develop a spread sheet of where formative and summative assessment is taking place
- Develop a plan of what data is collected, who is responsible for collecting/reviewing data, and what is to be done with the data in terms of recommendations/timelines for change
- Evaluate use of the HESI product for both summative and formative learning
- Determine if test item validity and reliability are being evaluated
- Determine the percentage of test items which are at the same high levels as NCLEX-RN test items

Findings

Students are assessed in a variety of ways including examinations, clinical performance, and written assignments. All faculty teams reported that the assessment methods incorporate knowledge, skills, and attitudes.

Faculty have been attempting to use NCLEX style test items and to assure a high percentage of questions that are at the application level or higher, to prepare students for the NCLEX. Exams were reviewed and statistics were collected on Exam 3 for each course with the following results for percentage of high-level questions: N400 65%, N410 67%, N420 73%, N430 82%. All courses except N410 are using a single question per page, no going back display which mirrors NCLEX. N410 will be changing to this format for Fall 2019. Experienced faculty continue to mentor other faculty with test item development and evaluation.

Most faculty reported that test items were aligned to the objectives and a few also align to steps of the nursing process. Only a few faculty develop a test grid with this data. Most faculty teams review item analysis using the >40-50% missed rule. Some use point biserial although application of it varies among content experts and faculty.

Students who are part of DSPPS receive testing accommodations.

All semester faculty require students to complete the HESI practice exams as passport for entry for the graded HESI exam. All require practice exams to be completed at 80-90% correct. Faculty are evaluating overall scores but may not be evaluating the concepts, exemplars, and detailed question results. Overall, faculty are new users of the product. Additionally, there have been several issues with testing and some faculty dissatisfaction which has been forwarded to HESI.

One area of the curriculum that has not been fully developed into a concept based format is that of clinical assignments. Faculty have initiated some concept related projects but as a whole agree that it is the next priority for the faculty to work on.

We did not develop a spreadsheet nor plan for program assessment as described in bullets 2 and 3 under “Evaluation Methods” as it exceeded the scope of this project.

Discussion

Strengths

Most of the students successfully pass the exams and NCLEX. Overall exit HESI scores are positive and indicated acceptable levels of knowledge.

Recommendations

1. Align each test item with an objective and the step of the nursing process. Consider identifying the objective by number or phrase on the exam itself. Some faculty have indicated they were planning to implement this starting Fall 2019.
2. Faculty teams should consider evaluation of validity and reliability of each test item.
3. Consider developing a testing policy.
4. Consider utilizing HESI exams at beginning and end of semester, using the pre-test for targeted remediation and the end-test for achievement.
5. Faculty teams should closely evaluate HESI results and make any needed adjustments to the seminars for included exemplars/concepts.
6. Continue to work on addressing/revising/developing/aligning clinical assignments to the concept based curriculum.
7. Evaluate the program evaluation plan for currency and application to the new curriculum.

Objective 9: Evaluate the adequacy of resources including faculty members (expertise/experience/availability), staff members (Skills Lab, Sim Lab, Other support), classrooms, offices, labs, meeting rooms, clinical placements, and equipment.

Evaluation Method:

- Survey of faculty, students, and staff
- Inspection of physical resources
- Interview Program Director and HEED Dean

Findings

The nursing program shares space with multiple other programs in the HEED complex. As those programs expand, the nursing program has been impacted.

N400 and N410, as well as N420 and N430 have need of the labs at the same time, due to course scheduling during the first week of each semester. The physical size of the labs prohibits more than one class of students, and even with that, it is quite crowded.

The Skills Lab is not always available, causing N400 and N420 to conduct lab off campus. Faculty teams felt that skill lab supplies were adequate. The physical space for skills lab is confining for 40 students and supplies are not always ideal e.g. outdated or refurbished Alaris pumps with limited drug libraries*. Lockers were recently added for storage of student belongings to help address the space issue. There were some

concerns with the Skills Lab IA's availability for remediation. Faculty indicated that the Skills Lab IA was helpful with setup of the labs.

**Update: faculty are to provide a list of needs to replace outdated skills lab equipment to Program Director this Fall 2019.*

The biggest challenge to use of the Simulation Lab is availability as it is utilized by multiple programs. As with the Skills Lab, physical size is a challenge. There is a planned remodel of the space during summer of 2019 to address the physical layout. The environment of the simulation lab is noisy, many of the purchased scenarios are outdated, and the birth mannequin is broken*. Additionally, the voice simulators are not realistic per faculty and student feedback. The Simulation Lab is not currently utilized by N420. The Simulation Lab IA is helpful and flexible and has developed a core of assistants to facilitate simulations.

**Update: Faculty to provide list of simulation supplies and equipment for replacement and/or updating in Fall 2019 to the Program Director. Construction remodeling is taking place currently in the simulation lab to help with the crowding and observation issues. Additionally, a mobile simulation lab will be available for use from time to time as it is shared between all disciplines in HEED and will be off campus at times as well.*

The HEED 710 classroom is crowded for 40-50 students and does not lend itself to an active learning classroom due to size and desk/chair configuration. On the positive side, faculty have a new podium with computer, classroom wi-fi, and projector. Additional white boards and camera are due to be installed, per faculty request, to facilitate active learning.

Faculty offices are adequate for those who have them in the HEED complex. Several faculty have been assigned offices in a different location (Portable Village) and some of those are shared spaces. Adjunct faculty have limited assigned office space and are often referred to the HEED break room for computer use.

Meeting rooms for large meetings are adequate only if classrooms are available and reserved well in advance as they do not have priority and there are no designated meeting rooms in the HEED complex. The program Administrative Assistant does put in timely requests for meeting space. When meeting as teaching teams, or with small groups of students, the faculty office space is crowded and not ideal.

Faculty adequacy and consistency is an ongoing challenge for both theory and clinical. Some of the challenges include adjunct faculty turnover, new inexperienced adjunct faculty, inconsistent application of curriculum by adjunct faculty, use of long-term temp faculty, pre-retirement cut backs, retirements, frequent moving of full-time faculty to address needs, and general faculty shortage. Additionally, mentoring of new and inexperienced faculty is time-consuming and unpaid.

The program has a Student Success Coordinator who assists students having academic and clinical challenges. She no longer assists students in the clinical setting, but rather meets with students in a small group setting on campus.

Adequacy and consistency of clinical shifts and locations remains an ongoing problem. The following facilities have terminated ARC's clinical rotations as they stood: Sutter Roseville (Med-Surg), Kaiser Roseville (Peds, Preceptorship), Sutter General (Peds, Med-Surg, Preceptorship). Specialty facilities have reduced the number of students from 10 to 6-8, further limiting placement. Further changes are expected with Sutter Center for Psychiatry.

Discussion

Strengths

In spite of clinical placement challenges, students are able to meet clinical objectives in all areas with the additional use of evening shifts and simulation.

Recommendations

1. Continue to address physical space issues with the College and assure inclusion in the long-term plan.
2. Evaluate Skills Lab usage and remediation without a health care trained IA (there will be a change to staffing in Fall 2019).
3. Evaluate effectiveness of space, sound, and efficiency of Sim Lab after remodeling is completed.
4. Continue to recruit and mentor faculty.
5. Continue conversations with clinical partners and regulatory agencies to address clinical site limitations.
6. Evaluate long term effectiveness of student outcomes for those assisted by the Student Success Coordinator.
7. Evaluate content of success seminars to determine if they are meeting the needs of all students.
8. Consider use of the Student Success Coordinator in the sim/skills lab for remediation.