

Oklahoma City Community College
Nursing Program
Nursing Advisory Committee

Spring 2007
March 14, 2007

MINUTES

Chairperson: Karen Tomajan, MS, RN

Faculty Liaisons: Linda Cowan, MS, RN, Cindy Neely, MSN, RN

Members Present: Karen Tomajan (Integris), Renee' Lewis (Francis Tuttle), Debbie Kamphaus (Metro Tech), Lisa Rother (Integris), Sue Lawson (Children's Center), Mike Abla (Cedar Ridge)

Administration/
Faculty: JoAnn Cobble, EdD., RN, Dean of Health Professions Division
Felix Aquino, PhD., Provost, Vice President for Academic Affairs
Rosemary Klepper, MS, RN, Nursing Program Director
Deborah Myers, MS, RNC, Assistant Nursing Program Director
Linda Cowan, MS, RN, Cindy Neely, MSN, RN, Jackie Frock, MSN, RN, Gina Edwards, MSN, RN, Valerie McCartney, MS, RN, Carol Heitkamper, MS, RN, Michael Cole, MA, BSN, RN, Diana Spencer, BSN, RN, Kay Wetmore, BSN, RN, Robin McMurray, MSN, RN, Monica Holland, BSN, RN, Beverly Schaeffer, MS, RN, Susan Mann, MS, RN, ARNP, NP-C

- I. Call To Order: 3:40 p.m.
- II. Welcome: Karen Tomajan welcomed members, administration, and faculty. Rosemary Klepper welcomed all, and explained official Advisory Committee appointment letters had been sent to all members in order to comply with regulations on committee memberships at OCCC, and the date of July 1, 2007 was simply referencing the upcoming fiscal year membership, and in no way indicated members were *not* currently on the Advisory Committee.
- III. Introductions: Linda Cowan initiated faculty introductions; each faculty introduced themselves and where they work within the program.

IV. Approval of Minutes:

MMS to approve minutes of Fall 2006 minutes, with spelling and credentialing corrections.

V. College Updates:

A. Growth and Development of OCCC: Dr. Aquino relayed information regarding a new proposal to state regents requesting \$300, 000+ for the nursing program. He discussed new college programs for enhancement of student success, including the College and Life Success course for Fall. He also discussed development of learning communities, to also begin in the Fall, and explained the new course and the learning communities are shown by research to be best practices for decreasing attrition rates and increasing students' sense of community within their learning environment. Dr. Cobble added that nursing program courses are presented in a package format at present, and Rosemary mentioned that the nursing program does participate in sub-communities for those needing additional help.

B. New Health Professions Building, Progress: Dr. Cobble discussed the ongoing construction of the new 2-story, 46,000 square foot building. She stated administrative offices will be located there, as will many classrooms large enough to accommodate the increasing size of the program. There will also be an auditorium for larger classes, in-services, continuing education, etc. After the move to the new building, the current cubicle area in the present Health Professions area will be remodeled to accommodate 12 new individual, private offices. Long range planning with Stu Harvey includes looking at more classroom space and increased use of simulation. The new initiative proposal includes a 40,000 square foot proposal for offices, classrooms, and simulation labs.

VI. Program Updates:

A. Faculty Updates: D. Myers related there are 16 full time faculty in the nursing program, 1 program director, 1 assistant program director, for current full time total of 18 faculty. She informed that 78% of the faculty are masters-prepared, with the remaining 22% (4 faculty) currently pursuing the masters degree in nursing. Two new faculty have been added since the Fall 2006 meeting, and they are Michaele Cole and Diana Spencer. One resignation was received from faculty, which was effective March 2, 2007, from the NP IV team. This position, along with 3 additional positions

funded from the initiative will begin interviewing in April, with new faculty to begin Fall, 2007.

B. NCLEX-RN Results: D. Myers discussed the expected level of achievement (ELA) on the exam is to achieve at least the national average passing standard. For 2005 the OCCC program has 83.47% pass rate compared to 87.29 for the national average. In 2006, OCCC achieved 85.71 passing rate compared to 88.11 for the national average. Of the 60 graduates last Fall, 50 have taken the exam for a present pass rate of 88%. To increase OCCC pass rate (would like 90%), Debbie and Rosemary went to the NCLEX-RN Workshop in Philadelphia, have ordered the detailed test plan for critical content areas, and have made program changes based on information they attained from the workshop. The program began using the Assessment Technologies Institute (ATI) testing program last Fall to decrease knowledge deficits. Students must pass ATI progression standards to advance to the next course. Students may remediate up to three times; upon failure a third time the student will be required to repeat the course. Students must pass with a 90% predictability of passing the NCLEX-RN before they can pass the overall nursing program. Program curriculum is being examined in light of the new NCLEX-RN test plan also. Rosemary added that general education support courses are also being reviewed, and it is anticipated that Principles of Chemistry will be added as a support course, and that Human Anatomy and Human Physiology will replace Anatomy and Physiology I and II. However, total program hours will remain at 75, or possibly 76 as Math for Health Careers is being replaced by the Principles of Chemistry course.

C. Program Growth in Progress: 1) Enrollment Updates (handout) Rosemary related there has been tremendous growth in the nursing program, which anticipates 142 graduates for 2007. The program does need qualified applicants for the Career Ladder Pathway—this program has a capacity of 60, with 44 students enrolled. The BADNAP program (baccalaureate to associate degree) begins in June 2007 and will have 30 students. The program's 5-year enrollment rate is up 99%, with the graduate rate up 115%. Rosemary and Dr. Cobble both expressed commitment to the continuation of quality programs during this growth. 2) Baccalaureate to AND Accelerated Pathway (BADNAP) track: This program involves 10-month immersion in the nursing program. All general ed. and support courses must be completed prior to entering the program. Students will have two 12-hour clinicals per week, and one-half of the theory content will be online.

3) OUCN Collaboration: Rosemary relayed we are “on target” to begin teaching junior-level nursing courses to OU College of Nursing students next Fall. This provides OCCC-educated students (who receive first preference) to stay at OCCC for their junior level nursing courses, at OCCC tuition/fee rates. OU will select the participating students and will guarantee those who pass a transfer to OU for their senior-year nursing courses. Karen Tomajan commended OCCC’s nursing program for creating programs that increase enrollment in nursing. Dr. Cobble commended Rosemary and Debbie for their hard work, as well as the hard work of all the faculty. 4) Pharmacology in Nursing Practice course: to enhance board results and curriculum integrity, this new course will be offered for preference points in an online and web-enhanced format. Ten sections will be offered in Fall 2007. This course does not supplant the current pharmacology course provided by EMS but is an alternative to that course. 5) Rosemary discussed the Institute of Oklahoma Nursing Education (IONE) on whose interim executive board she serves. Rosemary informed the purpose of this group is to increase nurse educator input into nursing education issues in Oklahoma, and is not intended to supplant the Oklahoma Healthcare Workforce Center (formerly Governor’s Council). She provided a handout which has, *informally*, provided the purpose of the IONE group. She stated the group is to meet this month to approve by-laws, so formal statements of purpose from the group will be forthcoming. Karen Tomajan mentioned the Workforce group is applying for 503 (c) status, and its interim board is seeking grant funding.

VII. Course Updated:

- A. Nursing Process I- Susan Mann, Team Leader, states there are 71 out of an initial 72 students enrolled for the semester.
- B. Nursing Process II- Carol Heitkamper, Team Leader, states there are 71 of 72 students enrolled for the semester.
- C. Nursing Process III- Terri Walker, Team Leader, was unable to attend the meeting but the group was informed there are 59 students in this process.
- D. Nursing Process IV- Terri Walker is also leading this group in the interim, and there are 49 students in this process.
- E. Career Ladder Pathway (CLP)- Valerie McCartney, Team Leader, informed there are 33 students of an initial 33 students who began in January for the CLP.

VIII. Committee Input and Suggestions:

A. Safety in the Workplace: 1) Back Safety-Karen Tomajan discussed the national push for a “no lift” policy in the workplace by the ANA, and mentioned OU is piloting a “no lift” curriculum, and more information on the curriculum could be obtained from them. She stated she felt nursing students should be prepared for “no lift” policies in the workplace upon graduation.

2) Patient Care and Safety (a)Communication- Karen discussed preparing nursing students for Situation Background Assessment Recommendation (SBAR) protocol for communicating with physicians, which is already in place in many OKC area hospitals. She provided the website <http://www.ihi.org> for further information. (d) Rapid Response Teams- Karen explained this protocol was also put forth by the Institute for Healthcare Improvement (IHI) and information could be obtained from the website listed.

Due to time constraints, the committee was not able to discuss the remaining input and suggestions items on the agenda. However, one item was added, that of PDA Confidentiality. Deborah Myers explained we are in the process of utilizing PDAs for the BADNAP program, and depending on the results, may utilize PDAs in other programs in the future. She requested feedback from committee members who are in service regarding confidentiality issues with PDA use. The consensus from committee members in service suggested there is typically not a separate confidentiality policy for PDA use, though such use would need to adhere to current policies of confidentiality, e.g. no identifiable patient information should be relayed via PDA or stored on a PDA. It was also noted that if internet use is desirable, the area facilities represented by committee members do have wi-fi capabilities and this would be available to instructors and students using PDAs.

IX. Next Meeting Date: Wednesday, September 26, 2007 at 3:30. Location TBA

X. Adjournment: The Spring 2007 meeting was adjourned at 5:40 p.m.