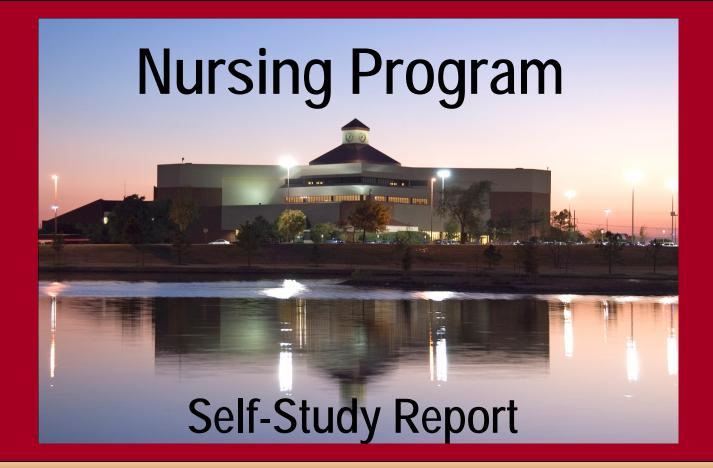
Oklahoma City Community College



For the purpose of Continuing Accreditation from the Accreditation Commission for Education in Nursing

February 11-13, 2014

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EXECUTIVE SUMMARY

GENERAL INFORMATION

Nursing Program Type Associate Degree Nursing

Purpose of Visit Continuing Accreditation

Name and Address of Governing Organization Oklahoma City Community College 7777 S. May Avenue Oklahoma City, Oklahoma 73159 Phone: 405-682-1611 www.occc.edu

Name and Title of Chief Executive Officer Paul W. Sechrist, Ph.D. President

Name and Title of Chief Academic Officer Felix J. Aquino, Ph.D. Vice President for Academic Affairs

Name and Title of Associate Academic Officer Greg Gardner, MS Associate Vice President for Academic Affairs

Name of Regional/Institutional Accrediting Body and Accreditation Status The Higher Learning Commission of the North Central Association of Colleges and Schools; Full Approval Most recent accreditation: 2011 Next accreditation visit scheduled: 2021

ACEN Accreditation Status Continued Accreditation without conditions: March 7-9, 2006 Next accreditation visit scheduled: February 11-13, 2014

Name and Address of Nursing Education Unit Oklahoma City Community College Nursing program 7777 S. May Avenue Oklahoma City, Oklahoma 73159



Name, Credentials, and Title of Nursing Administrator Deborah Myers, MS, RNC Director, Nursing Program Office: 405-682-1611, ext. 7138 Fax: 405-682-7826 <u>dkmyers@occc.edu</u>

Name, Credentials, and Title of Associate Administrator, Nursing Program Terri Walker, MSN, RN Associate Director, Nursing Program Office: 405-682-1611, ext. 7282 Fax: 405-682-7826 twalker@occc.edu

Name of State Board and Status Oklahoma State Board of Nursing 2915 N. Classen, Suite 524 Oklahoma City, Oklahoma 73106 Continued Accreditation without conditions: October 26-27, 2009 Next accreditation visit scheduled: February 11-13, 2014

ACEN Standards and Criteria Used to Prepare the Self-Study Report ACEN Accreditation Manual; ACEN Standards and Criteria: Associate Degree Program; 2013 Edition

Number of full-time faculty and administrators 2 full-time nurse administrators without teaching responsibilities 19 full-time faculty 1 full-time HPS/Nursing Laboratory Coordinator

Number of part-time faculty 49 part-time faculty



INTRODUCTION

Oklahoma City Community College (OCCC) is accredited by the Higher Learning Commission through 2021 and is a member of the North Central Association of Colleges and Schools. The *HLC Report on Accreditation and Verification of Decision Letter* can be viewed in Appendix A. The College is a member of the American Association of Community Colleges and is also recognized by the federal government to offer education under the veterans and social security laws. OCCC is authorized by the Oklahoma State Regents for Higher Education to offer certificate, associate in arts, associate in science, and associate in applied science programs.

OCCC is a public two year open door admission college serving primarily an urban population in the south Oklahoma City area. OCCC is the fifth largest college in Oklahoma, employs approximately 1,300 full-time or part-time individuals and serves more than 28,400 students a year. OCCC is recognized as a leader in technology education and grants over 1,800 degrees annually. In academic year 2013, the College awarded 1,426 associate degrees. Of those, 194 degrees were AAS in Nursing, accounting for 13.5% of the total number of degrees awarded by the College (AY2013).

OCCC offers a wide variety of associate degree programs which prepare students to transfer to baccalaureate institutions. Other degree and certificate programs are designed to prepare students for immediate employment in a variety of fields. Overall, OCCC offers 80 degree options with associate degrees in 51 different areas of study and certificates in 28 areas. OCCC also offers a wide variety of community and continuing education courses, workshops, conferences and seminars, along with numerous recreational and cultural programs. Additionally, several programs are offered cooperatively at area Technology Centers as part of the College's Cooperative Alliance partnerships. OCCC serves a diverse population, with students from the Oklahoma City metropolitan area as well as 71 counties in Oklahoma, 41 states, territories and provinces, and 67 nations.

In spring 2013, the total student semester headcount in college credit courses was 13,216. Forty-five percent of the students enrolled in at least one online course and 16% were enrolled exclusively online. The FTE and enrollment has been steadily increasing over the past ten years. Enrollment statistics are listed below.

OCCC Enrollment Spring 2013		
Total student enrollment	13,216	
Full-time students	31.7% (n=4,187)	
Part-time students	68.3% (n=9,029)	
New students	28.6% (n=3,752)	
Returning students	71.4% (n=9,375)	
Students enrolled at Technology Centers/Cooperative Alliance	8.2% (n=1,086)	

According to data obtained from the Human Resources Department, OCCC employed 141 full-time faculty and 618 part-time faculty for instructional purposes in the spring of 2013. The gender, racial and ethnic breakdown for full-time faculty is depicted below.



OCCC Full-time Faculty Statistics		
Female faculty	54% (n=76)	
Male faculty	46% (n=65)	
Caucasian (non-Hispanic)	79% (n=112)	
Asian	5.7% (n=8)	
Native American	5.0% (n=7)	
African American	4.3% (n=6)	
Hispanic/Latino	4.3% (n=6)	
Two or more races	1.4% (n=2)	

On March 11, 2013, the Board of Regents formally adopted <u>*The OCCC Roadmap 2018</u>*, a new five year plan which identifies three "Big Goals" designed to address student success:</u>

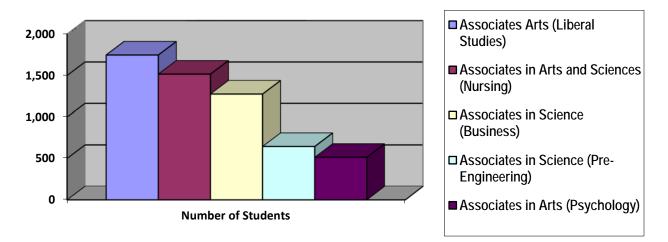
- 1. Increase the number of our students who complete a certificate or degree by 50%.
- 2. Close the academic achievement gaps that persist with our low-income, first-generation, and some racial and ethnic groups.
- 3. Double annual giving to support student scholarships, community events, and the endowment.

The ten initiatives developed as part of *The OCCC Roadmap 2018* are listed below:

- 1. Complete College OCCC (Oklahoma is a member of the nation-wide initiative, Complete College America)
- 2. Partnerships (OCCC will collaborate with K-12 systems, career technology schools, and four-year colleges)
- 3. Student Support Program and Services (continue to offer a broad range of student services)
- 4. Community Development Programs (enhance artistic, recreation, and community programs)
- 5. Capitol Hill Center (enhance educational pathways for credit and non-credit students, and assist in business and community development)
- 6. Focused Professional Development (refocus the education, training, and development of OCCC faculty and staff)
- 7. Technology to Support Learning Services (provide reliable, up-to-date, and integrated technology solutions to enhance student learning and improve support services)
- 8. Learning and Support Services (provide new or renovated learning spaces and other facilities to accommodate OCCC's student population and accomplish the ENDs
- 9. Efficient and Effective Business/Operational Services (emphasis on reducing the cost of operations while improving their effectiveness)
- 10. Increasing Revenue from Donations, Grants and Other Sources (increase revenues from donations, grants, and other non-traditional sources)



Top Five Majors Spring 2013



OCCC students represent a diverse population in gender, age, and ethnicity as shown below:

OCCC Student Enrollment		
Total Enrollment	13,216	
Enrolled Full-Time	31.7% (n=4,187)	
Enrolled Part-Time	68.3% (n=9,029)	
New Students	28.6% (n=3,752)	
Returning Students	71.4% (n=9,375)	
International Students	3.0% (n=399)	
OCCC Student Characteristics		
Females	58.2% (7,648)	
Males	41.8% (5,504)	
Ages 24 and under	44.1% (5,834)	
Ages 25 and over	55.9% (7,381)	
White	51.9% (6,865)	
Black or African American	13.7% (1,806)	
Asian	7.9% (1,049)	
Native Hawaiian and Other Pacific Islander	0.4% (47)	
Hispanic or Latino	10.9% (1,443)	
Other race/ethnicity	5.4% (719)	
Two or more of the above races/ethnicities	3.8% (501)	

OCCC Student Profile Spring 2013

The nursing program student profile data for academic years 2011, 2012, and 2013 is listed below:

Nursing Student Profile AY2011-AY2013

Nursing Student Characteristics			
	2011	2012	2013
Enrollment	439	475	428
Females	365	395	364
Males	74	80	64
Average Age	31	30.8	31.1

Nursing Student Characteristics			
	2011	2012	2013
White	270	315	279
Black or African American	46	43	42
American Indian and Alaska Native	25	27	16
Asian or Native Hawaiian/Pacific Islander	41	29	31
Hispanic or Latino of any race	14	16	17
Some other race/ethnicity	42	0	0
Two or more of the above races/ethnicities	1	2	3
Choose not to answer	0	43	40

The design of the college affords easy access from one part of the campus to another as most of the buildings are connected. The College's academic Division of Business and many administrative offices are located in the three-story Main Building. Most offices that offer services for students are located there, as well as the College Bookstore, Campus Police Department, and Facilities Management.

An Administrative Building also houses the President's Office and connects the Main Building to the Arts and Humanities Center, which contains the offices for Academic Affairs, Institutional Advancement, Community Outreach and Education, and the Division of Arts. The English and Humanities Center houses the offices of the Vice President for Community Development, The Bruce Owen Theater, classrooms and laboratories.

The newly constructed 50,000 square foot Visual and Performing Arts Center provides classrooms, laboratories and studios for art instruction, music, photography and visual arts. Groundbreaking ceremonies were held in the fall of 2010 for the new Performing Arts Theater, which is scheduled to be completed in December of 2013. This state-of-the-art facility will include 1,000 seats and will host many college and community events including the nursing pinning ceremonies (beginning March, 2014).

Completed in 2007, the Robert P. Todd Science, Engineering and Math Center (SEM Center) consists of sixteen group laboratories, five open access laboratory/tutorial centers and forty-three faculty offices. These spaces include a second floor addition with six new academic laboratories, eleven new classrooms, thirty faculty offices, two large laboratory centers, the Math, Engineering, and Physical Sciences Division office and the Chemistry and Biological Sciences Division office. A state-of-the art botany classroom and greenhouse runs along the south side of the building. The building includes the Center for Learning and Teaching (CLT), with specially designed space for faculty development, training, and collaboration. To the southeast of the SEM center, the Transportation Technology Center contains faculty offices (six of which are nursing faculty), automotive technology laboratories and classrooms (including one nursing classroom).

The College Union offers a variety of meeting and conference rooms, food service facilities, and dining areas. Adjacent to the Union is the Wellness Center, which includes a gymnasium, cardiovascular center, weight room and aerobic rooms. Nearby is the Aquatic Center which contains a competition swimming pool and diving well. This center hosted the 1989 U.S. Olympic Festival aquatic events. The Social Sciences Center is also in this area and houses offices and classrooms for the Division of Social Sciences.

The Health Professions Education Center is a 42,800 square foot, multi-million dollar facility, built in 2008. This facility is home to five health-related programs to include Emergency Medical Sciences (EMS), Registered Nursing (RN), Occupational Therapy Assistant (OTA), Physical Therapist Assistant (PTA), and



Speech-Language Pathology Assistant (SLPA). OCCC is recognized locally and across the state as a leader in health technologies and pre-health professional programs. Students declaring a health-related major account for 21.2% of the overall student body with nursing representing 11.5% of the total.

Located northeast of the Main Building, the Keith Leftwich Memorial Library offers information services and computing resources on the first two floors for students and the community. The third and fourth floors of the building house the academic Division of Information Technology, Student Computer Center, and the Cooperative Alliance Program staff.

The governing board for OCCC is the Board of Regents. Members of the Board are appointed by the Governor of the State of Oklahoma for a seven-year term or as designated. Using the purposes set out for community colleges by Oklahoma State Statutes and the functions assigned by the Oklahoma State Regents for Higher Education, the College's Board of Regents develops the mission, vision, and priorities for the College.

The current president of OCCC is Paul W. Sechrist, Ph.D. Dr. Sechrist became the ninth President of the College when he accepted the position in 2005. He received his Bachelor's Degree in Speech Communication in 1976 and his Master's Degree in Speech Communication Emphasis in 1977, both from Southern Nazarene University. He received his Ph.D. in Communication in 1984, from the University of Oklahoma.

Dr. Sechrist has served in a variety of administrative capacities. He has been a part of the administration of OCCC since 1995. Prior to being appointed as President, he has served as Provost, Vice President for Academic Affairs, and Dean of Business and Computer Technology. Before coming to OCCC, President Sechrist held faculty and academic leadership positions at Southern Nazarene University, including Dean of External Programs (now Adult Studies). He began his long career in education as a junior high and midhigh teacher.

COLLEGE HISTORY

Oklahoma City Community College (OCCC) traces its beginning to June 17, 1969. At that time, the Greater Capitol Hill Chamber of Commerce submitted a petition with 3,234 signatures to the Oklahoma State Regents for Higher Education (OSRHE), requesting that a junior college be established in South Oklahoma City. As a direct result of the interest and initiative of these citizens, a junior college district was formed, and the original Board of Trustees of South Oklahoma City Junior College was constituted in early 1970.

The first facility, a 64,000 square foot structure called the Main Building, was completed in 1972. The interior was consciously designed using an "open concept" that was almost free of permanent walls, with modular partitions used to create classrooms, offices and other enclosed spaces as needed.

In February, 1972, Dr. Bruce Owen, the chief academic officer, together with the Board of Trustees submitted the first academic plan to the OSRHE. The plan was titled *A Common Sense Approach to Education* and included the first mission statement, educational format, and educational philosophy of the college. The concepts in the plan were unique in Oklahoma. Admission was open to all who had a desire to learn, and tests would determine placement in courses based on the students' level of learning.



The OSRHE found the plan reasonable and approved it in February, 1972. On Monday, September 25, 1972, the college began classes with 1,049 students. In 1974, the college became part of the state system for higher education, and a new Board of Regents was appointed as the governing unit.

Over the past 41 years, many changes have occurred. In 1983, the name of the college changed to Oklahoma City Community College, reflecting the fact that the college served the entire metropolitan area. Despite all the changes, many key features of the original college philosophy remain intact. OCCC still has an open door admissions policy, making education available to as many students as possible. The commitment to this original principle is expressed in the first college END statement: *Our community has broad and equitable access to both highly valued certificate and degree programs and non-credit educational opportunities and events.*

HISTORY OF THE NURSING EDUCATION UNIT

The associate degree nursing program admitted the first class in fall, 1973 with an original class of 25 students. The program achieved initial National League for Nursing accreditation in 1977 and has been continually accredited since that time with the last visit occurring in March of 2006 (Appendix B). The program has also maintained continuing approval status with the Oklahoma Board of Nursing (OBN) since its inception. The last visit from the OBN occurred in October of 2009 at which time continued full approval was received (Appendix C). Prior to 1993, the nursing program was in the Division of Health, Social Sciences and Human Services (now named the Social Sciences Division). From 1993 through 2000, the nursing program was a separate entity within the college known as the School of Nursing. In 2000, the college created a Division of Health Professions which includes programs in Emergency Medical Sciences, Nursing, Occupational Therapy Assistant, and Physical Therapist Assistant. In August of 2011, a new degree program was launched by the Health Professions Division, the state's first and only online Speech-Language Pathology Assistant program. The nursing program is the largest of the health profession programs and is an integral part of the educational institution as demonstrated by the College, Division and Program organizational charts (Appendix D).

Traditional Pathway

The traditional pathway of the nursing program is primarily for students who are not previously licensed as a practical nurse or paramedic or who have not earned a baccalaureate degree in another discipline. The traditional pathway is the original pathway and has remained strong and responsive to the community's need for well-prepared nurses. In 1991, a second annual admission period was initiated for a flex offering of the program. The flex scheduling, which offers the core nursing major courses and some clinical opportunities in the evening hours, continues to thrive and meet student needs. Students admitted in the fall semester follow a more typical day-time schedule, while those admitted in the spring semester attend evening theory classes. In 2000, when the Division of Health Professions was organized, 45 nursing students were admitted into the program twice a year. In response to the shortage of registered nurses, that number was increased so that 54 students were admitted twice a year beginning in 2003. With two entry points annually, there continued to be four to five qualified applicants for each student admitted to the traditional pathway of the program. In the fall of 2005, approval was obtained to increase the class size from 54 to 63 in response to the continued high demand for the program and the community's need for registered nurses.



In 2006 the State Regents funded the OCCC nursing program for \$367,100 as a part of the Oklahoma State Regents for Higher Education Nursing and Allied Health Initiative. Funding provided for four additional nursing faculty members, a nursing campus clinical laboratory coordinator, a full-time clerical position and 50% funding for an Academic Advisor to be matched by OCCC. These changes allowed the program to increase the number of students accepted to the traditional pathway to 72 each semester.

Career Ladder Pathway

Another important indicator of the program's responsiveness and adaptability to changing community needs was the evolution of the Career Ladder Pathway (CLP). Although admission by articulation was previously available to qualified licensed practical nurses, the LPN-RN pathway was more formally developed in 2002. In 2004, the track was re-designed to include Oklahoma licensed paramedics as well as licensed practical nurses and was renamed the career ladder pathway (CLP). Integris Health System provided partial funding for this pathway through financial support and clinical placement opportunities. Funding from Integris was discontinued in 2011; however they continue to be instrumental in providing clinical placement for students in the CLP, and all students enrolled in the nursing program. In the fall of 2005, the CLP partnered with three area practical nursing (PN) programs to create the 1+1 partnership. This program refers qualified applicants to the fall traditional pathway who are placed on an alternate list to one of the PN programs for their first year of nursing education. The three partner PN programs accept between 10-30 students per year into the 1+1 program. Because of the 1+1 partnership as well as the growing number of other applicants, the CLP enrollment capacity has increased from 30 (2002) to 72. At this time we are accepting 63 students annually due to a limited number of available clinical slots.

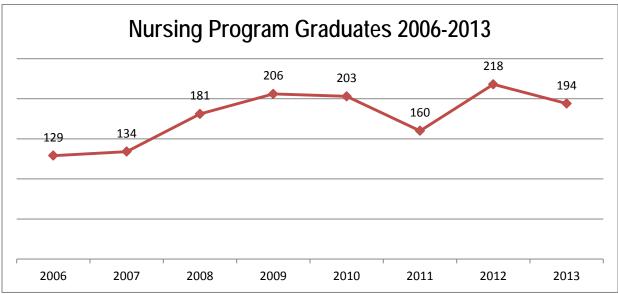
Baccalaureate to Associate Degree Nurse Accelerated Pathway

An additional innovative approach that was developed as a part of the Oklahoma State Regents for Higher Education Nursing and Allied Health Initiative was the Baccalaureate to Associate Degree Nurse Accelerated Pathway (BADNAP). This pathway offers an accelerated route to earning the AAS degree in nursing for individuals who have a baccalaureate degree (non-nursing) from an accredited institution of higher education. The BADNAP has a summer entry point with opportunity for students to complete core nursing courses in a 10 month time framework. Thirty students were admitted to the first class (summer 2007) with enrollments increasing over the last six years to a total of 63 students admitted for summer 2013.

All pathways in the OCCC nursing program require a total of 74-75 credit hours for completion. In the traditional pathway, the suggested degree plan outlines the required coursework over a period of two summer, two fall, and two spring semesters. The CLP suggested degree plan spans five semesters, (one summer, two fall and two spring). The BADNAP program suggested degree plan outlines the coursework over a period of two summer, two fall, and two spring semesters. The four BADNAP core nursing courses are taught in 8 week semesters.

The nursing program has seen significant growth over the past eight years. There has been as great as a 59% increase (2012) in graduates from 2006 to 2013 as a result of the increase in enrollment numbers, as reflected below.





Number of students graduated from OCCC nursing program by year, 2006-2013.

NURSING PROGRAM OVERVIEW

At OCCC, quality learning experiences and student success are of primary importance, and the faculty continually strives to improve both the program as a whole and individual student performance. Every effort is made to select faculty, both full-time and part-time, who are committed to the same goals. It is expected that all faculty have contributions which will strengthen the program and lead to quality instruction, in theory and laboratory areas. Importantly, the nursing program is organized with teaching teams, underscoring the importance of positive teamwork from all faculty, novice and experienced.

As previously stated, the nursing program has three pathways to award the Associate in Applied Science degree (AAS) in nursing. The traditional pathway is the largest, admitting up to 72 students each fall and spring semester. The traditional pathway is comprised of four semesters of core nursing major coursework through four Nursing Process courses (NUR1519; NUR1529; NUR2539; and NUR2549). Each of these courses are taught during both fall and spring semesters. Entry into the traditional pathway is accomplished through a competitive application process that utilizes preference points for ranking of applicants. Current enrollment in the traditional program is 269.

The second pathway is the career ladder pathway (CLP) and is for those individuals who are Oklahoma licensed practical nurses and Oklahoma licensed paramedics. Entry into the CLP is accomplished through a competitive application process that utilizes a standardized test (ATI – LPN STEP exam) as an application requirement and preference points for ranking of applicants, and through the 1+1 partnership where students are given direct articulation into the program following the successful completion of their PN program and first time passage of the NCLEX-PN. All students are offered advanced standing opportunities for NUR1519 and NUR1529 with subsequent opportunities to complete NUR2539 and NUR2549 following the successful completion of the Nursing Role Transition course (NUR1415). The Nursing Role Transition course (NUR1415) is taught during the fall semester, NUR2539 in the spring, and NUR2549 in the following fall with graduation occurring in December. Up to 72 students are admitted annually (with 63 admitted for the fall 2013 cohort due to limitations on clinical opportunities). Current enrollment in the CLP is 60.

The third pathway is for those individuals who have baccalaureate or higher degrees in disciplines other than nursing and provides an accelerated opportunity (10 months) for qualified students to complete the



AAS degree in nursing. The baccalaureate to associate degree nurse accelerated pathway (BADNAP) teaches NUR1519 in the summer, NUR1529 and NUR2539 in the fall, and NUR2549 in the first eightweeks of the spring semester. Up to 72 students are admitted annually (with 63 admitted for the summer 2013 cohort due to limitations on clinical opportunities). Current enrollment in BADNAP is 53.

The program currently has four admission entry points each academic year:

- Two (fall and spring) for the traditional program. The fall admissions follow a day-time theory class schedule with the spring following an evening theory class schedule. Clinical and campus laboratory experiences occur in the daytime with some evening and weekend options available. This means that faculty in the traditional program teach day classes one semester and evening classes the next semester.
- One annual admission in the career ladder pathway (begins in the fall with the transition course and entry into the CLP core course, NUR2539 occurring the following spring). The class schedule is one theory day per week with one clinical day each week plus some campus laboratory experiences throughout the program.
- One annual admission (summer) for the baccalaureate to associate degree accelerated pathway. This pathway offers the curriculum through eight week terms rather than usual 16 week semesters. It includes one-half of the theory content taught online and one-half in the classroom with weekly clinical assignments that vary from 20-24 hours.

At this time, the nursing program is approved for (19) FTE faculty positions, all of which are filled. In addition, there is (1) FTE HPS/Nursing Laboratory Coordinator; (1) FTE Nursing Program Associate Director, and (1) FTE Nursing Program Director. There are three Health Profession's administrative assistants that share the responsibilities of the Division with one assistant primarily assigned to nursing (HP Division Support Assistant).

SUMMARY OF STANDARDS AND CRITERIA

Standard 1: Mission and Administrative Capacity

Criterion 1.1

The mission/philosophy and outcomes of the OCCC nursing program are congruent with the mission and vision of the governing organization and share the goals of ensuring student success and strengthening the community. The College is directed and governed by a Board of Regents appointed by the Governor of the State of Oklahoma. Using the purposes set out for community colleges by Oklahoma State Statutes and the functions assigned by the Oklahoma State Regents for Higher Education, the College's Board of Regents develops the mission, vision, and priorities for the College.

Criterion 1.2

The governing organization has nursing faculty and nurse administrator representation on college-wide committees, and provides opportunities for student involvement. Nursing students are active participants in varied OCCC groups such as the Phi Theta Kappa, the Nursing Student Association and the International Student Association.

Governance of the nursing program is shared by all nursing faculty through the Nursing Faculty Organization (NFO) and its Committees. The NFO is a means by which faculty through the process of shared decision-making works to maintain the nursing program in accordance with the mission and vision



of the governing organization and to maintain the standards set forth by state and national accrediting bodies. Only full-time faculty are voting members. All students are welcome to the NFO meetings and are given time on each agenda to offer their perspective on relevant issues discussed as well as to address other issues or to offer suggestions. Students are invited to the majority of nursing committee meetings and active participation is encouraged. A list of all nursing committee meetings is maintained on each course Moodlerooms (online course management system) page for student access.

Criterion 1.3

Communities of interest have ongoing input into program processes. The Nursing Advisory Committee functions to provide input on current and projected nursing trends, employment needs, program development and long-range strategic planning. Evaluation strategies utilized by the program provide multiple opportunities for students, graduates and employers to provide input into the decisions that affect governance of the program.

Criterion 1.4

Partnerships that promote excellence in nursing education, enhance the profession, and benefit the community have been created through articulation agreements, memorandums of agreement for student educational experiences and community service opportunities.

Criterion 1.5

The nursing program is administered by a nurse who holds a master's degree in nursing. She has over 34 years of experience in nursing, ten of which have been in nursing education as a full-time employee. She also has over 25 years of clinical experience in the areas of medical-surgical nursing, neonatal intensive care, pediatrics, labor and delivery, and maternal newborn care. She has served in a variety of management positions throughout her career, in clinical and educational settings.

Criterion 1.6

Ms. Deborah Myers, MS, RNC is the director of the nursing program and is responsible for the supervision of all faculty and staff. Ms. Myers has been in a full-time position within the nursing program for ten years and meets the OCCC and Oklahoma Board of Nursing (OBN) requirements for the position. She holds a Bachelor of Science and a Master of Science degree in nursing from the University of Oklahoma. Ms. Myers is a member of local, state and national organizations and is actively involved in ACEN as a Program Evaluator for associate degree programs. Prior to her appointment to the program director role, Ms. Myers occupied the nursing program associate director position. She worked closely with the previous program director over a period of seven years during which time she was exposed to the job responsibilities of the program director position. The OBN was also instrumental in the orientation process through their workshop for new administrators. Ms. Myers' curriculum vita is located in Appendix E.

Criterion 1.7

The nursing program organizational structure provides for a full-time associate director and seven Team Leaders. Ms. Terri Walker, MSN, RN is the associate director and holds a graduate degree in nursing. Ms. Walker assists with the development and day-to-day administration of the program. Ms. Walker's curriculum vita is located in Appendix F.

All seven Team Leaders hold a Master of Science degree in nursing and are well qualified for their role. The Team Leaders provide leadership and oversight for all aspects of their respective course as outlined in



the team leader job description as well as through the detailed team leader checklist located in the document room. The program provides adequate release time for the fulfillment of the job requirements.

Criterion 1.8

Ms. Myers has authority and responsibility for the development and administration of the nursing program at OCCC. The position of nursing program director is a full-time administrative one and includes authority and responsibility for leadership of the program in all personnel and operational matters. The position is also responsible for maintaining relationships within the Health Professions Division, with College administration and other departments, and with external agencies and community groups.

Criterion 1.9

The nursing program director has primary responsibility for procuring input from faculty and other sources on budgetary issues, needs, and planning for the nursing program. The Division budget process is the same for each program in the HP Division.

Criterion 1.10

Policies of the nursing program are comprehensive, provide for the welfare of the faculty and staff, and are consistent with the governing organization in the areas of non-discrimination; faculty appointment/hiring; academic rank; grievance procedures; promotion; salary and benefits; tenure; rights and responsibilities and termination as described in the <u>2013-2014 Oklahoma City Community College Faculty Handbook</u>. There are some differences in faculty policies of the nursing program from those of the governing organization which include the appointment of the program director, which is a non-teaching role and is not time-limited due to the responsibilities and function required for administration of the program. In addition, there is a full-time associate director who assists with administrative responsibilities, which is unlike other programs in the College. A further point of difference is in the faculty appraisal process where the nursing program director and the associate director facilitate the process. In other programs, only the Dean of the Division participates. Additional differences are justified due to external regulatory and clinical agency requirements.

Criterion 1.11

The OCCC nursing program does not offer distance education at this time.

Standard 2: Faculty and Staff

Criterion 2.1

The nursing program employs 19 full-time faculty and 1 full-time HPS/Nursing Laboratory Coordinator, all of which are academically and professionally qualified to teach in the associate degree program. Of those, 19 are credentialed at the MS/MSN level and one will complete her master's degree in nursing December, 2013. Of the 20 full-time faculty and HPS/Nursing Laboratory Coordinator, three are Certified Nurse Educators and two are currently enrolled in a Ph.D. program. The College supports the educational advancement of all full-time employees by providing tuition assistance as outlined in <u>OCCC Policy No.</u> 2302, Educational Opportunities for Employees, Families, and Retirees. Faculty curriculum vitae are available for review in the Health Professions Division Office.

Criterion 2.2

The program currently has 49 part-time faculty members: 23 are prepared at the baccalaureate level and 26 hold a master's degree in nursing. One of the master's prepared part-time faculty is currently enrolled in



a Family Nurse Practitioner (FNP) program. Of the 24 with a BSN, ten are enrolled in a MS/MSN program of study and one is enrolled in a Doctor of Nursing Practice (DNP) program.

Criterion 2.3

All faculty meet the OCCC faculty requirements and the minimum requirements for faculty in programs leading to licensure as a Registered Nurse in the state of Oklahoma as set forth in Subchapter 5 (Section 485:10-5-5.1.) of the <u>Oklahoma Board of Nursing Rules</u>.

Criterion 2.4

OCCC does not utilize preceptors within their nursing program.

Criterion 2.5

The number of full-time faculty within the OCCC Nursing Program is sufficient to ensure the achievement of student learning and program outcomes. Each nursing course is delivered through a team teaching approach. All courses utilize three full-time faculty except for the first nursing course (NUR 1519) in the traditional program. This course employs four full-time faculty members due to the large number of students (72) and the time required for new learners to acclimate to the culture of nursing education.

Criterion 2.6

The nursing faculty brings a diverse range of clinical experiences and maintains currency in their areas of expertise. The nursing faculty are actively engaged in scholarly activities that include continued formal education, service to the profession, teaching-learning enhancements, attendance at workshops and conferences, presentations on campus and at local conferences, participation in state and national nursing organizations, and the successful completion of Certified Nurse Educator (CNE) credentialing.

The current HPS/Nursing Campus Laboratory Coordinator, Cindy Milam, is credentialed with a MS in nursing. In addition to the full-time laboratory coordinator, part-time faculty can work a total of 460 contact hours with 300 of those contact hours dedicated to the campus laboratory setting and 160 contact hours dedicated for the operation of the Human Patient Simulators (HPS). These 460 total contact hours are generally filled by 2-3 part-time faculty, all of whom possess a MS/MSN in nursing. The campus laboratory also utilizes student employees through the work-study program or the Federal STEP program. Students have the option of working during the fall, spring and summer semesters within the guidelines set forth by their particular employment status. Typically there will be 3-5 students employed throughout the year. Students assist with the cleaning and maintenance of equipment, set-up and teardown of laboratory learning spaces, as well as occasional secretarial duties.

Criterion 2.7

The number and utilization of staff which lend support to the nursing program are sufficient to achieve program goals and outcomes, but not sufficient to lessen the increased workload required of the nursing program director and nursing program associate director. There are three administrative assistants within the Health Professions (HP) Division. One is assigned primarily to nursing with the other two lending support as needed. The Division also has an Academic Advisor that is assigned only to the Health Professions students and housed within the HP Division. Additional administrative support is achieved through the use of work study students.



Criterion 2.8

All full-time faculty are provided mentoring and orientation to their areas of responsibility by the College, the nursing program, and the clinical facilities. The College offers a three day workshop prior to the beginning of the semester to cover information general to all faculty. A formal mentoring program is required of all full-time faculty for the first year of employment. A program specific mentor is assigned to help facilitate learning within their respective area of instruction and monthly meetings conducted by Academic Affairs provides additional training appropriate for all faculty. An orientation to the nursing program is conducted by the program director and associate director within the first two weeks of employment and clinical facility orientation is provided by the assigned clinical agency.

Criterion 2.9

Systematic assessment of full-time faculty performance demonstrates competencies and ongoing scholarship activities. Full-time faculty are evaluated annually, by the program director and associate director, utilizing the same criteria as other faculty at the College with the exception of the requirement for the demonstration of scholarship. Classroom observations are conducted annually by the program director or associate director and include ratings on various criteria and recommendations for improvement.

In addition, each faculty member is evaluated each semester by students through a variety of College and nursing program-specific evaluative tools. Performance evaluation of part-time faculty is completed and a more structured process is necessary to ensure evaluations are conducted annually and that part-time faculty performance is consistent with program goals and outcomes.

Criterion 2.10

Ongoing support for instructional and distance technologies is an area of strength within the College as evidenced by the number and type of educational offerings as well as the availability of support personnel within the Center for Learning and Teaching. Another resource that provides current and accessible content for enhancement of instructional and/or distance instruction through evidence-based practice is the ongoing subscription to the NurseTim faculty development online program.

Standard 3: Students

Criterion 3.1

Student policies of the nursing education unit are congruent with those of the governing organization and are publicly accessible, non-discriminatory, and consistently applied. The policies specific to the nursing program are in place to ensure student academic success, provide patient and student safety, satisfy clinical agency requirements, and meet student learning and program outcomes.

Criterion 3.2

OCCC strives to fully disclose all internal and external activities of the institution in a current, accurate, clear, and consistent manner. Information specific to the nursing program is available in a variety of publications as well as on the nursing webpage. Information is reviewed as directed by the plan for Systematic Program Evaluation (SPE) with revisions and updates made as needed. Information regarding the nursing program's accreditation status and the ACEN contact information is available on the <u>nursing program webpage</u>, in the <u>2013-2014 OCCC Student Handbook</u>, the <u>2013-2014 OCCC Catalog</u>, and the <u>2013-2014 OCCC Nursing Student Handbook</u>.



Criterion 3.3

Any changes in policies, procedures, guidelines, and program information are clearly and consistently communicated to current and prospective students in a timely manner. All students enrolled at OCCC are assigned an email address. This email is considered the official means of College communication.

Criterion 3.4

Students are supported by a wide array of services that are provided by well-qualified individuals. These services support, enhance, and facilitate a positive campus experience at OCCC and within the nursing program. Nursing students are generally satisfied with the variety of student services offered as indicated by positive comments and results of evaluative data. At OCCC, helping students succeed in fulfilling their educational goals is a top priority as evidenced by the <u>Achieving the Dream and Complete College OCCC</u> initiatives.

Criterion 3.5

Student educational records are in compliance with the policies of the governing organization and State and Federal guidelines. The College complies with the Family Education Rights and Privacy Act of 1974 (FERPA).

Criterion 3.6

OCCC also maintains compliance with the Higher Education Reauthorization Act Title IV as evidenced by their continued eligibility to participate in the Federal Student Financial Aid Program through December 31, 2018 and as specified in the most recent <u>Financial Statements with Independent Auditors' Reports</u>. The <u>Office of Financial Aid</u> maintains a comprehensive webpage for students which address student loan information, counseling, monitoring and cooperation with lenders.

Criterion 3.7

Complaints and grievances of students within the nursing program are addressed as with any other student attending OCCC. Students are always encouraged to first work with their respective faculty to attain resolution. If resolution cannot be achieved all students are referred to the procedure for filing a complaint or grievance as outlined in the <u>2013-2014 OCCC Student Handbook</u> or the <u>2013-2014 OCCC Catalog</u>.

Criterion 3.8

A comprehensive orientation to the online management system is provided all students through the Success in College and Life course (SCL 1001) and through an orientation to the Moodlerooms (online course management system) accessed from the homepage. Technical support is available through the <u>OCCC online course support center</u> as well as by calling the Help Desk in house at extension 7777 or from off campus between the hours of 9:00 a.m. and 9:00 p.m. at 1-877-693-2962.

Standard 4: Curriculum

Criterion 4.1

The curriculum of the OCCC Nursing Program incorporates established professional standards, guidelines, and competencies through the mission, philosophy, and organizing framework of the OCCC Associate Degree Program. The framework and standards are derived from nursing and health organizations such as American Nurses Association, the National League for Nursing, the Oklahoma Board of Nursing, the National Council for State Boards of Nursing, and the Quality and Safety Education for Nurses (QSEN).



The major concepts depicted by the philosophy are threaded throughout each semester and form the foundation for the organizing framework.

Criterion 4.2

The student learning outcomes and program outcomes incorporate the values inherent in safe, quality, evidence-based practice within contemporary healthcare systems. They help organize the curriculum, direct teaching and learning activities and evaluate student progress.

Criterion 4.3

The nursing faculty are responsible for the development of the nursing curriculum. Formally, the curriculum is reviewed annually for currency, rigor and relevance during the month of May. Ongoing evaluation of the curriculum occurs continuously through a variety of processes including committee meetings, evaluation tools, and feedback from students, clinical agencies, and Advisory Committee members. The current curriculum was introduced in the fall of 2012 and reflects a more current and comprehensive curriculum which clearly ties the philosophy and organizing framework to the leveled courses and ultimately to the program and student learning outcomes.

Criterion 4.4

The curriculum includes general education courses that enhance and support the knowledge and practice required of the nursing profession. The nursing faculty conducts a biennial review of the general education and support courses as directed by the SPE. Any recommendations for addition or revisions are forwarded to the appropriate academic division for consideration. In addition, representatives from the science and social science divisions are regular members of the Nursing Advisory Committee.

Criterion 4.5

The curriculum includes cultural, ethnic, and socially diverse concepts as part of the threads that are incorporated throughout the curriculum within the classroom and simulated laboratory settings.

Criterion 4.6

The curriculum and instructional processes reflect educational theory, research, and current standards of practice and have been carefully constructed to build upon adult learning theory. OCCC considers professional development in the discipline of nursing and instructional methodologies as essential components of the job.

Criterion 4.7

A variety of evaluation methodologies are used by the faculty to measure the achievement of student learning. In theory, students are tested by faculty written exams and standardized exams from Assessment Technologies Institute (ATI) and safeMedicate® (an e-learning solution for reducing medication errors). In the clinical setting, students are evaluated weekly to monitor progress toward completion of the course objectives. Within the campus and simulation laboratory settings, students are evaluated through a variety of written and observational methods.

Criterion 4.8

The overall design of the curriculum provides for 74-75 credit hours which consist of 36 nursing course credits and 38-39 general education/support course credits. A 1:3 credit hour ratio is followed for clinical learning experiences. These hours allow adequate opportunity for the student to synthesize the material presented throughout the program and to achieve student learning and program outcomes.



Criterion 4.9

Practice learning environments are well equipped and provide a variety of learning resources to assist students in achieving program and student learning outcomes. Students have access to three (3) laboratory spaces with state of the art equipment and a variety of task trainers and related supplies. The Program for Nursing Curriculum Integration (PNCI) was purchased in 2012 to provide access to an increased number of well-developed simulations. Faculty has begun utilizing the simulations within the laboratory and classroom settings with very favorable student reviews.

Criterion 4.10

Clinical learning experiences occur in a variety of agencies, ensuring that students experience a wide array of learning opportunities that enable each to meet course outcomes. All acute care clinical facilities are accredited by the Joint Commission and adhere to nationally established patient health and safety goals.

Criterion 4.11

All clinical affiliation agreements are current and provide the specifications necessary for quality learning experiences. Clinical sites are recommended by identified criteria to support specific course outcomes and are evaluated following each rotation by students and faculty with feedback provided to the respective facility and tracked as outlined by the SPE.

Standard 5: Resources

Criterion 5.1

The College uses a strategic planning process to prepare and plan to meet future goals which proves adequate to provide an excellent learning environment for nursing students. Budgets for each area of the institution, including the Health Professions Division and nursing program, are developed from the approved plan. The nursing program director assists the Dean of HP in developing the program strategic plan and budget requests, and a method for nursing faculty to have formal input into the process is in place. Despite the continued decrease in state funding, the nursing program budget data for FY2011-FY2014 demonstrates, through the increase in faculty salaries, that the College provides support sufficient for the program to achieve program and student learning outcomes.

Criterion 5.2

The nursing program resides in two buildings, Health Professions (HP) and Science, Engineering and Math (SEM). Classroom and private office space is provided in each of these buildings and is sufficient for student and faculty needs. Campus laboratory space is provided in three well-equipped separate laboratory spaces within the HP Division. Attractive and comfortable furniture is strategically placed throughout the campus to provide students with comfortable spaces for study or interacting with peers.

Criterion 5.3

The learning resources available through OCCC are conducive to an excellent student experience. Carl Perkins funds continue to provide valuable support for the program's laboratory and technology learning equipment and resources. Learning resources such as instructional aids, software and hardware, and technical support available to the program's students and faculty are strengths. The program is the only nursing education program in Oklahoma to have the Human Patient Simulator (two are currently in place) as a learning resource. Hardware resources include computers for all faculty, 32 computers in the nursing computer laboratory, 25 additional computers in the Health Professions computer laboratory, and multi-media equipped classrooms. The nursing program utilizes a variety of technology and programs to provide



students with access to current and reliable information reflecting best practice which they can integrate into their knowledge base. Nursing faculty members are issued an iPad to use in learning environments facilitating point of care access to information and practice resources, enhancing classroom and laboratory activities, and assisting in timely feedback of student work in the classroom and clinical setting. Future use of the iPads includes utilization of an electronic medical record currently being developed through a grant project.

The Keith Leftwich Library is an excellent resource for students and faculty, providing 88,054 books, 452 periodicals, 281 microfiche publications, 54 databases, 12,801 electronic books and a media collection of 20,431 titles. Additional learning resources are available to students through the many learning laboratories and computer laboratories located throughout the campus.

Standard 6: Outcomes

Criterion 6.1

The nursing program's systematic plan for evaluation (SPE) has been in place for several years and provides the faculty with an organized means for assessment and evaluation of the program educational (role specific graduate competencies/student learning) outcomes, program achievement outcomes and the standards set forth by the Accreditation Commission for Education in Nursing (ACEN). The SPE contains all expected components by which important data is obtained, analyzed, and utilized for program improvement. Formal evaluation of criteria occurs in May by the Nursing Faculty Organization (NFO) and as scheduled by the SPE calendar. Informal evaluation is ongoing and occurs through student and clinical agency feedback, as well as scheduled faculty meetings. Evaluative data is used for the development, maintenance, or revision of the program.

Criterion 6.2

Aggregate data from student and faculty evaluation tools are annualized and examined for trends. The information obtained is used to guide decisions concerning the program. Students are provided with multiple opportunities to evaluate faculty, courses, and clinical facilities. Graduate and employer follow-up surveys conducted six to twelve months post-graduation facilitate continued improvement of the program.

Criterion 6.3

Evaluation findings are shared with faculty and students through the Nursing Evaluation Committee and the NFO, to the College Administration for dissemination to the Board of Regents, with the Oklahoma Board of Nursing through the annual report, and to several constituency groups through the Nursing Advisory Committee.

Criterion 6.4

OCCC nursing program graduates have consistently exceeded state and national benchmarks for first-time pass rate of the NCLEX-RN (with the exception of 2005 and 2006). In addition, the graduate success on the licensure exam has been at or above target when looking at <u>monitoring reports of OCCC core</u> <u>indicators</u> used to measure graduate success. This information can be found on the Regents' Dashboard on the College website. The program's overall retention rate consistently meets the benchmark of 70% which was revised from 80% during the curriculum revision as a recommendation from our QSEN curriculum consultant. Program satisfaction is measured through graduate exit interviews and graduate and employer follow-up surveys. The data gathered from these surveys reveal an overall satisfaction with the



nursing program however, the need to increase the rate of survey returns has been identified. A majority of graduates report employment in registered nurse positions when contacted six months after graduation.

Standard	Strengths of the Nursing program	Areas Needing Improvement
1 Mission and Administrative Capacity	 Nursing program's Mission/Philosophy are congruent with that of the governing organization Opportunities exist for both full-time and part-time faculty and student involvement in nursing program and OCCC governance Active Nursing Student Association Stable leadership from program director and associate director Ongoing college-wide initiative and innovation designed to promote student success (Complete College OCCC) 	 Need to develop a more formal nursing faculty handbook that is distributed to faculty following the annual review and update of content.
2 Faculty and Staff	 All full-time faculty (except one) have a minimum of a master's degree in nursing; one remaining faculty to complete her master's degree in nursing, December 2013 More than one-half of the part-time faculty hold a minimum of a master's degree in nursing Well qualified faculty (full and part-time) who maintain expertise in their areas of responsibility Administrative support for team-teaching and use of active teaching strategies Team leader release time to provide clinical and classroom oversight Comprehensive mentoring program for full-time faculty within the College and nursing program Comprehensive evaluation process of full-time and part-time clinical faculty 	 Although we are fortunate to have a fair amount of longevity within the faculty cohort, there continues to be one or two vacancies at the end of each academic year due to reasons such as retirement, returning to school, returning to service, pregnancy, relocating, etc. Need for additional program support staff dedicated to the nursing program. More structured process for evaluation of part-time faculty teaching in the nursing laboratories. Increased diversity within the nursing faculty.
3 Students	 Student policies are congruent and consistently applied OCCC offers a variety of student services All student records are in compliance and meet all policies of the governing organization and state and federal guidelines Student receive a comprehensive orientation to technology Nursing Student Association (NSA) mentoring program 	 Increase recruitment and retention of ethnic populations with an emphasis on Hispanic students (large Hispanic population within the catchment area of OCCC).

ANALYSIS AND SUMMARY OF STRENGTHS AND AREAS NEEDING DEVELOPMENT

Standard	Strengths of the Nursing program	Areas Needing Improvement
4 Curriculum	 Curriculum is comprehensive and cohesive and shows logical progression Program outcomes organize the curriculum and flow from the program's philosophy and organizing framework Graduates of the program are well prepared for attainment of licensure and performance in employment Offer a wide variety of clinical experiences that provide students with opportunities to apply knowledge and develop clinical reasoning and collaborative skills 	 Increase planned interdisciplinary activities for nursing with other HP students. Re-evaluate and revise the method of instruction and associated learning tools for teaching the nursing process. Re-evaluate the length of the nursing program and number of credit hours required (74- 75 hours approved by OBN and ACEN (formerly NLNAC). Develop additional community health experiences. Complete inclusion of geriatric and leadership content with appropriate leveling across the curriculum.
5 Resources	 Adequate classroom and faculty/staff office space Comprehensive learning resources for faculty and students Adequate computer laboratory facility and many opportunities to experience a variety of technologies in the laboratory and classroom settings Continued successful grant funding to support program laboratory and classroom needs State-of-the-art simulation and nursing laboratory facilities with use of high and mid-fidelity technologies Full-time HPS/Nursing Laboratory Coordinator State of the art library with extensive resources and staff Progressive and dynamic staff within the Center for Learning and Teaching 	 Develop an annual competency activity for faculty in the operation of laboratory equipment.
6 Outcomes	 Comprehensive SPE with scheduled reviews throughout the calendar year Comprehensive evaluation methods for gathering aggregate data for program improvements NCLEX-RN first time pass rate consistently above state and national average 	 Increase rate of return of graduate and employer surveys Develop additional methods to assess achievement of student learning outcomes (SLO).



STANDARD 1: MISSION AND ADMINISTRATIVE CAPACITY

The mission of the nursing education unit reflects the governing organization's core values and is congruent with its mission/goals. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified program outcomes.

Criterion 1.1: The mission/philosophy and program outcomes of the nursing education unit are congruent with the core values and mission/goals of the governing organization.

The mission/philosophy and outcomes of the OCCC Nursing Program are congruent with the mission and vision of the governing organization and share the goals of ensuring student success and strengthening the community. The <u>mission and vision</u> of Oklahoma City Community College are located online in the <u>2013-</u> <u>2014 OCCC Catalog</u> (Exhibit 1.1A) in further depth through the *FY11-FY14 OCCC Strategic and Annual Plan* (Exhibit 1.1B) and also through the new five year plan entitled <u>The OCCC Roadmap 2018</u> (Exhibit 1.1C). The OCCC Roadmap 2018 identifies three "Big Goals" which are aimed at helping students earn a degree at OCCC. These "Big Goals" are listed below:

- Increase the number of our students who complete a certificate or degree by 50%.
- Close the academic achievement gaps that persist with our low-income, first generation, and some racial and ethnic groups.
- Double annual giving to support student scholarships, community events, and the endowment.

Oklahoma City Community College strives to empower students to achieve their educational goals through completion of a degree or certificate, and thereby provide a more prosperous future and enriched community. The college mission and vision and supported by the following core values and key outcomes:

- Access broad and equitable access to certificate and degree programs.
- College Readiness students are prepared to succeed in college.
- Student Success students successfully complete their academic courses.
- Graduate Success graduates succeed at four-year institutions and/or in their careers.
- Community Development our community is enriched economically and socially by our educational and cultural programs.

The mission, philosophy, and organizing framework of the nursing program are described in the <u>2013-2014</u> <u>OCCC Nursing Student Handbook (NSH)</u> (Exhibit 1.1D) and in the Nursing Program Curriculum Notebook (Exhibit 1.1E). The mission of the OCCC Nursing Program is to provide an accessible, quality education to students in an environment that fosters academic success through the encouragement of innovation, integrity and life-long learning.

The philosophy of the nursing program is based on the collective, basic assumptions and beliefs of the nursing faculty. The organizing framework reflects the program's mission and philosophy and includes the following major concepts: client; environment; health; nursing and nursing education. In addition, students are prepared to practice as competent generalists in a complex healthcare environment by the incorporation of the core concepts of caring, clinical reasoning and communication into the curriculum. A focus on quality care and client safety are reflected in the curriculum and organized around the client needs categories used in the NCLEX test plan.



The relationship between the College mission and purposes and that of the nursing program are noted in Table 1.1.1 below.

Table 1.1.1: Relationship between the College Mission and Purposes and the Nursing Program
Mission, Philosophy, Organizing Framework and Outcomes

OCCC MISSION AND VISION	NURSING PROGRAM MISSION, PHILOSOPHY, ORGANIZING FRAMEWORK AND OUTCOMES
MISSION: OCCC provides broad access to learning that empowers students to complete a certification or degree that enriches the lives of everyone in our community.	 Nursing Program Mission: The Associate Degree Nursing Program supports the mission, vision, values, and ends statements of Oklahoma City Community College. The nursing program is committed to providing accessible and quality nursing education to meet the community's needs for entry level registered nurses who are prepared to succeed in an ever-changing healthcare environment within an increasingly diverse global society.
	 Nursing Program Purposes: The overall purpose of the program is to prepare graduates who are prepared to assume entry level nursing practice roles and responsibilities as defined by the Oklahoma Nurse Practice Act and other professional regulatory bodies. The nursing program offers a comprehensive program of study preparing students for college success and entry level nursing practice as associate degree graduates. The program is accessible to qualified, traditional pathway students and offers advanced placement to LPN's and paramedics. To further support workforce needs, the program includes an accelerated pathway for students with baccalaureate (or higher) degrees in other disciplines.
VISION: OCCC aspires, through bold and transformative action, to significantly raise the educational achievement of all our students and to be an indispensable pathway to a more prosperous and fulfilling future.	 Nursing Program Mission: The nursing program is committed to providing accessible and quality nursing education to meet the community's needs for entry level registered nurses who are prepared to succeed in an ever-changing healthcare environment within an increasingly diverse global society.
 ENDS: 1. Access – our community has broad and equitable access to both highly valued certificate and degree programs and non-credit educational opportunities and events. 2. College Readiness – our students develop the 	 Nursing Program Philosophy: Learning is a lifelong process achieved through multiple approaches and is dependent upon active learner participation in the process. Nursing faculty serve as resources and role models, foster a climate of intellectual inquiry, and plan, implement, and evaluate varied

OCCC MISSION AND VISION		NURSING PROGRAM MISSION, PHILOSOPHY, ORGANIZING FRAMEWORK AND OUTCOMES
3.	skills and knowledge required to succeed in college. Student Success – our students successfully complete their academic courses, persist in college, and earn certificates or degrees at OCCC or another institution.	 learning experiences that facilitate student learning. Associate degree nursing education is responsive to the needs of the local community and its rapidly changing healthcare delivery systems. Nursing education also collaborates with its agency partners to shape nursing
4.	<i>Graduate Success -</i> Our graduates go on to earn higher-level degrees at OCCC or another institution.	practice in response to consumer needs. The program regularly updates its plan of study based on advances in evidence-based practices in nursing, healthcare and education, and
5.	Community Development – Our communities' quality of life is enriched through our educational, artistic, and recreational programs, and events.	systematic program evaluation. The graduates of the OCCC nursing program are well-prepared for upward mobility in nursing through articulation with baccalaureate and master's degree nursing education programs.
		 Nursing Program Purposes: The nursing program offers a comprehensive program of study preparing students for college success and entry level nursing practice as associate degree graduates. The program is accessible to qualified, traditional pathway students and offers advanced placement to LPN's and paramedics. To further support workforce needs, the program includes an accelerated pathway for students with baccalaureate (or higher) degrees in other disciplines.
		 Nursing Program Achievement Outcomes: In addition, certain outcomes are minimal expected levels of achievement for the nursing program. These outcomes address ACEN Criteria for pass rates, program completion, program satisfaction of graduates, employers' satisfaction, and job placement.
		 Seventy percent (70%) or greater of students will complete the program within a period of six semesters (traditional program and baccalaureate to associate degree nurse accelerated pathways) and four semesters (career ladder pathway).
		 Graduates will perform at or above the national average pass rate on the NCLEX-RN licensure examination. Eighty percent (80%) or greater of graduates seeking employment will obtain an entry level



OCCC MISSION AND VISION		NURSING PROGRAM MISSION, PHILOSOPHY, ORGANIZING FRAMEWORK AND OUTCOMES
		 position within six (6) months after graduation. 4. Ninety percent (90%) or greater of graduates responding to graduate surveys will report overall satisfaction with the program. 5. Ninety percent (90%) or greater of employers responding to employer surveys will report that graduates are adequately prepared for entry level practice.
		 Nursing Organizing Framework: The curriculum is planned to ensure that graduates develop the essential knowledge, skills, and attitudes to meet professional role expectations in order to provide safe, quality nursing care within complex healthcare systems. The responsibility of the faculty of Oklahoma City Community College's Nursing Program is to facilitate learning within the context of a collaborative learning environment whereby students can develop the competencies required for entry level nursing practice.
VALUES:		Nursing Program Mission
1. 2. 3. 4.	 Students – Fundamental to all that we do Safety – Safe and secure environment for everyone Accountability - Use of evidence to measure performance and make decisions. Stewardship - Wise and efficient use of resources 	 The program recognizes that quality nursing education incorporates innovation, integrity and diversity to facilitate learner acquisition of the knowledge, skills, and attitudes necessary for entry level nursing roles. The nursing program achieves its mission through the wise and efficient use of resources while relying on data-driven evidence to validate program success.
	resources	Nursing Program Philosophy
5. 6.	Integrity – Honest, ethical, and respectful to all Innovation – Creative and forward thinking	 The faculty recognizes the intrinsic value and worth of human life and the individual's right to respect and dignity, which includes the right to
7.	<i>Diversity</i> – Embrace and appreciate the value of differences	 participate actively in healthcare decisions so that the highest level of wellness can be attained. Within the caring context, nurses collaborate with other members of the inter-professional healthcare team to provide safe, quality healthcare based upon respect for client choices related to culture, values, beliefs and lifestyle. The diversity of students enriches the learning environment and reflects the society nursing graduates will serve.



OCCC MISSION AND VISION	NURSING PROGRAM MISSION, PHILOSOPHY, ORGANIZING FRAMEWORK AND OUTCOMES
	 Nursing Program Purposes: The overall purpose of the program is to prepare graduates who are prepared to assume entry level nursing practice roles and responsibilities as defined by the Oklahoma Nurse Practice Act and other professional regulatory bodies. The nursing program offers a comprehensive program of study preparing students for college success and entry level nursing practice as associate degree graduates. The program is accessible to qualified, traditional students and offers advanced placement to LPN's and paramedics. To further support workforce needs, the program includes an accelerated pathway for students with baccalaureate (or higher) degrees in other disciplines.
	 Nursing Program Educational Outcomes (Student Learning Outcomes) Apply the nursing process in practice using clinical reasoning and decision-making competencies, communication competencies, and nursing skills which include technology and informatics necessary for safe, quality, and evidence-based practice in contemporary healthcare systems. Collaborate effectively with others in assessing, analyzing, planning, providing and evaluating client-centered care within complex healthcare systems. Practice safe, quality nursing care within healthcare teams in a caring manner to meet the multi-dimensional needs of clients, whether individual, family, groups, or community. Act in accordance with an understanding of and commitment to professional role expectations, which include the values, ethics, legalities, and standards for entry-level nursing practice.
	 Nursing Organizing Framework Quality and safety competencies are incorporated into the curriculum.

Criterion 1.2: The governing organization and nursing education unit ensure representation of the nurse administrator and nursing faculty in governance activities; opportunities exist for student representation in governance activities.

OCCC is a two year public institution governed by a <u>Board of Regents</u>. Members of the Board are appointed by the Governor of the State of Oklahoma for a seven-year term or as designated. On behalf of the community it serves and the people of the State of Oklahoma, the Board of Regents governs OCCC through the Board's expressed policies, including the development and monitoring of key mission outcomes (ENDS) and the definition of Executive Limitations and monitoring compliance by the President of the college. The Board sets the general policies of the College, elects the President and, upon his recommendation, approves other administrative officers and members of the faculty. To the President and those who work under his purview is committed the responsibility for the day-to-day operation of the College. During their monthly meetings, the Board receives Monitoring Reports which provide clear evidence of progress and attainment for each of the College's ENDs. They also receive regular reports on elements of the strategic plan and other projects and initiatives. The Board assumes the responsibility to direct, control and inspire the college through careful establishment of the broadest values and perspectives in the form of written policies.

Individuals who work under the President and report to him include the Vice President for Academic Affairs, Executive Director of Institutional Advancement, General Counsel, Executive Director of Planning and Research, Vice President for Enrollment and Student Services and the Executive Vice President as delineated in the *OCCC Organizational Chart* (Appendix D).

The accountability unit of Academic Affairs, headed by the Vice President for Academic Affairs and assisted by the Associate Vice President for Academic Affairs, is responsible for all college credit instruction. The unit is comprised of Divisions of Arts, English and Humanities, Math, Engineering and Physics, Chemistry and Biological Sciences, Business, Health Professions, Information Technology and Social Sciences, as well as the Center for Learning and Teaching, Library, Cooperative Technical Education and the Downtown College Consortium.

The nursing program is one of five programs in the Division of Health Professions (HP); the other four are programs in Emergency Medical Sciences, Occupational Therapy Assistant, Physical Therapist Assistant, and Speech-Language Pathology Assistant. As with other Divisions in the College, the HP Division is led by a Division Dean who has the authority and responsibility to ensure that all programs in the Division have adequate support, funding and oversight. The Dean works closely with the Deans of the other Divisions in the College through the Deans Council. This group has the responsibility to ensure that all Divisions have accurate and current information. Deans Council members review and recommend policy and procedural changes and act in an advisory capacity to the Vice President for Academic Affairs and the Associate Vice President for Academic Affairs. The Council also prioritizes faculty and funding needs as part of the yearly strategic planning process.

The Health Professions (HP) Division Dean, program directors, faculty and staff meet monthly during the academic year. The *Health Professions Division Organizational Chart* (Appendix D) indicates the lines of authority within the division. The Nursing Program Director represents the faculty, program and students to the Division Dean and other HP Program Directors through semi-monthly meetings and other times as needed. The nursing program is comprised of the Nursing Program Director, Nursing Program Associate Director, HPS/Nursing Laboratory Coordinator, and nineteen nursing faculty. The *Nursing Program*



Organizational Chart (Appendix D) indicates the appropriate lines of authority, responsibility and channels of communication to and from, as well as within, the nursing program. Because of the size and scope of responsibilities necessary to administer the large nursing program, a full-time Nursing Program Associate Director position was created in AY2010 and continues to be a valuable position for program success.

For instructional purposes, the program is organized into six teaching teams. There is one team for each of the four traditional pathway nursing process courses, one for the career ladder pathway, and one for the baccalaureate to associate degree nurse accelerated pathway. Each team functions to coordinate the course/pathway activities with direction from the Nursing Program Director and of Nursing Program Associate Director.

There are several well-organized channels of communication within the nursing program. The nursing faculty meet monthly during the academic year (Nursing Faculty Organization-NFO), directly following the HP Division meeting. Minutes of NFO meetings and the *Rules and Regulations of the NFO*, as well as the standing committees are included as Exhibit 1.2A and are also maintained on the College shared drive. The NFO has four standing committees (Admissions, Curriculum, Evaluation, and Testing) with membership consisting of representation from each nursing course. The NFO Rules and Regulations are the primary means of assuring faculty involvement in program governance, including program policies and procedures. Agendas are reviewed and approved at the start of each meeting, with an opportunity to add items if necessary. Reports from all committees are documented prior to NFO to allow time for faculty review and to help decrease meeting time. Regular meetings of the NFO and standing committees have resulted in decisions and actions that are ongoing efforts to strengthen the program.

Additional special committees and task force groups are currently functioning to achieve specified assignments and tasks within the NFO. All committees, both standing and special, maintain minutes which are available for review in the document room. Faculty participation is determined by faculty interest, course needs, or by program director appointment. The agenda and supporting documents for all meetings are distributed electronically prior to the meeting start. Faculty are encouraged to bring their iPads to meetings in an effort to conserve paper.

Teaching team meetings occur four times (more often if needed) each semester and include full-time and part-time faculty and include on campus and online (asynchronous) meetings. Individual team minutes are available for viewing in the document room. Team leader meetings are also held monthly throughout each semester, and include the program director, program associate director, and Team Leaders. A special August pre-semester meeting for Team Leaders is held to facilitate review, problem-solve and plan for program improvement. Team leader meeting minutes are included in the document room as Exhibit 1.2B.

Students are invited and encouraged to attend and participate in all nursing faculty meetings except for team leader committee and admissions committee. Students are informed of this opportunity by their faculty and in their course syllabus. In addition, the committee schedule is posted on the <u>OCCC webpage</u> <u>calendar</u> for easy student access. Student input is a regular agenda item at all NFO meetings and students are encouraged to bring issues/concerns for discussion.

The Nursing Program Director and faculty participate in institutional governance through institutional committees as well as through leading and attending College educational sessions and activities. Assignments for <u>Institutional Committees</u> are reviewed and assigned on an annual basis at the beginning of the fall semester. All faculty and program administrators have an opportunity to select open positions during the August Health Profession's Division meeting, under the guidance of the Dean for Health Professions.



These appointments are approved by the Vice President of Academic Affairs. Participation on committees allows faculty input into the decision making process of the College. Nursing faculty assignments to College committees, nursing program standing and special committees, nursing scholarship committees, and outside Advisory Boards are outlined in Exhibit 1.2C.

All faculty have the option of joining the OCCC Faculty Association Committee. The mission of the Faculty Association is to improve the academic environment at the College by providing a formal means of direct communication between College faculty and administration. The Faculty Association gathers and considers input and recommends improvements as well as promotes faculty needs and goals. The Faculty Association represents all faculty, though membership is voluntary. Additional ad hoc committees are created as issues/concerns arise.

As outlined in <u>OCCC Policy No. 4043</u>, the Faculty Association provides a mechanism whereby faculty can work cooperatively with College administration in the development of policies on matters relating specifically to instruction. A majority agreement from the group allows the Association to submit written instructional policy recommendations through the Vice President for Academic Affairs. If the President determines that the recommended instructional policy should be considered by the Board of Regents, the President shall present the recommendation to the Board of Regents in the manner established by the Board of Regents' policies.

The Vice President of Academic Affairs, Dr. Felix Aquino, conducts quarterly meetings with all director's and managers for the purpose of communication sharing, planning, and problem-solving. This information is shared with the nursing faculty during the HP Division meetings or the NFO meetings. There are College wide general faculty meetings scheduled in each month of the fall and spring semesters that have a fifth Tuesday. These meetings are conducted by the Vice President for Academic Affairs for the purpose of covering special topics of interest to the faculty.

All students are encouraged to join the OCCC Nursing Student Association (NSA). The overall purpose of the NSA is to encourage and mentor nursing students and assist in preparing them for careers in the field of nursing. Student officers are elected by the nursing student body. Faculty sponsors are selected on a volunteer basis and are responsible for communication of pertinent information between administration and students. Elected officers of the NSA and their sponsors are required to attend a leadership retreat each August sponsored by the Office of Student Life. These overnight retreats are 2-3 days in length and are held at an off campus location. The retreat provides clubs and organizations an opportunity to collaborate with other clubs on campus to meet club needs and to assist in their efforts to have a positive impact on the larger OCCC community. Procedures from the clubs and organization manual are covered and specific activities are designed to promote growth in leadership, communication, civic duty, and group collaboration. During the August 2013 retreat, the students developed a mission statement for the NSA which is outlined below:

It is the mission of the Nursing Student Association to encourage and mentor nursing students and prepare them for the nursing profession while developing leadership and community service.

Activities sponsored by the OCCC NSA over the last year include:

• Five officers, two sponsors, and seventy-five NSA members participated in the Oklahoma Nursing Student Association (ONSA) Annual Convention.



- Five officers and one sponsor participated in the ONSA COOL leadership conference which was held on the OCCC campus for the second straight year. This conference will be held on the OCCC campus again for the 2013-2014 academic year.
- Three officers and one sponsor participated in the OCCC student life workshop.
- Five officers and five members participated in the Down Syndrome of Central Oklahoma Easter Egg Hunt (hiding Easter eggs, serving food and clean up).
- The OCCC NSA received the Office of Student Life recognition for Outstanding Collaborative Community Event for the Life Saver 5K.
- The Life Saver 5km and 1 mile Fun Run grew so much in attendance over the first three years that the NSA partnered with the Physical Therapist Assistant program and the EMS program for the 4th. annual event. This event contributed over \$10,000 to student scholarships.
- Hosted local nursing employment opportunities and test-taking workshops.
- Additional successful fund-raisers (book sales, uniforms, stethoscopes, t-shirts and jacket sales) were also held to support the scholarship funds.
- Seventy students and one sponsor attended the 2013 Oklahoma Nursing Student Association State Convention in October where three students were elected to represent the state at the National Convention through the jobs of Community Project Director, Legislative Director, and Breakthrough Director. The OCCC NSA received a special recognition award for their continued support of the ONSA.

The intangible gains for all students, faculty, and the College of having an active and involved student organization are considered to be major program strengths.

Criterion 1.3: Communities of interest have input into program processes and decision-making.

The nursing program has many groups that provide input and feedback into program decision-making. Constituents include OCCC Board of Regents, the Oklahoma Board of Nursing, OCCC students, OCCC general faculty, OCCC nursing faculty, clinical agency partners, graduate employers, nursing program alumni, area nurse educators, and nursing program educational partners.

The nursing program invites communities of interest to provide input into program evaluation, improvement and long-range planning through the work of the OCCC Nursing Advisory Committee. The Nursing Advisory Committee meets biannually in October and March for the purpose of information sharing and brainstorming. Through these meetings the program has the opportunity to inform the constituents of College, Division and Program growth and updates to include National Council Licensure Examination (NCLEX-RN) pass rates, program retention rates, and graduate and employer survey results. Members of the Nursing Advisory Committee are asked to provide input into the currency, integrity and rigor of the nursing curriculum at each meeting. Input is obtained through round table focus groups in which students, faculty, and board members participate in guided discussions on topics relevant to nursing education. Minutes from the Nursing Advisory Committee, a description of the committee functions and a current roster of the committee membership are available for review as Exhibit 1.3A.

Students are provided with opportunities to evaluate the nursing program and to offer suggestions for improvement through the student surveys associated with the Systematic Program Evaluation (SPE). All surveys are distributed online with time allotted for completion while on campus. In addition to student evaluations, our clinical agencies are also given an opportunity each semester to evaluate the students and faculty. All nursing program surveys can be viewed in the document room as Exhibit 1.3B. Program graduates are provided an opportunity six months after graduation to offer feedback on their employment



experience and feedback on their overall educational preparation 6-12 months post-graduation. With graduate's approval, employers are also surveyed for input on the readiness of the graduates upon employment.

Upon graduation from the nursing program, all graduates complete a comprehensive exit survey where they provide feedback about the strengths and weaknesses of the nursing program, as well as other oncampus services.

Additional external resources include The Higher Learning Commission of the North Central Association of Colleges and Schools, ACEN, NLN, NCSBN, and the OBN. All of these agencies provide the College and nursing program with valuable resources and feedback for program improvement.

Criterion 1.4: Partnerships that exist promote excellence in nursing education, enhance the profession, and benefit the community.

The nursing program participates in several events and partnerships that strengthen its ties to the community and enhance the nursing profession.

In 2005 the nursing program entered into a partnership with the Integris Health System and three area practical nursing (PN) programs in the 1+1 partnership program. The LPN-RN program was re-designed to include Oklahoma licensed paramedics as well as licensed practical nurses and renamed the Career Ladder Pathway (CLP). This program refers qualified applicants to the fall traditional pathway who are placed on an alternate list to one of the PN programs for their first year of nursing education. The three partner PN programs accept between 24-30 OCCC students per year into the 1+1 program. Because of the 1+1 partnership as well as the growing number of other applicants, the CLP enrollment capacity has increased from 30 in 2002 to a capacity of 72 in 2013. At this time we are accepting 63 students annually due to a limited number of available clinical slots. Integris Health has provided partial funding for this pathway through financial support and clinical placement opportunities. Funding from Integris Health was discontinued in 2011 but they continue to be instrumental in providing clinical placement for students in the CLP as well as all students enrolled in the other pathways within the nursing program. The CLP is administered following the *Oklahoma State Regents for Higher Education (OSHRE) LPN/ADN Articulation Agreement* as outlined in Exhibit 1.4A.

In the spring of 2007, planning began with the University of Oklahoma College of Nursing (OUCN) to establish a collaborative program designed to increase the number of baccalaureate prepared nurses in the metropolitan Oklahoma City area. The OCCC Nursing Program entered the collaborative partnership to further aid in meeting the community's need for nurses committed to high-quality practice and lifelong learning, recognizing that both associate degree and baccalaureate prepared nurses are essential to current and future professional practice needs. The Collaborative Baccalaureate in science in nursing (CBSN) option was initiated in fall 2007, with 23 students admitted to the first cohort. Students admitted to this program submitted application to OUCN and were selected by their admission criteria. OCCC nursing faculty provided instruction (theory, laboratory, and clinical) for up to 24 students, implementing the OUCN junior level curriculum on the OCCC campus and at OCCC tuition rates. The OU-OCCC CBSN option was the second to be implemented in the state of Oklahoma, with Tulsa Community College as the first ADN program partner. This very popular program option continued through May of 2012 at which time the partnership was dissolved due to the continued decline in state funding and a change in program emphasis at the University of Oklahoma. Many lessons of collaborative educational practices were learned through this partnership.



Beginning September 1, 2013 and continuing until August 31, 2019, OCCC and OUCN entered into a Memorandum of Agreement whereby educational experiences for OUCN students will be provided at OCCC through organized preceptor opportunities. Graduate students at OUCN seeking a master's degree in nursing will work with designated OCCC faculty to fulfill educational objectives for the completion of their degree. Although no formal agreement is in place, we have had several graduate students from Southern Nazarene University (SNU) and Oklahoma Baptist University (OBU) working with designated OCCC faculty on similar projects. All graduate students must complete the requirements set forth in the *Graduate Student Preceptor Guidelines* prior to beginning their educational experience (Exhibit 1.4B).

Students in the first nursing course (NUR1519) participate in area school screenings for the Oklahoma City Public Schools each semester. A variety of age specific screenings are conducted to include visual acuity, hearing, random depth perception, height/weight, tonsil check and blood pressure measurements.

Beginning in 2009, OCCC and the University of Central Oklahoma (UCO) entered into a Transfer Agreement. By this agreement, OCCC and UCO express a shared commitment to increasing opportunities for student access to and success in higher education. By clarifying transfer policies and procedures, which assure articulation between programs, the institutions seek to assist students in making a seamless transfer from the associate to the baccalaureate degree. In 2013, an additional articulation agreement was entered into with the University of Phoenix (UOP) for the purpose of providing opportunities for seamless articulation into higher education. All articulation agreements can be viewed as Exhibit 1.4A.

Each year, community leaders, healthcare organizations, and the OCCC community outreach program invite student and faculty participation in health and career fairs. These partnerships provide the students with community service opportunities and provide the community with health education as well as promote the nursing profession. Examples of student participation in service learning opportunities include: Senior Health Fair at OCCC, Hispanic Health Fair at OCCC, Christmas Connection, Integris Health Fairs, vaccination clinics, mobile screening clinics sponsored by the Lion's Service Foundation, and a variety of other service learning organizations. Additional ways students have been involved with the community are through raising money for Alzheimer's research by participating in the Alzheimer's Annual Walk of 2012 and 2013, raising money and manning an information booth for MDA resources during the MDA Muscle Walk in the spring of 2013, and raising money for breast cancer research and providing local breast cancer education at the Susan G. Komen Race for the Cure in fall 2013. Several times per year the nursing program meets with area schools of nursing and clinical agency representatives to discuss clinical education needs, agency requirements, as well as the availability of clinical opportunities and effectiveness of the clinical placement process (Clinical Hub). The <u>Clinical Hub</u> is a forum which provides an opportunity to voice concerns or issues, clarify expectations, and discuss ways to improve the students' experiences.

In 2009, the nursing program partnered with the Recreation and Fitness department at OCCC to conduct the first Life Saver 5 km and 1 mile Fun Run for the purpose of student scholarships. This event has grown in popularity and has become an annual event in which the majority of nursing students and full-time faculty participate. In addition to the race, many students man booths where health topics that are specific to our community/state are addressed through poster presentations, video presentations and/or informational brochures. In 2011 the Nursing program invited the PTA and EMS programs to participate in this event due to the need for additional volunteers. This collaboration with our allied health partners has proven to be a very positive experience for all students.

Additional partnerships also exist to ease the financial concerns of students in the nursing program, including scholarship opportunities through the Bode Nursing Scholarship and the Derek Calhoun Nursing



Scholarship. The <u>Foundation</u> benefits, supports and enhances the priority programs of OCCC and facilitates the scholarship process for all students.

Criterion 1.5: The nursing education unit is administers by a nurse who holds a graduate degree with a major in nursing.

Deborah Myers, MS, RNC, Nursing Program Director, completed her baccalaureate degree in nursing in 1979 and her Master of Science (Nursing) in 1987, both from the University of Oklahoma College of Nursing. She has over thirty-four years of experience in nursing, ten of which have been in nursing education as a full-time employee. She also has over twenty-five years of clinical experience in the areas of neonatal intensive care, pediatrics, labor and delivery, and maternal newborn. She has served in a variety of management positions throughout her career within the clinical and educational settings.

A copy of the official transcript is available on file in the Health Professions Division Office with the official document being maintained in Human Resources.

Criterion 1.6: The nurse administrator is experientially qualified, meets governing organization and state requirements, and is oriented and mentored to the role.

Ms. Myers meets the educational and experiential requirements for the role of Nursing Program Director set forth by OCCC and the Oklahoma Board of Nursing (OBN). Since 1995, Ms. Myers has been involved in the formal education of nurses. Between 1995 and 2004 Ms. Myers provided adjunct clinical instruction to associate and baccalaureate level students on a part-time basis. In 2004, Ms. Myers accepted a full-time faculty position at OCCC. Areas of teaching responsibility included fundamentals of nursing, maternal-newborn nursing and coordination of the nursing clinical laboratory as described in *Ms. Myers' Curriculum Vita* (Appendix E). Over the next seven years, Ms. Myers assumed administrative responsibilities, first as an assistant program director at a .5 FTE then as a full-time administrator in the associate director role. In 2011, Ms. Myers was appointed Acting Nursing Program Director following the retirement of her predecessor. In January of 2012 after six months in the acting position, Ms. Myers was appointed Nursing Program Director.

Ms. Myers currently serves as a Program Evaluator for the ACEN. This position has been instrumental in strengthening her knowledge of the accreditation process and in assisting her faculty in preparing for this site visit. Ms. Myers is a member of the National League for Nursing, Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN), Oklahoma Nurses Association and Sigma Theta Tau (Beta Delta Chapter). She is currently serving on the Advisory Boards of Francis Tuttle Technology Center LPN program, Metro Technology Center LPN program, Rose State College ADN program, and Oklahoma City University Kramer School of Nursing. She has accepted a position on the University of Oklahoma College of Nursing Nurse Education Program Advisory Committee to begin in spring 2014.

Ms. Myers was mentored to the Nursing Program Director position by her predecessor whom she worked closely with for more than six years. In addition, the Oklahoma Associate Degree Deans and Directors Council is an active organization that provides many avenues for networking and communication. Another valuable resource for new and returning administrators of nursing programs is the orientation provided by the Oklahoma Board of Nursing. A comprehensive review of the requirements for nurse administrators, as outlined in the OBN Rules, as well as the available resources for nursing programs is covered. Written materials are supplied for future reference and contact numbers of key individuals distributed. The most recent OBN orientation attended was on September 20, 2013. Further support can be obtained from the



staff at ACEN when interpretation and/or further clarification of the Standards for program administration is needed.

Orientation and mentoring to the director role within OCCC is accomplished through the new faculty/administrator orientation and mentoring program, periodic meetings of the managers and program directors with the Vice President of Academic Affairs (VPAA) and the Associate Vice President of Academic Affairs (AVPAA), and through meeting with the Division Dean at the HP Program Director meetings.

Criterion 1.7: When present, nursing program coordinators and/or faculty who assist with program administration are academically and experientially qualified.

Other positions within the nursing program that have administrative responsibilities are the positions of the Nursing Program Associate Director, HPS/Nursing Laboratory Coordinator, and the Team Leaders for each nursing course. Proof of their academic and experiential preparation can be found in the curriculum vitae and transcript documents found in the personnel files within the Health Professions Division Office. Additionally the faculty qualification documents required by the OBN are maintained electronically and in a *Faculty Qualification Notebook* (Exhibit 1.7A) maintained in the office of the program director. Official transcripts are available for review in the office of Human Resources.

The team leader position within the nursing program is considered a program strength. All Team Leaders work on a 10-month contract which includes two weeks prior to the start of the fall semester and two weeks following the end of the spring semester. A total of nine (9) CHE (144 contact hours) is awarded in release time to allow the team leader to provide clinical oversight of all clinical rotations, accomplish the administrative components of their job, and provide the necessary support to students and full-time and part-time faculty. The extent of their job duties can be found in the team leader job description and in the team leader checklist included in the *Nursing Program Job Description* exhibit (Exhibit 1.7B).

Criterion 1.8: The nurse administrator has authority and responsibility for the development and administration of the program and has adequate time and resources to fulfill the role responsibilities.

The Nursing Program Director has responsibility for the leadership and supervision of all nursing faculty and staff assigned to nursing and reports directly to the Dean of Health Professions. The job description (Appendix F) demonstrates administrative authority for the purpose of overseeing day-to-day program operations, faculty and staff evaluation, chair of the interview committee for nursing faculty, faculty workload, approval of faculty travel requests, input into the annual budget process, student advisement, program development and evaluation activities, compliance with regulatory standards and community outreach/involvement. The position is a 12-month, full-time, administrative position with no teaching requirements. The Nursing Program director has resources to fulfill her responsibilities including a private office, a large desk with locking file drawers, four additional large locking filing cabinets, a large bookshelf with two floor to ceiling cabinets on each side, computer with dual 24 inch monitors, office printer, comfortable office chair and two side chairs, and access to Datatel Colleague (Resource Management System), People Admin (Position Management System), OCCC shared drive and all programs needed to perform other duties.

The Nursing Program Director is assisted in her job by the Nursing Program Associate Director, Terri Walker, who assumes responsibility for chairing the Nursing Evaluation Committee, administration of the Clinical Hub (clinical placement software), and many other duties as outlined in the job description located in the *Nursing Program Job Description* exhibit. Ms. Myers and Ms. Walker represent the nursing program



at the Nursing Education and Service Administrator (NESA) meetings, the Institute for Oklahoma Nursing Education (IONE) meetings as well as the Oklahoma Associate Degree Nurse Deans and Directors Council.

Criterion 1.9: The nurse administrator has the authority to prepare and administer the program budget with faculty input.

The Nursing Program Director has primary responsibility for procuring input from faculty and other sources on budgetary issues, needs, and planning for the nursing program. The Division budget process is the same for each program in the HP Division.

The Nursing Program Director submits program budgetary needs for the annual Division budget through submission of a *Strategic Plan Request Form* (Exhibit 1.9A). The HP Program Directors meet with the HP Division Dean to discuss needs and priorities. This group then prioritizes requests to be submitted by the Dean to the Associate Vice President for Academic Affairs. The Deans Council (comprised of all Academic Deans, the Vice President for Academic Affairs, and the Associate Vice President for Academic Affairs) discuss the requests and prioritize them into one list for Academic Affairs. The requests are taken forward by the Vice President for Academic Affairs to the President's Cabinet. The final budget is submitted by the President to the OCCC Board of Regents for approval. The approval of budgets by the OCCC Board of Regents constitutes authority for the administration to expend funds to implement the Institutional Plan.

The nursing faculty and HPS/Nursing Laboratory Coordinator provide input into the budgetary process through submission of the *Faculty Fiscal Resource Planning Form* (Exhibit 1.9B) each March. The timing of requests is planned to coincide with a major source of grant funding for educational equipment and supplies (Carl Perkins funds, typically requested in April and/or May) as well as with the Strategic Planning cycle.

Criterion 1.10: Policies for nursing faculty and staff are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the goals and outcomes of the nursing education unit.

OCCC Faculty Policies	Nursing Program Faculty Policies
Academic Advisement	Follow same policy. HP Division has own full-time advisor to assist with student advisement.
Academic Freedom and Responsibilities	Follow same policy
Academic Standards	Follow same policy. Program does have specific policies for academic progression and selective admissions.
Adjunct (Part-Time) Faculty Workload	Follow same policy with exception that part-time nursing laboratory faculty receive one contact hour for each hour of campus laboratory and clinical instruction. Other college faculty receive 0.7 credit hour equivalency for campus laboratory instruction. The nursing program pays part-time clinical faculty per hour (based on contact hour) with clinical and clinical laboratory paid at \$42.50 per hour and planning/grading paid at \$29.75 per hour.
Full-Time Faculty Workload	Follow same policy with exception that nursing faculty receive one contact hour for each hour of campus laboratory and clinical instruction. Other college faculty

Table 1.10.1:	Comparison of (College and Nursing	y Program Policies
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OCCC Faculty Policies	Nursing Program Faculty Policies
	receive 0.7 credit hour equivalency for campus laboratory instruction. Also, the nursing program has Team Leaders who are 10/12 month appointments, which differs from other Division faculty appointments.
Administrative Services	Follow same policy
Advanced Standing Credit	Follow same policy
Appointment and Responsibilities of Department Chair or Program Director	A full-time Nursing Program Director position exists and is a non-teaching position due to scope of responsibilities and functions for administration of the program. The position does not have a time limit expectation. In addition, due to the size of the program, a full-time Nursing Program Associate Director position exists. The Nursing Program Associate Director position does not have a time limit expectation. Separate job descriptions also exist for the Nursing Program Director and Nursing Program Associate Director.
Assessment of Student Learning	Follow same policy
Assignment of Classrooms	Follow same policy
Copyright	Follow same policy
Course Syllabi	Follow same policy. Program does have additional syllabi requirements.
Curriculum Revision Process	Follow same policy. All revisions in total curriculum plan as well as major course changes require compliance with College specified.
Developing and Approving Faculty Reassigned Time	Follow same policy except for appointment of program director and program associate director positions. These are not time-limited, as specified as "typical" for other College program directors. Job descriptions also have difference.
Faculty Performance Review and Evaluation	Slight deviation from College policy. College policy specifies Dean or Director responsibility for faculty performance appraisal. The Nursing Program Director and Nursing Program Associate Director jointly conduct the appraisal meetings with all nursing faculty and staff.
First Year Faculty Mentoring Program	Follow same policy
Final Grade Submission	Follow same policy
Grade Book	Follow same policy
Grade Changes	Follow same policy
Grade Reports to Students	Follow same policy
Institutional Review Board	Follow same policy
Official Withdrawal	Follow same policy except nursing students are required to do an exit survey.
Posting of Grades	Follow same policy
Prior Learning Assessment	Follow same policy
Procedure for Incomplete (I) Grades	Follow same policy
Release of Academic Information (FERPA)	Follow same policy
Safety and Health Training	Follow same policy
Student Appeal of Grades	Follow same policy

OCCC Faculty Policies	Nursing Program Faculty Policies
Student Input on Instruction (SII)	Follow same policy. Nursing students also complete additional faculty evaluation surveys administered through SPE.
Student Support Services	Follow same policy
Support Services	Follow same policy
Tentative Class List (Class Roll)	Follow same policy
Travel Procedure	Follow same policy
There is no College policy for faculty concerning required immunization records, other health records, licensure or CPR. Some other faculty positions require drug testing and/or background checks.	Nursing program faculty are required by clinical contracts to maintain current CPR, TB testing/follow-up procedures, immunizations, criminal history background checks, drug testing and current licensure as a Registered Nurse.

Criterion 1.11: Distance education, when utilized, is congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit.

OCCC Nursing Program does not offer distance education at this time.



STANDARD 2: FACULTY AND STAFF

Qualified and credentialed faculty are sufficient in number to ensure the achievement of the student learning outcomes and program outcomes. Sufficient qualified staff are available to support the nursing education unit.

Criterion 2.1: Full-time faculty hold a minimum of a graduate degree with a major in nursing.

100% (n=2) of the nursing administration hold a master's degree in nursing. 95% (n=19) of full-time faculty hold a master's degree in nursing and 5% (n=1) hold a bachelor's degree in nursing. This faculty is currently enrolled in a master's program with an anticipated graduation date of December, 2013. 10% (n=2) of full-time faculty are currently enrolled in a Ph.D. program. Full-time faculty credentials and areas of responsibility are reflected in Tables 2.1.1 (Administration) and 2.1.2 (Faculty).

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	Academic Teaching (T) and Other (O) Areas of Responsibility	
Administration	•			•				Т	0
Myers, Deborah	FT	9/98 PT 1/04 FT 9/11 FT	Nursing Program Director	BSN University of Oklahoma (1979)	MS University of Oklahoma (1987)	NA	OB, Peds, NSY, NICU		Administration
Walker, Terri	FT	8/02 PT 10/04 FT 1/12 FT	Nursing Program Associate Director	BSN Oklahoma Wesleyan University (2002)	MSN University of Phoenix (2004)	NA	OB, Peds, NICU, Med- Surg, Mental Health		Administration

Table 2.1.1: Nursing Administration Profile Table

 Table 2.1.2:
 Full-Time Faculty Profile Table

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	Academic Teaching (T) and Other (O) Areas of Responsibility	
Full-Time		00/00		DON		N 14			0
Boren, Traci	FT	08/09	Faculty	BSN University of Oklahoma (1998)	MS University of Oklahoma (2008)	NA	Peri-Op, Med-Surg	BADNAP Theory/Lab	BADNAP Lab Coordinator BADNAP Clinical
Brown, Sarah	FT	01/07 PT 08/08 FT	Faculty	BS University of Central Oklahoma (1998)	MS University of Oklahoma (2010)	NA	OB, Med-Surg, Mental Health	BADNAP Theory/Lab/ Clinical Oversight	BADNAP Team Leader
Butcher, Brooke	FT	10/11	Faculty	BS University of Oklahoma (2007)	MS University of Oklahoma (2012)	NA	OB, Med-Surg	NUR 2549 Theory/Lab	NUR 2549 Clinical
Cole, Joyce	FT	08/11 PT 08/12 FT	Faculty	BS University of Central Oklahoma (1993)	MS University of Oklahoma (2009)	PhD University of Northern Colorado (A2015)	Med-Surg, OB, Mental Health, Pediatrics, Oncology	NUR 2539 Theory/Lab	NUR 2539 Clinical
Cole, Michaele	FT	10/06	Faculty	BSN University of Oklahoma (1982)	MHR University of Oklahoma (1998) MS University of Oklahoma (2008)	NA	Med-Surg	NUR 2549 Theory/Lab/ Clinical Oversight	NUR 1529 Team Leader NUR 1529 Clinical NUR 2539 Clinical
Frock, Jacqueline	FT	08/06	Faculty	BSN Oklahoma City University (2003)	MSN Oklahoma City University (2006)	NA	Mental Health, Med-Surg	NUR 2539 Theory/Lab/ Clinical Oversight BADNAP (2539) Theory	NUR 2539 Team Leader

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	Academic Teaching (T) and Other (O) Areas of Responsibility	
Full-Time			-					Т	0
Heitkamper,Carol	FT	08/02	Faculty	BSN Southern Nazarene University (2000)	MS University of Oklahoma (2008)	NA	Med-Surg, Mental Health	CLP Theory/Lab/ Clinical Oversight	CLP Team Leader
Holland, Monica	FT	01/03 PT 08/06 FT	Faculty	BS Southern Nazarene University (2002)	MS Southern Nazarene University (2007)	NA	Med-Surg, Fundamentals	NUR 1519 Theory/Lab	NUR 1519 Clinical HPS/Nursing Lab Coordinator
Jordan, Karen	FT	08/07	Faculty	BSN University of Oklahoma (1972)	MS Education Oklahoma City University (1980) MS University of Oklahoma (1985)	NA	Med-Surg, Mental Health, Community, Geriatrics	NUR 1519 Theory/Lab	NUR 1519 Clinical
McCauley, Karen	FT	08/12 PT 08/13 FT	Faculty	BS University of Oklahoma (2011)	MS University of Oklahoma (A2013)	NA	Med-Surg, Fundamentals, Leadership, Emergency	NUR 2549 Theory/Lab	NUR 2549 Clinical
McMurry, Robin	FT	01/04 PT 08/06 FT	Faculty	BSN University of Oklahoma (2003)	MS Southern Nazarene University (2005)	PhD Oklahoma City University (A2015)	OB, Med-Surg, Leadership,	BADNAP Theory/Lab/ Clinical Oversight NUR 1529 Lab	BADNAP Team Leader NUR 1529 Clinical
Milam, Katherine	FT	08/10 PT 01/11 FT	Faculty	BS Oklahoma City University (2008)	MS Southern Nazarene University (2012)	NA	Peds, OB, Mental Health, Med-Surg, Fundamentals	NUR 1519 Theory/Lab	HPS/Nursing Lab Coordinator Student Nurse Association. Advisor
Miller, Shelley	FT	08/10 PT	Faculty	BSN	MS Oklahoma	NA	Med-Surg,	CLP	CLP Clinical

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	Academic Teaching (T) and Other (O) Areas of Responsibility	
Full-Time			-					Т	0
		08/12 FT		University of Central Oklahoma (1990)	Baptist University (2010)		Critical Care, Mental Health, Fundamentals	Theory/Lab	
Peters, Jennifer	FT	08/08	Faculty	BS Oklahoma City University (Non-Nursing BS to MS – has ADN)	MS University of Oklahoma (2008)	NA	OB, Med-Surg	NUR 1529 Theory/Lab BADNAP 1519 Lab	NUR 1529 Clinical BADNAP 1519 Clinical Chair OCCC Curriculum Committee
Pospisil, Randa	FT	09/07 PT 08/13 FT	Faculty	BS Southern Nazarene University (2001)	MS Southern Nazarene University (2008)	NA	Med-Surg, Hospice	NUR 1519 Nursing Theory/Lab	NUR 1519 Clinical
Schaeffer, Beverly	FT	08/02	Faculty	BSN University of Central Oklahoma (1977)	MSN University of Phoenix (2004)	NA	OB	NUR 1529 Theory/Lab	NUR 1529 Clinical
Schenk, Karla	FT	10/07	Faculty	BSN University of Oklahoma (1989)	MSN University of Phoenix (2006)	NA	Med-Surg, Fundamentals, Mental Health, Pediatrics	NUR 2549 Theory/Lab/ Clinical Oversight	NUR 2549 Team Leader
Wallace, Stephanie	FT	08/07	Faculty	BS Southern Nazarene University (2003)	MS Southern Nazarene University (2010)	NA	Fundamentals, Med-Surg	NUR 1519 Theory/Lab/ Clinical Oversight	NUR 1519 Team Leader
Watts, Whitney	FT	09/13	Faculty	BS University of Oklahoma (2009)	MS Tennessee State University	NA	Med-Surg, Mental Health	NUR 2539 Theory/Lab	NUR 2539 Clinical

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	Academic Teaching (T) and Other (O) Areas of Responsibility	
Full-Time								Т	0
					(2012)				
Wetmore, Jimmie Kay	FT	08/05 PT 08/06 FT	Faculty	BSN Oklahoma City University (2005)	MS Southern Nazarene University (2009)	NA	OB, Med-Surg	CLP Theory/Lab	CLP Clinical

Criterion 2.2: Part-time faculty hold a minimum of a baccalaureate degree with a major in nursing; a minimum of 50% of the part-time faculty also hold a graduate degree with a major in nursing.

53% (n=26) of part-time faculty hold a minimum of a graduate degree with a major in nursing. One (1) of the master's prepared part-time faculty is currently enrolled in a FNP program. 47% (n=23) of part-time faculty hold a minimum of a baccalaureate degree in nursing. Of the faculty holding a BSN in nursing, 41.66% (n=10) are currently enrolled and pursuing a master's degree in nursing and 0.04% (n=1) is enrolled in a BSN to DNP program. Part-time faculty credentials and areas of responsibility are reflected in Table 2.2.1

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	Academic Teaching (T) and Other (O) Areas of Responsibility	
Part-Time								Т	0
Andrade, Melissa	PT	08/13	Faculty	BS Southern Nazarene University (2001)	MS Southern Nazarene University (2013)	NA	Med-Surg, OB	Nursing Lab NUR 1519 Lab CLP Lab BADNAP Lab	
Armstrong, Cecelia	PT	08/09	Faculty	BS Oklahoma Wesleyan University (2007)	MS Oklahoma Baptist University (2010)	NA	Med-Surg, Fundamentals		NUR 1519 Clinical
Arnold, Amy	PT	08/12	Faculty	BS University of Oklahoma (2009)	MS University of Oklahoma (2011)	NA	Med-Surg, Mental Health		
Berry, Delanie	PT	08/13	Faculty	BS University of Oklahoma Lawton (2010)	MS Texas Women's University (A2013)	NA	Med-Surg	NUR 2549 Theory/Lab	NUR 2549 Clinical

 Table 2.2.1:
 Part-Time Faculty Profile Table

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	and O	Teaching (T) ther (O) esponsibility
Part-Time								T	0
Branch, Deanne	PT	08/13	Faculty	BSN University of Oklahoma (2003)	MS Oklahoma Baptist University (A2014)	NA	Med-Surg, OB	NUR 1519 Lab CLP Lab	CLP Clinical
Breath, Letitia	PT	08/13	Faculty	BS Oklahoma City University (1991)	MS Oklahoma City University (2011)	NA	Mental Health, Med-Surg		CLP Clinical
Chambers, Yvonne	PT	08/13	Faculty	BS Indiana University SE Basic Nursing (1990)	MS University of Oklahoma (2013)	NA	Med-Surg, OB	BADNAP Lab	BADNAP Clinical NUR 1529
Clay, Shelly	PT	08/10	Faculty	BSN University of Oklahoma (1994)	NA	NA	Med-Surg, OB, Peds	BADNAP Lab NUR 1529 Lab	NUR 1529 Clinical
Cole, Brianne	PT	08/12	Faculty	BSN Oklahoma Wesleyan University (2012)	MS University of Oklahoma (A2015)	NA	Med-Surg, Mental Health	NUR 1519 Lab NUR2539 Lab	NUR 2539 Clinical
Crabbe, Kelia	PT	08/07	Faculty	BSN University of Oklahoma (1995)	MS Oklahoma Baptist University (2012)	NA	OB, Med-Surg	NUR 1529 Theory	NUR 1529 Clinical BADNAP Clinical
Deibel, Paula	PT	01/09	Faculty	BSN Oklahoma City University (2001)	MBA University of Phoenix	NA	Med-Surg	BADNAP Theory/Lab	NUR 1529 Clinical

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	and Ot	Feaching (T) her (O) esponsibility
Part-Time								Т	0
					(2004)				
Emery, Jonathan	PT	01/12	Faculty	BS University of Southern Alabama (2007)	NP/MS University of Maryville (A2015)	NA	Med-Surg	NUR 2549 Theory/lab	NUR 2549 Clinical
Ford, Genie	PT	01/04	Faculty	BSN University of Southern Louisiana (1992)	MSN University of Phoenix (2005)	NA	Med-Surg, Mental Health	NUR 2539 Lab BADNAP Lab	NUR 2539 Clinical
Frymire, Roxanne	PT	08/13	Faculty	BS Oklahoma Wesleyan University (2005)	NA	NA	Mental Health, Leadership	CLP Lab	CLP Clinical
Geb, Joyce	PT	08/13	Faculty	BS Southern Nazarene University (2007)	MS Regis University (2013)	NA	Med-Surg, OB	NUR 1519 Lab	NUR 1519 Clinical
Goff, Merette	PT	01/12	Faculty	BS Oklahoma City University (2010)	MS Oklahoma Baptist University (A2014)	NA	Med-Surg, OB		NUR 1529 Clinical
Grellner, Kristin	PT	08/12	Faculty	BS University of Central Oklahoma (2006)	NA	NA	Med-Surg, OB	NUR 1529 Lab	NUR 1529 Clinical
Hilliard, Andrea	PT	08/08	Faculty	BSN Oklahoma City University (2008)	MS Southern Nazarene University	NA	Med-Surg Leadership	NUR 2549 Theory/Lab	NUR 2549 Clinical

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	Academic Teaching (T) and Other (O) Areas of Responsibility	
Part-Time				•	•			Т	0
					(2011)				
Hoyle, Bonnie	PT	08/12	Faculty	BS East Central State University (2000)	MS University of Oklahoma (A2014)	NA	Med-Surg, OB		BADNAP NUR 2539
Hudson, Sandy	PT	10/05	Faculty	BSN University of Oklahoma 1990	MS Oklahoma Baptist University (A2014)		Med-Surg, Mental Health	NUR 2539 Lab	NUR 2539 Clinical
Jordan, Christine	PT	08/12	Faculty	BS University of Oklahoma (1988)	MS Oklahoma Baptist University (2012)	NA	Med-Surg,	NUR 1529 Lab	NUR 1529 Clinical
Juarez, Christina	PT	8/12	Faculty	BS Oklahoma Wesleyan University (2000)	NA	NA	OB	BADNAP Lab	BADNAP NUR 1529 Clinical
Kennedy, Kimberly	PT	01/12	Faculty	BS Oklahoma City University (2010)	DNP Oklahoma City University (A 2015)	NA	Med-Surg, Fundamentals		NUR 1519 Clinical
Kennedy- Stewart, Sheila	PT	08/11	Faculty	BSN Oklahoma City University (2008)	MS Oklahoma Baptist University (2010)	NA	Med-Surg,	NUR 2549 Theory/Lab	NUR 2549 Clinical
Kerner, Paula	PT	08/07	Faculty	BSN	NA	NA	Med-Surg,		NUR 2539

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	Academic Teaching (T) and Other (O) Areas of Responsibility	
Part-Time						·		Т	0
				University of Oklahoma (1991)					Clinical BADNAP Clinical
Kraft, Monica	PT	08/11	Faculty	BS University of Oklahoma (2002)	NA	NA	Med-Surg, Mental Health	BADNAP Lab	BADNAP Clinical
Martin, Paula	PT	08/09	Faculty	BS University of Oklahoma (1986)	NA	NA	Med-Surg, OB	NUR 1529 Lab	NUR 1529 Clinical
Masters, Francis	PT	08/08	Faculty	BS University of Oklahoma (1986)	MS University of Oklahoma (1992)	NA	Med-Surg,	Nursing Lab/HPS	NUR 1519 Clinical
McCartney, Valerie	PT	08/05 FT 08/12 PT	Faculty	BSN University of Oklahoma (1995)	MS University of Oklahoma (1999)	NA	Med-Surg, OB, Peds	NUR 1532 Theory NUR 1519 Lab	
McCollough, Jessica	PT	08/12	Faculty	BS University of Central Oklahoma (2005)	NA	NA	Med-Surg, OB		NUR 1519 Clinical
Milligan, Sherry	PT	08/13	Faculty	BS University of Oklahoma (1991)	MS Oklahoma Baptist University (2013)	NA	Med-Surg, OB	CLP Lab	CLP Clinical NUR 2539 Clinical
Miller (Brown),	PT	08/12	Faculty	BS	MS	NA	Med-Surg	NUR 1423	

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	Academic Teaching (T) and Other (O) Areas of Responsibility	
Part-Time						•		Т	0
Ameika				Louisiana University (2002)	Southern Nazarene University (2012)			Pharm	
Miller, Jolene	PT	08/11	Faculty	BS University of Central Oklahoma (2005)	MBA Mid-Amer. Christian University (2012)	NA	Med-Surg, OB		NUR 1519 Clinical
Mitchell, Whitney	PT	08/12	Faculty	BS University of Central Oklahoma (2005)	NA	NA	Med-Surg, OB		BADNAP NUR 1529
Moore, Stacy	PT	03/13	Faculty	BSN University of Central Oklahoma (2005)	MS University of Oklahoma (A2014)	NA	OB	NUR 1529 Lab	
Morris, Elizabeth	PT	01/06	Faculty	BSN Southwestern Oklahoma State University (1999)	MS University of Oklahoma (2003)	NA	Med-Surg		NUR 2539 Clinical
Orum, Benita	PT	08/13	Faculty	BS University of Oklahoma (1996)	MS University of Phoenix (2007)	NA	Med-Surg, Fundamentals	NUR 1519 Lab	
Parker, Veretta	PT	08/11	Faculty	BS University of	MS Southern	NA	Med-Surg, OB, Mental Health		BADNAP Clinical

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	Academic Teaching (T) and Other (O) Areas of Responsibility	
Part-Time								Т	0
				Oklahoma (2004)	Nazarene University (A2013)				
Pinnick, Jennifer	PT	03/11	Faculty	BSN Southern Nazarene University (2007)	MS Southern Nazarene University (2010)	NA	Med-Surg, Mental Health, Leadership		CLP Clinical
Potts (Nash), Stephanie	PT	08/12	Faculty	BS (Nurs/Geriatrics) Langston University (2007)	MS Oklahoma Baptist University (2012)	NA	Med-Surg	CLP Theory (NPIV)	NUR 2539 Clinical NUR 1529 Clinical
Reilly-Schmidt, Barbara	PT	8/08	Faculty	BSN University of Oklahoma (1977) BA (Psych) (1976) Pediatric NP University of Colorado (1980)	MS Regis University (A2015)	NA	Med-Surg	NUR 1529 Lab	
Robnett, Bobby	PT	8/09	Faculty	BSN Oklahoma City University (2007)	NA	NA	Med-Surg		NUR 1529 Clinical
Rogers, Wendy	PT	10/11	Faculty	BS University of	MS University of	NA	Med-Surg, OB, Mental Health	BADNAP Lab	

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	Academic Teaching (T) and Other (O) Areas of Responsibility	
Part-Time	•		•					Т	0
				Oklahoma (1993)	Oklahoma (2013)				
Vasquez, Jennifer	PT	8/09	Faculty	BSN Oklahoma City University (2007)	MSN Frontier Nursing University (2012)	NA	OB		NUR 1529 Clinical
Walsh, Deborah	PT	10/13	Faculty	BSN University of Oklahoma (1988)	MS University of Oklahoma (2010)	NA	PICU	NUR 2549 Lab	NUR 2549 Clinical
Warner, Corinna	PT	08/13	Faculty	BS	MS Midwestern State University (2011)	NA	Med-Surg, OB	NUR 1529 Lab	NUR 1529 Clinical
Webb, Candace	PT	08/13	Faculty	BS University of Oklahoma (2006)	MŠN/MBA Okla. City University (2012)	NA	Fundamentals, Med-Surg, OB	Nursing Lab NUR 1519 Lab	
Winston, Anrea	PT	08/13	Faculty	BS University of Oklahoma (2005)	MS Southern Nazarene University (2013)	NA	Med-Surg	Nursing Lab	CLP Clinical
Worden, Heather	PT	8/10 FT 7/12 PT	Faculty	BS Southwestern Oklahoma State University	MSN University of Oklahoma (2010)	NA	Leadership, Med-Surg	NUR 2549 Theory/Lab BADNAP Lab/Theory	NUR 2549 Clinical

Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	and O	Teaching (T) ther (O) esponsibility
Part-Time								Т	0
				(2009)	Currently in FNP program			NUR 1519 Lab	

The academic and experiential preparation and variety of faculty backgrounds for both full-time and parttime faculty are appropriate for the responsibilities each is assigned within the nursing program.

Criterion 2.3: Faculty (full- and part-time) credentials meet governing organization and state requirements.

All full-time and part-time faculty members plus the Nursing Program Director, Nursing Program Associate Director, and the HPS/Nursing Laboratory Coordinator are licensed as registered nurses in the State of Oklahoma and meet the Oklahoma BON regulations for their positions as outlined in Subchapter 5; section 485:10-5-5.2. of the <u>Oklahoma BON Rules, July 12, 2012</u> (Exhibit, 2.3A). Requisite qualifications and preparation for faculty in Oklahoma nursing education programs include:

- 1) hold a valid license to practice as a Registered Nurse in the State of Oklahoma;
- present evidence of current practice with a minimum of two (2) years full-time equivalent practice as a Registered Nurse in a clinical setting preceding the first date of first employment as a teacher;
- 3) submit a Faculty Qualification Record to the Board office within two weeks of day of appointment and anytime that an advanced degree is attained;
- 4) participate in research projects, surveys, professional writing, continuing education, academic study, or clinical practice to improve own nursing competence in areas of responsibility.
- 5) hold a master's or higher degree in nursing; or
- a baccalaureate degree in nursing plus evidence of continued progress toward a master's or higher degree in nursing with completion of a minimum of six (6) semester hours per calendar year; and
- 7) at least one-half of the full-time faculty having a master's or higher degree in nursing; and
- 8) part-time clinical instructors, regardless of title used, having a minimum of a baccalaureate degree in nursing.

OCCC follows these rules for recruitment and hiring of nursing faculty. Preference is given to applicants with a completed master's degree. However, if there is a lack of qualified applicants, someone without a master's in nursing may be hired if they are currently enrolled in a graduate program and show continued progress toward a master's degree in nursing as outlined by the Oklahoma Board of Nursing (OBN). The OCCC Nursing Program is in compliance with OBN Rules, exceeding the required number of full-time faculty having a master's degree in nursing. The faculty who assist the HPS/Nursing Laboratory Coordinator all hold a master's degree in nursing. All part-time clinical faculty have a minimum of a baccalaureate degree in nursing with 50% or more holding a master's degree in nursing.

Copies of the Faculty Qualification Records sent to the BON as well as the approval letters received from the BON are kept on file in the Nursing Program Director's office. Each faculty member's license is verified on employment and at each subsequent renewal date. Pending expiration is monitored with notification sent to obtain renewal by the Nursing Program Associate Director. All faculty members, program administrators and the HPS/Nursing Laboratory Coordinator are academically and experientially qualified and maintain expertise in their area of responsibility.

Criterion 2.4: Preceptors, when utilized, are academically and experientially qualified, oriented, mentored, and monitored, and have clearly documented roles and responsibilities.

The OCCC Nursing Program does not utilize preceptors for instructional purposes.



Criterion 2.5: The number of full-time faculty is sufficient to ensure that the student learning outcomes and program outcomes are achieved.

The primary role of OCCC faculty is teaching. The nursing program employs faculty members under four types of appointment: full-time 12-month; full-time 10-month; full-time 9-month; and part-time. There is no tenure program. Contracts are subject to renewal under the policies set forth in the <u>2013-2014 OCCC</u> <u>Faculty Handbook</u> (Exhibit 2.5A). Most full-time contracts are issued for nine months except for the positions of program director, program associate director, HPS/Nursing Laboratory Coordinator, and BADNAP Team Leaders and faculty (12 twelve month positions). Team Leaders in courses other than BADNAP are issued contracts for ten months. The required teaching load for an OCCC faculty member is 30 semester hours per academic year as described in <u>OCCC Policy No. 4009</u>, Full-time Faculty Workload. The only exception to this policy is the campus laboratory pay for nursing faculty. Nursing faculty are paid with 1.0 credit equivalency (CHE) whereas other OCCC laboratory faculty are paid at a 0.7 credit hour equivalency (CHE).

The nursing program faculty does not follow the usual college teaching load pattern of 30 semester hours per academic year because of the nature of the education and close contact with students in the laboratory and clinical settings. The nursing faculty teaching load generally tends to be higher because of the high number of student contact hours. Full-time faculty usually team teach in one specific course, but may be asked or elect to teach in another course as his/her schedule permits. The instructional load may include day, evening, or weekend classes. Nursing faculty workload is determined by contact hours (face-to-face time with students). Full-time faculty working over 15 CHE (240 contact hours) per semester accrue overload which is paid by a separate overload contract at the part-time rate of compensation which is currently \$680 per credit hour. The maximum number of hours faculty can accrue for overload is 6.5 CHE (104 contact hours) per semester. Full-time faculty working in intersession and/or summer courses are paid by separate part-time contract and at a maximum workload of 9 CHE per eight week course paid at the part-time rate of compensation pursuant to OCCC Policy No. 4008, Summer and Intersession Faculty Staffing. The nursing program uses contact hours to compute workload in theory, laboratory, and clinical settings, all paid at a 16 contact hour equals 1 CHE ratio. An example of workload computation can be found in Appendix G. Table 2.5.1 presents workload data for each full-time faculty member for the fall, 2013 semester.

Faculty	Course Assignment	Workload Credit Hour Equivalency	Overload Hours	
Traci Boren	BADNAP – all courses	21.5	6.5	
Sarah Brown	BADNAP – all courses	21.5	6.5	
Brooke Butcher	Traditional – NUR 2549	15.0	0	
Joyce Cole	Traditional – NUR 2539	21.5	6.5	
Michaele Cole	Traditional – NUR 1529	21.5	6.5	
Jackie Frock	Traditional – NUR 2539	21.5	6.5	
Jennifer Peters	Traditional – NUR 1529	20.09	5.09	
Carol Heitkamper	CLP – all courses	15.0	0	
Monica Holland	Traditional – NUR 1519	21.5	6.5	
Karen Jordan	Traditional – NUR 1519	17.19	2.19	
Karen McCauley	Traditional – NUR 2549	18.13	3.13	
Robin McMurry	BADNAP – all courses	21.5	6.5	

Table 2.5.1:	Workload Data for Nursing Program Faculty, Fall 2013
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Faculty	Course Assignment	Workload Credit Hour Equivalency	Overload Hours
Cindy Milam	Laboratory Coordinator	19.0	4.0
Shelley Miller	CLP – all courses	18.94	3.94
Randa Pospisil	Traditional – NUR 1519	16.56	1.56
Beverly Schaeffer	Traditional – NUR 1529	21.5	6.5
Karla Schenk	Traditional – NUR 2549	21.5	6.5
Stephanie Wallace	Traditional – NUR 1519	20.66	5.66
Whitney Watts	Traditional – NUR 2539	15.00	0
Kay Wetmore	CLP – all courses	20.91	5.91

All part-time faculty are issued contracts semester by semester and paid by contact hour at the part-time rate of compensation. Direct student contact is paid at the 1.0 credit hour equivalency while planning and grading are paid at the 0.7 credit hour equivalency. Part-time faculty workloads are generated using the same nursing workload document as listed above with the addition of the formula for planning and grading hours. According to <u>OCCC Policy No. 4007</u>, Adjunct Faculty Workload, and the <u>OCCC Adjunct (part-time)</u> Faculty Handbook (Exhibit 2.5B) the maximum workload for part-time faculty will not exceed 11 CHE (176 contact hours) in a sixteen week semester, 5.5 CHE (88 contact hours) in an eight week period, and 22 CHE in a calendar year (352 contact hours). The nursing program is exempt from this policy due to the nature of the instruction and the difficulty in recruiting and maintaining part-time faculty credentialed with a master's degree in nursing. Part-time nursing faculty participate in laboratory and/or clinical settings, or as an occasional guest lecturer in the classroom. Currently the maximum workload for part-time nursing faculty is 320 contact hours in a sixteen week semester or 96 contact hours in an eight week summer session (not to exceed 20 hours per week).

Qualified faculty provide the leadership and support necessary to attain the goals and outcomes of the nursing education unit. The nursing program has 19 full-time nursing faculty and one (1) HPS/Nursing Laboratory Coordinator, for a total of 20 full-time faculty that provide instruction to students. All full-time nursing faculty are responsible for the development, implementation, and evaluation of the curriculum which includes instruction in class, clinical, and the laboratory setting. Although Team Leaders are not assigned a clinical group, they participate in clinical activities through post-conferencing and individual meetings with faculty and students when providing clinical oversight.

Nursing faculty maintain an "open-door" policy in addition to the required 10 hours per week of mandatory office hours to assist students with questions or concerns as outlined in section 4.0 of <u>OCCC Policy No.</u> 4009, Full-time Faculty Workload. In addition to teaching and clinical responsibilities, each full-time faculty is assigned to several nursing committees and many are additionally serving on one institutional committee or task force. Duties and responsibilities of nursing faculty are described in the job descriptions and can be viewed in the *Nursing Program Job Description* exhibit.

The current number of full-time faculty is sufficient to ensure that student learning outcomes and program outcomes are achieved. The nursing program operates on a team teaching approach. Table 2.5.2 outlines the OCCC faculty to student ratios for nursing.



Course	Classroom (team teaching)	Clinical	Campus Laboratory	Simulation (laboratory)
NUR 1519	1:24 max	1:9 max*	1:9 max	1:9 max
NUR 1529	1:24 max	1:9 max*	1:9 max	1:9 max
NUR 2539	1:24 max	1:9 max*	1:9 max	1:9 max
NUR 2549	1:24 max	1:9 max*	1:9 max	1:6max

Table 2.5.2: Nursing Faculty to Student Ratios 2013

*Some clinical agencies may require a lower ratio, particularly in specialty areas

Although the maximum ratio in the classroom has been identified as 1:24, the ratio in NUR 1519 (Fundamentals) is kept at 1:18 if possible. Faculty teaching in this first nursing course spend many hours counseling and supporting students as they acclimate to the rigor and requirements of the nursing program. The full-time faculty-to-student ratio in the classroom for NUR 2549 (traditional pathway) was 1:34 following the first 3 weeks of the semester due to the absence of one faculty member as a result of maternity leave.

Responding to the number of qualified applicants to the program, clinical practice shortages of RNs and budgetary limitations for full-time faculty positions necessitates the utilization of part-time (adjunct) faculty to carry out the program's purposes. Forty-nine well-qualified part-time faculty were utilized in the fall semester, 2013, primarily for clinical or laboratory teaching assignments. Twenty-six of the part-time faculty have master's degree in nursing and of those, one (1) is enrolled in a FNP program. Ten part-time faculty are enrolled in a master's program for nursing and one (1) is enrolled in a BSN to DNP program. There are 23 part-time faculty that hold a baccalaureate degree in nursing. Every effort is made to recruit both full-and part-time faculty who hold a master's degree in nursing.

Criterion 2.6: Faculty (full- and part-time) maintain expertise in their areas of responsibility, and their performance reflects scholarship and evidence-based teaching and clinical practices.

In support of a climate where faculty are expected to be members of a "community of learners," each OCCC faculty member creates a personal plan for professional development annually. The *Faculty Development Plan* (Exhibit 2.6A) must include at least one of the three development categories: discipline development, instructional development, and organizational development. Specifics on the required Faculty Development Plan are included in the 2013-2014 OCCC Faculty Handbook. Nursing faculty have creative and well-developed plans that demonstrate commitment to the integration and discovery of knowledge in professional roles and can be found in the office of the Nursing Program Director within each individual faculty evaluation file.

The nursing program generally concurs with the definition of scholarship as defined in the <u>2013 ACEN</u> <u>Accreditation Manual, Section III, Glossary</u>. However, at the community college level application of knowledge, teaching, service and practice are the focus, rather than research. Faculty at OCCC are evaluated on teaching as their primary responsibility. In the past, the nursing faculty were evaluated on their commitment to lifelong learning and their continued efforts to improve instructional effectiveness. This was achieved in a variety of ways to include ongoing clinical practice, study of current materials, participation in professional organizations, attendance at local and national conferences, and additional graduate study. In the spring of 2013, the nursing faculty developed a more comprehensive definition of scholarship and expanded the scope and extent to which attainment would be identified.

The OCCC Nursing Program's definition of scholarship is based on Boyer's definition of scholarship as it applies to faculty (1990, 1997) and is reflected below:



The nursing faculty at Oklahoma City Community College define scholarship as professional endeavors that aid in the transmission of knowledge, skills and attitudes that contribute to the advancement of nursing practice through evidence-based teaching and learning. Faculty commitment to scholarship is demonstrated through contributions to professional knowledge and to nursing practice. Forms of scholarship identified fall into the five areas proposed by Boyer (1990, 1997) and include teaching, practice/application, integration, discovery and engagement.

The Faculty has adopted the paradigm proposed by Ernest Boyer to define areas of scholarship:

- The scholarship of discovery building new knowledge through traditional research
- The scholarship of integration interpret the use of knowledge across disciplines
- The scholarship of application aid society and professions in addressing problems
- The scholarship of teaching study teaching models and practices to achieve optimal learning
- The scholarship of engagement moves students into the community through engaged pedagogy, community-based research and collaborative practice

Faculty demonstrate attainment of scholarship in a variety of ways and document this annually during the faculty appraisal process. Examples of activities that support the five identified areas of scholarship are reflected on the *Faculty Scholarship Criteria for Self Appraisal* (to be initiated in AY14 appraisal process) which can be found in the document room as Exhibit 2.6B. Prior to this appraisal cycle, scholarship was documented through the nursing *CEU documentation form* found in the appraisal file for each faculty kept locked in the program director's office and through discussion of their primary responsibility on the Faculty Appraisal. Nursing faculty are encouraged to attend professional meetings each year in nursing education and/or their specialty areas. They are also encouraged to belong to and be active in professional organizations. The nursing program provides funding for conferences and workshops annually. The amount of funding is dependent upon the funds allocated for nursing and the number of faculty seeking compensation. The travel monies allocated to nursing from AY2011-AY2014 can be viewed in Table 2.6.1 below:

Academic Year	NURSING	# FT Faculty	EMS	# FT Faculty	ΟΤΑ	# FT Faculty	PTA	# FT Faculty	SLPA	# FT Faculty
2011	\$7,200.00*	22	\$2,700.00	4	\$2,700.00	2	\$2,700.00	2	N/A	0
2012	\$7,200.00*	23	\$2,700.00*	4	\$2,700.00*	2	\$2,700.00*	2	Grant	1
									Funded	
2013	\$7,200.00*	21	\$2,700.00*	3	\$2,700.00*	2	\$2,700.00*	1.5	Grant	1
									Funded	
2014	\$7,200.00*	22	\$2,700.00*	4	\$2,700.00*	2	\$2,700.00*	2	Grant	1
									Funded	

Table 2.6.1: Health Professions Faculty Travel Budget AY2011-AY2014

* Additional travel dollars supplemented through Carl Perkin or Academic Affairs and not reflected in above totals

There are many opportunities for on campus faculty development through the <u>Center for Learning and</u> <u>Teaching (CLT)</u>. The CLT provides training and courses that enhance faculty knowledge through a variety of topics, such as technology advances, instructional design, management of online learning systems, and curriculum development. Examples of training opportunities can be viewed in the *CLT Program Brochure* (Exhibit 2.6C). In addition, the CLT provides opportunities for part-time faculty development. Resources and opportunities currently available include the following:

- Infofest adjunct orientation to the college as well as a guided tutorial introduction to Moodlerooms
- CLT tour and introduction to faculty consultants during infofest
- Moodlerooms instructor training course
- Web resources for faculty and adjuncts regarding using Moodlerooms
- Anticipated date of January for expanded teaching and learning resources on the CLT website
- Moodlerooms training workshops
- Teaching and learning workshops
- Individual consultations with CLT team members to assist with use of classroom technology, Moodlerooms, or teaching and learning (independent of technology)
- Adjunct Advisory Committee provides for adjunct faculty input and requests for information from college administration

OCCC also offers tuition reimbursement for full-time faculty up to a maximum of twelve graduate or twelve undergraduate credit hours per calendar year as described in <u>OCCC Policy No. 2302</u>, Educational Opportunities for Employees, Families and Retirees. Additionally, the college grants professional leave time for faculty to attend meetings, conference, or workshops when funding is not provided. Approval for professional leave must be requested through the Nursing Program Director, the HP Division Dean, and approved by the Vice President of Academic Affairs. Currently two full-time faculty members are engaged in scholarly activity through enrollment in doctoral programs. Three full-time faculty members have recently attained their CNE and several others are actively preparing for the exam. One part-time faculty is currently enrolled in a DNP program, one in a FNP program, and ten in graduate study to obtain a master's degree in nursing.

Other sources of funding have been utilized to supplement the Division budget for professional development, including Carl Perkins grant funds for the program director and program associate director to attend the ACEN (formerly NLNAC) Self-Study Forum in April, 2013. In academic year 2012 Cindy Milam, nursing faculty, submitted a proposal for a Faculty Development Grant to fund 11 iPads for classroom use which was funded in full. The following year Ms. Milam again submitted a proposal for a Faculty Development Grant to fund 25 iPads for faculty use within the classroom, clinical, and laboratory setting. This proposal was also fully funded. Both proposals can be viewed as Exhibit 2.6D. The use of iPads within our program continues to evolve as we continue to discover ways in which they can enrich the learning environment and provide organization and efficiency to faculty responsibilities.

In academic year 2012, the office of Professional Development funded an online faculty development program, NurseTim webinars, for all full-time and part-time nursing faculty. <u>NurseTim Webinars</u> cover a variety of topics to include curriculum development, faculty success, teaching strategies, assessment and exams, campus laboratory and clinical. Webinars are available online at a time that is convenient for the individual faculty. New content is added on a routine basis. In academic year 2013 the cost of this resource was shared between the office of Professional Development and Academic Affairs. This very valuable resource has been added to the annual Strategic Plan for nursing to help supplement the travel budget and educational needs of a large faculty.

Another source for faculty development is through the program's utilization of the Assessment Technologies Institute (ATI) student testing products. ATI has developed a faculty resource product (ATI



Academy) which allows all part-time and full-time faculty to assess webinars and other continuing education offerings, most of which are free of charge.

In the summer of 2013 full-time faculty member, Monica Holland, submitted a grant funded by the <u>Complete</u> <u>College OCCC initiative</u>. Ms. Holland's proposal outlined the need for an understanding of information technology in nursing and how creating an electronic medical record (EMR) for use in campus laboratory and simulation activities would enhance student learning. The Complete College OCCC One Year Innovation Grant was awarded to Ms. Holland for a total of 3 CHE (48 contact hours) with a timeline for projection completion set for September, 2013 (Exhibit 2.6E).

Maintenance of clinical expertise is achieved through outside employment and through participation in clinical teaching and educational offerings provided in the clinical setting. OCCC full-time and part-time faculty reflect evidence-based teaching in the classroom and clinical settings as seen in the course syllabi, assessments, instructional modules, simulations and clinical learning activities. In addition, faculty demonstrate scholarship of application through editing of textbooks, consulting with area agencies, and maintaining certification in practice.

Faculty members are also involved in a wide variety of community service activities. These activities support the individual faculty and the needs of the community in general, including, but not limited to:

- Community organization involvement
 - Baptist Mission
 - Crossings Community Clinic
 - o Good Shepherd Clinic
 - Methodist Church camp nurse
 - o St. Paul Episcopal Church health fair and immunization clinic
 - Christmas Connection
 - Alzheimer's Association
 - Muscular Dystrophy Walk
 - o Oklahoma Lion's Service Foundation Mobile Health Screening Unit
 - o OCCC Senior Awareness Day
 - o OCCC Hispanic Health Fair
 - American Red Cross
 - Regional Food Bank of Oklahoma
 - Area Aging Agency

It is important to note the contributions of part-time faculty to the collective talents of the faculty as a whole. The group includes clinical educators, supervisors, nurse practitioners, and nursing leaders. More specific information on continuing education, presentations, and other activities that contribute to faculty scholarship are included in the nursing CEU report document and curriculum vitae for both full-time and part-time faculty located in the faculty files maintained in the program director's office.

Criterion 2.7: The number, utilization, and credentials of staff and non-nurse faculty within the nursing education unit are sufficient to achieve the program goals and outcomes.

There are no non-nurse faculty members in the OCCC Nursing Program.

The number and utilization of staff which lend support to the nursing program are sufficient to achieve program goals and outcomes, but not sufficient to lessen the increased workload required of the Nursing



Program Director, Nursing Program Associate Director, and Division Program Support Assistant. At this time, there are three Division Assistants in the Health Professions Division. The Division Program Support Assistant, Martie Collin, BA is assigned primarily to nursing. The Division Assistant, Debbie Martinez, AS has primary responsibility for organizing, managing and executing the clerical responsibilities of the Division. The Division Secretary, Kristen McMurray, BS assists all programs within the Health Profession Division and provides support for Division activities as a whole. From August 2012 through July 11, 2013, there was a fourth clerical position within the Health Professions Division. The Division Clerical Assistant was assigned primarily to nursing with some Division responsibilities. Decreases in state funding and a reorganization of the Divisions from 6 to 8 resulted in the reassignment of staff to assist in providing support to the new Divisions. At this time, there are no plans to replace the Division Clerical Assistant position in the Health Professions Division Clerical Assistant position in the Health Professions Division Clerical Assistant position in the Increased workload produced by the deletion of the Division Clerical Assistant position.

Criterion 2.8: Faculty (full- and part-time) are oriented and mentored in their areas of responsibility.

Full-Time Faculty:

As part of the development process for first year full-time faculty, a formal faculty mentoring program has been established at OCCC. The new faculty mentoring program is one of the strategies used to enhance the development of first-year full-time faculty. The College is committed to a system of developing first year faculty through an expansion of the role of faculty mentors. The development of first year faculty will add value to student learning, as well as to the College and respective departments/programs and divisions.

The guiding principles for the first year faculty mentoring program are listed below:

- 1. The mentoring program will be considered part of the first year faculty member's contract requirements
- 2. The mentoring program will be a formative and developmental process, not a part of the performance appraisal process.
- 3. The program will recognize the value of diverse teaching and learning styles and discipline specific instructional strategies and should avoid a "one size fits all" approach.

New full-time faculty members are requested to attend a three day orientation on the Wednesday, Thursday, and Friday prior to faculty Planning and Preparation week. The orientation is funded through Academic Affairs and is a separate contract from their regular 9 month faculty contract. Faculty are presented with a new faculty orientation binder and are introduced to the following topics over the three day period:

- OCCC faculty handbook
- required health and safety training
- overview of technology resources
- college library resources
- OCC policies and procedures
- introduction to student services
- overview of competency based education
- introduction to the Center for Learning and Teaching and available resources
- student engagement and instruction
- student services

- introduction to OCCC's learning management system (Moodlerooms)
- tour of the Keith Leftwich Memorial Library and review of resources
- tour of campus
- orientation to employee benefits
- orientation to classroom technology
- print shop services
- Test Center services
- OCCC faculty association
- safety and security
- introduction to the College deans and administrative leaders
- open session for questions and answers

During the week prior to the beginning of every semester, known as Planning and Preparation week, several events are planned to enhance preparation of full-time faculty. New full-time faculty are assigned to their office, introduced to nursing program personnel, issued all handbooks, textbooks and desk supplies, as well as attend the numerous activities planned for new faculty as outlined in the *Planning and Preparation Week Schedule* (Exhibit 2.8A). On Monday new full-time faculty are introduced to their faculty mentors and the mentoring program by the Associate Vice President for Academic Affairs, Mr. Greg Gardner. During this week an individualized needs based plan for orientation is developed and timelines for implementation discussed. New full-time faculty are required to attend six meetings with Mr. Gardner throughout the academic year to discuss topics such as professional development plans, performance appraisal process, academic integrity and student conduct, advisor training, assessment and the Student learning counsel, as well as a host of other topics. A one-on-one meeting is scheduled with the President of OCCC, Dr. Paul Sechrist and each new full-time faculty is introduced to the Board of Regents during the November board meeting.

Full-time faculty members are oriented to the role of the nurse educator in a variety of ways. An assigned nursing faculty colleague will serve as mentor to the new faculty member. The mentoring process involves provision of essential information, specific activities and an ongoing opportunity to interface with people "who know". The mentor will provide specific task-related guidance as outlined in the *nursing faculty orientation checklist* (2.8B), and support the new faculty member in achieving a good working relationship with colleagues. The mentor will also provide feedback regarding performance in teaching and additional faculty roles. The new faculty will observe the mentor, and other faculty members if requested, in the classroom and laboratory setting for instructional development. The mentor will in turn observe the new faculty member in the teaching environment for purposes of formative evaluation. The mentor will submit a written report concerning the new faculty member's performance to the Dean of HP at the end of the first and second semester.

In addition to the mentoring program, the Nursing Program Director and Nursing Program Associate Director conduct an orientation for new full-time faculty during the first two weeks of the semester. The new faculty orientation manual and resource CD are reviewed and a detailed orientation to the program philosophy, mission, organizing framework, student learning outcomes, program outcomes, and curriculum mapping is conducted. New full-time faculty workloads are required to be kept at the fifteen CHE for the first semester with classroom teaching, campus laboratory and clinical assignments assigned based on faculty readiness. Orientation to the specific course requirements is provided by the team leader and includes topics such as an introduction to their area of content, curriculum and testing procedures, course materials,



team teaching philosophy, and the expectations of a nursing instructor. A copy of the orientation manual, *nursing faculty orientation checklist*, and resource CD can be viewed as Exhibit 2.8B in the document room.

Orientation to the clinical setting is accomplished from the education and clinical facility perspective. The Team Leaders for each course orient new full-time faculty to the process for planning and facilitating clinical instruction, faculty and student expectations, course objectives, clinical requirements, student evaluation and documentation, completion of Clinical Hub (online clinical placement management program) requirements, and enhancing the learning environment through post-conference activities. Orientation to the clinical facility is conducted by the facility nursing education department either through online learning modules or in face to face orientation sessions. Many of the clinical facilities maintain their orientation materials on the <u>Clinical Hub</u>. Examples of online clinical orientation modules can be found at the following websites:

- OU Medical Center
- Integris Health
- St Anthony

Integris Health, Mercy, Midwest City Regional, the Children's Center, St. Anthony, OU Medical Center, Deaconess, McBride, and Veterans are examples of clinical facilities that maintain orientation materials and required forms on the <u>Clinical Hub</u>.

Part-Time Faculty:

Part-time faculty members are oriented to their role by the team leader for the specific course in which they will be providing clinical or laboratory instruction. This is a one-on-one orientation to introduce them to the course materials, student evaluation process, clinical requirements, process for planning and facilitating clinical instruction, faculty and student expectations, course objectives, student evaluation and documentation, and methods to enhance the clinical experience. During Planning and Preparation week, several events are planned to enhance preparation of part-time faculty. An example of the activities scheduled can be found in the *Planning and Preparation Week Schedule*. In addition to the College and HP Division orientation, there is a comprehensive nursing program orientation conducted by the program director, associate director, HPS/Nursing Laboratory Coordinator, and occasional nursing faculty member. A copy of the agenda, orientation manual, and resource CD can be viewed as Exhibit 2.8C. All part-time faculty are required to attend the part-time nursing orientation during Preparation and Planning Week each semester.

Orientation to the clinical setting is the same as for full-time faculty. In many cases, the part-time faculty teach in facilities in which they are currently employed.

Criterion 2.9: Systematic assessment of faculty (full- and part-time) performance demonstrates competencies that are consistent with program goals and outcomes.

Full-Time Faculty:

Full-time nursing faculty are systematically assessed each spring, encompassing the previous calendar year's performance, to ensure employees are consistently displaying knowledge, skills, and behaviors that meet the goals and expectations of both the program and the college. This is done by direct classroom,



laboratory, and/or clinical observation, and by joint review of an annual performance summary by the faculty member and the program director and program associate director. The annual performance appraisal packet consists of the following:

- Faculty Performance Self-Appraisal
- Team Leader Appraisal (if applicable)
- Nursing Scholarship Self Appraisal
- Continuing Education Report form
- Faculty Consideration of Merit
- Faculty Performance Appraisal Review Form
- Faculty Performance Appraisal Summary Report

Faculty are asked to specifically address performance elements that are key in fulfilling course, program, and departmental objectives. Among these elements are:

- Teaching Effectiveness
- Development of/Innovation in Curriculum and Teaching Strategies
- Assessment of Student Outcomes
- Evidence of Ongoing Scholarship
- Maintenance of Required Licensure and Certification(s)
- Collegiality and Team-building Efforts
- Positive Representation of the Program, Department, and College
- Positive Role-Modeling and Advisement to Students
- Contribution to Special Assignments/Committees (at both program and college-wide level)

Additionally, students college-wide assess faculty via each semester's Student Survey of Instruction (SSI), the results of which are made available to deans, directors, and the respective instructors. Students also complete SPE surveys each semester related specifically to the quality of their clinical instruction, via the Student Evaluation of Clinical Faculty and Student Evaluation of Nursing Course surveys. These student surveys are submitted anonymously to encourage frank and forthright feedback from students, and results are addressed in the faculty performance evaluation process. Please refer to Exhibit 2.9A for faculty performance assessment forms and Exhibit 1.3B for nursing program survey tools.

The program director or program associate director observes the classroom, laboratory, and/or clinical instruction of all full-time faculty at least once per year. A *Faculty Observation Form* is completed which includes rating on various criteria and recommendation for improvement (Exhibit 2.9B). The program director or program associate director and faculty member subsequently meet to discuss the observation ratings, comments, and recommendations. This process is considered formative evaluation although some recommendations may become a part of the annual performance appraisal, which occurs in the spring semester each academic year.

Part-Time Faculty:

Part-time nursing program faculty are systematically assessed each fall (completed at the end of the spring semester if the part-time faculty member was a new employee beginning during the spring), encompassing the previous calendar year's performance, to ensure part-time employees are consistently displaying



knowledge, skills, and behaviors that meet the goals and expectations of both the program and the college. This is done by direct laboratory and/or clinical observation (depending on the specific area in which the part-time employee instructs), and by joint review of an annual performance self-appraisal each part-time employee submits to their respective team leader. Following the part-time employee self-assessment, the team leader discusses this assessment with the employee and provides comments and feedback as indicated. The assessment document is then provided to the Nursing Program Director. The annual part-time employee performance appraisal consists of the following:

- Faculty Formative Self-Evaluation
- Team Leader Response in Likert scale format
- Team Leader Comments

Part-time faculty are asked to specifically address performance elements that are key in fulfilling course and program outcomes. Among these elements are:

- Management Responsibilities: clinical management liaison, orientations, professional relationships with clinical agencies, Nursing Faculty Organization (NFO) and nursing team meeting attendance and participation
- Clinical Responsibilities: clinical/laboratory instruction, grading, and documentation and evaluation
- Evidence of Ongoing Scholarship

Additionally, nursing students assess part-time faculty via each semester's SSI and SPE surveys just as they do for full-time faculty. The results of these surveys are shared with the part-time faculty via their orientation packets each spring, as requested, or through formal review with the team leader or program director if warranted. Part-time faculty performance assessment forms can be viewed in Exhibit 2.9A.

Criterion 2.10: Faculty (full- and part-time) engage in ongoing development and receive support for instructional and distance technologies

The nursing program does not offer distance education within the core nursing curriculum. Two pre-nursing courses, NUR 1221 (Overview of Nursing) and NUR 1423 (Pharmacology for Nursing Practice) are offered fully online and on campus. All of the core nursing courses and NUR 1415 (Nursing Role Transition) utilize the College online course management system (Moodlerooms) to enhance on campus courses through use of communication/collaboration tools, organization of learning assignments, easy access to online learning sites and resources, and maintenance of student grades.

The <u>Center for Learning and Teaching (CLT)</u> offers services to all faculty members. The CLT team collaborates with and supports faculty in research and the implementation of innovative strategies and technologies to enhance learning and increase student engagement and success. The Center for Learning and Teaching provides a variety of workshops, seminars, and faculty learning circles throughout each semester. Their hours of operation are Monday through Friday 7:30 a.m. to 5:00 p.m. Additional times are available by appointment for individual faculty consultation sessions related to instructional design, use of the College's learning management system, instructional strategies, instructional technologies, and cooperative learning. The CLT has multiple resources available for faculty use including laptops for checkout, a computer laboratory to work in as needed, and many publications.

Within the nursing program, technologies are utilized in the classroom, campus and simulation laboratories, and clinical environments. Faculty experts provide orientation and ongoing support for these technologies



throughout the academic year. Examples of the technologies utilized and the support provided are listed below:

- iPads
- Work week instruction class provided
- o Innovative use to enhance classroom learning
- o Use of Apple Configurator for downloading and syncing apps
- o Total of 21 available student iPads
- o Wireless connection for classrooms
- o Use of Apple TV for student/faculty interactivity in the classroom setting
- IT support provided during college operation hours.
- o Instructor able to reserve iPads for classroom time
- Cart provided for safe transportation.
- o Knowledgeable staff available for trouble shooting and ideas for use
- Clickers
 - o 75+ clickers available
 - o Online scheduling
 - Online PowerPoint instructions available on the college shared drive.
 - o Work week instruction class provided
 - o Provides immediate feedback on student understanding
 - o Sample questions over content
- Campus/Simulation Laboratory Technologies
 - Human Patient Simulators
 - High-fidelity simulated clinical experiences
 - Classroom and campus laboratory utilization
 - Utilized across the curriculum/core nursing courses
 - Work week instruction class provided
 - MUSE software installed on one HPS
 - o IV Simulators
 - Basic to Advanced Scenarios
 - Stimulates critical thinking and build IV management skills
 - Can be used for practice or skill evaluation
 - Work week instruction class provided
 - o VitalSim
 - Lower-fidelity simulated clinical experiences
 - Task trainer(s) for skills across curriculum
 - 12 adult, two pediatric and one infant
 - Work week instruction class provided
 - Noelle and Baby Hal
 - High-fidelity simulated clinical experiences
 - Non-tethered
 - Utilized in Maternal-Newborn simulated clinical experiences

OCCC

- Work week instruction class provided
- PNCI (Program for Nursing Curriculum Integration)
 - Comprehensive program to facilitate integration of patient simulation
 - Planning and Preparation Week instruction class provided



STANDARD 3: STUDENTS

Student policies and services support the achievement of the student learning outcomes and program outcomes of the nursing education unit.

Criterion 3.1: Policies for nursing students are congruent with those of the governing organization, publicly accessible, non-discriminatory, and consistently applied; differences are justified by the student learning outcomes and program outcomes.

The policies and procedures which govern student behavior and activities at Oklahoma City Community College are found in the <u>2013-2014 OCCC Catalog</u> and the <u>2013-2014 OCCC Student Handbook</u> (Exhibit 3.1A). Both publications, updated and published each year are available to the public in print through the office of Admissions and Records, distributed throughout the common areas of the College and online.

Student policies of the nursing program are congruent with those of the College except as justified by specific functions and needs of the program. Policies and Guidelines specific to the nursing program are found in the <u>OCCC 2013-2014 Nursing Student Handbook (NSH</u>). A hard copy of the NSH is distributed to all new nursing students during orientation and (again) annually at the beginning of the fall semester. Within the nursing program, the Admissions Committee reviews all policies and procedures in the NSH annually, recommending action to the Nursing Faculty Organization. Each year when a new NSH is distributed, the students sign a confirmation form acknowledging they have read, understand and agree to abide by the rules and regulations set forth in the handbook. This document is kept in the student's file located in the HP Division office.

There are guidelines and policies in the nursing program that differ from, or are in addition to, those of the College. These guidelines and policies are in place to ensure student academic success, provide patient safety, satisfy safety and health requirements and meet program outcomes. Specific policies, location, and rationale for differences between campus and nursing policies are identified in Table 3.1.1.

OCCC Student Policies	Online	OCCC Catalog 2013-2014	OCCC Student Handbook	OCCC Nursing Student Handbook	Justification for Additional Criteria/Policies
Non-	http://www.occc.edu/s				
Discrimination	upport/policies.html	p. 34	p. 52	р. 77	No differences
Academic	http://www.occc.edu/				
Integrity	policy/pdf/4016.pdf		p. 41	pp. 86-87	No differences
	http://www.occc.edu/fi				
Financial Aid	nancialaid/	pp. 12, 18-27	pp. 28-40		No differences
Grievance/Compl					
aints and Appeal	http://www.occc.edu/				
Procedure	policy/pdf/5035.pdf	pp. 28, 36	pp. 42-54	р. 76	No differences
Graduation	http://www.occc.edu/				
Requirements	policy/pdf/5014.pdf	pp. 42-45	р. 16		No differences
				Trad: p. 49	
Selection and	http://www.occc.edu/			CLP: pp. 50-54	Patient safety and
Admission	policy/pdf/5041.pdf	pp. 13-15		BADNAP: p. 55	program outcomes
					Patient safety and
Functional Ability				pp. 43-46	program outcomes
Attendance	http://www.occc.edu/	pp. 37-38	рр. 17, 42	pp. 74-75	Patient safety and

Table 3.1.1: Student Policies



OCCC Student Policies	Online	OCCC Catalog 2013-2014	OCCC Student Handbook	OCCC Nursing Student Handbook	Justification for Additional Criteria/Policies
	policy/pdf/4023.pdf				program outcomes
Academic Progression	http://www.occc.edu/ policy/pdf/5012.pdf	pp. 28-29	p. 38	p. 56	Patient safety, SLO's and program outcomes
Information Technology Acceptable Use Policy	http://www.occc.edu/ policy/pdf/3058.pdf		p. 17	p. 83	Patient safety, SLO's and HIPAA regulations
Student Evaluation/ Grading	http://www.occc.edu/ policy/pdf/4028.pdf	pp. 38-42	p. 16	p. 56	Patient safety, SLO's and program outcomes
Retention		p. 32		Trad: pp. 58-59 CLP: pp. 60-61 BADNAP: pp. 62-63	SLO's and program outcomes
Withdraw/Dismis sal	http://www.occc.edu/ policy/pdf/5040.pdf	pp. 15-16	pp. 16, 19	pp. 57	Patient safety and program outcomes
Student Conduct Code	http://www.occc.edu/ policy/pdf/5076.pdf	p. 36		pp. 73, 77-78	Patient safety, SLO's, and program outcomes
Transfer of Credit	http://www.occc.edu/ policy/pdf/5013.pdf	pp. 14, 29	pp. 39, 42	pp. 64-66	Benefit student and program outcomes
Immunization and Health Records Requirements				pp. 91-92	Student and patient safety
Validation of Prior Learning/Articula tion	http://www.occc.edu/ policy/pdf/4018.pdf	р. 37		pp. 64-66	Benefit student and program outcomes

The OCCC student policies and the nursing program student policies and guidelines are publicly accessible, non-discriminatory, and consistently applied.

Selection and Admission: OCCC provides educational opportunities for a diverse student population and has admissions policies that make its programs available to as many people as possible. Due to limited program resources and the number of applicants, the nursing program (like the other College health programs) does have restrictions on enrollment as noted in the <u>2013-2014 OCCC Catalog</u>.

Applicants to the nursing program must first meet College admissions requirements and then complete the nursing program application procedures for the traditional pathway, CLP or BADNAP as outlined in the *NSH*. Application availability and deadlines are clearly communicated on the respective application and on the <u>nursing webpage</u>. The nursing program admission requirements are established to ensure each applicant has equal opportunity for success; to maintain safe clinical faculty-student ratios; and to ensure available clinical resources to meet student and program learning outcomes. In addition to basic program admission criteria, preference points are awarded according to specified criteria and are used to rank

applicants for selection in the traditional and career ladder pathways. The ranking procedure is determined by the number of preference points, using cumulative (retention) grade point average (GPA) to further rank applicants who have the same number of preference points. The preference point system is explained in detail in the *Prospective Student Letters* (Exhibit 3.1B1) as well as in the *Nursing Applications* (Exhibit 3.1B2). Starting in the spring of 2014, the CLP will have an application requirement of a score equal to or above the national mean on the ATI Step Test as a requirement for application submission. In the BADNAP, students are ranked according to cumulative GPA following achievement of the application requirement of a score of 70% on the ATI Test for Essential Academic Skills (TEAS) version V. Completed nursing applications are submitted to the Office of Admissions and Records, where they are reviewed and ranked. Notification of acceptance is communicated via the office of Admissions and Records.

Functional Ability Policy: Nurses must possess the knowledge, skills, and functional abilities to provide safe and effective client care. The standards and functional abilities required for safe nursing practice include: fine and gross motor coordination; physical endurance and strength; mobility; intact senses; reading and arithmetic competence; emotional stability; critical and analytical thinking; and interpersonal/communication skills. Some limitations in ability can be accommodated with special devices or special circumstances; others cannot. The ultimate determination regarding the reasonableness of accommodations will be based upon the preservation of client safety and the resources of the nursing program. The standards and functional abilities necessary for participation in the nursing program are outlined in the NSH.

Attendance and Tardiness Policies: The nature of the profession for which nursing students are preparing to enter demands that the graduate be safe, ethical, and responsible. Because attendance in the clinical and campus laboratory settings is essential to gain the necessary knowledge, skills, and attitudes to be safe practitioners, to demonstrate responsibility, and to be evaluated in the nursing role, the nursing program operates under a separate attendance policy from the one governing the general college.

Academic Progression: A minimum grade of "C" must be achieved in each required course to progress in the nursing program. (Exceptions are American History and Political Science courses, in which a grade of "D" is minimum). All policies related to academic progression, including grading policies and clinical health requirements, are carefully planned, evaluated, and revised when indicated to ensure students are meeting course objectives/outcomes, culminating with attainment of program outcomes. Because of the importance of the general education and support courses in the program's curriculum, pre- and corequisite courses are specified for each nursing process course and students are required to adhere to these requirements for progression.

Student Evaluation and Grading: A minimum of 74% of the total points in each nursing process course is required to receive a passing grade for that course. In addition, a minimum of 74% of the total points available through test scores must also be achieved to receive a passing grade in each nursing process course. A passing grade in the clinical component of each course is also required to receive a passing course grade.

Two (of the four) nursing process courses are divided into two components. In order to progress from Nursing Process II (NUR 1529), the student must achieve a 74% in both the medical-surgical and maternal-newborn course components. To progress from Nursing Process III (NUR 2539), the student must achieve a 74% in both the medical-surgical and mental health course components.



The following grade scale is used for each nursing course:

- A = 90-100% of total points, including 74% of total points available through test scores AND a passing grade in clinical
- B = 80-89% of total points, including 74% of total points available through test scores AND a passing grade in clinical.
- C = 74-79% of total points, including 74% of total points available through test scores AND a passing grade in clinical.
- D = 65-73% of total points.
- F = 64% or below of total points.

More specific information on how course grades are assigned is found in each nursing course syllabus. The policies related to student evaluation and grading are planned and evaluated to ensure students are meeting course objectives which lead to attainment of program and student learning outcomes.

Retention: Opportunities for readmission to the program are provided with certain limitations. The primary rationale for the readmission limitations is the number of qualified applicants seeking first-time enrollment. Students may re-enter the nursing program one time for academic reasons (except for Nursing Process I NUR 1519) and one time for personal reasons. Only students who have withdrawn for personal reasons may be considered for readmission to Nursing Process I. Students who have withdrawn from Nursing Process I for academic reasons must complete another application and be considered along with all other applicants following the selection process as specified for that pathway. The readmission policies and procedures are explained in the NSH. A student who has exited the program after successfully completing a course and has been out of the program for one calendar year but less than two calendar years must demonstrate readiness for the next course by written testing and/or evaluation of clinical performance. Students who remain out of the nursing program for more than two years will not be considered for readmission. Although the College does not have general policies which limit readmission opportunities, the number of applicants to the nursing program as well as the need for current knowledge and skills for safe practice are the rationales for the difference. The student must finish the program within four years of the starting semester in the traditional pathway or within two years of the starting semester for CLP and BADNAP, as current nursing knowledge and curriculum updates are essential for graduate competency.

Withdrawal/Dismissal: An OCCC Nursing Program student may exit the program (withdraw) either voluntarily or involuntarily as explained in the NSH. Rationales for policies related to withdrawal include the numbers of qualified applicants seeking program opportunities and responsibilities to the profession of nursing regarding safe and ethical behaviors with which nursing students must comply. Nursing faculty recognize the importance of professional behavior standards and the risks (actual and/or potential) that exist for clients, other students, faculty, and/or healthcare professionals in clinical settings if misconduct arises.

Whether withdrawal is voluntary or involuntary, an exit interview is required if the student is to be considered for readmission to the program. The student is responsible for scheduling an exit interview with the Nursing Program Director or Nursing Program Associate Director. In the exit interview questions pertaining to student utilization of available course and college resources as well as faculty advisement are discussed. The readmission guidelines and procedures are reviewed with the student, as well as student performance in theory and clinical experiences, and documentation is signed by both the student and program director (or associate director). The student is provided a copy of this document and the original is



sent to the chair of the Admissions Committee for filing and future use when considering readmission requests.

Student Conduct Code: Standards for student conduct during theory class, campus/simulation lab, and during clinical placement are provided in the *NSH*. Specific actions or like actions by a student are identified which may be grounds for immediate termination, from either the clinical assignment or from the program. Importantly, procedures are defined that allow for students to correct behaviors in most situations although there are limitations to those opportunities.

OCCC also has a Student Conduct Code which governs the actions of nursing students as well as all other College students. The Code is found in the 2013-2014 OCCC Student Handbook. The Code identified the conduct expected of students in many areas and defines misconduct and possible disciplinary actions. The specified procedures are followed if concerns about nursing student behavior occur outside of clinical areas (e.g., classroom cheating). In such cases, the procedures for disciplinary action are followed.

Transfer of Credit: The policies and procedures for transfer of nursing course credits from another (accredited) institution of higher education are found in the NSH. Nursing faculty established these policies to provide opportunities for students from another college or university to succeed while maintaining integrity of the OCCC Nursing Program curricular standards. The process for transfer of credit is further explained in the discussion of validation of prior learning and articulation.

Validation of Prior Learning/Articulation: Qualified applicants who fulfill basic application requirements may apply for advanced standing in accordance with College and nursing program policies delineated in the 2013-2014 OCCC Catalog and the NSH. Policies exist to grant advanced placement to Oklahoma licensed LPN's and Paramedics who meet the requirements set forth by the Articulation Agreement approved by the Oklahoma State Regents for Higher Education. Additional information concerning these requirements can be found in the NSH.

Transferring nursing students may also be admitted to the program through the College's Advanced Standing Credit options. Students who request to transfer into the program are required to validate prior learning through two placements exams (theory and dosage calculation) and through skills demonstrations as specified in the Nursing Transfer Student Policies and Procedures (NSH, pp. 64-66) and in more depth through the <u>Transfer Student Information</u> located on the OCCC campus laboratory webpage. In addition, transferring nursing students are only considered for Nursing Process II (NUR 1529) or Nursing Process III (NUR 2539). This policy provides for at least two semesters of academic work in the OCCC Nursing Program to evaluate student learning.

Annual review of the 2013-2014 OCCC Catalog, 2013-2014 OCCC Student Handbook, and NSH, result in necessary revisions. These documents are readily available to all nursing students. If changes in policies or procedures are necessitated prior to the annual review/revision process, the changes are communicated to nursing students in writing, through the online course management system (Moodlerooms), through class announcements and in meetings of the Nursing Faculty Organization (NFO) or its Committees, all of which provide for student participation. In addition, policy changes are communicated to the OCCC HP Academic Advisor as a means of communicating information to the general advisement staff.

Immunization and Health Record Requirements: Nursing students have additional health requirements because of the clinical requirements in the program. All clinical agencies with which written agreements exist have specific health requirements. Prospective nursing students are informed of the requirements in written communications and admitted students are informed through acceptance letters and through the



NSH. Additional policies and requirements (listed below) are in place to comply with terms and affiliation agreements between OCCC Nursing Program and clinical agencies and to protect the safety of patient and students:

- Health Professions Student Drug Testing Policy NSH (pp. 80-82)
- Background Checks *NSH* (p. 80)
- OCCC Nursing Guidelines for the Use of Electronic Communications and Social Media NSH (pp. 84-85)
- Exposure Notification Procedure NSH (pp. 93-94)
- Dress Regulations NSH (pp. 95-96)
- Nursing Program Sharps Safety Policy NSH (pp. 100-101)
- Immunization and Health Record Requirements *NSH* (pp. 91-92)

Criterion 3.2: Public information is accurate, clear, consistent, and accessible, including the program's accreditation status and the ACEN contact information.

The OCCC Nursing Program continually strives to maintain consistency with regards to all program information disseminated to the public. Therefore, all formats of the information are cross-checked by faculty, specifically the program director, assistant director, and the nursing admissions committee, and validated for accuracy. Examples of this type of information include ACEN accreditation status, program entry requirements, policy and procedures, along with the mission and philosophy. Course syllabi reflect the current calendar/weekly schedules. Table 3.2.1 lists where information intended to inform the public is found.

Information	Location
ACEN Accreditation Status	http://www.occc.edu/health/pdf/Handbook-2.pdf
	http://www.occc.edu/academics/programs/nursing.html
	http://www.occc.edu/catalog/index.html
ACEN Contact Information	http://www.occc.edu/health/pdf/Handbook-2.pdf
	http://www.occc.edu/academics/programs/nursing.html
	http://www.occc.edu/catalog/index.html
OCCC Nursing Program Website	http://www.occc.edu/health/nursing.html
OCCC Student Handbook: Policies	http://www.occc.edu/handbook/pdf/Student-Handbook.pdf
Nursing Student Handbook: Policies	http://www.occc.edu/health/pdf/Handbook-2.pdf
Program Entry Requirements	Traditional Pathway http://www.occc.edu/health/pdf/ProspectiveTRNLetter.pdf
	Career Ladder Pathway http://www.occc.edu/health/pdf/ProspectiveCareerLadderLetter.pdf

Table 3.2.1: Information Intended to Inform the Public

Information	Location
	Baccalaureate to Associate Degree Nurse Pathway http://www.occc.edu/health/pdf/BADNAP-Ltr.pdf
Program Mission and Philosophy	http://www.occc.edu/health/pdf/Handbook-2.pdf
Curriculum	Traditional Pathway http://www.occc.edu/catalog/pdf/Nursing-AAS.pdf
	Career Ladder Pathway http://www.occc.edu/catalog/pdf/Nursing-NCLP-AAS.pdf
	Baccalaureate to Associate Degree Nurse Pathway http://www.occc.edu/catalog/pdf/Nursing-BAP-AAS.pdf
Oklahoma Board of Nursing Approval	http://www.occc.edu/health/pdf/Handbook-2.pdf http://www.ok.gov/nursing
NCLEX-RN pass rates	Highlights Tab http://www.occc.edu/academics/programs/nursing.html
Faculty profiles	http://www.ok.gov/nursing http://www.occc.edu/faculty/health-professions/
	http://www.occc.edu/academics/programs/nursing.html
Tuition/ Fees	Traditional Pathway http://www.occc.edu/health/pdf/ProspectiveTRNLetter.pdf
	Career Ladder Pathway http://www.occc.edu/health/pdf/ProspectiveCareerLadderLetter.pdf
	Baccalaureate to Associate Degree Nurse Pathway http://www.occc.edu/health/pdf/BADNAP%20Ltr.pdf
	Bursar <u>http://www.occc.edu/bursar/index.html</u>

To maintain consistency and accuracy in written publications and online information sources, all College and nursing program publications are reviewed annually and as needed. Oversight of program information is the responsibility of nursing program administration and faculty. When revisions are made, the Nursing Program Director is aided by Health Professions administrative assistants, or by the OCCC public relations department, to make the necessary changes in hard copy and online.

Criterion 3.3: Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.

All policies, procedures and information of OCCC are clearly and consistently communicated to students in a timely manner. Revisions or updates to the <u>2013-2014 OCCC Student Handbook</u> and the <u>2013-2014</u> <u>OCCC Catalog</u> are made annually and distributed to student in hard copy and online. Additionally revisions and updates to the <u>NSH</u> are made annually. A hard copy of the NSH is distributed to all new nursing



students during orientation and (again) annually at the beginning of the fall semester. In the event of a change, students are informed through various means such as online announcements, class announcements, email notifications, special information sessions, letters, and through contact with academic advisors.

Changes made to the *NSH* are routinely made during the February and May Admission's Committee meetings when the handbook is reviewed and revised. Students are required to sign and return the confirmation form, stating they have read and understand the *NSH*. The signed agreement is placed in the student file. Any changes or revision made during the academic year, once the *NSH* has been distributed, are made in writing via an addendum and distributed to each student.

OCCC student email is assigned upon admission to OCCC and is considered the official means of College communication. This mode of communication is used to send important College enrollment and registration information, safety announcements, and calendared campus events. Nursing faculty use this means of communication as well as the email option through the online course management system (Moodlerooms) for their respective course.

All students have access to text alerts. The <u>OCCC Campus Alert Notification System (CAN)</u> is available for all students, faculty and staff who sign up for this system. This system is designed to quickly communicate information regarding emergency situations on campus and any campus closures that may be necessary. Students can go to the CAN website to sign up for the alert system or to access safety and security procedures for the College.

Criterion 3.4: Student services are commensurate with the needs of nursing students, including those receiving instruction using alternative methods of delivery.

OCCC offers a variety of support services to students to assist them in the fulfillment of their education goals. Student services are described in the <u>2013-2014 OCCC Student Handbook</u>. The Vice President for Enrollment and Student Services is Marion Paden, Ed.D. All student support services are administered by individuals who have met specific qualifications for their positions and are listed in Table 3.4.1.

Student Service	Website	Personnel
		Tamara Madden, M.A.
Academic Advising	http://www.occc.edu/acs/index.html	Director
		Brenda Reinke, M.A.
Bookstore	http://bookstore.occc.edu/home.aspx	Director
		Cynthia Gary, B.A.
Bursar	http://www.occc.edu/bursar/index.html	Bursar
Career Transitions		Nora Pugh-Seemster, M.S.W.
Program	http://www.occc.edu/career/index.html	Director
		Jenna Howard, M.S.W.
Counseling Services	http://www.occc.edu/support/index.html	Counselor
		Lisa Fisher, Ph.D.
Disability Services	http://www.occc.edu/support/disability.html	Director
Employment and		
Career Services	http://www.occc.edu/es/index.html	Tamara Madden, M.A.
		Harold Case, M.Ed., Dean
		Meghan Morgan B.S.
Financial Aid	http://www.occc.edu/financialaid/index.html	Assistant Director

Table 3.4.1: Student Services



Student Service	Website	Personnel
		Angela Leal, B.A.
		Assistant Director
Learning Support		Alta Price, M.Ed.
Services	http://www.occc.edu/support/index.html	Mary Turner, M.Ed.
		Barbara King, M.L.S.
Library	http://www.occc.edu/library/	Director
		Jon Horinek, M.Ed.
OKC-GO	http://www.occc.edu/okc-go/index.html	Director
		Alan Stringfellow, M.Ed.
		Registrar
		Jill Lindblad, M.A.
		Associate Registrar
Records and		Barbara Gowdy, B.S.
Graduation Services	http://www.occc.edu/records/index.html	Director
Recreation and		Roxanna Butler, M.B.A.
Fitness	http://www.occc.edu/rf/index.html	Director
Recruitment and		Jon Horinek, M. Ed.
Admissions	http://www.occc.edu/admissions/index.html	Director
		Jennifer Hardt, M.B.A.
Scholarships	http://www.occc.edu/admissions/scholarships.html	Director of Development
•		Keisha Williams, B.S.
SMART	http://www.occc.edu/smart/	Coordinator
		Erin Logan, M.Ed.
Student Life	http://www.occc.edu/studentlife/	Director
Testing and		
Assessment		Linda Little, M.A.
Services	http://www.occc.edu/acs/testingcenter.html	Director
		Javier Puebla, M.B.A.
Transfer Center	http://www.occc.edu/transfercenter/index.html	Coordinator
		Karolyn Chowning, M.S.
Trio Programs	http://www.occc.edu/trio/index.html	Director
		Janis Armstrong, B.S.
Veterans Office	http://www.occc.edu/veterans/index.html	Coordinator

Academic Advising

The responsibility for advising nursing students is shared by the <u>Office of Academic Advising</u> and the Nursing Program Director and Nursing Program Associate Director. A full-time academic advisor is assigned to the Health Professions Division and is in close contact with the Nursing Program Director and Nursing Program Associate Director to keep updated on program requirements and changes. The academic advisor also works closely with the Nursing Program Director to address the career and educational needs of all nursing students, including pre-nursing students. The academic advisor and the Nursing Program Director jointly conduct open meetings for pre-nursing students called "Meet the Director" where information is shared about all three nursing pathways. Students have the opportunity to ask specific questions and address individual concerns.



Through the webpage for Academic Advising, students have the opportunity to browse through student academic plans and to link to the website for the Oklahoma State Regents for Higher Education for course transfer information. Students can also obtain multi-divisional forms for transfer guidance and options.

Bookstore

The <u>Bookstore</u> at OCCC makes available on campus and online the textbooks, laboratory materials, access codes and other items directly related to their courses. Along with a selection of new textbooks, the Bookstore also has eBooks, used books and rental books available in some of the titles. A broad selection of supplies, snacks and novelty items are also available for purchase. A "Book Buy Back" period is held during the last week of classes for the fall and spring semesters and the last three days of the summer semester. Checks may be cashed in the Bookstore for \$20 with a current student I.D. card. Access to an ATM is also provided outside the Bookstore entrance.

Bursar

The OCCC Bursar Office is open for student access during the following days/times:

Mon 8:00 am - 8:00 pm Tue - Wed 8:00 am - 6:00 pm Thu 11:30 am - 6:00 pm Fri 8:00 am - 5:00 pm

Students must pay their tuition and fees by the designated due date or at the time of enrollment in order to avoid finance charges. Payment can be made in person by cash, check, money order, or credit card. A drop box in the foyer outside the office can be used for payment by check only. All refunds are processed in accordance with preferences selected using the OCCC Debit Card.

Career Transitions Program

The <u>Career Transitions Program</u> is designed to assist individuals facing economic challenges (i.e. receiving temporary assistance) in acquiring educational attainment that will assist them in reaching self-sufficiency. This is accomplished by providing participants with educational training that leads toward completion of a college certificate and/or an associate degree. Additional support services include assistance in obtaining a work study and/or a work related activity and other support services that lead to employment.

Student Support Services

Student Support Services include the following services:

- Counseling Services The counseling aspect of Student Support Services was developed to
 provide a confidential process to assist students in gaining a greater understanding of self and
 relationships in order to benefit from education opportunities. The counselor will also provide
 referrals to community services and provide group opportunities to address a variety of resolution
 of issues that can deter student success.
- Disability Services The disability office at OCCC provides services and accommodations for students with disabilities as defined by the Rehabilitation Act of 1973 or the Americans with Disabilities Act, if that disability substantially impairs the student's ability to participate in educational programs and activities. Nursing students have been and currently are provided these services.

Learning Support Services – The College employs two Learning Support Specialists who work
with students who have been referred through the Early Warning System as a result of poor
academic performance. Faculty refer nursing students following the first unit exam if a passing
grade has not been achieved. Services provided include the development of skills related to testtaking, organization, study, critical thinking, and stress reduction.

Employment and Career Services

<u>Student Employment and Career Services</u> provide valuable resources to assist students with career and college major guidance, resume building and job seeking, and techniques for interviewing through resources found on their website and through a variety of workshops held throughout each semester. Other resources found on their website include information on upcoming job fairs, student internship opportunities, and current openings in nursing and allied health.

Financial Aid

The <u>Financial Aid Office</u> provides financial assistance for students to enable them to complete their educational goal. Financial assistance consists of federal, state, and college grants, scholarships, tuition waivers, student loans, and student work opportunities. Financial Aid Advisors inform students through financial aid presentations about assistance available and are also available to advise students on an individual basis about eligibility requirements and application processes. The use of online forms and comprehensive information on the Financial Aid Office webpage allows students to access services from off-campus.

Library

The <u>Keith Leftwich Memorial Library</u> is a 108,757 square foot facility which is open nearly 90 hours a week for use by OCCC students, staff, faculty and members of the community. Students have direct access to library holdings of more than 150,000 items that include books, serials, DVDs, CDs, microfiche, maps, videos and online databases. The library provides over 76 computers to access the web based online catalog and tens of thousands of online magazine and newspaper full text articles and citations. The library has nine small-group study rooms for groups of two or more. Students may "Ask a Librarian" questions through chat/text/phone or use the numerous online resources and video tutorials.

OKC-GO

<u>OKC-GO</u> is a program designed to remove some of the financial barriers that might limit a student's ability to succeed in college. The program is exclusive to OCCC and services graduates from Oklahoma City and Western Heights public high schools. Eligible students can attend OCCC tuition free for up to three (3) years or 61 college credit hours. Students have access to learning labs, personal mentoring, and leadership building opportunities.

Records and Graduation Services

The <u>Office of Records and Graduation</u> assists students with services such as enrollment, transcript submission and requests, student ID cards, parking permits, transfer credit evaluation, application for graduation and degree checks. A representative from this office meets with each NUR 2549 class for the purpose of graduation preparation. Graduation evaluations are conducted at the beginning of the semester on all students and a report sent to the student, course team leader, and the Nursing Program Director.



This allows the student time to clear up any deficiencies or missing documentation that would otherwise delay graduation.

Recreation and Fitness

<u>Recreation and Fitness</u> aims to provide access to recreation, fitness, and aquatic facilities and programs that will aid in the development of healthy lifestyles and foster a life-long devotion to fitness. Recreation and Fitness is responsible for offering a large variety of non-credit classes, special events and activities on and off campus. They also manage the OCCC world class Aquatic Center, which hosts a number of national, regional and state swimming and diving events, as well as a variety of national and state aquatic conferences and training programs. The pool was built in 1989 as a host site for the U.S. Olympic Festival and since then has held some of the world's finest swimming and diving events.

Recreation and Fitness offer non-credit class such as spinning, pilates, yoga, and land or water aerobics, swimming, diving, SCUBA, and weight training. OCCC hosts a variety of water safety certification programs, and provides non-credit training in First Aid, CPR, blood borne pathogens and AED courses, many of which help to meet requirements for entrance into the EMS, Nursing, OTA, PTA, and SLPA curricula. They also offer hundreds of classes and camps for children each year as well as adult basketball and volleyball leagues. A comprehensive intramural sports program is available to OCCC students in sports such as flag football, volleyball, softball, and basketball. Additionally, students have the opportunity to join the club soccer team which competes with numerous other state and private college teams.

Recruitment and Admissions

The <u>Office of Recruitment and Admissions</u> assists students with admission information and requirements for regular College admission, transfer procedures, application procedures for health programs, International application and procedures, concurrent high school enrollment, and non-degree seeking opportunities. OCCC provides all current and prospective students, parents, and others with information about the College's academic programs, student services, student rights, and student responsibilities. A list of subjects with summary information can be found on the College webpage through the <u>Disclosure of Information</u> list. This list serves to assist students in the identification of subjects of interest and the office that should be contacted to access information and reports to enable students to make informed decisions about OCCC.

Scholarships

Multiple opportunities for scholarship funding are available to students enrolled in our programs. Oklahoma City Community College offers numerous <u>scholarships</u> for current and prospective students. Some of the scholarships that are awarded by OCCC are tuition waivers that will pay for some or all of tuition but do not pay for fees. Some cash scholarships are also available that can be used for other expenses such as fees and books. Information pertaining to scholarship opportunities can be accessed online.

SMART

Single Mothers Academic Resource Teams was created through a grant from the Women's Foundation of Oklahoma. <u>SMART</u> is committed to helping single parents obtain a GED, complete a Certificate of Mastery or obtain a degree at OCCC. Parents who enroll in the SMART Program will complete an educational plan of action and will be provided emotional and educational support as they balance school, work and family schedules.



Student Life

The <u>Student Life Office</u> operates within the fundamental principles of student development theory in order to provide a variety of programs and services that support students in their pursuit of a successful higher education experience. Programs and services offered include Service Learning, New Student Orientation, campus activities, <u>student clubs</u>, and co-curricular leadership activities and events.

The nursing program works closely with the staff of Student Life. The nursing program initiated a service learning requirement for each course in the fall of 2005. Information concerning the guidelines for this requirement and the grading rubric are available in each course syllabus. In the fall of 2013, the service learning requirement was revised to be more in line with current trends, connect the service to the nursing curriculum, and increase student engagement and thoughtful reflection. Implementation started with NUR 1519 in the fall and will be phased in over the next two years to include all courses.

Testing and Assessment

Entry level assessment and academic testing are offered in the <u>Test Center</u>. The Test Center's hours alter in accordance with the academic year's situation and correspond to the Enrollment and Student Services hours of operation. The Test Center offers CLEP examinations, entrance testing, TOEFL testing, TEAS testing, ACT testing, Accuplacer testing, and GED testing.

Transfer Center

The goal of the <u>OCCC Transfer Center</u> is to help students choose the university that is right for them, get connected to their chosen university, and to get the answers they need to make the transfer easier. They strive to meet these goals through transfer fairs, university tours, one-on-one meetings and the expansion of resources. The Transfer Center website has many links to resources, opportunities, and checklists designed to help with the transfer process.

Trio Programs

The Federal <u>TRIO Programs</u> are educational opportunity outreach programs designed to motivate and support students from disadvantaged backgrounds. TRIO includes six outreach and support programs targeted to serve and assist low-income, first-generation college students, and students with disabilities to progress through the academic pipeline from middle school to post baccalaureate programs. TRIO also includes a training program for directors and staff of TRIO projects and a dissemination partnership program to encourage the replication or adaptation of successful practices of TRIO projects at institutions and agencies that do not have TRIO grants

Veterans Office

OCCC provides a full-time <u>Veterans Affairs Office</u> to assist students who are eligible to receive educational benefits from the Department of Veterans Affairs. All degree plans offered by OCCC have been approved by the State Accrediting Agency for payment of federal benefits. The OCCC Veterans Affairs Office processes enrollment certifications for an estimated 575 to 775 students each semester.

The OCCC Veterans Affairs Office will certify enrollment for payment of VA Educational Benefits for all students who meet eligibility criteria as set forth by the Department of Veterans Affairs. Enrollment certification is also completed for students eligible for REPS (Restored Entitlement Program for Survivors) and for students eligible for CHAMPVA (the VA Civilian Health and Medical Program).



In addition to the services outlined in Table 3.4.1, OCCC has a variety of <u>learning labs and centers</u> which can be accessed online. Table 3.4.2 below lists these important resources:

Learning Lab/Center	Website	Personnel
		Myra Decker, M.S.
Accounting Lab	http://www.occc.edu/business/accountinglab.html	Coordinator
Biological Sciences		Virginia Hovda, M.Ed.
Center	http://www.occc.edu/sm/biologylab.html	Supervisor
		Fabiola Janiak-Spens, Ph.D.
Biotechnology Lab	http://www.occc.edu/biotech/index.html	Director
Child Development Center		Mary McCoy, Ph.D.
and Lab School	http://www.occc.edu/childdev/	Director
		Brandon Isaak, B.A.
Communications Lab	http://www.occc.edu/comlab/	Acting Supervisor
		Greg Holland, Ph.D.
Engineering Lab	http://www.occc.edu/engr/engineeringlab.html	Director
		Julian Hilliard, M.S.
Human Anatomy Lab	http://www.occc.edu/science/index.html	Professor of Biology
		Christine Peck A.S.
Math Lab	http://www.occc.edu/sm/mathlab.html	Supervisor
		Michael Boyle, M.M.
Music Lab	none	Coordinator
		Ronna Austin, B.A.
Newswriting Lab	http://pioneer2010.occc.edu/	Lab Assistant
Nursing Campus Clinical		Cindy Milam, MS, RN
Laboratory	http://www.occc.edu/nccl/	Coordinator
		Betty Higgins, M.S.
Physical Science Center	http://www.occc.edu/sm/physicallab.html	Supervisor
		Yuthika Kim, M.A.
	http://www.occc.edu/socialscience/psychology-	Jeff Anderson, Ph.D.
Psychology Lab	lab.html	Coordinators
Speech Lab	http://www.occc.edu/ah/speech-lab.html	Julie Corff, M.A.
		Gary Dominguez, A.A.S.
Student Computer Center	http://www.occc.edu/it/scc.html	Supervisor
World Languages and		Chiaki Troutman, M.A.
Cultures Center	http://www.occc.edu/world/index.html	Coordinator

 Table 3.4.2:
 Learning Labs and Centers

The Learning Labs and Centers most frequently utilized by students within the nursing program are described below.

Child Development Center

The <u>OCCC Child Development Center</u> assists students in reaching their highest academic potential through their student scheduled child care program. This program is structured to meet the needs of students requiring child care while attending classes at OCCC. Students schedule a semester-long reservation for each of their children. The reservation guarantees placement for the child while the student is attending class. A pre-enrollment process provides the Center with all the necessary information required by state licensing and national accreditation systems when caring for young children. Children from six (6) weeks to eight (8) years of age are accepted for three to four hour blocks of time at a reasonable cost to students.



Communications Laboratory

In keeping with Oklahoma City Community College's mission of intellectual growth and development, the <u>Communication Laboratory's</u> mission is to be the best and most effective communications resource for OCCC students and faculty and to foster a community of academic writers and thinkers. The laboratory's goal is to provide laboratories that reinforce and strengthen language skills in the context of: resource materials, peer tutoring, writing workshops, professional mentoring, and cultural awareness. The laboratory offers a comfortable, student-centered atmosphere for learning and discussion.

Additional resources through the communications laboratory includes online tutoring, tutor facilitated study groups, ESL conversation groups, instructional handouts and writing workshops. Online resources include links to cover topics such as grammar, research, literature sites, online writing laboratories, reference sites and writing.

Math Lab

The <u>Math Lab</u> is located in the Science, Engineering and Math Center and provides free services intended to supplement mathematics learning for college students. Help is available with any math course or for solving mathematical problems. Nursing students are frequently referred to the math lab for additional assistance with dosage calculation problems.

Criterion 3.5: Student educational records are in compliance with the policies of the governing organization and state and federal guidelines.

Oklahoma City Community College Office of Registrar is responsible for maintaining and archiving all student records. As detailed in <u>OCCC Policy No. 3044</u>, Archives and Records Disposition, the college complies with the Rules and Regulations of the Archives and Records Commission.

OCCC adheres to the Family Educational Rights and Privacy Act (FERPA) of 1974. The privacy and confidentiality of all student records are preserved at all times pursuant to OCCC policies. OCCC uses Colleague, a software owned by Elllucian, to facilitate the academic process in areas such as: enrollment, transcripts, grade reports, and billing. Storage of these computerized records is maintained by the Computer Services Department under the guidance of Enrollment Management. Access to student records maintained on Colleague is limited to individuals with a valid user name and password assigned by the Information and Instructional Technology Services. Full access to Colleague is only available within the Information Technology Department. Back-up is performed daily on Colleague and most network files, while some of the files have back-up performed three times weekly.

Students have the right to view their records upon request following the designated process. Students must submit their request in writing and specify their needs. The college will coordinate access to records as soon as possible but no later than 45 days. Students will be notified of the time and place their records can be viewed.

Students at OCCC have the right to request an amendment to their records if they feel they are inaccurate, misleading or in violation of the student's right to privacy under FERPA. The student must submit in writing and clearly identify the portion they want rectified. If the request is denied, the student will be informed of that decision in writing and will then be advised of the right to a hearing regarding their request.



Under the guidelines of FERPA the student also has the right to consent to the release of personal, identifiable information from the student's educational record which can involve a third party. The student must submit this request in writing as well. Students also have the right to file a complaint with the U.S. Department of Education concerning allegations of OCCC not complying with FERPA if they feel this is the case.

Records of nursing students, graduates, and those eligible for readmission are kept in the Health Professions Division office within a locked, secure area. Student files are kept for 2 years post-graduation. Confidentiality is preserved with all records at all times. Faculty members have access to these files as well as staff who handle maintenance. In addition, health records of students are stored in an online database which has limited access for those staff members requiring access as a part of their job position. After graduation, OCCC archives student records on a permanent basis in compliance with state and federal guidelines. The records are maintained as outlined in the *Guidelines for Student Record Maintenance* (Exhibit 3.5A).

In summary, OCCC complies with the policies of the institution and state and federal guidelines. The educational rights and privacy procedure of OCCC is published in the institutional policies and procedures manual and is available upon request in the Office of the Dean of Admissions/Registrar.

Criterion 3.6: Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained, including default rates and the results of financial or compliance audits.

The Dean of Student Financial Support Services, Harold Case, M.Ed. confirms that OCCC is in compliance with Higher Education Reauthorization Act Title IV eligibility and certification requirements. In discussions with Mr. Case, he states OCCC has had clean audits the past two years as reported in the most recent *Financial Statements with Independent Auditors' Reports* (Exhibit 3.6A).

OCCC has experienced an upward trend in the Student Ioan default rate, a trend in which Mr. Case contributes to the change in the way the rate is now calculated. Mr. Case states OCCC is not at risk for penalties due to the default rate. The two year default rate is currently at 18.3. The three year default rate calculation is expected to be 26.2. Additional information concerning the default rate can be found in the *Cohort Default Rate History List* (Exhibit 3.6B). OCCC was granted continued eligibility to participate in the Federal Student Financial Aid Programs through December 31, 2018 as outlined in the *U.S. Department of Education Eligibility and Certification Approval Report* (Appendix H).

3.6.1 A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.

The OCCC Financial Aid Office has written procedures and consumer information for students on loan information, online loan counseling, and monitoring student loan debt. OCCC participates in Federal Direct Loans in which the Government is the lender and therefore we utilize their online services. Mr. Case states there is cooperation with the Government lenders. OCCC does not advocate or promote the use of private loans and therefore has very little interaction with lenders outside the U.S. Department of Education.

Financial Aid information is available to students in the <u>2013-2014 OCCC Catalog</u>, <u>2013-2014 OCCC Catalog</u>, <u>2013-2014 OCCC Student Handbook</u>, on the <u>College Financial Aid website</u> and through <u>Fact</u> <u>Sheets</u> available in the Financial Aid Office and online.



OCCC participates in the following Federal/State Student Financial Assistance Programs: Grants/Work/Veterans:

- Bureau of Indian Affairs (BIA) Tribal Grants
- Federal Direct Parent Loan for Undergraduate Students (PLUS)
- Federal Direct Stafford Student Loan (Subsidized)
- Federal Direct Stafford Student Loan (Unsubsidized)
- Federal Pell Grant
- Federal Supplemental Educational Opportunity Grant (SEOG)
- Federal Work-Study (FWS) Employment
- National Guard Tuition Waiver Program
- Oklahoma Higher Learning Access Program (OHLAP) Oklahoma's Promise
- Oklahoma Tuition Aid Grant (OTAG) Program
- Veterans Services

Additional financial assistance is available through the OCCC Foundation Scholarship Program. The OCCC Foundation is a privately funded nonprofit that offers OCCC student scholarships throughout the year. Information on <u>available scholarships</u> and application requirements can be found online and through the office of Recruitment and Admissions. Current scholarship opportunities can be found in Exhibit 3.6.1A.

3.6.2 Students are informed of their ethical responsibilities regarding financial assistance.

Extensive consumer information requirements for students and prospective students requires the College to address a wide range of financial aid topics in a formal way. Students are informed of their ethical responsibilities regarding financial assistance through individual email notification at the beginning of each term, in the <u>2013-2014 OCCC</u> <u>Catalog</u>, the <u>2013-2014 OCCC Student Handbook</u>, and on the <u>Financial Aid website</u>. Right to Know Disclosure Notifications are also placed in the <u>2013-2014 OCCC College Catalog</u>, 2013-2014 OCCC Student Handbook, and <u>2014 OCCC Spring Class Schedule</u> publication (Exhibit 3.6.2A). Award notifications are delivered through email and include information pertaining to these disclosures.

Financial Aid Advisors are available to meet with students who attend Oklahoma City Community College. Students are informed of their responsibilities in regard to financial assistance through information available in the Financial Aid Office. Students who participate in Federal Loan Programs complete mandatory entrance and exit counseling.

3.6.3 Financial aid records are maintained in compliance with the policies of the governing organization, state, and federal guidelines.

The Financial Aid Office is available to advise and assist all OCCC students with financial aid and has confirmed that the records are mostly imaged and retrievable. Hard copy records are maintained in compliance with state and federal government guidelines as well as OCCC procedures. The Financial Aid Office maintains student financial aid records for a minimum of three years from the end of the award year. All student financial aid files are confidential, kept in a locked office and are maintained only by members of the College staff hired for that purpose.



Criterion 3.7: Records reflect that program complaints and grievances receive due process and include evidence of resolution.

OCCC is responsible in providing an environment where people can study and learn. To maintain such an environment, procedures have been developed to protect the rights, health, and safety of students, staff, and faculty. The OCCC Nursing Program follows due process of complaints and grievances as documented in the OCCC Student Handbook. If a student believes than an action has been taken against him or her by a member of the college staff that misrepresents a policy or a procedure and/or violates the student's rights to education, the student may request that the action be reviewed by following the Student Grievance Procedures outlined in the <u>2013-2014 OCCC Student Handbook</u>, Section V, (pp. 43-44).

Grievances or concerns on matters related to the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973 should be brought to the attention of the Office of Student Support Services. Students who feel they have been discriminated against on the basis of race, color, national origin, sex, age, religion, handicap, disability or status as a veteran should refer to Section VI, Complaints of Discrimination, Sexual Harassment, and Sexual Offences of the *2013-2014 OCCC Student Handbook* (pp. 48-54).

A student who believes a final grade in a course was incorrectly administered may appeal that grade. Students must meet with the instructor who assigned the final grade and attempt to resolve the matter. If that meeting does not result in resolution, the student is counseled to initiate the grade appeal process as outlined in the *2013-2014 OCCC Student Handbook* (pp. 42-43).

The nursing program has had two formal grade appeals; one in 2011 and another in 2013. In both cases the final grade was upheld following an appeal hearing conducted by the Grade Appeal Committee. The Grade Appeal Committee is comprised of eight faculty, one from each of the academic divisions, who have been elected by the faculty in the respective divisions, not to include the instructor involved in the case. The Grade Appeal Committee also includes three students selected by the Vice President for Enrollment and Student Services. The documentation of the appeal process and final determination is maintained in the Office of Academic Affairs.

Criterion 3.8: Orientation to technology is provided, and technological support is available to students.

OCCC provides orientation to technology through the Success in College and Life courses (SCL 1001 or SCL 1003) which are required for all new students and should be taken during the first semester of college work. Additional orientation to <u>online student resources</u> can be found on the College webpage. Here resources to help determine a student's online readiness and how to navigate within the online course management system (Moodlerooms) are available. Access to a <u>Moodlerooms Student Survival Guide</u> can be found online and printed if needed. Information concerning how to setup a student email account, technology support for email and MineOnline, and information on understanding copyright can also be found on the <u>student services</u> page of the online student resources.

The nursing program offers an additional orientation to technology during the NUR 1519 orientation to the BADNAP and traditional pathways as well as during the NUR 2539 career ladder pathway orientation. Library personnel are available to give the students a tour of the library and provide information on how to access and retrieve information necessary to complete required classroom assignments. Students are also



introduced to the online learning systems used throughout the nursing program such as Evolve, Assessment Technologies Institute (ATI), and safeMedicate®. The HPS/Nursing Laboratory Coordinator provides orientation to all new students on operation of the various technologies provided in the laboratory setting and resources available in the nursing computer laboratory as well as provides each with a copy of the *HPS/Nursing Laboratory Guidelines* (Exhibit 3.8A). These guidelines are also available on the campus laboratory online course management system (Moodlerooms) for easy access and referral. The nursing program arranges for student orientation to all electronic medical record systems used in the various clinical agencies. The amount of access provided to students is dictated by the clinical facility and varies from one institution to another in the degree to which students can participate in the documentation process.

Technology support for students is available Monday through Friday from 7:00 am to 5:00 pm by calling 405-682-7777 or through the <u>online course support center</u> Monday through Friday from 9:00 am to 9:00 pm (Central) by calling 1-888-998-6028. Additionally, the online course support center offers email support and chat support with a site consultant 7 days a week twenty-four hours a day.

Criterion 3.9: Information related to technology requirements and policies to distance education are accurate, clear, consistent and accessible.

OCCC Nursing Program does not offer distance education at this time.



STANDARD 4: CURRICULUM

The curriculum supports the achievement of the identified student learning outcomes and program outcomes of the nursing education unit consistent with safe practice in contemporary healthcare environments.

Criterion 4.1: The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning outcomes and program outcomes consistent with contemporary practice.

The OCCC nursing curriculum was developed by faculty and reflects the College's mission and goals as well as the program's mission, philosophy and organizing framework and is firmly rooted in the principles of adult education. The major concepts of the organizing framework are derived from the program's mission and philosophy, provide organizational direction for attaining the program outcomes, and are representative of the basic assumptions and beliefs of the nursing faculty. The major concepts include: Client, Environment, Health, Nursing, and Nursing Education. These concepts form the foundation for the program's educational outcomes (student learning outcomes/role-specific graduate competencies) that culminate in the attainment of program achievement outcomes and successful transition into nursing practice.

Further strengthening curricular integrity are the integrating concepts of caring, clinical reasoning, and communication which are viewed as core components of all nursing practice and are apparent throughout the curriculum. Professional standards and competencies derived from nursing and health organizations such as the American Nurses Association, the National League for Nursing, the Oklahoma Board of Nursing, the National Council for State Boards of Nursing, and the Quality and Safety Education for Nurses initiative were utilized in the development of the curricular directives, to include the program educational outcomes (student learning outcomes/role-specific graduate competencies).

The curriculum is planned to ensure that graduates develop the essential knowledge, skills, and attitudes to meet professional role expectations to provide safe, quality nursing care within complex healthcare systems. Quality and safety competencies are incorporated into the curriculum as are the four major client needs utilized to organize the NCLEX-RN test plan. The curricular directives and concepts of client care used to organize the program content can be viewed in the document room within the *Nursing Program Curriculum Notebook* (Exhibit 1.1E) and in the *2013-2014 OCCC Nursing Student Handbook* (Exhibit 1.1D).

The organizing framework model represents the inter-relationship of the major concepts and the client needs and the reciprocal impact that all have on the client. Change in one area impacts functioning (positively and negatively) in all areas. The model can be viewed in the <u>NSH</u> and in the document room within the *Nursing Program Curriculum Notebook*.

Concepts of client care are organized within the client needs categories of the NCLEX-RN test plan and the additional category of professional role expectations and include the competencies inherent to safe, quality, client-centered care. The concepts of client care determine the sequence and scope of the content and guide the teaching/learning experiences.

The nursing program educational outcomes (student learning outcomes/role-specific graduate competencies) are clear and concise and flow from the program's mission, philosophy, and organizing framework and are reflective of professional standards, guidelines, and competencies. Table 4.1.1



identifies specific professional standards, competencies, and client needs categories used to develop the program curriculum. Table 4.1.2 identifies the relationship between the program and course outcomes to the major concepts and core components of the program curriculum, ANA Standards, QSEN competencies, and the Client Needs categories of the NCLEX-RN Test Plan.

The program educational outcomes (student learning outcomes/role-specific graduate competencies) are as follows:

Graduates of this program will be skilled practitioners who demonstrate the following:

- 1. Apply the nursing process in practice using clinical reasoning and decision-making competencies, communication competencies, and nursing skills which include technology and informatics necessary for safe, quality, and evidence-based practice in contemporary healthcare systems.
- 2. Collaborate effectively with others in assessing, analyzing, planning, providing, and evaluating clientcentered care within complex healthcare systems.
- 3. Practice safe, quality nursing care within healthcare teams in a caring manner to meet the multidimensional needs of clients, whether individual, family, groups, or community.
- 4. Act in accordance with an understanding of and commitment to professional role expectations, which include the values, ethics, legalities, and standards for entry-level nursing practice.

The nursing program achievement outcomes document the program's effectiveness and are reported as statistical data for each cohort yearly. The nursing program achievement outcomes are as follows:

- 1. Seventy percent (70%) or greater of students will complete the program within a period of six semesters (traditional program and baccalaureate to associate degree nurse accelerated pathways) and four semesters (career ladder pathway).
- 2. Graduates will perform at or above the national average pass rate on the NCLEX-RN licensure exam.
- 3. Eighty percent (80%) or greater of graduates seeking employment will obtain an entry-level position within six (6) months after graduation.
- 4. Ninety percent (90%) or greater of graduates responding to graduate surveys will report overall satisfaction with the program.
- 5. Ninety percent (90%) or greater of employers responding to employer surveys will report that graduates are adequately prepared for entry level practice.



ANA Standards of Practice	OSEN Competencies	NCSBN Client Need Categories
Standard 1 - Assessment The registered nurse collects comprehensive data pertinent to the healthcare consumer's health and/or situation.	Patient-Centered Care Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs. <u>KSA's viewable here</u>	Safe and Effective Care Environment The nurse promotes achievement of client outcomes by providing and directing nursing care that enhances the care delivery setting in order to protect clients and health care personnel.
Standard 2 – Diagnosis The registered nurse analyzes the assessment data to determine the diagnosis or the issues.	Teamwork and Collaboration Function effectively within nursing and inter- professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.	Health Promotion and Maintenance The nurse provides and directs nursing care of the client that incorporates the knowledge of expected growth and development principles, prevention and/or early detection of health problems, and strategies to achieve optimal health.
Standard 3 – Outcomes Identification The registered nurse identifies expected outcomes for a plan individualized to the healthcare consumer or the situation.	Evidence-Based Practice Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.	Psychosocial Integrity The nurse provides and directs nursing care that promotes and supports the emotional, mental and social well-being of the client experiencing stressful events, as well as clients with acute or chronic mental illness.
Standard 4 – Planning The registered nurse develops a plan that prescribes strategies and alternatives to attain expected outcomes.	Quality Improvement Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.	Physiological Integrity The nurse promotes physical health and wellness by providing care and comfort, reducing client risk potential and managing health alterations.
Standard 5 – Implementation The registered nurse implements the identified plan.	Safety Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.	

Table 4.1.1: Professional Standards/Competencies/Client Need Categories

ANA Standards of Practice	QSEN Competencies	NCSBN Client Need Categories
Standard 5A – Coordination of Care	Informatics	
The registered nurse coordinates care delivery.	Use information and technology to communicate,	
	manage knowledge, mitigate error, and support	
	decision making.	
Standard 5B – Health Teaching and Health Promotion		
The registered nurse employs strategies to promote health and		
a safe environment.	-	
Standard 6 – Evaluation		
The registered nurse evaluates progress toward attainment of		
outcomes.	-	
Standard 7 – Ethics		
The registered nurse practices ethically.	-	
Standard 8 – Education		
The registered nurse attains knowledge and competence that		
reflects current nursing practice. Standard 9 – Evidence-Based Practice and Research	4	
The registered nurse integrates evidence and research findings.		
Standard 10 – Quality of Practice	-	
The registered nurse contributes to quality nursing practice.		
Standard 11 – Communication	-	
The registered nurse communicates effectively in a variety of		
formats in all areas of practice.		
Standard 12 – Leadership		
The registered nurse demonstrates leadership in professional		
practice setting and the profession.		
Standard 13 – Collaboration		
The registered nurse collaborates with the healthcare		
consumer, family, and others in the conduct of nursing practice.		
Standard 14 – Professional Practice Evaluation		
The registered nurse evaluates her or his own nursing practice		
in relation to professional practice standards and guidelines,		
relevant statutes, rules, and regulations.		
Standard 15 – Resource Utilization		
The registered nurse utilizes appropriate resources to plan and		

ANA Standards of Practice	QSEN Competencies	NCSBN Client Need Categories
provide nursing services that are safe, effective, and financially responsible.		
Standard 16 – Environmental Health The registered nurse practices in an environmentally safe and healthy manner.		

	Major Concepts	Core Components of Nursing	Client Needs	<u>QSEN</u>
	Client: CI	Caring: C	Physiological Integrity: PI	Teamwork & Collaboration: TC
	Environment: E	Communication & Documentation: COM	Psychosocial Integrity: PSI	Client Centered Care: CCC
	Health: H	Clinical Reasoning: CR	Safe & Effective Care Environment: SECE	Evidence-Based Practice: EBP
p		-	Health Promotion/Maintenance: HPM	Quality Improvement: QI
egend				Safety: S
Le	Professional Role Exp	pectations: PRE		Informatics: I

Table 4.1.2: Program/Course Outcomes Across the Curriculum

Category	OCCC Nursing Program Educational Outcomes (SLO's/Role-Specific Graduate Competencies)	NUR 1519 Course Outcomes	NUR 1529 Course Outcomes	NUR 2539 Course Outcomes	NUR 2549 Course Outcomes
Program Educational Outcome/ Course Outcome #1	Apply the nursing process in practice using clinical reasoning and decision-making competencies, communication competencies, and nursing skills which include technology and informatics necessary for safe, quality, and evidence-based practice in contemporary healthcare systems.	Use the nursing process and beginning level clinical reasoning skills which include basic skills in informatics and technology to provide safe, quality basic care for clients in assigned healthcare systems.	Apply the nursing process with increasing effectiveness in the areas of clinical reasoning and decision-making skills, communication competencies, and nursing skills which include technology and basic informatics to provide safe, quality care for clients in assigned healthcare systems.	Apply the nursing process with increasing effectiveness in the areas of clinical reasoning and decision-making skills, communication competencies, and nursing skills which include technology and informatics to provide safe, quality care for clients in assigned healthcare systems.	Apply the nursing process in practice using clinical reasoning and decision-making competencies, communication competencies, and nursing skills which include technology and informatics necessary for safe, quality practice in contemporary healthcare systems.
Major Concepts	CL,E, H	CL, E	CL, H, E	CL, H, E	CL, H, E
Core Components of Nursing	CR, COM	CR	CR, COM	CR, COM	CR, COM
Client Needs	PI, PSI, SECE	PI, PSI, SECE	PI, PSI, SECE	PI, PSI, SECE	PI, PSI, SECE
QSEN	EBP, S, I, QI	S, I, QI	EBP, S, I, QI	EBP, S, I, QI	EBP, S, I, QI
Professional Role					
Expectations	PRE		PRE		PRE
ANA Standards	1-5, 5a, 6, 9-11, 15-16	1-5, 5a, 6, 16	1-5, 5a, 6, 9-11, 16	1-5, 5a, 6, 9-11, 15-16	1-5, 5a, 6, 9-11, 15-16

Category	OCCC Nursing Program Educational Outcomes (SLO's/Role-Specific Graduate Competencies)	NUR 1519 Course Outcomes	NUR 1529 Course Outcomes	NUR 2539 Course Outcomes	NUR 2549 Course Outcomes
Program Educational Outcome/ Course Outcome #2	Collaborate effectively with others in assessing, analyzing, planning, providing, and evaluating client-centered care within complex healthcare systems.	Use basic therapeutic communication and collaborative techniques to promote optimal health for each assigned client.	Use therapeutic communication techniques with increasing effectiveness to provide client-centered and collaborative care in assigned complex healthcare systems.	Collaborate effectively with others in assessing, analyzing, planning, providing, and evaluating client- centered care within the assigned complex healthcare systems.	Collaborate effectively with others in assessing, analyzing, planning, providing, and evaluating client- centered care within complex healthcare systems.
Major Concepts	CL,E, H	CL, H	CL, E	CL, E	CL, E
Core Components of Nursing	CR, COM	СОМ	CR, COM	CR	CR
Client Needs	PI, PSI	PI, PSI	PI, PSI	PI, PSI	PI, PSI
QSEN	TC, CCC	TC, CCC	TC, CCC	TC, CCC	TC, CCC
ANA Standards	1-5, 5a, 6, 11, 13, 16	11,13	11,13,16	1-5, 5a, 6, 11, 13, 16	1-5, 5a, 6, 11, 13, 16
Program Educational Outcome/ Course Outcome #3	Practice safe, quality nursing care within healthcare teams in a caring manner to meet the multi-dimensional needs of clients, whether individual, family, group or community.	Perform safely and effectively all nursing skills in the course, including integration of technology.	Practice safe, quality nursing care in a caring manner to meet the multi-dimensional needs of clients in assigned complex healthcare systems.	Practice safe, quality nursing care within healthcare teams in a caring manner to meet the multi-dimensional needs of clients in the assigned complex healthcare systems.	Practice safe, quality nursing care within healthcare teams in a caring manner to meet the multi-dimensional needs of clients, whether individual, family, group, or community.
Major Concepts	CL, E, H	CL	CL, E, H	CL, E, H	CL, H
Core Components	С	С	С	С	С
Client Needs	PI, PSI, SECE, HPM	PI, PSI, SECE	PI, PSI, SECE, HPM	PI, PSI, SECE, HPM	PI, PSI, SECE, HPM
QSEN	TC, CCC, S, QI	CCC, S	CCC, S, QI	TC, CCC, S, QI	TC, CCC, S, QI
Professional Role					
Expectations	PRE	PRE	PRE	PRE	PRE
ANA Standards	5b, 10, 13, 15, 16	16	5b, 10, 15-16	5b, 10, 13, 15, 16	5b, 10, 13, 15, 16

Category	OCCC Nursing Program Educational Outcomes (SLO's/Role-Specific Graduate Competencies)	NUR 1519 Course Outcomes	NUR 1529 Course Outcomes	NUR 2539 Course Outcomes	NUR 2549 Course Outcomes
Program Educational Outcome/ Course Outcome #4	Act in accordance with an understanding of and commitment to professional role expectations, which include the values, ethics, legalities, and standards for entry-level nursing practice.	Act in accordance with a developing awareness of professional role expectations, values, ethics, legalities and standards for nursing practice in all course learning situations whether classroom, online, campus laboratory settings, or clinical agencies.	Act in accordance with an increasing understanding of personal accountability for compliance with professional role expectations consistent with the values, ethics, legalities, and standards for nursing practice.	Act in accordance with an increasing level of personal accountability for compliance with professional role expectations consistent with the values, ethics, legalities, and standards for nursing practice.	Act in accordance with professional role expectations, including the values, ethics, legalities, and standards for nursing practice.
Professional Role Expectations	PRE	PRE	PRE	PRE	PRE
ANA Standards	7, 8, 10, 12, 14, 15	7, 8, 10, 14	7, 8, 10, 14, 15	7, 8, 10, 12, 14, 15	7, 8, 10, 12, 14, 15

Criterion 4.2: The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.

With direction from the Nursing Curriculum Committee, all faculty teams participate in tracking and reviewing their courses to assure and verify that the curriculum is organized around the program educational outcomes (student learning outcomes/role-specific graduate competencies). The curriculum flows from the program's philosophy and organizing framework and the program educational outcomes (student learning outcomes/role-specific graduate competencies) to the course outcomes as outlined in Table 4.2.1.

Course theory, clinical, and campus laboratory objectives were developed from the course outcomes and are leveled from simple to complex increasing in complexity from NUR 1519 to NUR 2549. The course outcomes are the foundations for measuring student success in each course. Instruction, learning activities, and all evaluation processes in theory, campus laboratory, and clinical are interrelated and were developed to achieve mastery of the course, as well as, program educational outcomes (student learning outcomes/role-specific graduate competencies). Clinical evaluation tools have been developed for each course, are consistent with the course and program outcomes, and evaluate competencies required for successful course completion.

Table 4.2.2 demonstrates the link between program outcomes, course outcomes, course objectives, and the specific learning activities utilized in the evaluation of those objectives. In addition, the focus of learning and method of evaluation for each course is clearly delineated in the *Nursing Program Curriculum Notebook* and the individual *Course Notebooks* (Exhibits 4.2A-4.2J) available for viewing in the document room.



	Program Educational	NUR 1519 Course Outcomes	NUR 1529 Course	NUR 2539 Course	NUR 2549 Course
	Outcomes		Outcomes	Outcomes	Outcomes
#	(SLO's/Role-Specific				
	Graduate				
	Competencies)				
1	Apply the nursing process in practice using clinical reasoning and decision-making competencies, communication competencies, and nursing skills which include technology and informatics necessary for safe, quality, and evidence-based practice in contemporary healthcare systems.	Use the nursing process and beginning level clinical reasoning skills which include basic skills in informatics to provide safe and quality basic care for clients in assigned healthcare systems.	Apply the nursing process with increasing effectiveness in the areas of clinical reasoning and decision- making skills, communication competencies, and nursing skills which include technology and basic informatics to provide safe and quality care for clients in assigned healthcare systems.	Apply the nursing process with increasing effectiveness in the areas of clinical reasoning and decision- making skills, communication competencies, and nursing skills which include technology and informatics to provide safe and quality care for clients in assigned healthcare systems.	Apply the nursing process in practice using clinical reasoning and decision- making skills, communication competencies, and nursing skills which include the technological and informatics competencies necessary for safe, quality practice in contemporary healthcare systems.
2	Collaborate effectively with others in assessing, analyzing, planning, providing, and evaluating client- centered care within complex healthcare systems.	Use basic therapeutic communication and collaborative techniques to promote optimal health for each assigned client.	Use therapeutic communication techniques with increasing effectiveness to provide client-centered and collaborative care in assigned complex healthcare systems.	Collaborate effectively with others in assessing, analyzing, planning, providing, and evaluating client-centered care within the assigned complex healthcare systems.	Collaborate effectively with others in assessing, analyzing, planning, providing, and evaluating client-centered care within complex healthcare systems.
3	Practice safe, quality nursing care within healthcare teams in a caring manner to meet the multi-dimensional needs of clients, whether individual, family, groups, or	Perform safely and effectively all nursing skills in the course, including integration of technology.	Practice safe, quality nursing care in a caring manner to meet the multi- dimensional needs of clients in assigned complex healthcare systems.	Practice safe, quality nursing care within healthcare teams in a caring manner to meet the multi- dimensional needs of clients in the assigned complex healthcare systems.	Practice safe, quality nursing care within healthcare teams in a caring manner to meet the multi- dimensional needs of clients, whether individual, family, group, or community.

Table 4.2.1: Program Educational Outcomes ((Student Learning Outcomes/Role	Specific Graduate Com	petencies) and Course Outcomes

#	Program Educational Outcomes (SLO's/Role-Specific Graduate Competencies)	NUR 1519 Course Outcomes	NUR 1529 Course Outcomes	NUR 2539 Course Outcomes	NUR 2549 Course Outcomes
	community.				
4	Act in accordance with an understanding of and commitment to professional role expectations, which include the values, ethics, legalities, and standards for entry-level nursing practice.	Act in accordance with a developing awareness of professional role expectations, values, ethics, legalities and standards for nursing practice in all course learning situations, whether classroom, online, campus laboratory settings, or clinical agencies.	Act in accordance with an increasing understanding of personal accountability for compliance with professional role expectations consistent with the values, ethics, legalities and standards for nursing.	Act in accordance with an increasing level of personal accountability for compliance with professional role expectations consistent with the values, ethics, legalities, and standards for nursing practice.	Act in accordance with professional role expectations to include the values, ethics, legalities, and standards for nursing practice.

Objective #	NURSING PROCESS I (TRN) (NUR 1519) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
1	 Explain how basic assumptions and beliefs about the following concepts serve as the foundation of nursing practice: Client Environment Health Nursing Nursing Education 	1	 These concepts are threaded through theory, lab, simulation activities and clinical. Specific attention is paid to these concepts during orientation and clinical orientation. Concepts are specifically discussed in these theory classes: Quality and Safety Initiatives Professional Role Expectations Legal and Ethical Guidelines Teaching and Learning Client-Centered Care (three classes to cover communication, diversity and developmental considerations) Nursing Process Health Promotion Evaluation of the student's knowledge of these concepts is made through theory examination and clinical performance/evaluation.
2	Examine how active involvement of the client, family or significant other(s) can impact the provision of safe, quality, and cost-effective health care.	3	The care planning simulation in NUR1519 includes a family member role; allows students to interact with the family member and to gather information about the client/client care and other input into the plan of care. Evaluation is made during faculty observation and feedback during the activity and/or debriefing period. This content is also threaded throughout theory topics with examination as the evaluative method. This is also a threaded concept for clinical and evaluated through the completion of the clinical assignment and clinical evaluation tool.
3	Determine how diverse cultural, ethnic, and social backgrounds influence client response to acute and chronic illness.	2, 3	NUR1519 has one theory class devoted to diversity and culture. Additionally, these concepts are threaded through all of the subsequent NUR1519 topics. A variety of cultural, religious and ethical topics are discussed in relation

Table 4.2.2: Evaluation Methods by Pathway and Course for Program Educational Outcome Achievement

Objective #	NURSING PROCESS I (TRN) (NUR 1519) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
			to each topic based on identified theory objectives. Cultural and diversity are also included in the clinical preparation (client prep) for consideration in development of the client plan of care. In theory and clinical, international students are encouraged to share life experiences, as it relates to theory content to develop a greater understanding and appreciation for diversity.
4	Utilize the nursing process and beginning level clinical reasoning to meet the client's basic needs in assigned complex healthcare systems.	1, 3	NUR1519 has two theory classes devoted for instruction of the nursing process. Additionally, these concepts are threaded throughout the course. NUR1519 uses simulation to support learning/utilization of the nursing process. This activity includes hands-on assessment, review of the clinical assignment form(s), identification and clustering of client assessment data and formulation of the client's plan of care. The nursing process, including complication anticipation (basic complications) is a focal part of all theory content. Students have the opportunity to practice the nursing process and clinical reasoning at clinical and during other simulation activities as utilized in theory or campus lab. Evaluation of student learning is made through theory examination and through development of the client plan of care in clinical.
5	Apply principles of therapeutic communications when providing safe, quality client-centered care.	1, 2	NUR1519 has one theory class devoted for instruction on therapeutic communication. Additionally, this concept is threaded throughout the course. Therapeutic communication is incorporated/reinforced in theory, laboratory and in clinical. To include appropriate communication techniques for inter-team communication, professional communication, chain-of-command communications and interpersonal use are discussed/reinforced. Evaluation of student learning is made through theory examination, clinical performance evaluation, simulation activities and through development of

Objective #	NURSING PROCESS I (TRN) (NUR 1519) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
			the client plan of care in clinical.
6	Employ teaching and learning skills and techniques to promote optimal client health.	2, 3	NUR1519 has one theory class devoted to health promotion. Additionally, this concept is threaded through all of the subsequent NUR1519 topics. Clinical assignments include a teaching component/requirement. Evaluation of student learning is made through theory examination, clinical performance evaluation, simulation activities and through development of the client plan of care in clinical.
7	Apply knowledge of growth and development when providing safe, quality client-centered care.	2, 3	NUR1519 has one theory class devoted to normal growth and development. Additionally, this concept is threaded through all of the subsequent NUR1519 topics. Some content relating to basic age-related changes and considerations may be included. Clinical assignments include evaluation of the client's developmental stage and accomplishment of associated tasks. Evaluation of student learning is made through theory examination and through development of the client plan of care in clinical. Students care for clients of a variety of ages during clinical (e.g. school screenings, LTC and hospital rotation)
8	Relate knowledge of health promotion and maintenance to the delivery of safe, quality, client-centered care.	2, 3	NUR1519 has one theory class devoted to health promotion and maintenance. Additionally, this concept is threaded through all of the subsequent NUR1519 topics. Clinical assignments include a HP&M section to allow the students opportunity to address client specific HP&M care. Evaluation of student learning is made through theory examination and through development of the client plan of care in clinical.
9	Identify the roles and impact of all members of the interdisciplinary healthcare team in the delivery of safe, quality, client-centered care.	2, 3	Students enrolled in NUR1519 have opportunities to observe and interact with many members of the interdisciplinary team (e.g. rehabilitation units). Emphasis is placed on the importance of the interdisciplinary team in all theory classes (e.g. effective communication, SBAR, collaborative

Objective #	NURSING PROCESS I (TRN) (NUR 1519) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
10	Provide safe, quality, nursing care utilizing principles of evidence-based practice.	1	interventions, identification of appropriate referral resources and processes, etc.) Evaluation of student learning is made through theory examination and through development of the client plan of care in clinical. EBP is incorporated into teaching through theory, textbook adoptions, campus lab/skills, clinical application, and through formation of the clinical assignment.
11	Identify the importance of using information and technology to support safe, quality client- centered care.	1, 3, 4	Assignment. NUR1519 has one theory class devoted to documentation, to include the electronic health record. Additionally, this concept is threaded through all of the subsequent NUR1519 topics. Clinical experiences include accessing the client medical record, orientation to use of the electronic health record and guidelines for protection of client information. Students are able to utilize technology available in the clinical setting (e.g. medication scanning devices, medication dispensing systems, workstations on wheels, etc.) Use of supportive technology devices is also available to students in theory and in campus lab. Evaluation of student learning is made through theory examination, clinical performance evaluation, simulation activities and through development of the client plan of care in clinical.
12	Discuss potential and actual impact of national client safety resources, initiatives, and regulations.	1, 3, 4	NUR1519 has one theory class devoted for instruction on national patient safety resources, initiatives and regulations. Additionally, this concept is threaded throughout the course. Patient safety is incorporated/reinforced in theory, laboratory and in clinical. Evaluation of student learning is made through theory examination, clinical performance evaluation, simulation activities and through development of the client plan of care in clinical.

Objective #	NURSING PROCESS I (TRN) (NUR 1519) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
13	Demonstrate competency in conversions and calculating medication dosages as specified in the NUR 1519 Medication Administration Competency Plan.	1, 3, 4	Students utilize safeMedicate® (Cae Healthcare) to review and test over dosage calculation. Dosage calculation is a component of each theory exam as well. Dosage calculation is a component of any campus laboratory with skills relating to medication administration and competency is again evaluated during final skills demonstration(s).
14	Distinguish basic information regarding uses, considerations, and clinical safety implications for appropriate pharmacological therapies.	1, 3, 4	NUR1519 has one theory class devoted for instruction on the principals of medication administration. Additionally, this concept is threaded through all of the fundamentals of nursing topics (basic information only), campus lab, and clinical. Safe practices and adherence to the principals of safe medication administration is incorporated/reinforced in theory, lab, and clinical. Evaluation of student learning is made through theory examination, clinical performance evaluation, simulation activities, and through development of the client plan of care in clinical.
15	Provide safe, quality basic nursing care that promotes and supports optimal physiological and psychosocial integrity for clients experiencing specified health alterations.	1, 3	This concept is threaded through all of the fundamentals of nursing topics. The provision for safe, quality basic nursing care that supports client physiological and psychosocial integrity for identified health alterations is incorporated/reinforced in theory, lab, and in clinical. Simulation activities and the use of case studies support student learning for these content areas. Evaluation of student learning is made through theory examination, clinical performance evaluation, simulation activities, and through development of the client plan of care in clinical.
16	Perform basic nursing skills safely and effectively, utilizing best practice.	1, 2, 3, 4	This concept is threaded through all of the fundamentals of nursing topics. Performance of basic nursing skills is incorporated/reinforced in theory, lab, and clinical. Simulation activities and the use of case studies support student learning for these content areas.

Objective #	NURSING PROCESS I (TRN) (NUR 1519) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
17	Provide safe nursing care to clients while demonstrating a basic understanding of and commitment to professional role expectations which include the values, ethics, legalities, and standards for nursing practice.	4	 Evaluation of student learning is made through theory examination, clinical performance evaluation, simulation activities and by skills demonstration(s) mid-term and prior to hospital clinical rotation. These concepts are threaded through theory, lab, simulation activities and clinical. Specific attention is paid to these concepts during orientation and clinical orientation. Concepts are specifically discussed in these theory classes: Quality and Safety Initiatives Professional Role Expectations Legal and Ethical Guidelines Teaching and Learning Client-Centered Care (three classes to cover communication, diversity and developmental considerations) Nursing Process Health Promotion Evaluation of the student's knowledge of these concepts is made through

Objective #	NURSING PROCESS II (TRN) (NUR 1529) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
1	Explain how basic assumptions and beliefs about the following concepts serve as the foundation of nursing practice:	1	These concepts are threaded through all theory, laboratory, simulation laboratory and clinical. Specific attention is paid to these concepts in our Orientation to NUR 1529 course and clinical on the first day of class.

Objective #	NURSING PROCESS II (TRN) (NUR 1529) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
	 Client Environment Health Nursing Nursing Education 		In addition some of these concepts are specifically discussed in peri-op and intro to maternal newborn nursing theory classes, as they are the first classes in the two theory components of NUR 1529.
2	Examine how active involvement of the client, family or significant other(s) can impact the provision of safe, quality, and cost-effective health care.	3	Our OB simulation laboratory includes a lesbian couple in labor and delivery. The simulation includes the role of the wife of the labor patient who feels ignored by the healthcare team. In debriefing we discuss the importance of involving all members of the patient's family and respect for diversity. It is also discussed that fear of discrimination is a major barrier to access to care for this and other populations.
3	Determine how diverse cultural, ethnic, and social backgrounds influence client response to acute and chronic illness.	2, 3	NUR 1529 has a global project where students chose a topic that is covered in theory and compare the typical American treatment/viewpoint with another country or culture in a 2-minute in class presentation. All students, especially international students are encouraged to share relative life experiences, as it relates to theory content to develop a greater understanding and appreciation for diversity. A variety of cultural, religious and ethical topics are discussed in relation to women's health including abortion and contraceptives as well as assistive reproductive technology.
4	Utilize the nursing process and beginning level clinical reasoning to meet the client's basic needs in assigned complex healthcare systems.	1, 3	The nursing process, including complication anticipation is a focal part of all theory content. Students have the opportunity to practice the nursing process and clinical reasoning at clinical and in Simulation Lab.
5	Apply principles of therapeutic communications when providing safe, quality client-centered care.	1, 2	Therapeutic communication is discussed in theory specifically when it comes to discussing sexuality including erectile dysfunction, sexually transmitted infections and sexual histories. Therapeutic communication is practiced in clinical as well as in Medical Surgical Simulation Lab and OB Simulation Lab.

Objective #	NURSING PROCESS II (TRN) (NUR 1529) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
6	Employ teaching and learning skills and techniques to promote optimal client health.	2, 3	Students have a clinical teaching assignment in both their MS and OB clinical. The assignment includes providing an EBP article and practicing patient teaching.
7	Apply knowledge of growth and development when providing safe, quality client-centered care.	2, 3	Growth and development is threaded throughout the course content including symptom, diagnostic, and treatment (including medication) differences. In addition, age specific risk factors and recommended vaccines are also discussed. Students care for clients of a variety of ages in clinical to include each student assigned to care for a newborn client.
8	Relate knowledge of health promotion and maintenance to the delivery of safe, quality, client-centered care.	2, 3	Health Promotion and Maintenance is also threaded into all theory content. Patient teaching with vaccinations using Nipit modules is a class assignment. Clinical paperwork includes a HP&M section to allow the students opportunity to address client specific HP&M care.
9	Identify the roles and impact of all members of the interdisciplinary healthcare team in the delivery of safe, quality, client-centered care.	2, 3	Many of our students have clinical rotations on units that involve many members of the interdisciplinary team, for example Rehab. The importance of the interdisciplinary team is threaded throughout theory content. Examples include working with PT and OT for a joint replacement client, and the use of SBAR to communicate with all members of the team.
10	Provide safe, quality, nursing care utilizing principles of evidence-based practice.	1	EBP articles are incorporated into many of our theory presentations. We continue to update our textbooks to make sure our students have the most recent and accurate information. We also have the EBP teaching assignment in clinical where students have to gather an EBP article and present appropriate patient teaching for that topic. Evaluation of faculty also includes use of EBP as an evaluation objective. Skills checklists are updated to reflect best practices.
11	Identify the importance of using information and technology to support safe, quality client-	1, 3, 4	Students have an opportunity to access electronic health records at most of our clinical facilities.

Objective #	NURSING PROCESS II (TRN) (NUR 1529) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
	centered care.		Technology is discussed very specifically in NP2 in our safety med-surg class, including the importance of scanning medications. The nursing campus laboratory is in the process of completing a medication scanning system for the students to be able to use in simulation. Additionally, students have an Electronic Fetal Heart Rate Monitoring workshop before attending OB clinical.
12	Discuss potential and actual impact of national client safety resources, initiatives, and regulations.	1, 3, 4	In NUR 1529 there is a three hour theory class over safety. During this class concepts that have been introduced earlier in the program, such as National Patient Safety Goals, are specifically discussed again with regard to overall client safety and the roles nurses play in preventing client injury. A students ability to perform safely is on the of the evaluation criteria in their Clinical Evaluation Tool.
13	Demonstrate competency in conversions and calculating medication dosages as specified in the NUR 1519 Medication Administration Competency Plan.	1, 3, 4	Starting spring 2014 NP2 students will be using safeMedicate® for their dosage calculation competency. This program has proven effective in not only teaching and evaluating the math of dosage calculation but also the safety of medication administration. Dosage calculation questions are included on all theory exams.
14	Distinguish basic information regarding uses, considerations, and clinical safety implications for appropriate pharmacological therapies.	1, 3, 4	Pharmacologic safety is threaded throughout the course content. Medications, including their safety are discussed concurrently with the corresponding theory content. Students are required to have reviewed and be familiar with client medications before they are allowed to administer in the clinical setting.
15	Provide safe, quality basic nursing care that promotes and supports optimal physiological and psychosocial integrity for clients experiencing specified health alterations.	1, 3	Students practice safe quality client care at clinical and in Simulation Lab. Their ability to perform these skills at clinical is included in their Clinical Evaluation Tool. In the simulation laboratory students are often put in situations that are challenging and errors do often occur. The debriefing period of simulation provides the opportunity for faculty to support student discovery of how they could have optimized client safety and success. Students have

Objective #	NURSING PROCESS II (TRN) (NUR 1529) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
			reported real clinical experiences that were optimized due to experiences they had encountered in simulation.
16	Perform basic nursing skills safely and effectively, utilizing best practice.	1, 2, 3, 4	Care of clients with course specific conditions are discussed in theory, as well as being covered in campus laboratory and simulation. Students have opportunities to care for clients with many conditions in the clinical setting. Their ability to perform safely, use of best practice, and willingness to request help when needed are evaluated in the Clinical Evaluation Tool. Students have IV insertion, IV medication administration, and phlebotomy skills check-offs in NUR 1529. In addition students are required to perform skills in the simulation laboratory setting including skills covered in NUR 1519.
17	Provide safe nursing care to clients while demonstrating a basic understanding of and commitment to professional role expectations which include the values, ethics, legalities, and standards for nursing practice.	4	Students have the opportunity to practice caring for clients while demonstrating appropriate professionalism during clinical and simulation laboratory. Professionalism is an area of evaluation on the Clinical Evaluation Tool.

Objective #	NURSING PROCESS III (TRN) (NUR 2539) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
1	Examine how the program's basic assumptions and beliefs about client, environment, health, and nursing relate to client-centered care for clients with more complex medical-surgical and psychiatric/mental health care health alterations.	1, 2, 3, 4	Discussion and class activity emphasis on holistic care, enhanced psychosocial intervention, and nurse self-awareness of attitudes/potential bias in caregiving to certain populations. OCCC Nursing Student Handbook review; ANA standards and OBN statement reviews; class discussion; test items
2	Explore barriers to involvement of the client, families and significant others in providing client-centered care.	2, 3	Discussion and activities emphasis on cultural/social stigma and gender identification barriers. Case studies; clinical activities; test items
3	Analyze the influences of client culture, ethnicity, values and preferences when providing client-centered care for those experiencing more complex medical-surgical and psychiatric/mental health alterations.	1, 2, 3	Discussion/activities focus on diversity and cultural sensitivity/preferences. Global assignment includes Skype session with international healthcare provider. Clinical activities, test items, study module(s)
4	Utilize the nursing process and clinical reasoning with increasing proficiency to meet the multi-dimensional needs of clients in assigned complex healthcare systems.	1, 2, 3	Discussion/activities include planning and intervention concerns with homeless, incarcerated, and vulnerable populations. Power point presentations, class activities, clinical post-conference, care planning, skills laboratory, test items
5	Integrate effective communication and teaching skills/techniques to contribute to safe, quality client-centered care in assigned clinical experiences.	1, 2, 3	Advanced therapeutic communication focus in discussion/activities, process recording, and group leadership styles. Mental health lab, class activities, clinical activities, test items
6	Formulate appropriate health promotion and maintenance nursing interventions for clients at risk for or experiencing the specified health alterations.	1, 2, 3	Online immunization modules, smoking cessation in psychiatric populations, PTSD and other stress-related interventions. Class activities, focused HPM content, clinical activities, test items

Objective #	NURSING PROCESS III (TRN) (NUR 2539) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
7	Propose strategies for improving teamwork and collaboration when providing care for clients in the assigned complex healthcare systems.	1, 2, 3	SBAR, handoffs, focus on peer-to-peer civility/professional behavior, two collaborative assignments, one in clinical and one in theory. Class activities, clinical post-conference, care planning, skills laboratory, required group work, test items
8	Utilize evidence-based clinical practice principles when providing care for clients experiencing the specified health alterations.	1, 2, 3, 4	CEU activity required relevant to mental health nursing care and to medical-surgical care in specified course topics. Care planning, EBP assignments (2), clinical activities
9	Examine nursing roles and responsibilities which contribute to continuous quality improvement within complex healthcare systems, including technological enhancements.	1, 3, 4	Utilization of EHR, applicable QSEN competencies include initial discussions of root-cause analysis. Class discussions, clinical activities
10	Analyze nursing roles and responsibilities that contribute to a culture of safety in complex medical-surgical and psychiatric/mental health care systems, including safety enhancing technologies.	2, 3, 4	Discussions/activities include healthcare worker safety in ER and psych- specific environments, and reducing incidence of seclusion/restraint episodes. Topic safety focus, power point presentations, clinical paperwork/care planning, post-conference activities, test items
11	Demonstrate competency in conversions and calculating medication dosages as specified in the NUR 2539 Medication Administration Competency Plan.	1, 3, 4	Clinical medication administration performance. Dosage calculation competency exams, test items on each exam
12	Distinguish basic information regarding uses, considerations, and clinical safety implications for pharmacological therapies appropriate for specified physiological and psychosocial health alterations.	1, 3, 4	Course content, PPTs, online pharmacology tutorial, self-study module, skills lab, clinical activities and paperwork, test items

Objective #	NURSING PROCESS III (TRN) (NUR 2539) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
13	Provide safe, quality nursing care that promotes and supports optimal physiological and psychosocial integrity for clients experiencing specified health alterations.	1, 3	Psychological First Aid simulation training/certification, study modules, skills laboratory and skills check offs. Class discussion/activities, clinical pre and post-conferences, clinical performance, care planning, test items
14	Perform safely and effectively, according to given standards, all specified nursing skills as well as those included in previous nursing courses.	1, 3, 4	Skills lab, skills check-offs, clinical observation by faculty, clinical evaluation tool
15	Act in accordance with an increasing level of personal accountability for compliance with professional role expectations, incorporating appropriate values, ethics, legalities and standards for safe, quality nursing care.	4	Study modules on violence/abuse reporting, peer reporting, peer-to-peer civility. Course content, clinical performance/evaluation, QSEN competency incorporation/activities, ANA/OBN relevant standards review, test items

Objective #	NURSING PROCESS IV (TRN) (NUR 2549) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
1	Synthesize the program's basic assumptions and beliefs about nursing and how each relates to the preparation of graduates who will act in accordance with professional entry level role expectations.	1, 2, 3, 4	Course content, OCCC NSH review, ANA and OBN statement reviews, Clinical post-conference group discussion on leadership attributes of the professional RN: Supervision by leading, inter and intra collaboration with all members of the healthcare team, i.e. subordinates, peers, colleagues, physicians, RT/PT, pharmacy personnel. Students are referred to Career Services in the college for assistance in developing a resume.
2	Propose strategies for empowering clients and families as partners in their healthcare including conflict resolution.	1, 2, 3	Course content, class discussion/activities, test items
3	Recognize the client or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for client choices related to culture, values, beliefs and lifestyle.	1, 2, 3	Power point slides with questions on delegation and prioritization. Online module on disaster nursing. Diversity of staff/patient population, cultural sensitivity Skype session with international healthcare provider (different countries than in NUR 2539)
4	Utilize the nursing process in practice using clinical reasoning and decision-making skills necessary for safe, quality practice in complex healthcare systems.	1	Case studies, unfolding case studies on heart and renal failure.
5	Incorporate teaching and learning strategies to client care, leadership, and managerial roles in complex healthcare systems.	1, 2, 3, 4	Student teach on LVADs/RVADs – internal/external
6	Demonstrate proficient communication and conflict management skills in all client care, including leadership and managerial roles.	1, 2, 4	How to give report – handouts of report structure/SBAR. Narrative Charting Guidelines
7	Synthesize health promotion and maintenance nursing interventions for safe, quality practice in complex healthcare systems.	1, 2, 3	Core Measures – Acute MI, Unstable Angina Core Measures – Heart Failure Patient teaching with vaccinations using nipit modules

Objective #	NURSING PROCESS IV (TRN) (NUR 2549) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
8	Integrate the concepts of management and coordination of care, complex healthcare systems, teamwork and collaboration while providing a safe and effective care environment.	1, 2, 3, 4	In Service – by Respiratory Staff on Ventilators, power point presentation and demonstration (previous semester)
9	Integrate evidence-based practice, clinical expertise, and client preferences and values for delivery of optimal healthcare.	1, 2, 3, 4	HIV clinician from State Health Department with a panel discussion, OU poison control RN utilized for emergent care.
10	Use information and technology to support clinical decision-making and quality improvement strategies.	1, 3, 4	Simulation, blackboard, clickers utilized in the classroom to enhance learning. iPad apps utilized in classroom, laboratory and simulation settings.
11	Examine essential knowledge, skills, and attitudes necessary for a culture of safety in complex healthcare systems.	2, 3, 4	Test items, laboratory and simulation
12	Demonstrate competency in conversions and calculating medication dosages as specified in the NUR 2549 Medication Administration Competency Plan.	1, 3, 4	Dosage calculation competency exams and items on each unit exam.
13	Distinguish basic information regarding uses, considerations, and clinical safety implications for pharmacological therapies appropriate for specified physiological and psychosocial health alterations.	1, 3, 4	Handout - AHA Cardiac Drugs Handout – Article "Beware of Beta Blockers" Handout – Article "Calcium Channel Blockers: In the Slow Lane" Handout – Article "An Ace Up Your Sleeveand an ARB in Your Back Pocket Just In Case" (Angiotensin-converting enzyme inhibitors and angiotensin receptor blockers) Handout – Article "A look at standard medications for LVSD"
14	Provide safe, quality nursing care that promotes and supports optimal physiological and psychosocial integrity for clients	1, 2, 3	Laboratory skills, simulation, test items, pathophysiology study guide used in clinical

Objective #	NURSING PROCESS IV (TRN) (NUR 2549) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
	experiencing specified health alterations.		
15	Perform safely and effectively, according to given standards, all specified nursing skills as well as those included in previous nursing courses.	1, 3, 4	Laboratory skills, simulation, test items
16	Act consistently in accordance with professional role expectations to include the values, ethics, legalities, and standards for nursing practice.	4	Leadership activities, QSEN competency, OBN/ANA standards. Core Competencies.

Objective #	NURSING PROCESS I (BADNAP) (NUR 1519) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
1	Explain how basic assumptions and beliefs about the following concepts serve as the foundation of nursing practice: Client Environment Health Nursing Nursing Education	1	These concepts are introduced in theory through case studies, quizzes, and modules. In lab, students participate in simulation and learn skills related to a safe environment, education of the patient, and health promotion.
2	Examine how active involvement of the client, family or significant other(s) can impact the provision of safe, quality, and cost-effective health care.	3	These concepts are learned through modules and case studies.
3	Determine how diverse cultural, ethnic, and social backgrounds influence client response to acute and chronic illness.	2, 3	One class is devoted to diversity and culture. Additionally, these concepts are threaded through all of the subsequent NUR1519 topics. A variety of cultural, religious and ethical topics are discussed in relation to each topic based on identified theory objectives. Cultural and diversity are also included in the clinical preparation (client prep) for consideration in development of the client plan of care.
4	Utilize the nursing process and beginning level clinical reasoning to meet the client's basic needs in assigned complex healthcare systems.	1, 3	Students complete care plans in the clinical setting using the nursing process. They also complete the Evidence-based Practice article assignment to learn more about specific disease processes.
5	Apply principles of therapeutic communications when providing safe, quality client-centered care.	1, 2	The clinical evaluation tool is used to assess the student's ability to communicate in the clinical setting. Professional behavior is reinforced in the classroom through modeling and study of professional, legal, and ethical topics.
6	Employ teaching and learning skills and techniques to promote optimal client health.	2, 3	Clinical assignments include a teaching component/requirement. Evaluation of student learning is made through theory examination, clinical performance evaluation, simulation activities, and through

Objective #	NURSING PROCESS I (BADNAP) (NUR 1519) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
			development of the client plan of care in clinical.
7	Apply knowledge of growth and development when providing safe, quality client-centered care.	2, 3	Course content; Test items; Clinical performance and paperwork
8	Relate knowledge of health promotion and maintenance to the delivery of safe, quality, client-centered care.	2, 3	Community health practice is conveyed through discharge teaching in the clinical setting. Preventive health practice is examined through theory and practiced in the clinical setting.
9	Identify the roles and impact of all members of the interdisciplinary healthcare team in the delivery of safe, quality, client-centered care.	2, 3	Students are exposed to different roles in the clinical setting including, the respiratory therapist, physician, nurse leaders, CNA's and AUA's. Students are often invited to accompany the wound nurse and the PIC line nurse as they care for patients.
10	Provide safe, quality, nursing care utilizing principles of evidence-based practice.	1	Students are required to present an EBP article in post-conference in the clinical setting.
11	Identify the importance of using information and technology to support safe, quality client-centered care.	1, 3, 4	Students are introduced to the electronic healthcare record in the campus laboratory. They also learn to navigate the patient record online in the hospital.
12	Discuss potential and actual impact of national client safety resources, initiatives, and regulations.	1, 3, 4	Clinical pre and post-conferences; Course content; Test items
13	Demonstrate competency in conversions and calculating medication dosages as specified in the NUR 1519 Medication Administration Competency Plan.	1, 3, 4	safeMedicate® : students are required to pass a medication exam every semester in order to progress from one process to the next. There are also drug calculation problems on each exam.
14	Distinguish basic information regarding uses, considerations, and clinical safety implications for appropriate pharmacological therapies.	1, 3, 4	Students are assigned a module regarding the Josie King story and must submit a paper on safe patient care. They are also tested in campus laboratory on the 6 rights when administering medication.
15	Provide safe, quality basic nursing care that promotes and supports optimal physiological	1, 3	This concept is threaded through all of the fundamentals of nursing topics.

Objective #	NURSING PROCESS I (BADNAP) (NUR 1519) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
	and psychosocial integrity for clients experiencing specified health alterations.		The provision for safe, quality basic nursing care that supports client physiological and psychosocial integrity for identified health alterations is incorporated/reinforced in theory, campus laboratory and in clinical. Simulation activities and the use of case studies support student learning for these content areas. Evaluation of student learning is made through theory examination, clinical performance evaluation, simulation activities and through development of the client plan of care in clinical.
16	Perform basic nursing skills safely and effectively, utilizing best practice.	1, 2, 3, 4	Students are checked off in the campus laboratory for basic skills. They are also observed in the clinical setting completing a head to toe assessment by the clinical instructor. They are evaluated by the clinical instructor with the clinical evaluation tool, which assesses for professional behavior, safety, and best practice.
17	Provide safe nursing care to clients while demonstrating a basic understanding of and commitment to professional role expectations which include the values, ethics, legalities, and standards for nursing practice.	4	 These concepts are threaded through theory, lab, simulation activities, and clinical. Specific attention is paid to these concepts during orientation and clinical orientation. Concepts are specifically discussed in these theory classes: Quality and Safety Initiatives Professional Role Expectations Legal and Ethical Guidelines Teaching and Learning Client-Centered Care (three class to cover communication, diversity and developmental considerations) Nursing Process Health Promotion

Objective #	NURSING PROCESS I (BADNAP) (NUR 1519) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
			Evaluation of the student's knowledge of these concepts is made through theory examination and clinical performance/evaluation.

Objective #	NURSING PROCESS II (BADNAP) (NUR 1529) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
1	Explain how basic assumptions and beliefs about the following concepts serve as the foundation of nursing practice: Client Environment Health Nursing Nursing Education	1	These concepts are introduced in theory through case studies, quizzes, and modules. In lab, students participate in simulation and learn skills related to a safe environment, education of the patient, and health promotion.
2	Examine how active involvement of the client, family or significant other(s) can impact the provision of safe, quality, and cost-effective health care.	3	Students participate in simulation activities involving precipitous delivery, newborn care, alternative lifestyles, and reproduction. Vaccination is promoted which decreases the risk of contracting vaccine preventable diseases.
3	Determine how diverse cultural, ethnic, and social backgrounds influence client response to acute and chronic illness.	2, 3	Global presentation; service learning; EBP articles Simulations covering pre-operative and post-operative hemorrhage
4	Utilize the nursing process and beginning level clinical reasoning to meet the client's basic needs in assigned complex healthcare	1, 3	The nursing process, including complication anticipation is a focal part of all theory content. Students have the opportunity to practice the nursing process and clinical reasoning at clinical and in the simulation laboratory.

Objective #	NURSING PROCESS II (BADNAP) (NUR 1529) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
	systems.		EBP article assignment
5	Apply principles of therapeutic communications when providing safe, quality client-centered care.	1, 2	Therapeutic communication is threaded through theory, campus laboratory, simulations, and clinical experiences.
6	Employ teaching and learning skills and techniques to promote optimal client health.	2, 3	Teaching assignment in OB and med-surg; patient teaching activity for newborn care; patient teaching with vaccinations (nipit module)
7	Apply knowledge of growth and development when providing safe, quality client-centered care.	2, 3	Growth and development is threaded throughout the course. NUR 1529 focuses on newborn care in OB along with age appropriate health promotion activities such as vaccinations, well child checkups, environmental safety, etc.
8	Relate knowledge of health promotion and maintenance to the delivery of safe, quality, client-centered care.	2, 3	Health promotion and maintenance is also threaded into all theory content. Clinical paperwork includes a HP&M section to allow the students opportunity to address client specific HP&M care.
9	Identify the roles and impact of all members of the interdisciplinary healthcare team in the delivery of safe, quality, client-centered care.	2, 3	Students work with rehab, PT and OT in clinical. Respiratory therapist presents at post-conference if available. SBAR is stressed in all situations as the way to communicate with all members of the team.
10	Provide safe, quality, nursing care utilizing principles of evidence-based practice.	1	EBP is utilized throughout theory content. Students present an EBP article in post-conference both for OB and med-surg. Experts in their field are brought in to class to discuss best practice (neonatal nurse practitioner, optometrist)
11	Identify the importance of using information and technology to support safe, quality client-centered care.	1, 3, 4	Students in simulations have access to electronic drug databases. EHR's are accessed in the clinical setting. EFM workshop is attended before OB clinical.
12	Discuss potential and actual impact of national client safety resources, initiatives, and regulations.	1, 3, 4	The following topics are utilized in theory, simulations, and campus laboratory for client safety: National Patient Safety Goals, Root Cause Analysis, Sentinel Events, QSEN, IOM, Joint Commission, Robert Woods Johnson Foundation
13	Demonstrate competency in conversions and calculating medication dosages as	1, 3, 4	safeMedicate® was initiated June 2013, Math questions are placed on exams

Objective #	NURSING PROCESS II (BADNAP) (NUR 1529) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
	specified in the NUR 1519 Medication Administration Competency Plan.		
14	Distinguish basic information regarding uses, considerations, and clinical safety implications for appropriate pharmacological therapies.	1, 3, 4	Medication safety is included in all simulations. Exams incorporate pharmaceuticals and side effects of medication.
15	Provide safe, quality basic nursing care that promotes and supports optimal physiological and psychosocial integrity for clients experiencing specified health alterations.	1, 3	Students are evaluated with the clinical evaluation tool, participate in post-conference, and physiological and psychosocial components are in assessed in care plan.
16	Perform basic nursing skills safely and effectively, utilizing best practice.	1, 2, 3, 4	Students have nasogastric tube insertion, IV insertion, IV medication administration, and phlebotomy skills check-offs in NUR 1529.
17	Provide safe nursing care to clients while demonstrating a basic understanding of and commitment to professional role expectations which include the values, ethics, legalities, and standards for nursing practice.	4	Students have the opportunity to practice caring for clients while demonstrating appropriate professionalism during clinical and simulations. Professionalism is an area of evaluation on the Clinical Evaluation Tool. Ethics and legality are threaded throughout the course.

Objective #	NURSING PROCESS III (BADNAP) (NUR 2539) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
1	Examine how the program's basic assumptions and beliefs about client, environment, health, and nursing relate to client-centered care for clients with more complex medical-surgical and psychiatric/mental health care health alterations.	1, 2, 3, 4	Discussion and class activity emphasis on holistic care, enhanced psychosocial intervention, and nurse self-awareness of attitudes/potential bias in caregiving to certain populations. OCCC Nursing Student Handbook review; ANA standards and OBN statement reviews; class discussion; test items
2	Explore barriers to involvement of the client, families and significant others in providing client-centered care.	2, 3	Emphasis on cultural/social stigma and gender identification barriers. Psychiatric modules; psychiatric simulations;
3	Analyze the influences of client culture, ethnicity, values and preferences when providing client-centered care for those experiencing more complex medical-surgical and psychiatric/mental health alterations.	1, 2, 3	Global presentation; EBP articles; Blood Administration and cultural beliefs;
4	Utilize the nursing process and clinical reasoning with increasing proficiency to meet the multi-dimensional needs of clients in assigned complex healthcare systems.	1, 2, 3	Students evaluated on clinical evaluation tool; post-conference discussion and activity; Discussion/activities include planning and intervention concerns with homeless, incarcerated, and vulnerable populations. Care planning; skills laboratory and simulation laboratory; test items
5	Integrate effective communication and teaching skills/techniques to contribute to safe, quality client-centered care in assigned clinical experiences.	1, 2, 3	Students work across the profession with multiple disciplines; SBAR report; mental health lab; class activities and discussions; test items
6	Formulate appropriate health promotion and maintenance nursing interventions for clients at risk for or experiencing the specified health alterations.	1, 2, 3	Service learning assignment; class activities; focused HPM content; Clinical activities; test items

Objective #	NURSING PROCESS III (BADNAP) (NUR 2539) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
7	Propose strategies for improving teamwork and collaboration when providing care for clients in the assigned complex healthcare systems.	1, 2, 3	Diabetes educator presentation; Class activities, clinical post-conference, care planning, skills laboratory, required group work, test items
8	Utilize evidence-based clinical practice principles when providing care for clients experiencing the specified health alterations.	1, 2, 3, 4	Course content; EBP articles; Clinical activities and planning of care
9	Examine nursing roles and responsibilities which contribute to continuous quality improvement within complex healthcare systems, including technological enhancements.	1, 3, 4	Applicable QSEN competencies include initial discussions of root-cause analysis. Clinical activities; post-conference presentations and discussions; Utilization of EHR
10	Analyze nursing roles and responsibilities that contribute to a culture of safety in complex medical-surgical and psychiatric/mental health care systems, including safety enhancing technologies.	2, 3, 4	Pediatric simulation; med-surg and mental health modules; Case studies; course content; test items; clinical and post-conference activities
11	Demonstrate competency in conversions and calculating medication dosages as specified in the NUR 2539 Medication Administration Competency Plan.	1, 3, 4	Clinical medication administration performance. safeMedicate®; test items on each exam
12	Distinguish basic information regarding uses, considerations, and clinical safety implications for pharmacological therapies appropriate for specified physiological and psychosocial health alterations.	1, 3, 4	Simulations incorporating medication safety; Course content, classroom and laboratory activities; Clinical activities and care planning; test items

Objective #	NURSING PROCESS III (BADNAP) (NUR 2539) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
13	Provide safe, quality nursing care that promotes and supports optimal physiological and psychosocial integrity for clients experiencing specified health alterations.	1, 3	Course content; class discussion/activities; clinical pre and post- conferences; clinical performance; test items
14	Perform safely and effectively, according to given standards, all specified nursing skills as well as those included in previous nursing courses.	1, 3, 4	Skills laboratory; skills check-offs; clinical performance; Clinical Evaluation Tool
15	Act in accordance with an increasing level of personal accountability for compliance with professional role expectations, incorporating appropriate values, ethics, legalities and standards for safe, quality nursing care.	4	Study modules on violence/abuse reporting, peer reporting, peer-to-peer civility. Clinical performance/evaluation; QSEN activities in the classroom; AA/OBN relevant standards; test items

Objective #	NURSING PROCESS IV (NUR 2549) (BADNAP) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
1	Synthesize the program's basic assumptions and beliefs about nursing and how each relates to the preparation of graduates who will act in accordance with professional entry level role expectations.	1, 2, 3, 4	Students are assigned a leadership module. They are also asked to prepare a cover letter and a resume in anticipation of entry into the nursing profession. Attend a required Board of Nursing meeting.

Objective #	NURSING PROCESS IV (NUR 2549) (BADNAP) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
2	Propose strategies for empowering clients and families as partners in their healthcare including conflict resolution.	1, 2, 3	Course content; class discussion/activities; test items
3	Recognize the client or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for client choices related to culture, values, beliefs and lifestyle.	1, 2, 3	The Oklahoma Organ Sharing spokesperson gives a presentation to the class. Diversity of staff/patient population and cultural sensitivity; Power point slides with questions on delegation and prioritization
4	Utilize the nursing process in practice using clinical reasoning and decision-making skills necessary for safe, quality practice in complex healthcare systems.	1	Clinical activities and paperwork
5	Incorporate teaching and learning strategies to client care, leadership, and managerial roles in complex healthcare systems.	1, 2, 3, 4	Clinical activities; Pre and post-conference discussions
6	Demonstrate proficient communication and conflict management skills in all client care, including leadership and managerial roles.	1, 2, 4	Students are asked to give report utilizing SBAR format in the clinical setting. Class discussion/activities; test items
7	Synthesize health promotion and maintenance nursing interventions for safe, quality practice in complex healthcare systems.	1, 2, 3	Core Measures – Acute MI, Unstable Angina Core Measures – Heart Failure
8	Integrate the concepts of management and coordination of care, complex healthcare systems, teamwork and collaboration while providing a safe and effective care environment.	1, 2, 3, 4	In Service – by Respiratory Staff on Ventilators

Objective #	NURSING PROCESS IV (NUR 2549) (BADNAP) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
9	Integrate evidence-based practice, clinical expertise, and client preferences and values for delivery of optimal healthcare.	1, 2, 3, 4	Students present an EBP article in clinical post-conference.
10	Use information and technology to support clinical decision-making and quality improvement strategies.	1, 3, 4	Students participate in a code blue simulation with the human patient simulator (HPS).
11	Examine essential knowledge, skills, and attitudes necessary for a culture of safety in complex healthcare systems.	2, 3, 4	Test items; Simulations and case studies
12	Demonstrate competency in conversions and calculating medication dosages as specified in the NUR 2549 Medication Administration Competency Plan.	1, 3, 4	Students are required to pass a medication calculation test in each process to pass the course. They also have dosage calculation questions on each exam.
13	Distinguish basic information regarding uses, considerations, and clinical safety implications for pharmacological therapies appropriate for specified physiological and psychosocial health alterations.	1, 3, 4	Handout - AHA Cardiac Drugs Handout – Article "Beware of Beta Blockers" Handout – Article "Calcium Channel Blockers: In the Slow Lane" Handout – Article "An Ace Up Your Sleeveand an ARB in Your Back Pocket Just In Case" (Angiotensin-converting enzyme inhibitors and angiotensin receptor blockers) Handout – Article "A look at standard medications for LVSD"
14	Provide safe, quality nursing care that promotes and supports optimal physiological and psychosocial integrity for clients experiencing specified health alterations.	1, 2, 3	Nurse specialists brought into the classroom for presentations on various topics; course content

Objective #	NURSING PROCESS IV (NUR 2549) (BADNAP) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
15	Perform safely and effectively, according to given standards, all specified nursing skills as well as those included in previous nursing courses.	1, 3, 4	Simulation; test items
16	Act consistently in accordance with professional role expectations to include the values, ethics, legalities, and standards for nursing practice.	4	Students are evaluated on the clinical evaluation tool; Leadership module; Course content to include QSEN competencies, OBN/ANA Standards of Care and Core Measures; test items

Objective #	NURSING PROCESS III (NUR 2539) (CLP) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
1	Examine how the program's basic assumptions and beliefs about client, environment, health, and nursing relate to client-centered care for clients with more complex medical-surgical and psychiatric/mental health care health alterations.	1, 2, 3, 4	These concepts are introduced in psych lab in the first week of NUR 2539. They are further reinforced in theory during class discussions. They are evaluated through unit exams. Students complete care plans based on the program's framework.
2	Explore barriers to involvement of the client, families and significant others in providing client-centered care.	2, 3	These concepts are addressed through in class case studies and simulation. They are evaluated through unit exams.

Objective #	NURSING PROCESS III (NUR 2539) (CLP) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
3	Analyze the influences of client culture, ethnicity, values and preferences when providing client-centered care for those experiencing more complex medical-surgical and psychiatric/mental health alterations.	1, 2, 3	Students complete care plans in the clinical setting that address cultural, ethnicity, values and preferences. The care plans are evaluated by clinical faculty using a grading rubric. The students complete online modules through the Office of Minority Health.
4	Utilize the nursing process and clinical reasoning with increasing proficiency to meet the multi-dimensional needs of clients in assigned complex healthcare systems.	1, 2, 3	Students complete care plans in the clinical setting using the nursing process. Clinical faculty evaluates the care plans based on a grading rubric.
5	Integrate effective communication and teaching skills/techniques to contribute to safe, quality client-centered care in assigned clinical experiences.	1, 2, 3	Therapeutic communication is introduced in the psych lab. Students are evaluated through process recordings completed in clinical. Student communication in the clinical setting is evaluated in the clinical evaluation tool. SBAR is used in the classroom.
6	Formulate appropriate health promotion and maintenance nursing interventions for clients at risk for or experiencing the specified health alterations.	1, 2, 3	Students complete <u>nipit</u> online modules. Health promotion and maintenance are included during theory in both lecture and case studies. This is evaluated in unit exams. Students take the ATI Community Health proctored exam.
7	Propose strategies for improving teamwork and collaboration when providing care for clients in the assigned complex healthcare systems.	1, 2, 3	SBAR used with case studies for both physician collaboration and handoff with other healthcare professionals. Students take the ATI Community Health proctored exam.
8	Utilize evidence-based clinical practice principles when providing care for clients experiencing the specified health alterations.	1, 2, 3, 4	Students read evidence-based articles and complete activities with CEU and CME. Students plan evidence-based interventions in care plans in the clinical setting.
9	Examine nursing roles and responsibilities which contribute to continuous quality improvement within complex healthcare systems, including technological enhancements.	1, 3, 4	Utilize iPads in the classroom to research medications and interventions. Students are trained at the clinical agency to use the EHR.

Objective #	NURSING PROCESS III (NUR 2539) (CLP) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
10	Analyze nursing roles and responsibilities that contribute to a culture of safety in complex medical-surgical and psychiatric/mental health care systems, including safety enhancing technologies.	2, 3, 4	Covered in lecture and case studies. Evaluated through exams. Students learn and practice skills (tracheostomy suctioning and care, central line dressing change, blood transfusion, and ostomy care). Evaluated through skills demonstration.
11	Demonstrate competency in conversions and calculating medication dosages as specified in the NUR 2539 Medication Administration Competency Plan.	1, 3, 4	Students utilize practice exams in safeMedicate® to learn skills in dosage calculations. Students are evaluated by passing one of four dosage calculation exams on pediatric dosages. Students are evaluated each unit exam with dosage calculation questions.
12	Distinguish basic information regarding uses, considerations, and clinical safety implications for pharmacological therapies appropriate for specified physiological and psychosocial health alterations.	1, 3, 4	Students complete drug cards in the clinical setting. Clinical faculty evaluate the students' knowledge of medication during the clinical day. Students are evaluated on pharmacology through exam questions. Students are also evaluated using ATI testing, both proctored and online quizzes.
13	Provide safe, quality nursing care that promotes and supports optimal physiological and psychosocial integrity for clients experiencing specified health alterations.	1, 3	Students perform nursing care throughout the day during clinical. This care is evaluated by the clinical faculty.
14	Perform safely and effectively, according to given standards, all specified nursing skills as well as those included in previous nursing courses.	1, 3, 4	Students practice skills in the campus laboratory (tracheostomy care and suctioning, central line care, blood transfusion and ostomy care). Skills are evaluated during skills demonstration. Clinical faculty evaluate skills in the clinical setting.
15	Act in accordance with an increasing level of personal accountability for compliance with professional role expectations, incorporating appropriate values, ethics, legalities and standards for safe, quality nursing care.	4	These are core concepts that students are expected to meet in the classroom, campus laboratory and clinical. This also includes anytime a student represents the college such as during service learning.

Objective #	NURSING PROCESS IV (NUR 2549) (CLP) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
1	Synthesize the program's basic assumptions and beliefs about nursing and how each relates to the preparation of graduates who will act in accordance with professional entry level role expectations.	1, 2, 3, 4	Students are encouraged to prepare a resume with cover letter. Students are referred to Career Services in the college for assistance in developing the resume'.
2	Propose strategies for empowering clients and families as partners in their healthcare including conflict resolution.	1, 2, 3	These concepts are covered in class and case studies/simulations. They are evaluated on unit exams.
3	Recognize the client or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for client choices related to culture, values, beliefs and lifestyle.	1, 2, 3	Students complete care plans that incorporate culture, values, beliefs and lifestyle. Care plans are evaluated by clinical faculty. Client centered care is also covered in theory and evaluated on unit exams. Complete online module from the Office of Minority Health on cultural competence and disaster nursing.
4	Utilize the nursing process in practice using clinical reasoning and decision-making skills necessary for safe, quality practice in complex healthcare systems.	1	Students complete care plans in the clinical setting using the nursing process. Students take the exit ATI Critical Thinking proctored exam.
5	Incorporate teaching and learning strategies to client care, leadership, and managerial roles in complex healthcare systems.	1, 2, 3, 4	Students identify client teaching needs using the NUR 2549 care plan. Client teaching is covered in theory using case studies and evaluated in unit exams.
6	Demonstrate proficient communication and conflict management skills in all client care, including leadership and managerial roles.	1, 2, 4	Students take the ATI Leadership proctored exam. Leadership concepts are covered in theory and evaluated through testing.
7	Synthesize health promotion and maintenance nursing interventions for safe, quality practice in complex healthcare systems.	1, 2, 3	Health promotion and maintenance concepts are covered in theory and evaluated in unit exams.

Objective #	NURSING PROCESS IV (NUR 2549) (CLP) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
8	Integrate the concepts of management and coordination of care, complex healthcare systems, teamwork and collaboration while providing a safe and effective care environment.	1, 2, 3, 4	Students interact with a variety of healthcare professionals in the clinical setting. Students complete a QSEN staff workaround activity. Students participate in a disaster nursing laboratory that incorporates triage.
9	Integrate evidence-based practice, clinical expertise, and client preferences and values for delivery of optimal healthcare.	1, 2, 3, 4	Students validate evidence-based interventions in the care plans completed in the clinical setting. The plans of care are client centered. Client centered care is emphasized in theory through case studies/simulations.
10	Use information and technology to support clinical decision-making and quality improvement strategies.	1, 3, 4	Students complete training for site specific EMR prior to the beginning of clinicals. Students receive training in how to use technology in the clinical setting such as the armband scanner.
11	Examine essential knowledge, skills, and attitudes necessary for a culture of safety in complex healthcare systems.	2, 3, 4	These concepts are covered in theory using case studies and simulation. They are evaluated on unit exams and ATI testing.
12	Demonstrate competency in conversions and calculating medication dosages as specified in the NUR 2549 Medication Administration Competency Plan.	1, 3, 4	Students utilize practice exams in safeMedicate® to learn skills in dosage calculations. Students are evaluated by passing one of four dosage calculation exams. Students are evaluated each unit exam with dosage calc questions.
13	Distinguish basic information regarding uses, considerations, and clinical safety implications for pharmacological therapies appropriate for specified physiological and psychosocial health alterations.	1, 3, 4	Students complete drug cards in the clinical setting. Clinical faculty evaluate the students' knowledge of medication during the clinical day. Students are evaluated on pharmacology through exam questions. Students are also evaluated using ATI testing, both proctored and online quizzes.
14	Provide safe, quality nursing care that promotes and supports optimal physiological and psychosocial integrity for clients experiencing specified health alterations.	1, 2, 3	Students perform nursing care in the clinical setting. This is evaluated by the clinical faculty using the clinical evaluation tool. These concepts are also covered in theory using case studies/simulations. They are evaluated on unit exams.

Objective #	NURSING PROCESS IV (NUR 2549) (CLP) Course Objectives	Associated Program Educational Outcome(s)/ Course Outcome(s)	Activities/Evaluation Methods/Clinical Experiences/Skills Lab Demonstrations
15	Perform safely and effectively, according to given standards, all specified nursing skills as well as those included in previous nursing courses.	1, 3, 4	Students perform nursing skills in the clinical setting. Clinical faculty evaluate this performance based on current texts and the clinical evaluation tool. Skills are also performed and evaluated in simulation.
16	Act consistently in accordance with professional role expectations to include the values, ethics, legalities, and standards for nursing practice.	4	These are core concepts that students are expected to meet in the classroom, campus laboratory and clinical. This also includes anytime a student represents the college such as during service learning.

Criterion 4.3: The curriculum is developed by the faculty and regularly reviewed to ensure integrity, rigor, and currency.

The curriculum of the nursing program has undergone revision since the March 2006 visit for accreditation continuation. In January of 2010, Ms. Myers and Ms. Walker attended the first QSEN Faculty Development Institute in San Antonio, which began the process for curriculum revision. Over the next 12 months, the faculty conducted an in-depth curriculum review, comparing the current curriculum to the QSEN competencies, ANA standards, and the NCLEX-RN test plan. Following this review it was evident that the curriculum needed to be revised to reflect a more comprehensive and cohesive curriculum showing progression, which clearly tied the philosophy and organizing framework to the leveled course and clinical objectives/outcomes, and ultimately to the program educational and achievement outcomes as well as placed increased emphasis on professional standards and guidelines and content representative of contemporary healthcare systems. In the spring and summer of 2011, the faculty sought consultation from the QSEN consultant, Dr. JoAnn Mulready-Schick to assist in the curriculum revision. Over the next year, the curriculum was developed with initial implementation beginning in the fall of 2012. The new curriculum was introduced in the first course of the traditional pathway (NUR 1519) in the fall of 2012, the first course of the BADNAP pathway (NUR 1519) in the summer of 2013, and the first course of the CLP pathway (NUR 2539) in the fall of 2013. The new curriculum will be fully implemented across all courses and all pathways by the spring of 2014.

Review of the curriculum is directed by the SPE and occurs annually in April through the Nursing Curriculum Committee and in May during the NFO Curriculum and Program Evaluation meeting to ensure curriculum integrity, rigor and currency and to evaluate student progress toward achievement of course and program outcomes. The committees ensure that key content is addressed and prior learning is reinforced and that curriculum drift is avoided. No changes to any of the curricular directives can be made without following the approved process for revisions, which includes presentation of the revision request, and supporting evidence to the Nursing Curriculum Committee. Following approval by the Nursing Curriculum Committee and state and national accrediting bodies follows NFO approval if required. A detailed curriculum map reflecting the curricular directives and content of each core course can be viewed in the document room within the *Nursing Program Curriculum Notebook* exhibit

As a result of ongoing review and analysis of the nursing curriculum, the process for utilization of ATI (Assessment Technologies Institute) standardized exams was changed. ATI has been used to supplement the curriculum since the fall of 2006. During the first two years of utilization the faculty explored several options of incorporating the ATI exams into the curriculum. It was determined through exam results and student accounting that students were not utilizing this program as intended. In 2008, the nursing program adopted the policy of utilizing ATI proctored exams for course progression. The exams identified for progression were fundamentals, maternal-newborn, mental health, and the comprehensive predictor. Students had three opportunities to pass at the established benchmark or were required to repeat the course. Faculty believed this practice assisted students in identifying areas of weakness and guided remediation and review efforts. However, in keeping with current recommendations on "high stakes testing", the faculty voted to change the program utilization of the ATI product. We are currently piloting a process whereby the ATI exam counts as 10% of the final grade (from exam scores) in the areas identified above. The *Nursing Course ATI Point Distribution/Required Benchmark* for each course can be viewed as (Exhibit 4.3A). Evaluation of this process will occur at the December 2013 NFO meeting and revisions made as needed.



The nursing faculty believes rigor is a strong component of the OCCC Nursing Program and contributes to the graduate's success. An example of this, the National Council Licensure Examination (NCLEX-RN) data, demonstrates first-time pass rates consistently above the state and national average (with the exception of 2005 and 2006). Both formal and informal feedback from graduates and employers validate that graduates of the OCCC Nursing Program are prepared for employment and are considered strong graduate nurses. The ATI Comprehensive Predictor data demonstrates that the overall group adjusted scores of OCCC students is consistently above the group national means for all students in programs of nursing education as reported in the *ATI Longitudinal Report – Composite Scores* for assessments taken between 1/1/2008 and 9/13/2013 (Exhibit 4.3B).

Curriculum currency is maintained in several ways. Currency of the program content is discussed in the Nursing Advisory Committee and through discussion with clinical partners throughout the year. A copy of our current curriculum map was distributed to all clinical partners in September of 2013 with requests for review. It was through this process that faculty identified a need to include the ANA Safe Patient Handling and Mobility Standards into our NUR 1519 and NUR 2549 courses. In additional, faculty are always exploring new ways to integrate current practice into their courses by attending conferences, journal and text readings, online continuing education opportunities and through graduate studies. Faculty regularly share new ideas during the NFO meetings where a regular agenda item for clinical updates is addressed as well as through mandatory presentations over conference topics upon return from continuing educational opportunities.

Criterion 4.4: The curriculum includes general education courses that enhance professional nursing knowledge and practice.

The support courses for the OCCC Nursing Program are regularly reviewed as directed by the SPE. Each faculty team is assigned general education and/or support courses to ensure foundational content assists in the overall achievement of student learning outcomes.

- NPI Faculty Team Government (POLSC 1113), Anatomy and Physiology I (BIO 1314 or BIO 2255 Human Anatomy)
- NPII Faculty Team English I (ENGL 1113), Principles of Chemistry and Laboratory (CHEM 1123 & CHEM 1131)
- NPIII Faculty Team Developmental Psychology (PSY 2403) and General Chemistry (CHEM 1115)
- NPIV Faculty Team US History (HIST 1483 or 1493) and Anatomy and Physiology II (BIO 1414 or BIO 2234 Human Physiology)
- BADNAP Faculty Team Psychology (PSY 1113) and Microbiology (BIO 2125)
- CLP Faculty Team English II (ENGL 1213) and Nutrition (BIO 1023)
- Biennial (odd years) (initiated AY 2013)
- January-May data collection by Nursing Teams (NT)
- September reviewed by NT
- October reviewed by NCC
- November reviewed by NFO

Each nursing team will review the course description, objectives, and any other supporting documents necessary for a thorough review of the content as outlined in Exhibit 4.4A.



Criteria 4.5: The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives.

Oklahoma City Community College utilizes an open enrollment policy, which increases the likelihood of a more diverse nursing student population. The College serves a diverse student population with representation from 41 states and 67 nations, as well as various ethnic backgrounds acknowledging cultures and ethnic groups in and around our community.

The mission of the Associate Degree Nursing program at Oklahoma City Community College is to provide quality, nursing education to meet the needs of an "increasingly diverse global society." Throughout the nursing program, emphasis is placed on diversity and respect for client choices related to culture, values, beliefs and lifestyle. Course learning objectives are based upon the course outcomes and program educational outcomes (student learning outcomes/role-specific graduate competencies) and provide direction for student learning. Faculty members as well as students are expected to model behavior that shows respect for all individuals regardless of age, gender, race, color, religious beliefs, sexual orientation, disability, or national origin. Cultural concepts are integrated in every course and are presented via lecture and focused activities.

The nursing program also uses other ways to nurture cultural competence. Students complete many clinical experiences at agencies where the patient population is ethnically and socio-economically diverse. Faculty members ensure that all students are given opportunities to work with patients of different ages, genders, religions, and ethnicities whenever possible. Students are exposed to diverse populations during their clinical experiences and are required to address cultural concerns on every clinical record throughout the program. In the fundamentals course, long-term care facilities are utilized for beginning clinical experiences to provide students with an opportunity to develop a perspective on the culture of the elderly. In addition to the clinical setting, laboratory and simulation experiences address cultural variances and how they affect nursing care. The nursing faculty continues to strengthen global nursing perspectives within the curriculum as opportunities arise.

Many students participate in service learning activities such as the OKC Food Bank, Baptist Mission, Infant Crisis Center, and others. These opportunities address the underserved and provide students with an awareness of the various needs of the community.

Nursing students in the traditional program (NUR 2549) communicated with a registered nurse from India in the spring of 2013 and Canada in the fall of 2013 via Skype. This activity provided the students with the opportunity to gain global perspective on health care and healthcare systems. Students were asked to compare and contrast the nursing scope of practice for registered nurses in the United States to that of the selected country. Exhibit 4.5A further displays how the concepts of culture, ethnicity and diversity are addressed in each course.

Criterion 4.6: The curriculum and instructional processes reflect educational theory, interdisciplinary collaboration, research, and best practice standards while allowing for innovation, flexibility, and technological advances.

The OCCC instructional processes are based on Adult Learning Theory (Knowles). Faculty and students work collaboratively to achieve learning outcomes. Nursing education promotes student acquisition of clinical reasoning, ethical decision-making skills, and other nursing competencies, including informatics, which are necessary for safe, quality practice in contemporary healthcare environments. Learning is a lifelong process achieved through multiple approaches and is dependent upon active learner participation



in the process. Nursing faculty serve as resources and role models, foster a climate of intellectual inquiry, and plan, implement, and evaluate varied learning experiences that facilitate student learning.

Evidence-based practice is introduced in the first nursing course and threaded throughout the curriculum. Faculty reference current research and practice throughout all learning environments. Knowles Adult Learning Theory is reflected in the curriculum design of simple to complex when introducing nursing concepts. Evaluation methods, identified in Table 4.2.2, reflect innovative, active learning strategies. High and mid-fidelity simulators are used to facilitate clinical reasoning, application of nursing concepts, and build student confidence and comfort in real-life patient care situations.

Students are encouraged to use prior knowledge and skills in the development of the additional knowledge, skills and attitudes required of an entry-level registered nurse. Students are provided with a variety of learning activities that encourage collaboration and emphasize personal responsibility in learning. Course content is delivered through a variety of methods that incorporate technology including MUSE simulation software, clinical reasoning scenarios, lecture, concept mapping, online discussion, hands-on skill practice and the use of student response systems. Students complete a variety of assignments that require the use of current nursing research and/or evidence-based practice. Examples include professional papers on peer-reviewed articles, completion of a continuing education offering on a global topic and an evidence-based client teach. Examples of student assignments and projects can be viewed in the document room.

OCCC nursing faculty strive to provide optimal learning environments in both the clinical and laboratory settings. Students have the opportunity to work collaboratively with other disciplines such as dietary, respiratory, physical therapy, occupational therapy, and pharmacy through diverse clinical experiences. In NUR 1529, students work closely with the PTA students while studying activity and mobility concerns of clients following joint replacement. The PTA students instruct nursing students on proper techniques of post joint replacement transfers and all students practice communication and teaching/learning techniques.

Students in the NUR 2539 Traditional pathway attended a presentation by a Respiratory Therapist and a licensed Social Worker (speaking on suicide assessment and violence/abuse). Students in NUR 2549 participate in Skype activities with professionals from India and Canada. Students in the CLP routinely attend grand rounds with other professionals such as physical therapists, pastoral care, dieticians, and case managers.

Students in the Career Ladder Pathway had the opportunity to work with patients dealing with drug, alcohol and sexual offenses in clinical experiences at the Veteran's Administration Hospital and St. Anthony's South facility. Communication and collaboration was evident when these students were assigned patients receiving hyperbaric treatments and utilizing specialized monitoring or treatments. Dialogue with the monitor technicians, nurses, physicians, nurse practitioners, physician assistants, dieticians, pastoral care, physical therapist and case managers occurred for patients with Ventricular Assistive Devices (VAD), those confined to a Roto Bed, and patients receiving ventilatory assistance or helium-oxygen therapy.

All nursing students have the opportunity to work and collaborate with students from EMS and PTA when planning the many duties required for the Life Saver 5K and 1 mile Fun Run. This event is held annually in the fall for the purpose of fundraising for student scholarships and charity donations.

A variety of high and mid-fidelity simulation activities also provide students with additional practice in communicating and interacting with other healthcare team members. Simulations are used to facilitate critical thinking, clinical reasoning, application of nursing concepts, and to build student confidence and



comfort in real-life patient care situations. In the clinical setting, students are exposed to a variety of electronic health records and other technologies that are essential to contemporary nursing practice.

Utilizing a dynamic and collaborative curriculum that incorporates current research and technology, faculty are able to provide diverse and meaningful learning opportunities for students that are essential for the entry level professional nurse.

Criterion 4.7: Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes.

The nursing program uses a variety of methods to evaluate student learning. In addition, the nursing program participates in the College wide outcomes assessment process and reports outcome data and evaluation plans annually.

Students are provided a course syllabus each semester as they progress through the nursing program. A NSH is given to students when they enter and annually while in the program. The course description, course outcomes, and course objectives are found in each course syllabus and in the NSH. The syllabus specifies the grading criteria, grading scale, and course requirements. Unit objectives based on the course outcomes and objectives can be found on the College's online course management system of which all students have access. Course theory examinations test content based upon the unit objectives and overall course objectives. Test items may be "multiple-choice" as well as in alternate format such as "select all that apply". Items are constructed within the taxonomy levels of knowledge, comprehension, application, and analysis. The percentage of items from each domain increases as students' progress through the program.

Nursing faculty members evaluate students' performance using criterion-based assessment throughout the program. This is consistent with <u>OCCC Policy No. 4010</u> Competency Based Instruction. Students are provided a set of objectives or criteria upon which all teaching and evaluation is based. Examination consistency with objectives is measured by using a test blueprint to tie each test item to an objective.

Students are evaluated using multiple methodologies. Evaluation methods include presentations, papers, quizzes, homework, exams, service learning activities, and skills laboratory as noted in Table 4.7.1. Theory examinations account for the majority of the overall course grade and as stated previously, students must attain a 74% average on theory exams to pass the course. All additional assignments are included in the course grade if the 74% on theory exams has been achieved.

Table 4.7.1: Evaluation Methods by Course

Assignment	NUR 1519	NUR 1529	NUR 2539	NUR 2549	
Examinations	90%	90%	90%	90%	
Learning activities (includes global					
presentation, meeting					
participation, quizzes, homework)	6%	6%	4.5%	4%	
Skills	Pass/Fail	Pass/Fail	Pass/Fail	Pass/Fail	
Service Learning	4%	4%	4%	4%	
Global Project	Х	Х	1.5%	2%	

Traditional Pathway



BADNAP

Assignment	NUR 1519	NUR 1529	NUR 2539	NUR 2549
Examinations	90%	90%	90%	90%
Skills	Pass/Fail	Pass/Fail	Pass/Fail	Pass/Fail
Service Learning	4%	4%	4%	4%
Global Project/Activities	6%	6%	6%	6%

CLP

Assignment	NUR 2539	NUR 2549
Examinations	90%	90%
Quizzes	3%	3.5%
Activities	2%	1%
Service Learning	4%	4%
Global Project	1%	1.5%

Evaluation methodologies of students learning reflect pre-determined professional practice standards and competencies. Summative evaluation occurs in all program pathways through written examinations. Many of the program's faculty have attended test item-writing workshops and several have written test items for multiple textbook publishers. The clinical evaluation tools reflect national standards of practice, QSEN, and are based on course and program outcomes. These evaluation tools provide a roadmap for faculty to use to evaluate student clinical performance at midterm and final during each clinical course. Clinical evaluation tools are shared with students at the beginning of each semester so they are aware of how they will be evaluated as well as clinical performance expectations.

Although, simulations are primarily used as a learning activity, during spring 2012 simulations were utilized to supplement clinical learning in areas of decreased clinical opportunities such as OB, mental health and critical care. The use of simulation to evaluate student abilities has been incorporated throughout several courses in the program for the purpose of evaluation. Simulations allow faculty to assess progress and point out areas of strengths and weaknesses within the courses and curriculum as a whole. Evaluation of student performance during the simulation scenario and debriefing process provides direction for additional learning needs.

Nursing students are evaluated on caring behaviors, mastery of theory, psychomotor skills, and clinical performance. It is anticipated students will develop increased knowledge and confidence while progressing through the program. Evaluation is a process that flows from one semester to the next, increasing in complexity as students progress.

• Students are evaluated on theory content through paper and pencil testing. Theory exams take into consideration the level of the course and facilitate the progressive movement of students from knowledge/comprehension to application/analysis using Bloom's Taxonomy as illustrated in Table 4.7.2. Each test item is carefully analyzed for performance on the examination using data obtained through ParScore. Analysis of each exam includes all course team members and follows the guidelines for test analysis as outlined by Susan Morrison in her book on *Critical thinking and test item writing*.



Cognitive Level	NUR 1519	NUR 1529	NUR 2539	NUR 2549
1 st	50%	60%	70%	80%
Examination	Application/analysis	Application/analysis	Application/analysis	Application/analysis
Final	60%	70%	80%	90%
Examination	Application/analysis	Application/analysis	Application/analysis	Application/analysis
Mastery Items	Not to exceed 8%			
Pilot Items	Not to exceed 4%			

Table 4.7.2: Progressive Leveling of Cognitive Testing

- Students may be allowed the use of a note card during examinations based on the decision of the teaching team for each individual course. Previously students have been allowed to use note cards that are typed. The faculty members voted spring 2013 to change this practice to handwritten 4x6 index cards for unit exams and handwritten 5x8 index cards for finals.
- Students participate in collaborative testing after each unit examination. Points are added to the unit examination grade based on the group score. Previously students were awarded up to 3% of total examination points. Faculty members voted spring 2013 to change this process to allow collaborative points only when the individual student achieves a passing grade on the unit examination. Students will be awarded a maximum of 2% of total unit examination points for a group score of A and 1% of total unit examination points for a group score of B through collaborative testing.
- Dosage calculation is evaluated using dosage calculation examinations and through questions on each unit examination. Students are required to pass dosage calculation competency exams at a score of 95% or greater prior to the start of clinical experiences. The Math Competency Plan clearly outlines this requirement for students within each course syllabi. safeMedicate® was introduced in BADNAP in the summer of 2013 and CLP and the traditional pathway NUR1519 in the fall of 2013 to aid in evaluating and remediating students in dosage calculation content. This program will replace the faculty written dosage calculation exams and assist in the remediation process. safeMedicate® will be progressively implemented throughout the curriculum until complete implementation occurs in the spring of 2015.
- ATI assessment products are used to enhance student learning and evaluate student progress. The ATI program allows faculty to assess individual student progress and attainment of student learning outcomes as well as evaluate how individual courses and the curriculum prepares students for NCLEX-RN success. Detailed information concerning the administration, remediation, and how ATI contributes to the overall course grade can be found in the syllabus for each respective course. The use of ATI exams throughout the curriculum is delineated in the *ATI Curriculum Alignment Document* and can be viewed in the document room as Exhibit 4.7A. Only those exams listed as final exams contribute to the course grade.
- Data gathered from ATI testing and the NCLEX-RN Program Reports provide valuable information about the overall effectiveness of teaching strategies used in the nursing program.
- Psychomotor skills are evaluated in campus laboratory, simulation, and in the clinical setting. Skills are evaluated using evidence-based criterion.
- Students are evaluated for competence prior to performing the skills in the clinical setting.
- Students are referred to the campus laboratory for remediation and skill evaluation as needed. The campus laboratory allows the student to practice and be evaluated on remediated skills in a safe setting.

The Testing Committee is a sub-committee of NFO and was implemented to provide a systematic process to ensure reliability and validity with all program exams. This committee established *Test Construction and Administration Guidelines* to provide faculty with a format to use for development and administration of exams (Exhibit 4.7B). These guidelines take into consideration the level of the course and use a progressive method of moving students from knowledge/comprehension to application/analysis utilizing Bloom's Taxonomy. Another resource for faculty is distributed in the full-time faculty orientation for new employees and is a comprehensive collection of test item development resources. The *Testing Resources/Faculty Manual* can be viewed in the document room as Exhibit 4.7C.

Grading rubrics and peer review are incorporated throughout the program for evaluation of presentations, service learning projects, clinical projects, and others as outlined in Exhibit 4.7D. The grading rubrics provide students with clear expectations and promote inter-rater reliability among faculty for grading.

Successful completion of a course requires the student to achieve a grade of 74% or higher on theory exams, with the clinical portion of each course graded as Pass/Fail, to progress to the next nursing course. Satisfactory completion of all assignments is a requirement of each course. Students receive clear and timely feedback regarding their progress and academic standing in all nursing courses. Course grades are recorded on the online course management system in which only nursing faculty and the individual student have access.

Clinical performance is evaluated using the clinical evaluation tool. This tool has been developed by faculty and flows from the philosophy, organizing framework, and course and program educational outcomes. Revisions to the tool were made during the curriculum revision to create an assessment tool that more effectively measured the attributes and competencies consistent with the program curriculum.

- The criteria in the clinical evaluation tools reflect national standards of practice, QSEN, and are based on the philosophy, organizing framework, and program and course student learning outcomes.
- Criteria in the clinical evaluation tools are used to provide formative and evaluative feedback to student performance in the clinical setting. Students are evaluated weekly, mid-rotation, and at the end of the clinical rotation utilizing the clinical evaluation tool. Students are graded as *satisfactory, developing,* or *unsatisfactory*. Students experiencing difficulty in achieving the clinical outcomes through the satisfactory modeling of required behavioral criteria are placed on a plan for improvement, which carefully delineates the remediation efforts required to achieve successful completion of the course.
- Clinical faculty members are given a detailed orientation on how to use the clinical evaluation tool at the beginning of each semester. In addition, written and audiovisual instructional resources are provided. Team Leaders from each course evaluate faculty documentation on the clinical evaluation tool during onsite visits.
- Students are made aware of the criteria in the clinical evaluation tool at the beginning of each semester. This is consistent with the College policy of competency-based instruction.
- The criteria in the clinical evaluation tool are used to evaluate student performance in on campus simulations when learning needs are identified.

In summary, the evaluation methodologies utilized to assess student learning and progress throughout the curriculum are varied and reflect established professional and practice competencies. The focus of the faculty continues to be on student learning outcomes and nursing educational theory. The faculty embraces



and welcomes the enhancement of student learning and the achievement of professional competencies and student success.

Criterion 4.8: The length of time and the credit hours required for program completion are congruent with the attainment of identified student learning outcomes and program outcomes and consistent with the policies of the governing organization, state and national Standards, and best practices.

The overall design of the curriculum provides for 74-75 credit hours which consist of 36 nursing course credits and 38-39 general education/support course credits. The increase from a total of 72 credit hours to 74-75 credit hours occurred in 2010 and was a result of replacing APPM 1313 Mathematics for Health Careers with CHEM 1123 Principles of Chemistry and CHEM 1131 Principles of Lab Chemistry (or CHEM 1115 General Chemistry) and replacing BIO 1514 Microbiology of Infectious Disease with BIO 2125 Microbiology. The chemistry course was added to improve compliance with OBN curricular requirements that specify a physical science component. The chemistry requirement also ensures that nursing students have better understanding of physiological concepts such as fluid and electrolyte balances/imbalances. The change in the microbiology course underscores essential principles of pathology as well as the biological requirements and activities of microorganisms. In addition, BIO 2125 is transferrable to other institutions of higher education. The current degree plans can be viewed in the <u>2013-2014 OCCC Catalog</u>, the <u>nursing webpage</u>, in the <u>NSH</u>, and in *Prospective Student Information Letters*.

The changes made to the program hours were approved by the OCCC Curriculum Committee, the OBN, and ACEN (formerly NLNAC). The approval documents are available for review as Exhibit 4.8A.

Required Courses	Total Hours Required	Course	Course Hours
General Education Courses	18	ENGL 1113: English I	3
		ENGL 1213: English II	3
		HIST 1483 or HIST 1493: History	3
		POLSC 1113: Political Science	3
		PSY 1113: Psychology	3
		PSY 2403: Dev. Psychology	3
Life Skills Course	3	BIO 1023: Nutrition	3
Support Courses	17-18	BIO 1314: A & P I	4
		BIO 1414: A & P II	4
		BIO 2125: Microbiology	5
		CHEM 1123/1131: Chemistry OR	
		CHEM 1115: General Chemistry	4-5
Major Courses	36	NUR 1519: Nursing Process I	9
		NUR 1529: Nursing Process II	9
		NUR 2539: Nursing Process III	9
		NUR 2549: Nursing Process IV	9

Table 4.8.1:	Nursing	Program	Curriculum Plan
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Criteria 4.9: Practice learning environments support the achievement of student learning outcomes and program outcomes.

Clinical practice environments and experiences

The Systematic Program Evaluation (SPE) provides for evaluation of clinical facilities by faculty and students each semester (NESA surveys) and through course evaluations. Results of NESA surveys are provided to the clinical facilities for their performance improvement plans. The SPE data are carefully monitored and used for decision-making within the program.

- NESA and the Clinical Hub are utilized to negotiate and schedule clinical rotations for most clinical practice sites.
- Students complete clinical rotations in various clinical practice settings to include assisted living, long-term care (adult and pediatric), community (e.g. schools, health screenings), hospitals (acute medical-surgical, pediatrics and maternal-newborn) and mental health (in-patient and out-patient) facilities.
- Students identify community resources that support patient outcomes through service-learning experiences each semester as required.
- Clinical sites are accredited as appropriate/determined by clinical agency, agency student orientation requirements are determined by the agency and met prior to the start of the clinical rotation.

Simulation and Nursing Campus Laboratory

The simulation and nursing campus laboratories at OCCC provide a rich hands-on learning environment for the nursing program. It is the goal of the simulation and nursing campus laboratories to provide students with an environment that builds confidence, supports learning and advances students from critical thinking to clinical judgment. Simulation is used to replicate clinical situations to prepare the student for clinical practice through the application of theoretical knowledge and skills acquisition in a safe, supportive learning environment.

It is in the simulation and nursing campus laboratories that students are introduced to nursing skills, concepts, and technologies prior to clinical experiences. The overall goal of our simulated clinical experiences is to assist the student in achieving and maintaining high standards of care for both common and uncommon clinical events.

Nursing students have access to several low, mid, and high-fidelity simulators while enrolled in the nursing program. Additionally, the simulation and nursing campus laboratories offer a variety of partial-task trainers and clinical equipment designed for the care of adult, geriatric, psychiatric, pediatric, maternity, and newborn patients in the acute, critical-care, or long-term/home settings.

The nursing campus laboratory offers a variety of support and learning resources for student utilization. Small group and individualized sessions facilitated by nursing laboratory faculty are scheduled on the nursing campus laboratory calendar to assist students with:

- dosage calculation
- psychomotor skills
- test-taking strategies
- care-planning and concept-mapping



- organizational skills
- skills practice and remediation

A reference library is available for students in Nursing Campus Laboratory 3. Materials include nursing textbooks, drug reference guides, NCLEX review books, dosage calculation resources, DVD's, etc. Study areas for individual and/or small group study sessions are also available in Nursing Campus Laboratory 3. These spaces are accessed first-come, first-serve unless reserved by a Student Supplemental Instructor (SSI) for special sessions/mentoring.

The simulation and nursing campus laboratories utilize the online course management system (Moodlerooms) to provide resources for all courses and as a means of communication with students between semesters when they are not actively enrolled in a course.

Criterion 4.10: Students participate in clinical experiences that are evidence-based and reflect contemporary practice and nationally established patient health and safety goals.

Clinical agencies are selected based upon factors such as location, type of facility, availability of appropriate clients, and quality of the clinical experience. Students are provided with a wide range of clinical experiences in a variety of institutions that provide students with the opportunity to apply the knowledge they have learned in theory and campus laboratories. A current list of the facilities utilized by the nursing program and the number and type of slot assignments is provided in the *Clinical Rotation Document* (Exhibit 4.10A).

Types of clinical sites include public schools, assisted living facilities, long-term care, acute-care, community health care settings, and mental health facilities (Table 4.10.1). Consistent with our curriculum that builds in complexity, first semester students begin clinical rotations in public schools, assisted living facilities, and long-term care facilities with a transition to acute care during the last six weeks of the semester. The second semester rotation consists of beginning medical-surgical and maternal-newborn experiences in acute care settings. Students in their third semester experience rotations in mental health facilities, long-term care for pediatrics, and acute care facilities. Students in their last semester complete clinical rotations in critical care, emergency, and medical-surgical specialty areas.

Long Term Care Facilities	Hospitals	Schools
Bellevue Rehab Center	Cedar Ridge	OKC Public Schools
Grace Living Center Norman	Children's Center	
Lackey Manor-North	Deaconess Hospital	
Windsor Hills	Deaconess at Bethany	
	Grady Memorial Hospital	
Assisted Living Centers	Integris Baptist	
The Legacy	Integris Southwest	
	Integris Spencer	
	McBride Hospital	
	Mercy Health Center	
	Midwest City Regional Hospital	
	Norman Regional Hospital	
	OUMC – Everett Tower	
	OUMC- Presbyterian Tower	
	Saint Anthony Hospital	

Table 4.10.1: Nursing Program Clinical Agencies



Long Term Care Facilities	Hospitals	Schools
	Saint Anthony Hospital – South Veteran's Hospital	

Clinical experiences are designed and planed to promote student success in meeting course outcomes and objectives. Pre and post-conferences are a component of each clinical experience, which allow faculty to assess student performance, and stimulate the students to engage and participate in a professional, problem-solving dialogue among their peers.

The Joint Commission's established 2012 National Patient Safety Goals regarding safety and infection control are embedded throughout the curriculum and are evident in all classroom and clinical setting.

Examples of how National Patient Safety Goals are carried out through each course are described in Table 4.10.2 and in the OCCC Nursing Program Curriculum Notebook as well as in each individual Course Notebook.



Course	Nationally Established Patient Health and Safety Goals
NUR 1519 (TRN and BADNAP)	 Introduce students to safe medication practices and stress the 6 rights of medication administration; utilize safeMedicate® Introduce professionalism as well as legal and ethical implications in nursing and healthcare Introduce students to QSEN, Joint Commission, and National Patient Safety Goals in class and through independent modules Clinical evaluation tool addresses safety each clinical experience All simulation activities incorporate national patient safety goals One three hour theory class is devoted to coverage and instruction of quality and safety initiatives, to include: Case Study Power Point Presentations Video Clicker questions HHS Partnering to Heal Activity (Online/Use iPad) NPSG 2013 SBAR/Team STEPPS Content is reinforced during campus lab/clinical, to include: Review of agency policy(ies) and communication processes, to include timely notification Establishment and maintenance of the sterile field during various procedures Infection control measures/interventions
	 Restraint alternatives and proper use/application of restraints Review of client fall risks and appropriate interventions for the prevention of falls/injuries Documentation of client condition, changes in condition and use of restraints, fall risk, etc. Body mechanics and patient transfers Swallowing precautions and interventions to prevent aspiration for the at risk client SBAR
NUR 1529 (TRN and BADNAP)	 In class handouts are provided in the safety class with test items that cover the content All simulation activities incorporate national patient safety goals Discuss staff communication and chain of command in the safety class and encourage students to practice this in clinical.
	 Discuss star communication and chain of command in the safety class and encourage students to practice this in clinical. Performing the 6 rights of medication administration. Safe medication administration including possible interactions is a big part of the care plan document. Hand washing is stressed in class, simulations, campus laboratory, and at clinical. Students are encouraged to pay attention to staff and pick up on violations of NPSG 5.
	Prevent Mistakes in Surgery—we discuss all of this in detail in class. We also try to get students OR slots so they can see the environment and observe how NPSG are used in surgery.

Table 4.10.2: Examples of Patient Health and Safety Goals within the Curriculum

 Clinical evaluation tool addresses safety each clinical experience NUR 2539 Identify patient safety risks: NPSG.15.01.01 Determine which patients are most likely to attempt suicide Prevent infection: NPSG.07.04.01 Use proven guidelines to prevent infection of the blood via central lines Clinical provides opportunities for students to use scanner and medication administration dispenser systems (Pyxis). 	Course
 (TRN, CLP and BADNAP) Determine which patients are most likely to attempt suicide Prevent infection: NPSG.07.04.01 Use proven guidelines to prevent infection of the blood via central lines Clinical provides opportunities for students to use scanner and medication administration dispenser systems (Pyxis). 	
 Continue to stress hand washing Continue to stress communication and collaboration through SBAR in classroom and clinical experiences Safe medication administration and adherence to the 6 rights of medication administration is stressed Skin assessments and pressure ulcer prevention techniques are practiced in clinical and simulation experiences Clinical evaluation tool addresses safety each clinical experience All simulation activities incorporate national patient safety goals Clinical provides opportunities for students to use scanner and medication administration dispenser systems (Pyxis). Continue to stress hand washing Continue to stress communication and collaboration through SBAR in classroom and clinical experiences Safe medication administration and collaboration through SBAR in classroom and clinical experiences Continue to stress communication and collaboration through SBAR in classroom and clinical experiences Safe medication administration and adherence to the 6 rights of medication administration is stressed Safe medication administration and adherence to the 6 rights of medication administration is stressed Safe medication administration and adherence to the 6 rights of medication administration experiences Safe medication administration and adherence to the 6 rights of medication administration is stressed Skin assessments and pressure ulcer prevention techniques are practiced in clinical and simulation experiences Clinical evaluation tool addresses safety each clinical experience All simulation activities incorporate national patient safety goals Practice communication and collaboration techniques with peers and staff NPSG 02.03.01 Report critical results of tests and diagnostic procedures on a timely basis. NPSG 07.03.01 Imple	(TRN, CLP and BADNAP) NUR 2549 (TRN, CLP and

Two of the clinical facilities (Mercy Health Center and Integris Baptist Medical Center) utilized by the nursing program are currently recognized as "Magnet" hospitals. The Magnet Recognition Program recognizes health care organizations for quality patient care, nursing excellence and innovations in professional nursing practice. "The <u>Magnet Recognition Program</u> advances three goals within health care organizations: promote quality in a setting that supports profession practice; identify excellence in the delivery of nursing services to patients/residents; and disseminate best practices in nursing services." This recognition, as well as several of our clinical sites being teaching facilities, ensure that the nursing standards are high and the student clinical experiences will reflect current best practices. Additionallly, Integris Baptist Medical Center was recently named a Consumer Choice Award winner by the people of the community in the areas of: Best Overall Quality, Best Image/Reputation, Best Doctors and Best Nurses.

Another clinical facility utilized (St. Anthony Hospital), was the first healthcare system to receive the Malcolm Baldridge National Quality Award. Other recognitions St. Anthony Hospital has received include: Oklahoma Quality Award for Excellence Distinguished Workplace Award from Press Gainey; 2010 Best Places to Work by Modern Health; Certified Stroke Center; Commission on Cancer (CoC) of the American College of Surgeons 2011 Outstanding Achievement; and Get with the Guidelines – Stroke Gold Plus Quality Achievement Award from the American Heart Association.

Additionally, Oklahoma University Medical Center (OUMC) was awarded the "Oklahoma Quality Award" in December of 2012 and the Women's and Newborn Center received the Struder Group "Excellence in Patient Care Award" in September of 2012.

Criterion 4.11: Written agreements for clinical practice agencies are current, specify expectations for all parties, and ensure the protection of students.

Clinical sites are selected based on several criteria including patient census and acuity, proximity to OCCC, facilitative learning environment, and the ability to provide students with clinical experiences in multiple specialty areas of nursing practice. The specific evaluation criteria are outlined in the *Guidelines for Selection of Clinical Agencies* (Exhibit 4.11A). In these contracts, the agency and College responsibilities are clearly outlined. All requests for new clinical affiliation agreements, as well as continuation of agreements are facilitated through the Office of the Clinical Affiliation Compliance Administrator (CACA) where viewing of documents is available. Importantly, all contracts are reviewed by OCCC legal counsel prior to signing and must meet all College standards as well.

The nursing program enjoys positive working relationships with our affiliating organizations. The agency resources support sufficient student numbers and a variety of experiences. Clinical sites are evaluated following each rotation and are the basis for decisions regarding continued use of the facility. The Nursing Evaluation Committee reviews the results of the evaluations first. Any recommendations are sent forward to NFO where the final determination of continued use occurs.

Criterion 4.12: Learning activities, instructional materials, and evaluation methods are appropriate for all delivery formats and consistent with the student learning outcomes.

The delivery methodologies of learning activities and instructional materials are congruent with the curriculum design and allow students to attain the learning outcomes. To facilitate the delivery of course content the nursing program utilizes an online course management system (Moodlerooms) to organize learning materials, provide easy access to resources, and facilitate course communication. Classroom activities include interactive learning activities to maximize student engagement.



In the BADNAP pathway, part of the classroom content is delivered on the College's online course management system, Moodlerooms, through learning modules, due to the accelerated class format. Efforts are currently underway to enhance the delivery methods and interactivity of this content. Faculty are working closely with the CLT to identify additional online activities, increase interactivity and develop appropriate evaluative methods. All evaluation methods within the BADNAP course are currently on campus or in the clinical environment. The BADNAP team submitted a Faculty Development Grant in October 2013 to request funding to support the creation and administration of online testing options. At the time of this writing, approval of this project is still pending.



STANDARD 5: RESOURCES

Fiscal, physical and learning resources are sustainable and sufficient to ensure the achievement of the student learning outcomes and program outcomes of the nursing education unit.

Criterion 5.1: Fiscal resources are sustainable, sufficient to ensure the achievement of the student learning outcomes and program outcomes, and commensurate with the resources of the governing organization.

The fiscal resources are adequate to support the nursing program and are sufficient to ensure the achievement of the student learning and program outcomes. Fiscal allocations from institutional funds, not including grants, gifts, and other restricted resources, are comparable with other departments. Continuing financial commitment to the nursing program is evidenced by the provision of operating funds to sustain and allow for currency of laboratory learning resources, a team teaching environment, and state of the art classroom technologies.

Dr. Paul Sechrist, College President, provides leadership for the budget development process. The budget is an extension of the planning process and is accomplished via a team effort. Members of the team include the College President, the Director of Budget and Fiscal Planning, and the President's Cabinet members. Utilizing the College's Annual Plan, which includes the Planning Directive, Statements of Purpose, The OCCC Roadmap 2018, ENDs and Mission Capacity Outcomes, Core Indicators, Specific Measurements, and Budget Principles, the President's Cabinet identifies and develops the activities to meet the Mission Capacity, Core Indicators, Process and Specific Annual Plan Measurements, and Targets.

The Educational and General Operating Budget is the primary budget of the College. It reflects the various sources of funds planned to support the mission of the institution. Funds are derived from state appropriations, student tuition and fees, and a local tax levy, with the majority coming from state appropriations. The Auxiliary Enterprises and Student Facilities Budget is comprised primarily of revenues and expenditures derived from self-supporting activities that provide services to students, faculty and staff. Auxiliary programs provide services and resources that directly enhance the educational process and generate revenue that is expended on programs that support recruitment, retention, and student/community development.

The budget process typically begins in January by building the next year's base budget as outlined in <u>College Policy No. 3041</u>. A base dollar amount is given to each budgetary unit by the President's Cabinet member in order to begin creating a budget for the next year. The detailed steps in preparing a budget may change from year to year but at the end of the fiscal year a budget report is presented to the Board of Regents for approval. Approval of the budget by the Board of Regents constitutes authority for the administration to expend funds within the total dollar limit of the budget. The President of the College is authorized to make budget adjustments as needed to meet the goals of the College, in accordance with rules and institutional policies of the College Board of Regents and the Oklahoma State Regents for Higher Education.

Special requests for one-time expenditures or new initiatives must be submitted to the Vice President for Business and Finance through the requestor's President's Cabinet member. The President's Advisory Council Budget Committee reviews and prioritizes these requests and submits them to President's Cabinet for consideration. Requests that are approved are blended into the base budget. The OCCC annual planning and budgetary process for years 2011-2014 can be found in the *Educational and General*



Operating Budget, Auxiliary Enterprises and Student Facilities Budgets (Exhibit 5.1A) and *Staffing Plans* (Exhibit 5.1B) are available for review in the document room.

The Nursing Program Director has primary responsibility for procuring input from faculty and other sources on budgetary issues, needs, and planning for the nursing program. A request for input into the strategic planning process is sent to all nursing faculty in the fall semester. The Division budget process is the same for each program in the HP Division.

The Nursing Program Director requests program budgetary needs for the annual Division budget through submission of a *Strategic Plan*. The HP Program Directors meet with the HP Division Dean to discuss needs and priorities. This group then prioritizes requests to be submitted by the Dean to the Associate Vice President for Academic Affairs. The Deans Council (comprised of all Academic Deans, the Vice President for Academic Affairs, and the Associate Vice President for Academic Affairs, and the Associate Vice President for Academic Affairs, and the Associate Vice President for Academic Affairs to one list for Academic Affairs. The requests are taken forward by the Vice President for Academic Affairs to the President's Cabinet. As stated above, the final budget is submitted by the President to the OCCC Board of Regents for approval and their approval constitutes authority for the administration to expend funds to implement the Institutional Plan.

The nursing faculty and HPS/Nursing Laboratory Coordinator provide input into the budgetary process through submission of the *Faculty Fiscal Resource Planning Form* each March. The timing of requests is planned to coincide with a major source of grant funding for educational equipment and supplies (Carl Perkins funds, typically requested in April and/or May) as well as with the Strategic Planning cycle.

The nursing program budget is a part of the Health Professions Division budget, although nursing has separate line items for materials and supplies, services, and dues/fees. The amount of funds dedicated to each of those line items for AY2011-AY2014 are listed in Table 5.1.1

Academic	Faculty/	Clerical/	Materials	Services	Dues/	Travel/
Year	Director	Staff	and	Budget	Organizational	Continuing
	Salaries	Salaries	Supplies	Pool	Fees	Education
AY2011	\$1,139,238	\$27,500	\$6,250	\$200	\$6,110	\$7,200
AY2012	\$1,158,247	\$27,500	\$6,250	\$200	\$6,110	\$7,200
AY2013	\$1,186,364	\$51,208	\$6,250	\$200	\$6,110	\$7,200
AY2014	\$1,202,522	\$31,218	\$6,250	\$200	\$6,110	\$7,200

Table 5.1.1: Nursing Budget for AY2011-AY2014

Salaries for the part-time nursing faculty are included in the Health Professions Division budget. The budgeted amount is not identified by specific program but rather for the Division as a whole. The amounts of funds allocated for part-time faculty for the HP Division are listed in Table 5.1.2.

Table 5.1.2: HP Division Part-Time Faculty Budget for AY2011-AY2014

Fiscal Year	Health Professions Part-time Faculty Salaries
2011	\$646,778
2012	\$646,778
2013	\$677,169
2014	\$687,726

Another source of the Health Professions Division budget that benefits the nursing program is that of the Human Patient Simulator (HPS) budget. This budget line provides the necessary funds to purchase supplies and equipment and any needed repairs for the two HPS mannequins housed in the nursing campus laboratory. The Human Patient Simulators are high-fidelity mannequins shared by all programs within the HP Division, with nursing accounting for the majority of the utilization. Three thousand dollars annually is dedicated to the HPS materials and supplies budget pool and has adequately covered the daily operational expenses generated by the HPS technologies. In addition to the materials and supplies budget pool for the HPS, 160 contact hours per semester is allotted for part-time nursing faculty to assist in the facilitation of laboratory simulation activities. This accounts for \$6,800.00 per semester at the current part-time faculty rate of pay.

In addition to general operating and educational funds, the nursing program also receives support from Carl Perkins grant monies, provided to the College by the Oklahoma Department of Career and Technology Education to support technical education programs. The *Carl Perkins Grant Allocation For HP Division* have been the primary source for laboratory equipment and supplies and teaching support materials for several years (Exhibit 5.1C). Annually, in the spring, requests are developed by the HP Division programs. The requests are prioritized by the HP Program Directors and Dean and submitted to Academic Affairs for consideration. Deans from each Division that participates in the grant request consult and submit one prioritized list to the Oklahoma Department of Career and Technology Education for final approval. The distribution of Carl Perkins grant funds for the HP Division from AY2011-AY2014 is listed in Table 5.1.3.

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Year	HP Division Allotment	Nursing Allotment	Percent of Funds (Nursing)
AY2011	\$137,439.84	\$105,201.06	76.5%
AY2012	\$134,410.30	\$47,899.93	35.6%
AY2013	\$109,477.98	\$58,124.68	53.1%
AY2014	\$120,835.37	\$79,646.48	65.9%

Table 5.1.3:	Carl Perkins Grant Funding
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An additional cost center within the Educational Budget that contributes resources to the nursing program is the Student Technology Fee (Budget #10-11-65300). Funding for replacement of the classroom projectors in HP 215 occurred in the summer of 2013. Additional funding for student computer upgrades in the nursing computer laboratory is another example of the utilization of funding from the Student Technology Fee budget.

The Keith Leftwich Memorial Library (Budget #14-41010) contributes to the nursing program on an annual basis. The library's budget provides additional funding for books, serials, audiovisuals, and databases. Nursing faculty can submit requests for books and electronic media for library purchase. Faculty submit their resource request and documentation of proposed utilization to the Nursing Program Director for approval. Once approved by the program director, the request is submitted to the HP Division library representative for purchase. In addition the library contributes to all Health Profession's programs through their support of the Medcom Trainex online streaming video courses (Exhibit 5.1D). This resource provides convenient, up-to-date videos for satisfaction of clinical requirements on topics such as fire and electrical safety, blood borne pathogens, HIPAA, cultural awareness, never events, tuberculosis, restraints and others. Other examples of the library's contribution to nursing is their funding of the "Expert Drug Therapy Series", an eight title series of streaming videos and the newly acquired online version for Perry and Potter's Clinical Nursing Skills and Techniques, both for use on our online course management system. In November 2013, faculty requested an additional nine DVD titles from the <u>Barb Bancroft</u> collection and a



new nursing collection from Films on Demand, all of which were funded. The nursing collection from Films on Demand will add an additional 1,379 titles to the nursing collection.

Fiscal allocations for the nursing program at OCCC are commensurate with other departments and with the resources of the governing organization. Many variables influence a meaningful comparison between the nursing program and other programs within the Health Professions Division and between other departments including but not limited to enrollment, laboratory experience requirements, clinical requirements, and progression within the program. The Divisions of Chemistry and Biological Sciences and Social Sciences were selected as comparison programs. Table 5.1.4 compares fiscal allocations of the departments.

Budget Item	Health Professions	Chemistry and Biological Sciences	Social Sciences
Full-Time Faculty	\$1,453,971.00	\$942,929.00	\$1,108,018.00
Part-Time Faculty	\$687,276.00	\$563,100.00	\$775,608.00
Benefits	\$1,083,274.00	\$790,352.00	\$706,695.00
Materials and Supplies	\$15,780.00	\$40,000.00	\$9,707.00
Services	\$7,880.00	\$18,993.00	\$8,500.00
Totals	\$3,248,181.00	\$2,355,374.00	\$2,608,528.00

Table 5.1.4: FISCAL Allocation Comparison of Three UCCC Departmen	Table 5.1.4:	Fiscal Allocation Comparison of Three OCCC Departments
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Despite a reduction in state appropriations and the resultant budgetary constraints, OCCC has provided exceptional financial support for the nursing program. Although the HP Division Clerical Assistant position was deleted, which directly impacts the workload of the Nursing Program Director, Nursing Program Associate Director, and the HP Division Support Assistant, no losses have occurred in full-time or part-time faculty positions.

Criterion 5.2: Physical resources (classrooms, Laboratories, offices, etc.) are sufficient to ensure the achievement of the nursing education outcomes and meets the needs of faculty, staff, and students.

OCCC Health Professions Division Building

In October 2008, the new Health Professions Center was dedicated and occupied. Although most of the nursing program's physical space remains in the previous Health Professions (HP) building and Science, Engineering and Math Center (SEM), the HP Center has added critically needed space for nursing program needs. Programs that occupy the Health Professions Center are Nursing, EMS, OTA, PTA, and SLPA.

The HP Center has eight classrooms with the two largest being dedicated to nursing. The second story of the HP Center consists of offices for the all HP Division faculty with the exception of nursing faculty. The Dean, Nursing Program Director, Nursing Program Associate Director, HP Academic Advisor, and administrative support staff are located on the second story. Additionally, the second floor offers a conference room which seats ten and includes a multi-media cart, projector and screen, scanner, and internet availability. There is a faculty and staff mailroom, a part-time faculty workroom with two fully equipped computers with internet availability, a copy room with a Xerox copy machine, and a break room with a table and four chairs, microwave, sink, and a full size refrigerator.

Within the HP Division Office, faculty and staff have access to two high speed laser printers, telephone, fax machine, shredder, electronic stapler, and numerous storage cabinets that hold a variety of office supplies.



The HP Center houses three designated men's and four women's restroom facilities and one single unisex/handicapped/family restroom facility. There is an elevator for access between floors and three sets of stairs for fire evacuation. There is ample security storage in the nursing program area which houses curriculum files, student files and sensitive information. There are vending machines, and comfortable areas with chairs, couches and side tables for students to study and socialize. The students have access to four desktop computers with the entire building having wireless internet access. There are ample electrical outlets and power supply for personal electronics as well.

The first floor is comprised of the three nursing campus laboratories, fourteen nursing faculty offices, a HPS/Nursing Laboratory Coordinator office, a secure room for the nursing testing software (ParSystem) and high speed laser printer, two computer laboratories with one being designated solely to nursing (32 computers) and the other shared by the HP Division (25 computers), and a small student lounge area with vending machines. There is one small alcove with a table and four chairs for student use outside the nursing faculty offices. The programs of EMS, OTA, and PTA are also located on this level with classroom and laboratory space, a fully functioning ambulance, a simulated home laboratory, and common areas for student studying and socialization.

Faculty Offices

The Nursing Program Director and Nursing Program Associate Director both occupy offices on the second floor of the new Health Professions Center. Each private office is furnished with a large desk with an overhead hutch, office chair, large filing cabinets, telephone with voicemail, as well as a personal computer with internet access and connection to the OCCC network that includes a central black and white laserjet printer and a color laserjet printer. Each office also has dual large screen monitors and a small laserjet printer, two side chairs, and ample bookshelves. Additionally, the director's office has built in cabinetry that includes six storage drawers with bookshelves above and two floor to ceiling cabinets on each side.

Each full-time faculty member enjoys a spacious, well-equipped office. The offices are furnished with a desk, chair, bookcase(s), filing cabinet(s), telephone with voicemail, personal computer with internet access and connection to the OCCC campus network that includes a central printer located in the faculty workroom. All offices have additional chairs for meetings with students allowing for privacy to conduct student conferences and counseling as needed. The college has permitted faculty to choose personal décor for their office space which has allowed for a welcoming and inviting atmosphere. Part-time faculty have access to the same supplies and equipment as full-time faculty with exception of a personal office. Many times part-time faculty will use full-time faculty offices for student conferences or counseling. If personal offices are not available for part-time faculty use, the conference room located within the HP Division Office can be scheduled for student conferences.

The office space for the HP support staff is located within the HP Division office and is a large open space with four workstations and contains all the equipment as mentioned above. The office is readily accessible to visitors, students, and faculty. The office space also includes ample storage and locked filing cabinets for maintenance of student and faculty records. The additional offices occupied in the HP Division office are those of the Dean of HP, the Clinical Affiliation Compliance Administrator, and the Directors of the EMS, OTA, and PTA programs.



Conference Room

Located within the HP Division office there is a conference room which seats ten people. This room can be reserved through the office staff and is utilized for student conferences, committee work, faculty appraisal meetings, and meetings with other College personnel and guests.

Classrooms

In the Health Professions Center, there are eight classrooms, which accommodate the various programs. There are two main classrooms designated specifically for the nursing program, room HP226 with a seating capacity of 88, and room HP215 having a seating capacity of 134. Each classroom has spacious whiteboards, podium, multi-media technology including computer with data projector and screen, internet access, Apple-TV connection, and Wi-Fi capability. Room HP 215 is equipped with tables having electrical outlets and power supply to accommodate student's laptop computers and personal electronics. The two classrooms are adequate to accommodate the student enrollment for the traditional and career ladder pathways. Each nursing process in the traditional pathway rotates between day and evening classes every other semester, staggering days and times for which they meet. The career ladder pathway students meet only on Wednesday's during the day. This schedule allows most of the nursing classes to take place in the Health Professions Center. The other classroom utilized by the nursing program is located in the Science, Engineering, and Math Center, SEM 1N2. This classroom is equipped with tables and chairs to accommodate up to 80 students, whiteboards, podium, multi-media technology, including computer with data projector and screen, internet access, Apple-TV connection, and Wi-Fi capability.

In 2008 the nursing faculty began using the Student Response System (clickers) in the classroom and have continued to collaborate on use of this technology with Instructional Video Services and the Center for Learning and Teaching. The Instructional Video Services Department will provide additional instructional equipment, such as a microphone or video camera, and technology support upon request. In 2013, faculty discovered a new use for the student response systems through the merging of that technology with the MUSE software utilized to facilitate the HPS technologies. This allows faculty to create interactive classroom simulation experiences with or without a simulator in the room. The MUSE software allows students to view the patient monitor. At any point the faculty can ask students to identify what their next intervention would be based on the information displayed. The multiple choice options would be displayed utilizing the student response systems. The intervention chosen would be determined by the class majority. If the outcome is not favorable, the faculty can take students back to that critical point in the simulation and ask them to re-evaluate their intervention.

In 2011, the nursing program was awarded 11 iPads through submission of a <u>Faculty Development Grant</u> proposal by Cindy Milam, nursing faculty. The iPads are utilized for campus laboratory and classroom activities in all nursing courses. Examples of iPad use in the classroom where Apple-TV is employed includes sharing of online search activities, collaborative classroom projects, and the ability to contribute to a faculty presentation during any class session where the computer and screen are utilized. In the laboratory setting iPads are utilized for point of care information through online tools and apps. iPads are also used to display videos and instructional information to enhance the various room set-ups.

In 2012, Ms. Milam again submitted a Faculty Development Grant proposal for the purchase of 25 iPads to be utilized by full-time nursing faculty in the classroom, laboratory and clinical settings. Use of the iPads in the classroom and laboratory settings have been valuable in creating a more collaborative and interactive learning environment. In the clinical area faculty utilize iPads for point of care information, access to



electronic books, access to tools and apps, timely feedback on student clinical assignments and evaluations, and assess to their remote desktops.

Computer Laboratory

In the Health Professions Center students have access to two computer laboratories with one being designated to nursing (32 computers) and the other shared by the HP Division (25 computers). The computer laboratories are open to students throughout the day for personal use, unless reserved for program or Division activities. The nursing program can schedule one or both laboratories through Ad Astra for special testing or course activities that require a secure and uninterrupted environment. The students have printer access from the computers located in both computer laboratories.

Skills Laboratory

The Nursing Campus Laboratories were remodeled in 2010 to accommodate additional students and the growing program. There are three distinct and separate laboratory areas to accommodate student learning. The largest campus laboratory (Nursing Laboratory 1) consists of a large room furnished with six complete client care units which can be converted into three semi-private client rooms through the use of accordion doors. A simulated bathroom in this area allows students to learn transfer skills. The accordion doors reduce noise allowing simultaneous learning activities when the room is divided. Additional rooms include three fully equipped private rooms utilized for various campus laboratory and simulation activities, a maternal/newborn room which houses the high fidelity birthing simulator (Noelle) and her newborn baby (Baby Hal), a four bed open ward with privacy curtains, and one private room which houses one of the high fidelity human patient simulators (HPS) and his many technologies. A supply room is located within the laboratory to provide students with the opportunity to identify and gather supplies needed during simulations. This laboratory also includes a fully equipped laundry room, a storage room for NSA supplies and equipment, a small classroom used for multiple functions and a large foyer which serves as a multipurpose area for learning activities.

Nursing Laboratory 2 is set up in classroom style with 30 tables and 60 chairs to accommodate up to 60 students. Additional resources include two whiteboards, podium, multi-media technology, including computer with data projector and screen, internet access, Apple-TV connection, and Wi-Fi capability. Cabinets line both ends of the room and house the many partial-task trainers and clinical equipment designed for the care of adult, geriatric, psychiatric, pediatric, maternity, and newborn patients in the acute, critical-care or long-term/home settings. A large sink on one end serves as an area for cleaning and maintenance of the IV task trainers and other equipment requiring regular cleaning. Faculty utilize this room for providing didactic content, demonstration of skills, and for supervised group practice. Skills such as IV insertion, venipuncture, parenteral medication administration, and sterile gloving are taught in this area.

Nursing Laboratory 3 is utilized for peer reviews, student practice, faculty assisted remediation, and group study. This laboratory is equipped with six client care areas and is used for psychomotor learning and skills' remediation. A hospital bedside is simulated with Hill-Rom beds, over-bed tables, bedside stand, and visitor chairs. Each bed has an anatomical low-fidelity adult practice manikin that is used by the students as they master nursing skills. There is also a small library of current nursing textbooks that are available for student use as well as seven tables and chairs for group or individual study. This laboratory has a large sink area to use for hand washing practice or cleaning of equipment. Cabinets and drawers line three walls and provide ample storage of supplies and equipment. The two IV simulators and their associated computers are located in this laboratory close to the HPS/Nursing Laboratory Coordinator's office. The HPS/Nursing



Laboratory Coordinator's office is equipped identically to the other nursing faculty.

An additional private room is in the common space between the three designated laboratories and houses the second high fidelity human patient simulator (HPS) and his associated technologies. The second HPS room has a separate anteroom with the control desk and video equipment. This laboratory houses two cameras that allow for 360° viewing of simulation activities within the room. Simulation activities can be viewed across the campus in any classroom with a computer/projector using wireless technology. Signs are posted in this area notifying students and faculty of video capability.

The availability of the HPS and Noelle simulators adds quality simulation opportunities for nursing students. It is in the simulation and nursing laboratories that students are introduced to nursing skills, clinical technologies, and the process of linking theoretical and clinical concepts. The overall goal of our simulated clinical experiences is to assist the student in achieving and maintaining high standards of care for both common and uncommon clinical events. Simulation is used to replicate clinical situations to prepare the student for clinical practice through the application of theoretical knowledge and skills acquisition in a safe, supportive learning environment. Student orientation to all laboratory and simulation learning environments is conducted during the first week of the first nursing course. The HPS/Nursing Laboratory Coordinator conducts a tour of the laboratory and simulation learning spaces and provides students with the *HPS/Nursing Campus Laboratory Guidelines* which cover the care and utilization of laboratory resources. These guidelines are also available on the campus laboratory online course management system (Moodlerooms) for easy access and referral.

Small group and individualized sessions are offered throughout the semester by the nursing laboratory faculty and are scheduled on the nursing laboratory calendar to assist students with:

- dosage calculation
- psychomotor skills
- test-taking strategies
- care-planning and concept-map development
- organizational skills

As stated previously, a reference library is available for students in Nursing Laboratory 3. Materials include current program textbooks, nursing resource materials, drug reference guides, NCLEX review books, dosage calculation references, videos, electronic media, etc. The HPS/Nursing Laboratory Coordinator is responsible for reviewing all resources annually and removing titles that are greater than five years old, unless deemed historically relevant. Study areas for individual and/or small group study sessions are also available in Nursing Laboratory 3. These spaces are accessed first-come, first-serve unless reserved by a Student Supplemental Instructor (SSI) for special sessions/instruction. The simulation and nursing campus laboratories utilize the online course management system (Moodlerooms) to provide resources for students enrolled in the OCCC Nursing Program. Within this site students can access laboratory rules and regulations, a calendar outlining the dates and times in which the laboratory is available for student use, skills demonstration videos, and various other resources for student reference.

The HP/Nursing Laboratory Coordinator is responsible for maintaining current equipment, as well as working with the Nursing Program Director and faculty to preview newly available learning materials and identify needed equipment. Inventories are reviewed throughout the year and supplies are restocked as needed. Faculty members are encouraged to request additional learning resources for their classes through the annual strategic planning process or Carl Perkins requests. The Nursing Program Director



works closely with the HPS/Nursing Laboratory Coordinator and nursing faculty to rank each request based on format, cost, relevance, extent of use, and currency of the learning resources prior to purchase. The nursing program strives to have comprehensive, current and relevant learning materials that increase student exposure to a variety of simulation, equipment, supplies and demonstration devices.

Purchases are integrated into course and laboratory instruction following faculty training in the use of the new item. The HPS/Nursing Laboratory Coordinator is responsible for providing the necessary faculty training. This is generally accomplished during the Planning and Preparation Week activities or at specially arranged times throughout the semester. All equipment is maintained and used in the laboratory spaces. Certain equipment and simulators are utilized during classroom instruction with prior approval of the HPS/Nursing Laboratory Coordinator. Most equipment available in the nursing laboratories closely resembles that which is used in current clinical settings and allows the students up-to-date learning opportunities that simulate current health practices and trends. A list of the current nursing campus laboratory inventory is available as Exhibit 5.2A in the document room.

In summary, the physical facilities of the nursing program include multimedia classrooms, well-equipped campus laboratories, state-of-the-art simulation resources, conference rooms, private faculty offices, secure and well-equipped faculty work rooms, part-time faculty work stations, and break facilities. These facilities are adequate to support the instructional and non-instructional needs of the nursing program.

Criterion 5.3: Learning resources and technology are selected with faculty input and are comprehensive, current, and accessible to faculty and students.

Technology

Center for Learning and Teaching - Faculty

The <u>Center for Learning and Teaching (CLT)</u> is an instructional resource for all faculty members located on the 2nd. floor of the Science, Engineering and Math Center (SEM) in the Main Building, Office 2G3. The CLT team collaborates with and supports faculty in research and the implementation of innovative strategies and technologies to enhance learning and increase student engagement and success. The Center for Learning and Teaching provides a variety of workshops, seminars, and faculty learning circles throughout each semester. Additional times are available for individual faculty consultation sessions related to instructional design, use of the College's online course management system (Moodlerooms), instructional strategies, instructional technologies, and cooperative learning. Information relating to best practice regarding distance learning is utilized in all of their instructional offerings. The CLT has multiple resources available for faculty use including laptops for checkout, a computer laboratory to work independently or with a member of the CLT staff, many publications, and a classroom for group instruction. Additional information on resources, services, tip sheets and user guides, upcoming workshops and events, as well as a faculty consultation request form can be found on their webpage. In addition, the CLT has a designated Moodlerooms support person identified for each College department for individualized assistance.

The CLT is home to multiple spaces conducive to conversation and learning. Listed below are the available spaces for faculty use:

• CLT Resource Room: Books, journals, videos, and other resources for teaching are located here and are available for check out as well as comfortable seating for relaxing and reading or visiting with colleagues.



- Instructional Technology Center: Computers, scanners, printers, and a variety of software are available for all faculty and staff to use. The Center can also be used for technology demonstrations as well as checkout of technology for the classroom.
- CLT Classroom: Large classroom with computers, which can be reserved for instruction or training.
- CLT Conference Room: This conference room is equipped with multimedia equipment as well as furniture that can be easily rearranged to meet specific needs of the faculty.
- Common Areas throughout the CLT: The Center provides comfortable seating for relaxing and reading or visiting with colleagues.

Office hours for the CLT are as follows:

Monday through Friday 7:30 a.m. to 5:00 p.m. (other times by appointment)

Information and Instructional Technology Services – Faculty

The Information and Instructional Technology Services department provides technology support for faculty members experiencing computer, network or printer problems. This department installs, services, troubleshoots, and repairs hardware and software for individual faculty, work room, and laboratory computers and printers. Technology support for students is available Monday through Friday from 7:00 a.m. to 5:00 p.m. by calling 405-682-7777 or by email through through through through the printers are resolved within 24 hours of the original request.

Instructional Video Services – Faculty, Staff, Students

Instructional Video Services (IVS) is dedicated to providing Audio/Visual Support and Video Production services to OCCC students, staff, and faculty. There are three main services provided by IVS. These services are A/V Distribution, Instructional Video Production and A/V Engineering. A/V Distribution is the area of IVS that has the most interaction with faculty and students. Staff members in this area are responsible for delivering requested equipment and media to classrooms and meeting rooms. A/V Distribution staff is also available to provide technical assistance for equipment in classrooms and meeting rooms. Instructional Video Production serves as the College's in-house video production facility. It is a full service, fully digital production studio capable of producing programs to multiple media formats including streaming formats for use with the internet. Other services available include off-air recording, videotape or CD duplication, lecture and course review taping, and videoconferencing. Maintenance and repair of campus audio/visual equipment is provided by the staff of A/V Engineering. This office also installs the equipment in multimedia classrooms and trains faculty teaching in these classrooms.

The IVS staff is responsible for providing the new panoramic projectors in the large nursing classroom (from their budget) and for configuring all of the technologies needed to facilitate the use of Apple-TV in each of the nursing classrooms and Nursing Laboratory 2. Additional resources and request for classroom equipment can be obtained from the <u>IVS webpage</u>.

Office hours for IVS are as follows:

A/V Distribution:

Monday - Thursday :	7:30 a.m 10:00 p.m.
Friday:	7:30 a.m 5:00 p.m.
Saturday:	7:45 a.m 1:45 p.m.



Instructional Video Production: Monday - Friday: 8:00 a.m. - 5:00 p.m.

A/V Engineering: Monday - Friday: 8:00 a.m. - 5:00 p.m.

Student Technology Resources

OCCC provides orientation to technology through the Success in College and Life (SCL 1001) course required for all new students and should be taken during the first semester of college work. Additional orientation to <u>online student resources</u> can be found on the College webpage. Information concerning how to setup a student email account, technology support for email and MineOnline, and information on understanding copyright can be found on the <u>student services</u> page of the online student resources.

Resources to help determine a student's online readiness and how to navigate within the online course management system (Moodlerooms) are readily available. Access to a <u>Moodlerooms Student Survival</u> <u>Guide</u> can be found online and printed if needed. Moodlerooms support can be found online at the <u>online</u> <u>course support center</u> Monday through Friday from 9:00 am to 9:00 pm (Central) by calling 1-888-998-6028. Additionally, the online course support center offers email support and chat support with a site consultant 7 days a week twenty-four hours a day.

Library

The Keith Leftwich Memorial Library at Oklahoma City Community College provides a full range of information services and resources selected to support the needs of OCCC's students and faculty. Amenities of the 30,000 square foot library facility include nine study areas, 76 public computers, one printer, two scanners and two copy machines provided for student and faculty use. Instructional and library support is available through library personnel, consisting of one part time and five full time librarians, as well as numerous supporting circulation and technical services staff.

The library is open six days a week for a total of 84 service hours per week during the spring and fall semesters and a total of 77 service hours per week during the summer semester. Librarians and support staff enhance learning and teaching by providing instructional support and resources that complement and supplement classroom learning. An hour-long orientation is available to help educate students and full- and part-time faculty on library services provided both on site and online. Students and faculty may access library resources online at http://www.occc.edu/library.

The library collection consists of over 160,000 volumes including 88,054 books, 452 periodicals, 281 microfiche publications, 54 databases, 10,000 journals, 12,801 electronic books, and a media collection of 20,431 titles. Nursing specific materials include 378 print books, three (3) e-books, seven (7) print journals, 190 e-journals (full-texted accessed via aggregated databases), 23 journals/periodicals that are purchased as an individual journal, 90 Films on Demand, and 80 audiovisual resources. There are currently 54 nursing books held on reserve with at least one copy of all required and recommended nursing textbooks. The library supplies students with access to an extensive collection of online resources including peer-reviewed nursing, medical and healthcare journals via the following databases:

• CINAHL Complete



- Health Source Nursing / Academic Edition
- Health Source Consumer Edition
- Medline
- Nursing & Allied Health Collection
- Nursing Resource Center

The journals/periodicals that are purchased as an individual journal and that are specific to nursing are listed below:

Journal	Online/Print
Advanced Emergency Nursing Journal	Online
American Journal of Nursing	Online
AORN Journal	Print
Critical Care Nurse	Online
Critical Care Nursing Quarterly	Online
Evidence-Based Nursing	Online
Geriatric Nursing	Print
JAMA : Journal of the American Medical Association	Online
Journal of Emergency Nursing	Print
Journal of Gerontological Nursing	Online
Journal of Nursing Education	Online
Journal of Obstetric Gynecologic and Neonatal Nursing	Online
Journal of Pediatric Nursing	Print
Journal of Professional Nursing	Print
Journal of Psychosocial Nursing and Mental Health	Online
Journal of Trauma and Acute Care Surgery	Online
MCN : the American Journal of Maternal Child Nursing	Online
Nurse Educator	Online
Nursing	Online
Nursing Clinics of North America	Print
Nursing for Women's Health	Online
Nursing made Incredibly Easy	Print
Nursing Research	Online

Table 5.3.1:	Nursing Specific Journals	
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Librarians have responsibility for collection development and maintenance as outlined in the *Library Collection Development Guidelines* (Exhibit 5.3A) but actively seek recommendations from faculty and the rest of the OCCC community. Faculty can request any books, journals, Films on Demand, and/or DVDs to be purchased for the library, online streaming, or office use. Formal reviews (*Choice, Publishers Weekly,*

etc.) are also available. Nursing faculty is consulted annually for identification of content area gaps in the collection and on existing subscriptions and requests for new periodicals. Revisions to subscriptions are made based on faculty recommendations. The Librarian assigned to the HP Division, Tricia Sweany, attended the October 2013 Team Leader meeting to discuss faculty and course needs for future library purchase. As a result of this meeting the NCLEX-RN DVD Review 2013 edition by Judith Miller and the Pharmacology – Simplify Don't Mystify DVD by Barb Bancroft were ordered.

The Library Director has final authority in the selection of materials. In cases where an academic program has a national or state accrediting agency, the library liaison works with program faculty to meet the standards of that agency, while acknowledging the overriding library collection goal of serving the diverse college population. Timeliness of materials is considered annually to ensure the selection of high quality materials.

Nursing Laboratories

The Nursing Laboratories are staffed with one HPS/Nursing Laboratory Coordinator and 2-3 master's prepared part-time faculty, providing students with access to the skills laboratory Monday through Friday and select Saturday's throughout the semester. Assistance, support, and one-on-one demonstration and teaching are provided to the students during staffed hours. Students are provided an orientation to the skills laboratory and are highly encouraged to utilize laboratory resources to their fullest extent throughout their time in the program.

Teaching devices and specialized equipment have been selected to facilitate student learning in specific courses. The laboratory is equipped with medication carts, infusion pumps, bedside glucose monitoring units, one ventilator, an EKG machine, IV arm simulators, mannequins with IV access, crash carts, and numerous other supplies. The diverse laboratory environment allows students to view demonstrations and practice skills in an environment similar to the clinical setting. Students may also check out iPads from faculty that are used to record one another practicing skills in an effort to allow them to identify areas of strength and weakness.

OCCC utilizes state-of-the-art high-fidelity simulations as part of the educational experience. Simulation suites include a room for the mannequin equipped with video and audio, a technical room and one-way mirrors for viewing. A library of patient simulations from the Program for Nursing Curriculum Integration (PNCI) has been adopted by faculty and is available onsite. The HPS/Nursing Laboratory Coordinator and laboratory part-time faculty are responsible for maintaining the mannequins and assisting faculty with developing and implementing simulation activities.

Students at OCCC have access to several computer labs. The nursing computer laboratory has 32 working units where students have access to assignments, internet, and printing. The Health Professions computer laboratory has an additional 25 computers for student use. The <u>Test Center</u> is also available for student testing purposes. This area has 111 computers with an additional six added in the fall of 2013. These three locations are used for proctored testing with a faculty member at each location where students are present. Maintenance and updating of software are evaluated on a yearly basis and as needed.

The following are specific examples of technology and how they are utilized and accessible to students and faculty:

iPads

• Planning and Preparation Week instruction class provided



- Innovative use to enhance classroom learning
- Process for app selection and review
- Total of 21 available student iPads
- Wireless connection for classrooms
- IT support provided during college operation hours
- Faculty iPads reservation process developed
- Knowledgeable staff available for trouble shooting and ideas for use
- Staff received personal iPads for classroom, laboratory and clinical enhancement in spring 2013

Clickers/Smartboards

- 75+ clickers available
- Smart boards available for each classroom upon request
- Electronic reservation process for scheduling clickers
- PowerPoint instructions available on College network
- Planning and Preparation Week instruction class provided
- Provides immediate feedback on student understanding

safeMedicate®

Nursing faculty at OCCC selected safeMedicate® software for dosage calculation instruction and testing in the spring of 2013 with implementation to start with the BADNAP students in the summer of 2013. safeMedicate® is a self-directed, fully interactive, narrated, and web-based program for nursing students and healthcare providers. Presented as a simulated clinical environment, safeMedicate® allows learners to practice and assess "best-practices" from a competency model based on three basic premises: Conceptual Competence, Calculation Competence, and Technical Measurement Competence. Students are assigned modules throughout the program relevant to theory content and focus. Faculty, as well as students, are provided training support and continual online technical support. Remediation plans are available and assigned to students on an individual basis.

PNCI

The Program for Nursing Curriculum Integration (PNCI) was implemented in the summer of 2013. The nursing program implemented this program in response to the decline in available clinical opportunities and the need for well-developed simulations that incorporated current and best practices. This program offers 100 evidence-based simulated clinical experiences. PNCI is current with The Joint Commissions National Patient Safety Goals, QSEN Competencies, and the Institute for Safe Medication Practices list of error prone abbreviations, symbols, and dose designations.

Each nursing process has selected relevant scenarios to be integrated into their course. Training sessions were held for faculty prior to beginning the program and again during each Planning and Preparation week. In addition, online support is continually available. PNCI nurse educators are available for on-site faculty development and consultation if needed.

ATI

ATI Nursing Education system was implemented at OCCC in 2006. This online assessment program is purchased by each student and utilized throughout the program as a supplement to the curriculum. The cost of this program has been included with tuition and fees to allow students to utilize financial aid options



for payment. Students are assigned proctored and non-proctored exams throughout the program as well as modules, assessments and tutorials. These areas indicate students' mastery of nursing concepts and are indicators of developing readiness for the NCLEX-RN exam. If a student does not meet the specified benchmark on a particular exam, remediation is assigned and each student is counseled on an individual basis.

Criterion 5.4: Fiscal, physical, technological and learning resources are sufficient to meet the needs of the faculty and students engaged in alternative methods of delivery.

OCCC Nursing Program does not offer distance education at this time.



STANDARD 6: OUTCOMES

Program evaluation demonstrates that students and graduates have achieved the student learning outcomes, program outcomes, and role-specific graduate competencies of the nursing education unit.

Criterion 6.1: The systematic plan for evaluation of the nursing education unit emphasizes the ongoing assessment and evaluation of each of the following:

- Student learning outcomes;
- Program outcomes;
- Role-specific graduate competencies; and
- The ACEN Standards

The systematic plan of evaluation contains specific, measurable expected levels of achievement; frequency of assessment; appropriate assessment methods; and a minimum of three years of data for each component within the plan.

The Nursing Evaluation Committee (NEC) of the Nursing Faculty Organization (NFO) has primary responsibility for ensuring that the systematic plan of evaluation (SPE) is planned, administered as scheduled, analyzed with the results communicated, and routinely updated as directed by changes in the ACEN Interpretative Guidelines for Associate Degree Nursing programs and the Oklahoma Board of Nursing Minimum Standards for nursing education programs. The SPE is organized according to the ACEN Standards and Criteria. The plan provides faculty with the tools to effectively assess program educational (role specific graduate competencies/student learning) outcomes and program achievement outcomes. The program educational (role specific graduate competencies/student learning) outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress and are guided by the program mission and philosophy as well as the College mission, vision, and goals (Criterion 1.1). Formal evaluation of the plan occurs annually during the May NFO Curriculum/Program Evaluation meeting. The findings are used for development, maintenance, and revision of the program. Following review of the SPE, the findings are documented within the SPE (Appendix I) and are reflected in the minutes of the last NFO meeting of the academic year. Informal program evaluation of the SPE occurs continuously. The NFO standing committees are responsible for reviewing all aspects of their respective areas to be evaluated and reports are provided during the monthly NFO meetings.

The SPE was updated in January 2013 to reflect the new 2013 ACEN Standards and Criteria and will provide assessment findings for the period of academic years 2014 to 2016. The current SPE, which faculty are in the process of reviewing and trending, covers the period of academic years 2011 to 2013. This SPE is based on 2008 ACEN (formerly NLNAC) Standards and Criteria.

During the process of updating the SPE to the 2013 Standards it was made evident that previous assessment of program educational (role specific graduate competencies/student learning) outcomes (referred to as program objectives) as well as course outcomes (referred to as course objectives), is not readily apparent in the academic year 2011-2013 SPE. Assessment measures were completed, however, results were not clearly or directly defined within the SPE. Data provided from the surveys administered did not clearly delineate the outcomes except as demonstrated by achievement outcomes. Assessment tools were revised with the addition of items that better address program educational and course outcomes. Evidence of this is demonstrated within the AY 2014-2016 SPE document and AY 2014 assessment tools. The SPE was written to clearly delineate assessment results by cohort otherwise identified as; Traditional,



BADNAP, and CLP pathways. With curriculum revision, faculty revised the program's mission, philosophy, and organizing framework, as well as program and course outcomes, which are now more clearly aligned. The OCCC nursing faculty is committed to providing high quality learning experiences to prepare nursing students to pass the NCLEX-RN examination and to work safely and effectively within the community as entry level nurses.

Several tools are used to assess that nursing graduates have demonstrated achievement of competencies appropriate to an entry level RN. The tools used to measure achievement of competencies include:

- Graduate Evaluation by Employer Survey
- Nursing Program Post Graduate Survey
- Nursing Advisory Committee Survey
- Total Program Evaluation by Faculty Survey
- Clinical Evaluation Tool

Items within the surveys address the program educational (role specific graduate competencies/student learning) outcomes. The Nursing Program Post Graduate Survey and Graduate Evaluation by Employer Survey are conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up six months post-graduation to the nursing graduates and their employers. The *Graduate Survey Process* document can be viewed in the document room as Exhibit 6.1A. Survey results are then forwarded to the chair of the NEC. The Nursing Advisory Committee Survey and the Total Program Evaluation by Faculty Survey are distributed for administration by the NEC. Results are tabulated by the NEC for dissemination to standing committees. Successful completion of the clinical experience is indicated by a satisfactory rating. Students are evaluated according to progression toward completion of course and program educational outcomes in the areas of client care, communication/collaboration, safety, and professional behaviors. The clinical evaluation tool, as well as results of clinical evaluation, is reviewed annually by the Clinical Evaluation Committee of the Nursing Curriculum Committee with recommendations forwarded to the Nursing Curriculum Committee. This tool can be viewed in the document room within the *Nursing Program Curriculum Notebook* or by individual course in the *Course Notebooks*.

Demonstration of achievement of individual nursing course outcomes by students is undertaken through measures which include:

- Student Evaluation of Nursing Course Survey
- Student Exit Survey
- Faculty Evaluation of Nursing Course Survey
- Clinical Evaluation Tool
- ATI Final Exam Results
- Successful Completion of Course

Survey results are tabulated and disseminated by the NEC. The clinical evaluation tool is reviewed annually by nursing course team members as well as those mentioned previously. The ATI Final Exam results are reviewed semi-annually by nursing course team members and annually by the Nursing Testing Committee in March and the Nursing Curriculum Committee in April. Assessment of Program Achievement Outcomes is demonstrated individually in the SPE and includes program completion rates, NCLEX-RN performance, job placement rates, graduate satisfaction with nursing program, and employee satisfaction with



preparation of graduates for entry level practice. Measures that assess achievement of these outcomes include:

- Graduate Evaluation by Employer Survey
- Nursing Program Post Graduate Survey
- Nursing Advisory Committee Survey
- Total Program Evaluation by Faculty Survey

To assess job placement rates, graduates are contacted six months from date of graduation by telephone and by survey.

Assessment of Program Educational (Role Specific Graduate Competencies/Student Learning) Outcomes demonstrates that graduates and current students have achieved identified competencies consistent with the institutional mission and professional standards. This demonstrates that the outcomes of the nursing education unit have been achieved.

Criterion 6.2: Evaluation findings are aggregated and trended by program option, location, and date of completion and are sufficient to inform program decision-making for the maintenance and improvement of the student learning outcomes and the program outcomes.

Data from individual evaluation tools is reviewed each semester by the Nursing Evaluation Committee (NEC) for trending patterns with results/recommendations shared with the Standing Committees. Aggregate data from these evaluations are used to guide decisions concerning the program learning and curriculum. All evaluation tools utilize a Likert-type scale for assessment. All data must meet an expected level of achievement of 3.5 out of a scale of 5.0 (2.8 out of a scale of 4.0 for NESA surveys). Recommendations to standing committees or the NFO occur when data demonstrates a downward trend or is below the ELA. Evaluation data is also shared with nursing course teams such as through the Student Evaluation of Nursing Course for course improvement and to the Nursing Program Director and Nursing Program Associate Director. A list of all assessment and survey tools (including purpose/definition of each) can be viewed in the document room within Exhibit 6.2A.

The SPE includes categories for planning and implementation. The plan can be further delineated to include: expected level of achievement, frequency of assessment, assessment methods, results of data collection and analysis, and actions for program development, maintenance, or revision.

A new survey was introduced during fall 2013. The survey, the Nursing Student Evaluation of Clinical Laboratory Faculty, will allow students to evaluate laboratory faculty who assist them in obtaining their clinical/clinical laboratory goals through practice and remediation.

Three new items were added to the Nursing Advisory Committee Survey during fall 2013. These items are for employers only and relate to employer satisfaction with our graduates' preparation for their role as registered nurses. The items added are:

- Do you employ our graduates?
- If you do employ our graduates, are you satisfied with their preparation?
- If not satisfied with our graduates' preparation, how could they be better prepared?



An ongoing goal of the NEC is to improve response to the program surveys as well as to institutional surveys. Currently student and faculty surveys are provided online with links distributed to course Team Leaders each semester. Reminder e-mails are sent out as well to ensure time is allowed for students and faculty to complete the surveys prior to the end of the semester or clinical experience. The NESA Staff Evaluation of Clinical Experience, Faculty and Students is provided by paper copy as well as online for clinical facility staff to complete during and at the end of students' clinical experience. Paper copies are also provided for all surveys as needed.

Nursing faculty provides education and information to their students on the importance of the survey process each semester. Students attending NEC meetings held during the semester are educated on the evaluation process including the importance of data provided from the surveys we ask them to complete. These students are asked to share this information with their student peers.

Review of the Nursing Program Post Graduate Survey and the Graduate Evaluation by Employer Survey administered through the OCCC Department of Institutional Effectiveness (IE) by the NEC and faculty indicated poor response rates as shown in Table 6.2.1. The Graduate Evaluation by Employer Survey response rate is dependent upon the response to the Nursing Program Post Graduate Survey.

Year	Number	Number	Percent
real	Surveyed	Responding	Responding
FY2012	216	51	23.6%
FY2011	159	103	64.8%
FY2010	204	52	25.5%
FY2009	208	73	35.1%
FY2008	181	55	30.6%

 Table 6.2.1:
 Nursing Program Post Graduate Survey

When queried about their plan to improve survey response rates, IE responded that the OCCC graduate response rate (Post Graduate Survey) has been roughly 50%, which is excellent for this type of survey. The employer survey results went from eight employers responding from the FY2011 graduates to 98 for the FY2012 graduates. The low response rate for the nursing special survey is probably attributable to the fact that this survey is included in the survey that is sent through the mail. (IE sends at least two surveys through the mail) Once IE starts phone calling all special surveys are deleted and the college-wide survey is cut by one third. IE has encouraged graduates to complete the online survey which includes the special surveys. IE stated that it is very difficult to keep the graduate on the line to answer a few questions and they report if more questions are added the graduates would hang up.

IE's plan for the Graduate Evaluation by Employer Survey, which they have already put in place, is to contact employers within one week of contacting the graduate. IE must have the student's permission to contact the employer. In addition, they have emphasized with the phone caller to obtain the graduate's supervisor's name. The nursing faculty and the NEC will continue to educate graduating students on the importance of these surveys for our program.

One of the goals of the Institutional Effectiveness office is to increase the response rate of the graduate surveys. One method that they use is to send out individual holiday cards with each graduate survey. For greater impact, IE has the faculty sign the cards. A copy of the process is included in Exhibit 6.1A.



Criterion 6.3: Evaluation findings are shared with communities of interest.

Evaluation findings are shared with several communities of interest. Communities of interest include the OCCC Board of Regents, the Oklahoma Board of Nursing, OCCC students, OCCC general faculty, OCCC nursing faculty, clinical agency partners, graduate employers, nursing program alumni, area nurse educators, and nursing program educational partners.

Each year the Nursing Program Director prepares an annual report that is submitted to the Oklahoma Board of Nursing and shared with the College President, College Board of Regents, Vice President of Academic Affairs, Associate Vice President of Academic Affairs and the Dean for Health Professions. The information in this report includes: accreditation status, nursing curriculum updates to include curricular design, a clinical facility report, program expenditures, nursing faculty and staff statistical data, clerical and support staff salaries, student statistical data, teaching assignments, faculty meetings, travel and continuing education costs, graduation attrition/retention data, library purchases and faculty workload. In addition, the Nursing Program Director prepares annual reports for the ACEN and periodic reports as requested by OCCC Academic Affairs, the Oklahoma State Board of Regents for Higher Education, and others.

The OCCC Nursing Program has a bi-annual advisory board meeting; one in the fall and one in the spring. The committee consists of representatives from clinical agencies, local nursing programs, industry, interested members of the community, full-time and part-time nursing faculty, OCCC campus administrators, current students, and graduates of the nursing program. The members of the Nursing Advisory Committee share agency administrative concerns, report on the implementation of new policies or technologies and offer insight into community issues and needs. The committee provides students and faculty with information regarding practical job application experiences and employment opportunities for students who complete the program. Discussion concerning practice related issues provides valued information to assist the Program with curriculum updates and improved student learning experiences. Data from faculty and student surveys to include NESA survey results are shared along with program achievement outcomes and are discussed with the membership. A survey is given to membership at the close of the meetings for the purpose of improving the program and reporting mechanisms.

Program reports are submitted quarterly to the ADN Deans and Director's Council of which the Nursing Program Director and Nursing Program Associate Director are members. The reports include information regarding the NCLEX pass rate by cohort, student census, program updates such as curriculum revisions, new program options, and accreditation updates.

The public is informed about the Program's NCLEX-RN pass rates through a link to the Oklahoma Board of Nursing on the nursing webpage <u>http://www.occc.edu/academics/programs/nursing.html</u>

The curriculum mapping document was shared with the Program's clinical affiliates during summer 2013. Three replies have been received with one resulting in an addition to the mapping document and content taught in our program. T. Bryan, the clinical liaison from Veteran's Hospital in Oklahoma City asked the following question, "Do you incorporate Safe Patient Handling and Mobility in your curriculum?" Upon review it was discovered that we did not. The American Nurses Association has issued an official position statement on Safe Patient Handling and Mobility so it was important that this be included in content taught to our students. Safe Patient Handling and Mobility was added to NUR 1519 and NUR 2549.



Criterion 6.4: The program demonstrates evidence of achievement in meeting the program outcomes.

6.4.1 Performance on licensure examination: The program's 3-year mean for the licensure

examination pass rate will be at or above the national mean for the same 3-year period.

Program pass rates on the NCLEX-RN have consistently been above the Oklahoma and National pass rate (Table 6.4.1.1)

Year	OCCC Pass Rate	Oklahoma Pass	National Pass Rate			
real	%	Rate	%			
2008	92.78%	85.65%	86.73%			
2009	91.75%	86.67%	88.42%			
2010	92.57%	86.77%	87.42%			
Mean 08-10	92.37%	86.36%	87.52%			
2011	94.97%	86.34%	87.90%			
Mean 09-11	93.10%	86.59%	87.91%			
2012	96.85%	91.45%	90.34%			
Mean 10-12	94.80%	88.19%	88.55%			
2013 (after 3 quarters)	90.91%	81.91%	80.78%			

 Table 6.4.1.1:
 NCLEX-RN Pass Rates Calendar Year 2009-2012

6.4.2 Program completion: Expected levels of achievement for program completion are determined by the faculty and reflect student demographics and program options.

Program completion rates (as defined in the table below) have varied per pathway with the Traditional and BADNAP pathways dropping below the ELA of 80% from 2010-2012 (Table 6.4.2.1). The application process to the BADNAP pathway was changed effective academic year 2012-2013. Students are now required to take the Test of Essential Academic Skills (TEAS) Exam. The purpose of the change was to decrease attrition rates and improve completion rates for the BADNAP pathway. Students must achieve a minimum score of 70 on the TEAS exam to be eligible for admission to the BADNAP pathway.

The Career Ladder Pathway has maintained completion rates above 90%. During summer 2011, the Nursing Program Director, the Nursing Program Associate Director, the Assistant Nursing Program Director and faculty members attended several teleconferences with a QSEN consultant, Dr. Joanna Mulready-Schick, who assisted with the Program's curriculum revision process. Under the recommendation of Dr. Mulready-Schick, the expected level of achievement (ELA) for program completion rates was lowered from 80% to 70%. This recommendation was implemented for the academic year 2013.

Academic Year	Traditional (6 semesters)	Career Ladder (4 semesters)	Baccalaureate to ADN (4 semesters + 1 summer)	Overall Program Completion Rate
2009	80%	91%	83%	84.67%
2010 2011	79.5% 69%	94% 94%	78% 72%	83.83% 78.33%



Academic Year	Traditional (6 semesters)	Career Ladder (4 semesters)	Baccalaureate to ADN (4 semesters + 1 summer)	Overall Program Completion Rate
2012	72.5%	95%	68%	78.5%
2013	81.66%	93.87%	83.92%	86.48%

Although not academic, the attrition rate for the nursing program is due in part to the number of Withdrawal/Passing students that leave the program for personal rather than academic reasons. In an attempt to decrease this area of student attrition, steps have been implemented to better prepare students and make them aware of the demands and rigor of the nursing program prior to entering.

6.4.3 Graduate Program Satisfaction: Qualitative and quantitative measures address graduates six to twelve months post-graduation.

Graduates have consistently demonstrated their satisfaction with the nursing program as reported by an ELA of 3.5 or greater from 90% of the respondents to the survey. Data reflected in Table 6.4.3.1 is provided by the OCCC Department of Institutional Effectiveness who administers the Nursing Program Post Graduate Survey. Survey results are forwarded to the chair of the NEC. Results are tabulated by the NEC for dissemination to standing committees.

Table 6.4.3.1: Graduate Program Satisfaction

Year	2008	2009	2010	2011	2012
Response rate to survey	55/181	73/208	52/204	103/159	51/216
	30.6%	35.1%	25.5%	64.8%	23.6%
Satisfaction with preparation for NCLEX-RN exam	3.39	3.79	4.40	4.35	4.22
Satisfaction with preparation for clinical practice	3.28	3.71	4.00	Not rated	3.67
Overall satisfaction with nursing program	3.76	3.88	4.30	4.19	4.20

6.4.4 Employer Program Satisfaction: Qualitative and quantitative measures address employer satisfaction with graduate preparation for entry-level positions six to twelve months post graduation.

Employers of Program graduates have consistently demonstrated satisfaction. Data reflected in Table 6.4.4.1 was provided by the OCCC Department of Institutional Effectiveness who administers the Graduate Evaluation by Employer survey. Survey results are forwarded to the chair of the NEC. Results are tabulated by the NEC for dissemination to standing committees.

Year	2008	2009	2010	2011	2012
Response Rate	19/33	25/59	7/25		28/31
	58.60%	42.37%	38.89%	4	90.3%
Satisfaction with critical thinking skills	4.28	4.40	4.50	5.00	4.39
Overall satisfaction with demonstration of professional, social, and personal behaviors consistent with expectations of an entry-level					
registered nurse	4.72	4.56	4.67	4.67	4.36
Overall satisfaction of the preparation received by OCCC nursing graduates	4.59	4.57	4.88	4.33	4.62

Table 6.4.4.1: Employer Program Satisfaction

6.4.5 Job Placement Rates: Expected levels of achievement are determined by the faculty and are addressed through quantified measures six to twelve months post-graduation.

Job placement rates are measured through a telephone survey, social media, and verbal contact with graduates six months post-graduation and through the Nursing Program Post Graduate Survey administered by IE. It is expected that eighty percent (80%) or greater of graduates seeking employment will obtain an entry-level position within six (6) months post-graduation. The expected level of achievement (ELA) for job placement was previously set at 90% for academic years prior to 2013. It was lowered to 80% for academic year 2013 secondary to recommendation of the QSEN consultant. Our graduates have expressed no difficulty obtaining employment. The program is working toward improving response to the survey and obtains contact information from students at completion of the program. Students are educated on the use and importance of the information. Job placement rates have exceeded 80% annually (Table 6.4.5.1/6.4.5.2). Currently 91.3% of the fall 2012 Traditional Pathway (AY 2013) graduates are employed (42 out of the 46 responding to telephone survey).

<u> </u>	lates	Respo	ondents	Idents			
Academic Year	Number of Graduates Number		Number Employed	Percent of Respondents Employed			
AY 2010	203	81	81	100%			
AY 2011	160	156	149	96%			
AY 2012	218	192	176	92%			
AY 2013	194	51	47	92%			

Table 6.4.5.1 Job Placement Rates

*AY 2013 is fall 2012 graduates only to date

Table 6.4.5.2: 6 Month Post Graduation Job Placement (by Program Cohort)

Dat	es	Tradi	Traditional NP4 CLP BADNA		CLP		ADNAP
Graduation	Survey	# Grads	# Respondents Employed	# Grads	# Respondents Employed	# Grads	# Respondents Employed
F10	6/11	59	56/59 (95%)				
SP11	12/11	40	38/40 (95%)	33	27/29 (93%)	28	28/28 (100%)
F11	6/12	66	61/65 (94%)				
SP12	12/12	65	48/54 (88.8%)	42	35/38 (92%)	45	32/35 (91%)
F12	6/13	61	47/51 (92%)				
SP13	12/13	61		37		35	
F14	6/15						
SP15	12/15						
F15	6/16						

Appendix A

HLC Report on Accreditation





March 27, 2012

President Paul W. Sechrist Oklahoma City Community College 7777 S. May Ave. Oklahoma City, OK 73159-4444

Dear President Sechrist:

This letter is formal notification of the action taken concerning Oklahoma City Community College by the Higher Learning Commission. At its meeting on March 19, 2012, the Institutional Actions Council (IAC) voted on the items below. This letter serves as the official record of this action, and the date of this action constitutes the effective date of your new status with the Commission.

Action. The IAC voted to continue the accreditation of Oklahoma City Community College with the next comprehensive evaluation to be set in 2021-22.

If the current Commission action includes changes to your institution's *Statement of Affiliation Status (SAS)* or *Organizational Profile (OP)*, the changes will appear in these documents on the Commission's Web site by April 16, 2012. The *SAS* is a summary of your institution's ongoing relationship with the Commission. The *OP* is generated from data you provided in your most recent Institutional Update. No other institutional information was changed.

If you have questions about these documents after viewing them, please contact Andrew C. Lootens-White, your staff liaison. Information about notifying the public of this action is found in Chapter 8.3-3 and 8.3-4 of the *Handbook of Accreditation, Third Edition*.

Please be aware of Commission policy on planned or proposed institutional changes that require Commission action before their initiation. You will find the Commission's change policy at ncahlc.org/information-for-institutions/institutional-change.html. If you have questions about how planned institutional changes might affect your relationship with the Commission, please write or call Andrew C. Lootens-White.

On behalf of the Board of Trustees, I thank you and your associates for your cooperation.

Sincerely,

Sylina Manning

Sylvia Manning President

cc:

Evaluation Team Members Board Chair

Appendix B

NLNAC SVR and Decision Letter



NLNAC

National League for Nursing Accrediting Commission, Inc.

BOARD OF COMMISSIONERS

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HOWARD L. SIMMONS, PHD Professor and Chairperson Department of Advanced Studies, Leadership and Policy Morgan State University Baltimore, Maryland August 2, 2006

Rosemary Jimerson Klepper, MS, RN Nursing Program Director, Division of Health Professions Oklahoma City Community College 7777 South May Avenue Oklahoma City, OK 73159-4444

Dear Ms. Klepper:

This letter is formal notification of the action taken by the National League for Nursing Accrediting Commission at its meeting on July 12-14, 2006. The Board of Commissioners granted the associate degree nursing program continuing accreditation and scheduled the next evaluation visit for Spring 2014.

Deliberations centered on the Self Study Report, the School Catalog, the Site Visitors' Report, and the recommendation for accreditation proposed by the program evaluators and the evaluation review panel. (See Summary of Deliberations and Recommendation of the Evaluation Review Panel)

The Board of Commissioners removed the following area needing development:

Standard VII. Educational Effectiveness

Develop strategies to improve survey response rates.

On behalf of the Commission, we thank you and your colleagues for your commitment to quality nursing education. By choosing to have accreditation by NLNAC, your nursing program demonstrates a continued interest in having the program measured against the highest national standards of quality in nursing education. If you have questions about this action or about Commission policies and procedures, please write or call John F. Garde, CRNA, MS, FAAN, Interim Executive Director or a member of the NLNAC Staff.

Patricia R. Forni, PhD, RN, FAAN Chair, NLNAC Board of Commissioners

cc: Katherine Townsend, EdD, MSN, BSN Program Evaluator Judy Murphy, PhD, RN Program Evaluator Patricia D. Fonder, MSN, RN Program Evaluator

Enc. Summary of Deliberations of the Evaluation Review Panel

NLNAC

National League for Nursing Accrediting Commission, Inc.

61 Broadway - 33rd Floor • New York, NY 10006 P. 800.669.1656 ext.153 • F. 212.812.0390 • www.nlnac.org

SUMMARY OF DELIBERATIONS AND RECOMMENDATION OF THE Associate Degree Evaluation Review Panel Spring 2006 Accreditation Cycle

<u>OKLAHOMA CITY COMMUNITY COLLEGE</u> <u>OKLAHOMA CITY, OKLAHOMA</u>

Associate Degree Program Accreditation History

Established: 1973

Initial Accreditation: June 1977

Last Evaluation Visit: <u>February 1998</u> Action: Continuing Accreditation. Next visit in 8 years (Spring 2006).

Overview

Length of Program:	<u>72</u> cre	edits	
Number of Students:	261	Full time: 261	Part-time: 0
Number of Faculty*:	28	Full time: <u>13</u>	Part-time: 15
	* refers	to faculty teaching assi	anment not contract

Evaluation Review Panel Summary

Recommendation: Continuing Accreditation. Next review in eight (8) years.

Commentary:

Areas of Strengths by Accreditation Standard

Standard I: Mission and Governance

- Leadership of the nurse administrator.
- Student participation in governance.
- College support of the nursing program.

Standard IV: Curriculum and Instruction

- Innovative Career Ladder Program.
- Standard V: Resources
 - Skills laboratory.
 - Clinical Affiliation and Simulator Coordinators.

Areas Needing Development by Accreditation Standard

Standard II: Faculty

- Facilitate the timely completion of graduate study for those faculty who do not currently hold at a minimum, a master's degree with a major in nursing.
- Implement strategies to recruit and retain academically qualified faculty.

Standard V: Resources

- Implement strategies to assure the ongoing systematic review of library holdings (paper and electronic) for retention or deletion.
- Develop a plan for assuring privacy for faculty to student conferencing.

Standard VI: Integrity

• Review and revise published documents (paper and electronic) to assure that they are accurate, complete, current, clear, consistent, including the NLNAC listing.

Standard VII: Educational Effectiveness

• Develop strategies to improve survey response rates.

Appendix C

OBN SVR and Decision Letter



OKLAHOMA BOARD OF NURSING



2915 CLASSEN BOULEVARD • SUITE 524 • OKLAHOMA CITY, OKLAHOMA 73106-5437 • (405) 962-1800 www.ok.gov/nursing • Fax (405) 962-1821

February 02, 2010

Rosemary Klepper, MS, RN, Director Oklahoma City Community College School of Nursing 7777 S. May Oklahoma City, OK 73159-4444

Dear Ms. Klepper,

At the January, 2010, meeting, the Oklahoma Board of Nursing considered the report of the survey visit to Oklahoma City Community College, School of Nursing, Oklahoma City. The Board would like to thank you for your attendance at the meeting. It was the Board's decision to:

- Accept the survey visit report;
- o Accept the recommendations and endorse the commendations; and
- Grant continuing full approval for five years.

The Oklahoma Board of Nursing appreciates your efforts to cooperate with standards that serve to upgrade and promote the academic credibility of Oklahoma nursing education programs. The members and staff of the Oklahoma Board of Nursing look forward to the continuing progress of the program, and trust that you will contact us when we can be of assistance.

Sincerely,

Wendy Hubbard

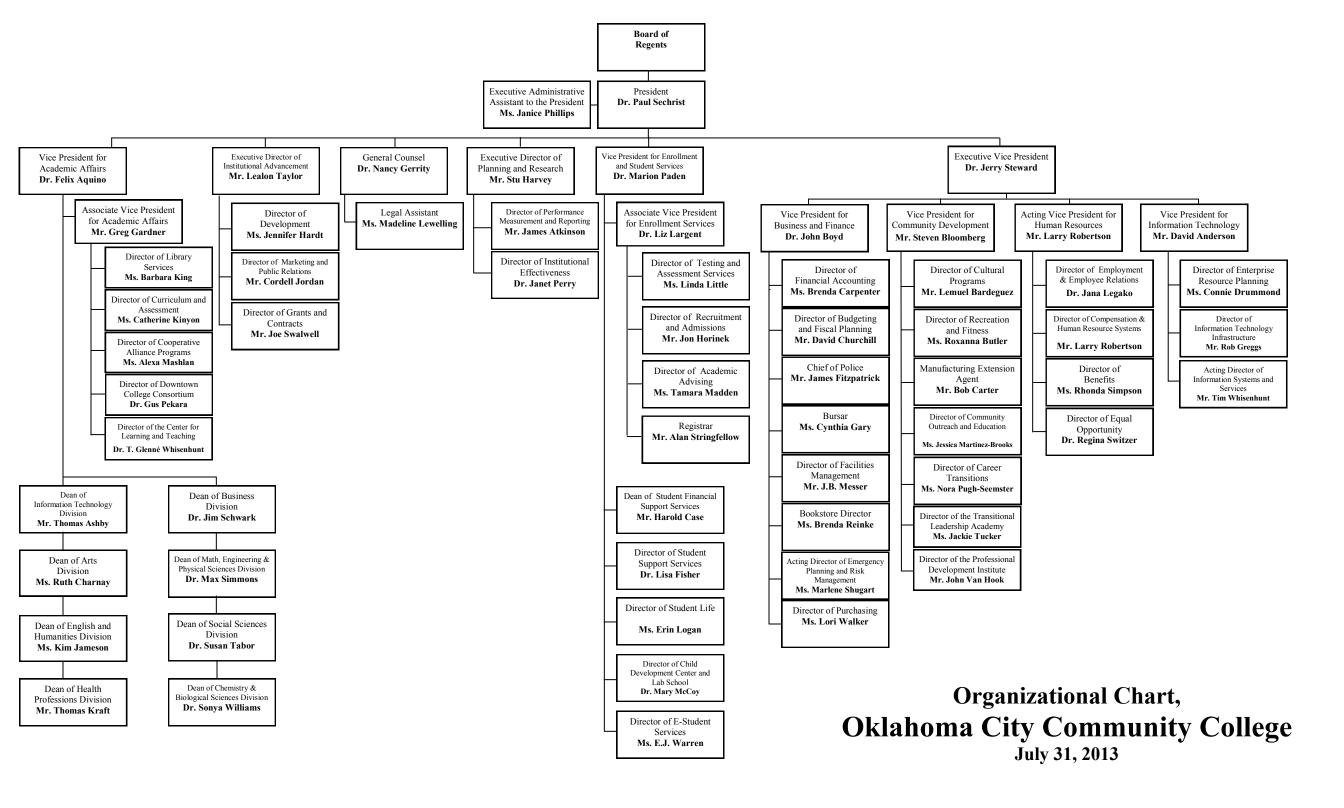
Wendy Hubbard, MS, RN Nursing Education Consultant

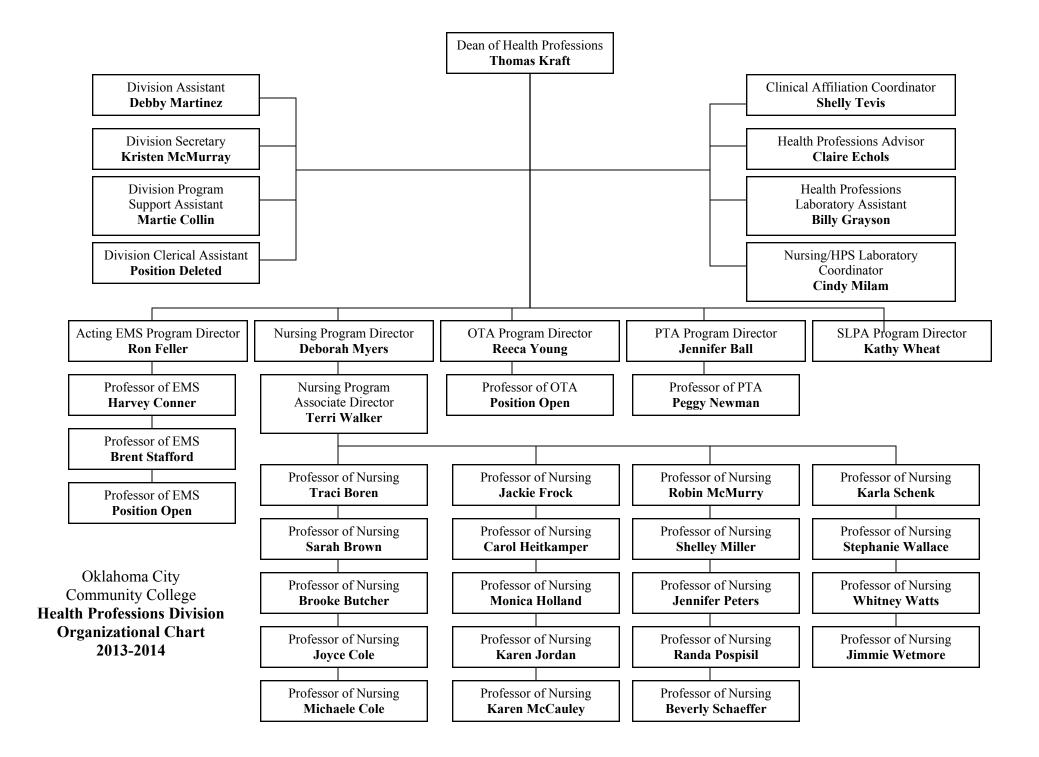
Cc: Dr. Paul Secrist, President Dr. Jo Ann Cobble, Health Sciences Division Dean

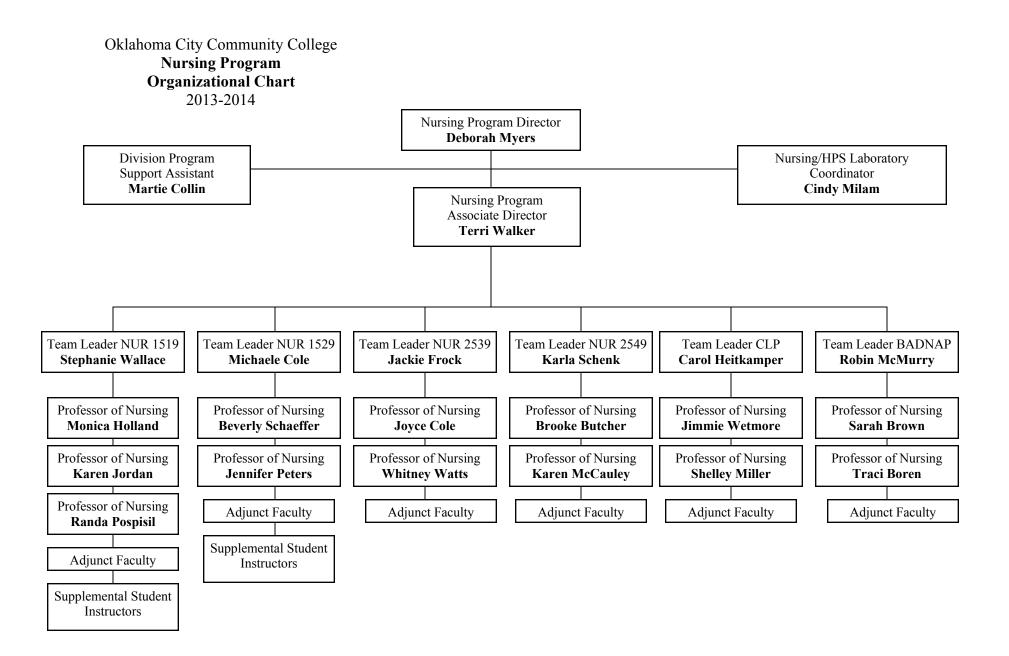
Appendix D

College Organizational Charts









Appendix E

D. Myers Curriculum Vita



CURRICULUM VITA Deborah K. Myers, MS, RNC

PERSONAL INFORMATION:

Address: 505 S.W. 30th. Circle, Moore, Oklahoma 73160 Phone: 405-793-7440 (H); 405-642-7717 (Cell) E-mail address: <u>dkmyers@occc.edu</u> (W); <u>myers_sooners@sbcglobal.net</u> (H)

EDUCATION:

No degree awarded, computer application courses Oklahoma City Community College	1998-1999
Master of Science, Nursing University of Oklahoma	1987
Bachelor of Science, Nursing University of Oklahoma	1976-1979
No degree awarded, pre-nursing major Northern Oklahoma College	1974-1976
ACADEMIC APPOINTMENTS:	
Nursing Program Director Oklahoma City Community College present	2011 to
Associate Nursing Program Director Oklahoma City Community College	2009-2011
Assistant Nursing Program Director Oklahoma City Community College	2004-2009
Professor of Nursing Oklahoma City Community College	2003-2004
Nursing Laboratory Coordinator (adjunct position) Oklahoma City Community College	1998-2003

Adjunct Nursing Faculty University of Oklahoma	1995
Adjunct Nursing Faculty Oklahoma City Community College	1989-1994
PROFESSIONAL LICENSE/CERTIFICATIONS/CREDENTIALS:	
Registered Nurse, State of Oklahoma: active status (1979 to present). Certificate (R0033786)	number
Inpatient Obstetric Nursing Certification (1990-present)	
American Heart Association BLS for Healthcare Providers (1979-present)	
Certified Infant Massage Instructor	
Neonatal Resuscitation Regional Instructor (1991-2006)	
PRIMARY NURSING EXPERIENCE:	
Nursing Program Director Oklahoma City Community College present	2011 to
Responsibilities include the ongoing development and administration of the nursi	ng program.
Associate Nursing Program Director Oklahoma City Community College	2009-2011
Responsibilities include providing administrative support and assistance to the New Program.	ursing
Assistant Nursing Program Director Oklahoma City Community College	2004-2009
Responsibilities include providing student instruction and administrative support	to the

Responsibilities include providing student instruction and administrative support to the Nursing Program Director, as well as accomplishing specific tasks, activities, and responsibilities necessary or the functioning of the nursing program.

Professor of Nursing Oklahoma City Community College

2004

Responsibilities include teaching activities to provide instruction to nursing students to complete an associate degree in nursing. Maternal Child Health (staff nurse) 2000-2001 Staff nurse in labor and delivery, postpartum and newborn nursery caring for low to high risk clients. Nursing Laboratory Coordinator (adjunct position) Oklahoma City Community College 1998-2003 *Responsibilities include providing instruction to students in a simulated setting, providing* technological support, coordination of laboratory activities and scheduling, inventory control, record keeping, and providingeducational support to faculty. **Adjunct Nursing Faculty** University of Oklahoma 1995 *Provided clinical instruction to students in an obstetrical setting.* **Adjunct Nursing Faculty** Oklahoma City Community College 1991-1994 Provided clinical instruction to students in an obstetrical setting. Maternal Child Health (staff nurse, coordinator of prenatal clinic) Hillcrest Hospital 1990-2000 Staff nurse in labor and delivery caring for low to high risk clients. Coordinated staffing, client scheduling, management of client records, and provided direct client care in the Resident Prenatal Clinic. Labor and Delivery (staff nurse) University Hospital 1988-1990 *Provided direct patient care to clients in a high risk obstetrical setting.* Maternal Child Health (head nurse) 1987-1988 Norman Regional Hospital Responsibilities included scheduling of staff, annual evaluations, budget preparation, staff development, hiring and personnel management, participation on various nursing and hospital committees, and policy development.

Medox Nurse Staffing Agency (staff nurse NICU)	
Oklahoma City, Oklahoma	1982-1984
Provided direct patient care to clients in a neonatal intensive care unit.	
Maternal Child Health (director of maternal child health) Hillcrest Hospital	1981-1987
Responsibilities included scheduling of staff, annual evaluations, budget prepara development, hiring and personnel management, participation on various nursing committees, and policy development.	
Maternal Child Health Nurse (staff nurse, charge nurse) Hillcrest Hospital	1980-1981
Responsibilities included direct patient care of obstetrical, neonatal, and pediatrestaff assignments and shift management.	ic clients,
Neonatal Intensive Care (staff nurse) Children's Hospital	1979-1980
Provided direct patient care to clients in a neonatal intensive care unit.	
HONORS/AWARDS/RECOGNITIONS:	
Outstanding Nursing Adjunct Oklahoma City Community College 2000	1999 and
Parry Scholastic Scholarship Award University of Oklahoma, Graduate College	1986-1987
Sigma Theta Tau, University of Oklahoma (inducted)	1979
Regent's Scholarship University of Oklahoma	1978-1979
President Academic Club University of Oklahoma	1978-1979
Dean and President's Honor Rolls University of Oklahoma	1978-1979
Who's Who in American Nursing University of Oklahoma	1978-1979

CURRENT PROFESSIONAL MEMBERSHIPS:

Oklahoma Nurses Association

IONE (Institute of Oklahoma Nurse Educators)

AWHONN (Association of Women's Health, Obstetric and Neonatal Nurses)

National League for Nursing

Sigma Theta Tau National Nursing Honor Society, Beta Delta Chapter, inducted 1979.

PROFESSIONAL PRESENTATIONS:

Improving Test Reliability Through Item Analysis. Oklahoma City Community College. Oklahoma City, OK. April 18, 2005.

NCLEX-RN: Licensure Exam Updates. 2007 OACC Conference. Oklahoma City, OK. March 1, 2007.

"OB Simulation, Using Clinical Simulation in Nursing and Allied Health Education and Staff Development", Oklahoma Health Care Workforce Center "Best Practices Workshop", May 21, 2008.

GRANTS:

Lead faculty on an internal grant awarded at Oklahoma City Community College for AY2007: "Integration of health informatics into an accelerated nursing curriculum through the use of personal digital assistants (PDA's).

Member of faculty grant team awarded an internal grant at Oklahoma City Community College for AY2009: "Putting It All Together: Facilitating and Enhancing Skill Acquisition, Confidence Building, and Critical Thinking in a Technology Enhanced Curriculum".

GOVERNANCE MEMBERSHIP (Current):

Nursing Faculty Org. (Chair), Oklahoma City Community College, Oklahoma City, OK

Nursing Admissions Committee, Oklahoma City Community College, Oklahoma City, OK

Nursing Advisory Committee, Oklahoma City Community College, Oklahoma City, OK

Nursing Evaluation Committee (Former Chair), Oklahoma City Community College, Oklahoma City, OK

Nursing Leadership Committee, Oklahoma City Community College, Oklahoma City, OK

Nursing Curriculum Committee, Oklahoma City Community College, Oklahoma City, OK

Nursing Team Leader Committee, Oklahoma City Community College, Oklahoma City, OK

OCCC Health Strategies Task Force, Oklahoma City Community College, Oklahoma City, OK

OCCC College Benefits Committee, Oklahoma City Community College, Oklahoma City, OK

Institute for Oklahoma Nursing Education (IONE), (Co-chaired 2010, 2011, and 2013 Conference Committee)

Oklahoma A.D.N. Deans and Directors Council, Statewide, OK, (Co-chaired 2009 and 2010 Conference Committee)

Derek Calhoun and Bode Scholarship Committee Chair, Oklahoma City Community College, Oklahoma City, OK (2011-present)

Metro-Tech Technology Center LPN Advisory Committee

Francis Tuttle Technical Center LPN Advisory Committee

Rose State College RN Advisory Committee

Kramer School of Nursing RN Advisory Committee

COMMUNITY SERVICE:

Life Saver 5km and 1 Mile Fun Run, Oklahoma City Community College, Oklahoma City, OK. (Race Director 2009-2012)

Blood Drive Coordinator at St. Andrew's Methodist Church, Oklahoma City, OK. (2000-2010)

Appendix F

Nursing Program Director Job Description



OKLAHOMA CITY COMMUNITY COLLEGE NURSING PROGRAM DIRECTOR JOB DESCRIPTION

The Nursing Program Director has the authority and responsibility to maintain the nursing program in compliance with the general policies of Oklahoma City Community College. Included are the:

- 1. Development and maintenance of cooperative relationships within the Nursing Program, Health Professions Division, College administration, and other departments.
- 2. Development and maintenance of cooperative relationships with hospital administration, appropriate official agencies and community groups.
- 3. Administration of the Nursing Program to ensure that requirements are met for ongoing approval and accreditation through the College, Oklahoma State Regents for Higher Education, Higher Learning Commission, Oklahoma Board of Nursing, and Accreditation Commission for Education in Nursing, Inc.

SUPERVISION

Work is performed under the direction and supervision of the Division Dean.

JOB DUTIES

(The omission of specific statements of duties does not exclude them from the position if the work is similar, related or a logical assignment to the position.)

SPECIFIC RESPONSIBILITIES

Faculty:

- 1. Provide over-sight of classroom, laboratory, and clinical instruction to ensure that content/objectives are current and adequately covered, teaching strategies are appropriate, and that faculty maintain constructive learning environments.
- 2. Provide over-sight of test items for clarity, cognitive level, correspondence with course objectives, and consistency with program testing policies.
- 3. Participate in the interview process and recommend for hire new adjunct faculty.
- 4. Chair the search committee for new full-time faculty.
- 5. Assign full-time and adjunct faculty teaching responsibilities according to the nursing program needs.
- 6. Assign full-time nursing faculty committee positions.

- 7. Identify the faculty educational needs and make recommendations to the Division Dean for allocation of travel funds and other faculty /staff development opportunities.
- 8. Foster professional relationships within the program faculty, other Division faculty and staff, students, other Divisions, public, and College administration.
- 9. Maintain primary responsibility for nursing faculty issues and grievances.
- 10. Coordinate the appraisal process for all nursing faculty/staff, including recommendations for merit to the Dean.
- 11. Coordinate the orientation of new full-time and part-time faculty.
- 12. Approve and monitor faculty office hours.
- 13. Approve faculty leave time and forward to the Dean.
- 14. Revise and recommend changes to faculty job descriptions as needed and submit for approval.
- 15. Prepare data for adjunct/special faculty contracts.

Program and Curriculum:

- 1. Chair the nursing faculty organization (NFO), ensuring that faculty participate in the assessment, planning, implementation and evaluation of the nursing program through regular meetings and committee/task force participation.
- 2. Provide over-sight for the preparation of accreditation reports for the OBN and ACEN as needed to assure that program accreditation is current.
- 3. Ensure maintenance/implementation of the systematic program evaluation plan.
- 4. Develop class schedules for the nursing program.
- 5. Coordinate the implementation and evaluation of the nursing curriculum.
- 6. Foster professional, reciprocal relationships with clinical agencies utilized for student experiences.
- 7. Provide information about the program to the public.
- 8. Maintain currency and accuracy of published information about the program, including prospective student letters and catalog.

- 9. With faculty input, revise, update, and/or establish the policies of the program.
- 10. With faculty input, update the nursing program's admission, progression, readmission, and retention policies.
- 11. With faculty input, review the student handbook annually and revise as needed.
- 12. With faculty input, evaluate and recommend selection of textbooks for the nursing program.
- 13. Participate in the process for negotiation clinical sites.
- 14. Actively participate in the NESA committee, the ADN Directors committee, and other community committees as needed to support the program.
- 15. Provide updates to the College curriculum committee as needed.

Program:

- 1. With input from the faculty and the dean annually formulate and establish short and long range goals for the program.
- 2. Coordinate the development/implementation/evaluation of the program's annual assessment plans and reports.
- 3. Monitor and report the NCLEX pass rates for the faculty, ACEN, and College administration.
- 5. Submit data for contracts with various health agencies where clinical facilities are utilized to the Clinical Affiliation Compliance Administrator to be processed for approval.
- 6. Actively participate in the Department Chairs and Program Directors committee, Leadership Council committee, and other assigned College committees.
- 7. Provide representation of the program at local, state, regional, or national meetings.
- 8. Facilitate interactions and collegial working relationships among the program faculty.
- 9. Provide required responses to program correspondence and reports from external agencies (e.g., ACEN, NLN, OSRHE).
- 10. Assist the Dean of Health Professions in the preparation of proposed program budget requests.

- 11. Provide necessary over-sight for grants, internal and external, to benefit the program and submit to Dean of Health Professions Division and VP for Academic Affairs for approval.
- 12. Determine and document the needs list for grants, such as Carl Perkins, that are awarded to the program.
- 13. Keep the Dean advised and current on the program and related issues.

Students:

- 1. Oversee the advisement, enrollment, progression, and retention of students.
- 2. Maintain primary responsibility when dealing with student grievances, grade appeals, student complaints, and other student problems as needed; when unresolved, provide information and documentation to the Dean.
- 3. Maintain an open door policy to students.
- 4. Monitor the clinical activities of the students for adequate achievement of course objectives.
- 5. Support the Nursing Student Association.
- 6. Recommend students identified by faculty for additional responsibilities such as tutoring within the department.
- 7. Assist with the coordination of the NCLEX application process.
- 8. Advise prospective students about the program.
- 9. Monitor degree checks for students and assist in making arrangements for required classes.
- 10. Assist with the coordination of the pinning ceremonies as needed.
- 11. Supervise the advanced placement processes for qualified students through the career ladder pathway or through transfer processes.

(The omission of specific statements of duties does not exclude them from the position if the work is similar, related, or a logical assignment to the position.)

QUALIFICATIONS

- Masters degree with a major in nursing.
- Three to five years teaching experience preferably in an associate degree nursing program.
- Demonstrated leadership skills, computer literacy, and competent administrative ability.
- Three to five years experience as a competent practitioner of nursing following graduation from a beginning level nursing program.
- Active membership and participation in nursing and other professional organizations.
- Hold a valid, unencumbered license to practice as a registered nurse in the state of Oklahoma or be eligible for Oklahoma licensure.
- Criminal history background check.

Appendix G

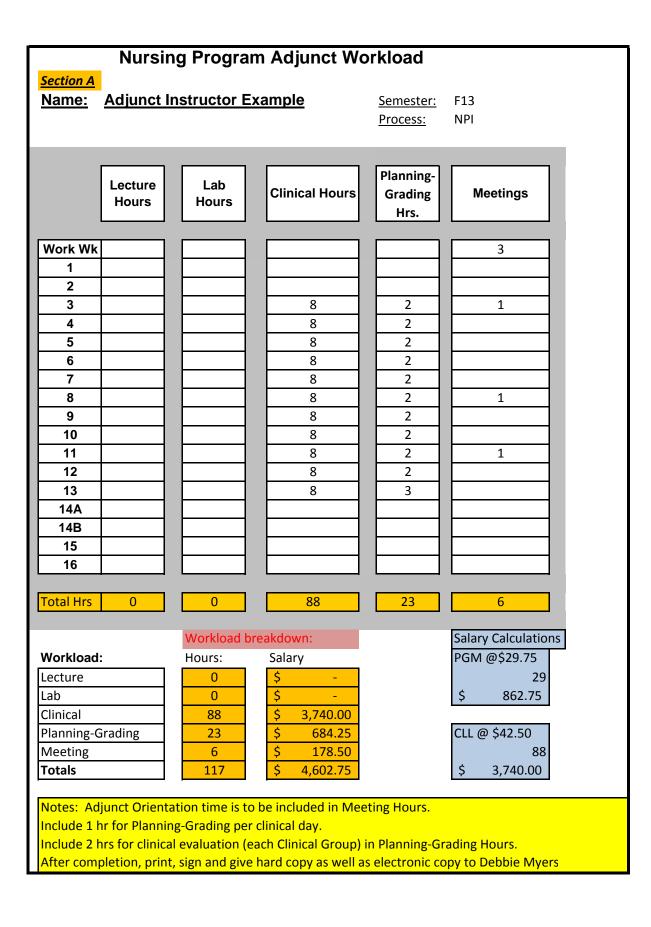
Nursing Workload Document



<u>Section A</u>		N	ursing	g Prog	ram W	orkloa	ad-Ful	l Time	Facult	у			C
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	Name.	<u>_</u>							Seme		ai.	115	INFI
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	Courses	taught	during s	semester		1	1						
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12	8				4				10				
14A	4				2								
14B	4				2								
15	8				4								
16	8				4								
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NUR 1519	1			Nursing									
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Lab		4.0		ł									
Clinical			000	ł									
Release Time	2	0.0		t	Total Sa	alary]					
Other		0.0		l	\$	-	360.00						
Totals		17.0	0000	1		urs/16-(1	5 CHE in	contract)=	CHE round	ed X \$680	0.00)		
Overload		2.	00										
	CHE consi												
	credit	t hours pe	er semes	ter.)									

		Amendn	nents										
<u>Section B</u>													
Name:	Full-Time E	xample		Semester:	F13								
	Changes to pre-semester workload calculations.												
Date	Lecture	cture Lab Clinical		CHE		Amount	Note:						
10/13/2013	4	2		0.38	\$	258.40	sub for sick faculty						
				0.00	\$								
				0.00	\$								
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	Ame	ndments T	otal:	0.38	\$	258.40							
	Adjus	ted Salary	Total:	2.38	\$	1,618.40	Adjusted workload and salary.						

Notes:	Notes and explanations of hours recorded in Section A.
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Amendments													
Section B		Chai	nges to pre	-sem	nester wo	rkload calcula	tions.						
Name:	Instructor E												
Date	Lecture	Lab	Clinical		ubtotal	Plan/Grade	Meetings		Note:				
10/12/2013			8	\$	320.00	2		\$ 56.00	sub.				
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Contact Hrs.		_		7	520.00	<u> </u>	<u> </u>	<u>y 30.00</u>					
contact m3.			s/Amendmo	ents		PGM Cha	nges/Amen	dments					
	Change in	-	8	\$	320.00	. en en	2	\$ 56.00					
127	Total Chang		96		1,060.00		31	\$ 918.75					

Subsection	<u>4</u>
Notes:	Notes and explanations of hours recorded in Section A.
Work Wk	Orientation and Team Mtg.
1	
2	
3	
4	
5	
6	
7	
8	

Appendix H

US Department of Education Eligibility and Certification Approval Report



MAR - 7 2013



FEDERAL STUDENT AID

UNITED STATES DEPARTMENT OF EDUCATION

FEDERAL STUDENT AID SCHOOL ELIGIBILITY CHANNEL SCHOOL PARTICIPATION TEAM DALLAS TEAM

Dr. Paul W. Sechrist PhD President Oklahoma City Community College 7777 South May Avenue Oklahoma City, OK 73159-4444 03/05/2013

OPE ID 01039100

Dear Dr. Sechrist:

The Dallas School Participation Team is pleased to inform you that, based upon the information included in your Application for Approval to Participate in Federal Student Financial Aid Programs, the Secretary of Education (Secretary) has determined that Oklahoma City Community College (Institution) satisfies the definition of an eligible institution under the Higher Education Act of 1965, as amended (HEA). Oklahoma City Community College will be listed in the next edition of the Directory of Postsecondary Institutions published by the U.S. Department of Education (Department).

OPE ID NUMBER

The OPE ID Number 01039100 is a unique identifier for the Institution. The OPE ID Number will also be the Institution's identification number for the Title IV, HEA programs. Please use the OPE ID Number in all communications with the Department.

ELIGIBILITY AND CERTIFICATION APPROVAL REPORT

Please print a copy of the Eligibility and Certification Approval Report (ECAR) Together, the Program Participation Agreement (PPA) that has been signed on behalf of the Secretary and the ECAR constitute the Dallas School Participation Team's determination that the Institution has qualified to participate in programs under the Higher Education Act of 1965, as amended (HEA) and the Federal student financial assistance programs (Title IV, HEA programs).

The Institution must retain the ECAR and the PPA together.

The ECAR contains the most critical of the data elements that form the basis of the Institution's approval, and also a list of the highest level of offering, any nondegree or short term training programs, and any additional locations that provide 50 percent or more of an educational program that have been approved for the Title IV, HEA programs. The Institution may not award, distribute or disburse any Title IV, HEA program funds for any educational or training program that is beyond the scope of the approval contained in the ECAR, nor for any additional location providing 50 percent or more of an educational program that has not been approved and is not listed on the ECAR.

- In order to comply with the requirements of 34 CFR 668.8(1), some vocational or nondegree programs may have been approved for fewer credit hours than requested in the Institution's application.
- Vocational and nondegree programs that do not meet the requirements of 34 CFR Parts 600 and 668 have not been approved and are marked in the ECAR as not approved.
- The listing of Vocational Programs in the ECAR contains those nondegree programs that the Dallas School Participation Team has determined are eligible programs for participation in the Title IV, HEA programs.
- The ECAR contains a list of HEA programs other than Title IV, HEA programs, for which the Institution is eligible to apply. This list does not mean that the Institution will automatically be eligible to participate in or receive funds under any HEA competitive grant program. Information concerning applications for, and the individual requirements of, the competitive grant program can be obtained from:

Deputy Assistant Secretary Office of Higher Education Programs U.S. Department of Education 400 Maryland Avenue, S.W. Washington, DC 20202-5140

PROGRAM PARTICIPATION AGREEMENT

The PPA contains the agreement between the Institution and the Secretary concerning the Institution's participation in the Federal student financial assistance programs (Title IV, HEA programs).

CERTIFICATION FOR TITLE IV, HEA PROGRAMS

As explained in the PPA, Title IV, HEA programs administered by participating educational institutions are subject to applicable laws, regulations, and guidelines. Listed below are the appropriate telephone numbers for further information on the HEA programs:

- Federal Pell Grant Program (800) 474-7268
- Federal Family Education Loan Program (202) 377-4008
- Federal Direct Student Loan Program (800) 848-0978

If the Institution wishes to begin participating in the Direct Loan Program or to request a change in its funding method, contact COD School Relations at the Federal Direct Student Loan Program number above or send an email to codsupport@acs-inc.com

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x.

- Federal Campus-Based Programs (877) 801-7168
 - The Federal Campus-Based Programs are (a) the Federal Supplemental Educational Opportunity Grant Program, (b) the Federal Work-Study Program, and (c) the Federal Perkins Loan Program. To obtain funding under any or all of these programs, the Institution must file the Fiscal Operations Report and Application to Participate (FISAP) annually. FISAP packages are typically available at the end of July each year and the due date for electronic submission of this data is generally a postmark or transmission date of October 1. Please keep in mind that the October 1 submission is to obtain funding for the Award Year that begins the following July 1.

If the Institution does not already participate in the Title IV, HEA programs, the Institution must complete Fundamentals of Title IV Administration (Precertification) Training no later than 12 months after the Institution executed the PPA. Completion of this training must be not earlier than one year before beginning to participate in any Title IV, HEA program for which the Institution has not previously participated. If you wish to register for Fundamentals of Title IV Administration (Precertification) Training, please register at http://www.register123.com/event/profile/web/index.cfm?

PKwebID=0x112117625&varPage=info. For information concerning the training, contact the Dallas Team at the telephone number listed later in this letter.

Participating educational institutions will be reviewed at least once every six years to determine whether the institutions remain administratively capable and financially responsible to administer Title IV programs and funds.

REPORTING AND REAPPLICATION REQUIREMENTS

The Institution must report promptly to the Department certain changes and actions that affect the Institution's participation approval, as specified in 34 CFR 600 and 668, including, but not limited to:

- Change of name and/or address;
- New contract or significant modification of existing contract with a third party servicer;
- Change in exercise of a person's substantial control over the Institution, e.g., a change in the chief executive officer or members of the board of trustees or board of directors.
- Change in the way the Institution measures educational program length;
- Change in the level of course offerings;
- Additions and/or closures of non-main campus locations that offer at least 50% of an educational program;
- Change of accrediting agency;
- Change of the State agency that confers legal authority on the Institution to offer programs of postsecondary education; or
- Change in ownership *whether or not* that ownership change results in a change in control of the Institution.

If the Institution fails to report any such changes within ten days after the change occurs, the ability of the Institution to administer the Title IV student financial assistance programs properly will be called into question. As a consequence, we will consider whether it is necessary to monitor the Institution's receipt of Federal funds more closely. Failure to report

http://eligcert.ed.gov/eapp/owa/approval_letter?ope=010391&id=38941

changes within the time frame required may also result in an adverse action being taken against the Institution in accordance with 34 CFR 668, Subpart G.

Automatic Termination of Approval

This Approval for Institutional Participation automatically terminates on the happening of any of the following events:

- December 31, 2018
- The date the Institution loses the legal authority to offer programs of postsecondary education in the State in which it is located;
- The date the Institution loses accreditation from its designated primary accrediting agency;
- The date the Institution ceases to offer all approved postsecondary instruction;
- The date the Institution merges with another institution;
- The date the Institution undergoes a change in ownership resulting in a change of control;
- The date the Institution files for bankruptcy; or
- The date the Institution otherwise ceases to meet the definition of an eligible institution of higher education.

Please send all information or documentation required by this letter to:

United States Department of Education Federal Student Aid, Schools Channel Attention: Dallas School Participation Team 1999 Bryan Street Suite 1410 Dallas, TX 75201-6817

One of the institutional eligibility requirements is that the institution must admit as regular students only persons who have a high school diploma; have the recognized equivalent of a high school diploma; or are beyond the age of compulsory school attendance in the State in which the institution is physically located (see 34 CFR 600.4, 5 or 6). This means if the student is not yet beyond the age of compulsory school attendance in the State in which the institution can only enroll the individual as a regular student if he or she has a high school diploma or its equivalent.

One of the student eligibility requirements is that an eligible student is one who is not enrolled in either an elementary or secondary school (see 34 CFR 668.32). This means that an institution cannot accept as a regular student at this school, an individual who is also enrolled at the same time in elementary or high school.

The telephone number for the Dallas Team is (214) 661-9490. The fax number is (214) 661-9662.

Sincerely,

Cyrothia Tharnton

Cynthia Thornton

Area Case Director School Participation Team, Federal Student Aid Dallas Regional Office

cc: Mr. Harold L. Case, Financial Aid Administrator
 North Central Association of Colleges and Schools - CIHE (Higher Educ)
 Guarantee Agency
 OK Oklahoma State Regents for Higher Education

Appendix I

AY2011-2013 Systematic Plan for Evaluation AY2014-2016 Systematic Plan for Evaluation



The Systematic Plan for Evaluation (SPE) was updated in January 2013 to reflect the new 2013 ACEN Standards and Criteria and will provide assessment findings for the period of academic years 2014 to 2016. The current SPE covers the period of academic years 2011 to 2013. This SPE is based on 2008 ACEN (formerly NLNAC) Standards and Criteria.

During this academic year 2014, the Evaluation Committee is in the process of reviewing, analyzing, and trending t he d ata a nd i nformation f rom A Y 2013 and forwarding r ecommendations t o t he appropriate committees for action on i tems not meeting the specified expected level of achievement (ELA). The SPE document should be complete when this process ends in May 2014.

Data collection began for academic year 2014 during the 2013 summer semester and continuing through the spring semester 2014. This data will be reviewed, analyzed, and trended during academic year 2015 entered in the S PE for ac ademic years 2014-2016 as required to include a ctions taken for i tems n ot meeting the ELA.

The decision to submit both the SPE for academic years 2011-2013 and the SPE for academic years 2014-2016 was due to the recent curriculum revision undertaken by the nursing program. The SPE for academic years 2014-2016 more adequately reflects the changes we have made to our curriculum which includes our new m ission, phi losophy, or ganizing framework, program ed ucational outcomes (student l earning outcomes) and our program achievement outcomes. The SPE for academic years 2011-2013 reflects the program's former curriculum.

SPEP Calendar AY 2013-2014

Component	1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.1	2.2	2.3	2.4	2.5
Months														
August			NFO	NPD							NPD NPAD		NPD NPAD TL	
September	NEC	NEC		NPD		NPD Dean	NPD Dean NEC	NEC		NEC			NEC	NEC NPD
October	NCC NFO *NEC	NFO	NEC *NEC NFO			NPD Dean	NPD Dean NFO	NFO		NFO			NFO	NFO NPD TL
November	NFO *NEC	*NEC	NCC *NEC											NPD TL *IE
December			NFO NEC	NPD										*NEC
January	NPD ANPD		*IE NFO	NPD									NPD NPAD TL	
February	NAC					NPD Dean	NPD Dean			NPD Dean				NPD NPAD
March	*NEC		*NEC	NPD		NPD Dean								NPD NPAD
April	*NEC	*NEC	*NEC											NPD NPAD *IE
May	*NEC	NFO *NEC NPD NPAD	NEC	NPD			*NEC	*NEC		*NEC	NPD		*NEC	*NEC
June		NPD NPAD												
July			*IE NPD NPAD					NPD NPAD						

(*) denotes data collection only

KEY:

NEC – Nursing Evaluation Committee

NCC – Nursing Curriculum Committee

NAC – Nursing Admissions Committee

NFO – Nursing Faculty Organization **Dean – Dean of Health Division**

NPD – Nursing Program Director

NPAD –Nursing Program Associate Director

TL – Team Leader

Dept of IE – Department of Institutional Effectiveness CACA – Clinical Affiliations Compliance Administrator

NT – Nursing Team

SPEP Calendar AY 2013-2014

Component	2.6	2.7	2.8	2.9	3.1	3.2	3.3	3.4	3.5	3.6	3.7	4.1	4.2	4.3
Months														
August														
September	NEC	NEC	NEC		NEC		NPAD	NPD Dean	NEC	NEC	NEC	NEC	NEC NT	
October	NFO	NFO	NFO TL		NFO	NEC NPD			NEC *NEC NPD NFO	*NEC NFO	NFO	*NEC NFO	NFO NCC	NEC
November			TL *IE		*NEC	*NEC			*NEC	*NEC	*NEC	*NEC	NFO	*NEC NCC
December			*NEC											NFO
January					NPD NPAD							*IE	*NT	NEC *IE
February			NPD DEAN NPAD	NPD	NAC				NPD NPAD NAC				*NT	
March			NPD DEAN		NEC				*NEC	NEC *NEC	NEC	NEC *NEC	*NT	NCC NEC
April			NPD DEAN NPAD *IE		NFO *NEC	*NEC			NPD NPAD NAC *NEC	* <mark>NEC</mark> NFO	* <mark>NEC</mark> NFO	*NEC NCC	*NT NCC	NFO *NEC NCC
May	*NEC	*NEC	*NEC		*NEC	*NEC			*NEC		*NEC	*NEC NFO	*NEC *NT NFO	*NEC NFO
June									NPD NPAD					
July (*) denotes data												*IE		*IE

(*) denotes data collection only

KEY:

NEC – Nursing Evaluation Committee

NCC – Nursing Curriculum Committee NAC – Nursing Admissions Committee

NFO – Nursing Faculty Organization

Dean – Dean of Health Division **NPD – Nursing Program Director**

NPAD –Nursing Program Associate Director

TL – Team Leader

Dept of IE – Department of Institutional Effectiveness

CACA - Clinical Affiliations Compliance Administrator

NT – Nursing Team

SPEP Calendar AY 2013-2014

Component	4.4	4.5	4.6	4.7	4.8	4.8.1	5.1	5.2	5.3	6.1	6.2	6.3	6.4	6.5
Months														
August														NPD NPAD
September						NEC	NEC	NEC	NEC	NEC	NEC			NEC NFO
October	NEC	NEC	NEC		NEC *NEC	NFO	NFO	NFO	NCC	NCC	NCC	*NEC	*NEC	*NEC NFO
November	*NEC NCC *IE	*NEC NCC	*NEC NCC		*NEC NCC	*NEC NEC		*NEC	*NEC NFO	NFO	NFO			
December	NFO	NFO	NFO		NFO	NFO								
January	NEC	NEC	NEC		NEC							NEC NPAD	NEC *IE	*IE
February							NPD NFO							
March	NCC NEC	NFO NEC NCC	NCC NEC		NCC NEC *NEC	NEC	NPD NFO					*NEC	*NEC NCC NEC	*NEC NPD NPAD NFO
April	NFO *NEC NCC	*NEC NCC NFO	NFO *NEC NCC		NFO *NEC NCC	*NEC NFO		*NEC	*NEC				NFO NCC	
May	*NEC NFO	*NEC NFO	*NEC NFO		*NEC NFO	*NEC	*NEC	*NEC	*NEC	*NEC	*NEC	NPAD	NFO	*NEC
June					NPD CACA							NEC		
July	*IE				NPD CACA							NPD NPAD	*IE	*IE

(*) denotes data collection only

KEY:

NEC – Nursing Evaluation Committee

NCC – Nursing Curriculum Committee NAC – Nursing Admissions Committee

NFO – Nursing Faculty Organization

Dean – Dean of Health Division

NPD – Nursing Program Director

NPAD –Nursing Program Associate Director

TL – Team Leader

Dept of IE – Department of Institutional Effectiveness

CACA - Clinical Affiliations Compliance Administrator

OKLAHOMA CITY COMMUNITY COLLEGE NURSING PROGRAM SYSTEMATIC PROGRAM EVALUATION PLAN RESULTS AND TRENDS AY2011 – AY 2013

INTRODUCTION

STANDARD I: MISSION AND ADMINISTRATIVE CAPACITY

The nursing education unit's mission reflects the governing organization's core values and is congruent with its strategic goals and objectives. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified outcomes

STANDARD II: FACULTY AND STAFF

Qualified faculty and staff provide leadership and support necessary to attain the goals and outcomes of the nursing education unit.

STANDARD III: STUDENTS

Student policies, development, and services support the goals and outcomes of the nursing education unit.

STANDARD IV: CURRICULUM

The curriculum prepares students to achieve the outcomes of the nursing education unit, including safe practice in contemporary health care environments.

STANDARD V: RESOURCES

Fiscal, physical, and learning resources promote the achievement of the goals and outcomes of the nursing education unit.

STANDARD VI: OUTCOMES

Evaluation of student learning demonstrates that graduates have achieved identified competencies with the institutional mission and professional standards and that the outcomes of the nursing education unit have been achieved.

SYSTEMATIC PROGRAM EVALUATION PLAN AY2011-AY2013

The Systematic Program Evaluation Plan (SPEP) has been developed by the nursing program to assess the quality, consistency, and effectiveness of its program. SPEP is a guide for the overall evaluation of the program. When areas of need are identified, at times other than those specified, appropriate action is taken. This evaluation plan demonstrates our commitment to excellence and provides evidence of quality improvement. The Plan is based on the NLNAC 2008 Accreditation Standards. The SPEP was reviewed, edited, and approved by members of the Nursing Evaluation Committee (NEC) and the Nursing Faculty Organization (NFO) as a "work in progress" (can be modified and edited as needed with updates posted on the shared drive) The plan was reviewed and re-approved by the NEC on May 22, 2013 and the entire faculty on May 22, 2013 during NFO. The SPEP is a fluid document and is subject to continuous updates and revisions. All results of data collection and analysis as well as actions for program development, maintenance, or revision are recorded on a separate document entitled "SPEP Implementation Results and Trends".

In addition to the Oklahoma City Community College (OCCC) and nursing program evidentiary sources identified in the plan, the following professional documents and publications are utilized:

- Oklahoma Board of Nursing (OBN) standards
- Accreditation Commission for Education in Nursing (ACEN) (NLNAC National League for Nursing Accrediting Commission) Interpretive Guidelines, 2008

Data are collected from the OCCC Nursing program community of interest – students, alumni, and local health care agencies – as follows:

- Student evaluations are completed every semester and consist of the following
 - Student Evaluation of Nursing Course (online)
 - Student Evaluation of Clinical Faculty (online)
 - NESA Student Evaluation of Clinical Experience (online)
 - Student Exit Survey (NP4 students only online)
 - Student Input on Instruction (scantron/pencil)
- Community advisory meetings are held every fall and spring.
 - OCCC Nursing Advisory Committee Survey (initiated AY2012)
- NESA Staff Evaluation of Clinical Experience (distributed to staff by faculty prior to departure from clinical facility or completed online each semester)
- Nursing program Post Graduation Surveys are completed 6-12 months post-graduation (per mailing via the Department of Institutional Effectiveness)
- Employers of alumni are asked to complete a Graduate Evaluation by Employer survey every 6 months (per mailing via the Department of Institutional Effectiveness)

Additional data are collected from the OCCC nursing faculty – as follows:

- Total Program Evaluation Faculty Survey (online-annually)
- Adjunct Faculty Survey (online annually)
- Faculty Evaluation of Nursing Course (online-annually)
- NESA Faculty Evaluation of Clinical Experience (online-each semester)

The OCCC web site is found at <u>www.occc.edu</u> and the nursing program web site is found at <u>www.occc.edu/Health/Nursing.html</u>. Online survey data is stored electronically and is password protected for faculty viewing. The data is maintained on the "S" drive of the OCCC Intranet.

The OCCC nursing program standing committees are identified in the SPEP as follows:

- Nursing Faculty Organization (NFO)
- Nursing Curriculum Committee (NCC)
- Nursing Evaluation Committee (NEC)
- Nursing Admissions Committee (NAC)

The OCCC nursing program special committees for AY2013 are as follows:

- Clinical Evaluation Special Committee
- Overview of Nursing Special Committee
- *Pediatric Committee

- Nursing Process Special Committee
- *Health Promotion/Maintenance Committee
- Leadership Committee

- Nursing Advisory Committee (NAdC)
- Testing Committee
- *Pinning Special Committee
- Pharmacology for Nursing Practice Committee
- Simulation Committee
- Math Committee

*Task Force (beginning Spring 2013)

The OCCC nursing program ongoing committees are identified in the SPEP as follows:

• Team Leader Committee

• Individual Course Team Committees

Nursing Program Director (NPD) Nursing Program Associate Director (NPAD) Assistant Nursing Program Director (ASNPD) (eliminated Spring 2012) Nursing Teams (NT)

STANDARD I: MISSION AND ADMINISTRATIVE CAPACITY

The nursing education unit's mission reflects the governing organization's core values and is congruent with its strategic goals and objectives. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified outcomes.

Component	Expected Level of Achievement
The mission/philosophy and outcomes of the	 The core values, strategic goals, objectives and outcomes of the nursing program are consistent with the OCCC mission.
nursing education unit are congruent with those	 The core values, strategic goals, objectives and outcomes of the nursing program are consistent with the OCCC stated values.
of the governing organization's mission	 Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 2.1-2.2, 3, 4 Mean score of at least 3.5 on a scale of 5 on the Student Exit Survey: Items 4.1-4.2
and values.	• Mean score of at least 3.5 on a scale of 5 on the OCCC Nursing Advisory Committee Survey: Item 1(initiated AY12)
	 Cultural, racial, and ethnic diversity of the nursing program reflect that of the institution.

Frequency of Assessment	Assessment Method
 Review by OCCC Board of Regents every 5 years Nursing Student Handbook: February Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC with recommendations to NCC October – reviewed by NCC with recommendations to NFO November – reviewed by NFO Student Exit Survey: November/April – data collected by NEC September – reviewed by NFO Student Exit Survey: November/April – data collected by NEC September – reviewed by NFO OCCC Nursing Advisory Committee Survey: (implemented AY12) October/March – data collected by NEC September – reviewed by NFO 	 Review of all pertinent literature/documents. Review and analysis of statements of mission/philosophy and program purposes and their congruency to OCCC mission and values, including review of relevant survey data. Review of the Nursing Student Handbook. Review and analysis of Total Program Evaluation – Faculty Survey by NEC, NCC, and NFO. Review and analysis of Student Exit Survey by NEC, NCC, and NFO. Review and analysis of OCCC Nursing Advisory Committee Survey by NEC and NFO (initiated AY12). Review of cultural, racial, and ethnic diversity of institution and nursing program and comparisons with community

COMPONENT 1.1 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)				Actions for Program Development, Maintenance, or Revision
<u>AY 2011</u>		<u>AY2011</u>		
ELA 1.1: met		Maintain current documents as stand. Continue to monitor.		
The mission, philosophy, strategic goals				
consistent with the OCCC mission and s				
standards, legal requirements, and scop	•			
Total Program Evaluation Faculty Sur	vey: Items 2.1-2	2.2, 3, 4		
ltem 2.1 – 4.41				
ltem 2.2 – 4.44				
Item 3 – 4.10				
ltem 4 – 4.31				
Student Exit Survey: Items 4.1-4.2				
ltem 4.1 – 4.20				
ltem 4.2 – 4.20				
Cultural, racial, and ethnic diversity of th institution and community with the except population. The nursing program is 3.29 Hispanic/Latino. This is a difference of 5 from AY 10 noted; 0.7% from 2.7%)	tion of the Hispa 6 Hispanic/Latin	nic/Latino stude with the colleg	ent e at 8.04%	Continue to monitor.
Ethnic Origin OCCC Program				
American Indian/Alaskan				
Native	5.43%	25 (5.7%)		
Asian/Pacific				
Islander/Native Hawaiian	Islander/Native Hawaiian 6.44% 41 (9.4%)			
African American	11.68%	46 (10.5%)		
Hispanic or Latino	8.04%	14 (3.2%)		
Other/Unknown/Unidentifie	d 11.83%	42 (9.6%)		
Caucasian	56.58%	270 (61.6%)]	

8

<u>AY 2012</u>			<u>AY 2012</u>		
ELA 1.1: m			Revisions to the Program's mission, philosophy, objectives and		
	and revised mission, philosophy				outcomes were implemented during the Fall 12 semester for NUR
	vere found consistent with the O				1519 in the traditional pathway as part of a curriculum revision.
	vith national standards, legal req			ctice.	Implementation for NUR 1529 in the traditional pathway occurred
	ram Evaluation Faculty Survey	/: Items 2.1-	2.2, 3, 4		during Spring 13. The new curriculum places greater emphasis on
	m 2.1- 4.87 m 2.2 – 4.87				the provision of safe, quality nursing care, interprofessional collaboration, and clinical reasoning. Full implementation for all
	m 3 – 4.40				nursing courses by Spring 2014 as follows:
	m 4 – 4.53				NUR 1519 BADNAP – Summer 2013
	kit Survey: Items 4.1-4.2				 NUR 2539 Traditional and CLP – Fall 2013
	m 4.1- 4.39				 NUR 2549 Traditional – Spring 2014
	m 4.2 – 4.40				
	sing Advisory Committee Surv	vev: Item 1			Noted upward trend in survey data. Will continue to monitor/review
(implemen	• •				for consistency with OCCC core values, strategic goals, objectives
· ·	em 1 - 4.54				and outcomes. Action is to maintain current documents as stand
					until full implementation of curriculum revisions for courses affected.
institution a population.	cial, and ethnic diversity of the n nd community with the exception The Nursing Program continues of 0.2% seen from AY2011.	n of the Hispa	anic/Latino stude	ent	During review of data (AY 2012) in Fall 2012 September Evaluation Committee meeting it was decided to bring suggestion/ideas forward to NFO (October meeting) for discussion on how to increase Hispanic and Latino student enrollment in the Nursing Program. Ideas to improve the number of Hispanic/Latino students
	Ethnic Origin OCCC Program				in the Nursing Program from the Evaluation Committee members included outreach to area high schools (with high Hispanic/Latino
	American Indian/Alaskan				student populations such as US Grant, Capitol Hill, and Southeast), within the OCCC community, promoting nursing as a career choice
Native 5.20% 27 (5.7%)			and OCCC. Consider partnering with OCCC Community Outreach		
	Asian/Pacific				and Education. In the October Evaluation Committee meeting it
	Islander/Native Hawaiian	6.06%	29 (6.1%)		was stated that OCCC Community Outreach and Education have
	African American	11.36%	43 (9.1%)	-	been approached. As time prevented forwarding to the NFO at the
	Hispanic or Latino	9.01%	16 (3.4%)		October meeting, the suggestion/ideas were presented at the
	Other/Unknown/Unidentified	12.77%	45 (9.5%)	_	November NFO meeting.
	Caucasian	55.60%	315 (66.3%)		Continue to monitor.

AY 2013

ELA 1.1: met

The Board of Regents conducts a comprehensive review of the statements of vision, mission, outcomes, and core values every five to seven years. This review is generally done in conjunction with the approval of a new strategic plan. Each year, the Board of Regents approves an Annual Plan that aligns with the current vision, mission, outcomes, and core values statements, and the initiatives of the current strategic plan. While drafts are discussed by the Board throughout meetings each Spring, final approval of each year's annual plan is part of the final budget approvals that are generally done in June prior to the start of the upcoming fiscal year in July.

The most recent review took place 2012 and culminated with approval of revised statements in March of 2013. The revised statements are included in the new strategic plan, The OCCC Roadmap 2018 that was approved by the Board of Regents in March 2013.

The Program's current and newly implemented mission, philosophy, strategic goals, objectives and outcomes are considered consistent with the OCCC mission and values and are congruent with national standards, legal requirements, and scope of practice.

Revisions to the Program's mission, philosophy, objectives and outcomes will be implemented during the Spring 13 semester for NUR 1529 in the traditional pathway as part of a curriculum revision

Total Program Evaluation Faculty Survey: Items 2.1-2.2, 3, 4

 $\begin{array}{c} \mbox{Item } 2.1 - 4.93 \\ \mbox{Item } 2.2 - 4.93 \\ \mbox{Item } 3 - 4.79 \\ \mbox{Item } 4 - 3.71 \\ \mbox{Student Exit Survey: Items } 4.1-4.2 \\ \mbox{Item } 4.1 - 4.49 \\ \mbox{Item } 4.2 - 4.48 \\ \mbox{OCCC Nursing Advisory Committee Survey: Item 1} \\ \mbox{Item } 1 - 4.95 \end{array}$

Cultural, racial, and ethnic diversity of the nursing program reflect that of the

Full implementation for all nursing courses by Spring 2014 as follows:

- > NUR 1529 Traditional Spring 2013
- > NUR 1519 BADNAP Summer 2013
- > NUR 2539 Traditional and CLP Fall 2013
- NUR 2549 Traditional Spring 2014

Continue to monitor.

institution with exception of the Hispanic/Latino student population, although improved from AY 11 and AY12.

<u>October 2013 Recommendations/Activities</u> The NFO discussed the Hispanic student enrollment for the nursing program.

Ethnic Origin	оссс	Nursing Program
American Indian/Alaskan Native		
	5.0%	16 (4.12%)
Asian/Pacific Islander/Native		
Hawaiian	6.7%	31 (7.98%)
African American	10.5%	42 (10.8%)
Hispanic or Latino	10.1%	17 (4.38%)
Other/Unknown/Unidentified	12.1%	3 (0.77%)
Caucasian	55.6%	279 (71.9%)

Will continue to monitor and develop ideas to increase enrollment of Hispanic/Latino students into the Nursing Program. To review Fall 2013 semester with NEC, NFO

Component	Expected Level of Achievement
The governing organization and nursing education unit ensure representation of students, faculty, and administrators in ongoing governance activities.	 1.2a 100% of full-time faculty will be on at least one nursing program committee 40% of full-time faculty, who have completed at least one year of employment, will be on at least one college committee Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 5, 6, 7, 8 50% of part-time faculty will be on at least one nursing program committee Mean score of at least 3.5 on a scale of 5 on the Adjunct Faculty Survey: Item 2 1.2b
1.2a Faculty and Administrators governance participation 1.2b	 All students will have the opportunity to attend and participate in nursing program committee meetings (exception: Team Leader and Admission Committee meetings) Mean score of at least a 3.5 on a scale of 5 on the Student Exit Survey: Items 6, 7

Student governance participation

Frequency of Assessment	Assessment Method
 1.2a OCCC and NFO committees reviewed annually in May Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC with recommendations to NFO October – reviewed by NFO Adjunct Faculty Survey: May – data collected by NEC September – reviewed by NEC May – data collected by NEC September – reviewed by NEC May – data collected by NEC September – reviewed by NEC with recommendations to NFO October – reviewed by NEC September – reviewed by NEC with recommendations to NFO 	 1.2a Review of OCCC Institutional Committee assignments by Dean of Health Professions. Review of NFO committee membership lists and minutes by NEC, NPD and NPAD. Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO. Review and analysis of Part-time Faculty Survey by NEC and NFO.
 1.2b Reviewed annually Student Exit Survey: November/April – data collected by NEC September – reviewed by NEC with recommendations forwarded to NFO October – reviewed by NFO 	 1.2b Review of NFO Committee and course team minutes by NEC. Review and analysis of Student Exit Survey by NEC and NFO.

COMPONENT 1.2 RESULTS

			Data Collection & Ana ctual level of achiever	Actions for Program Development, Maintenance, or Revision	
AY 2011 ELA 1.2a: met 100% of the full-time nursing faculty were members of at least one nursing program committee. 60.8% of the full-time nursing faculty who have completed at least one year of employment, were members of one or more OCCC institutional committees. Total Program Evaluation – Faculty Survey: Items 5, 6, 7, 8 Item 5 – 4.53 Item 6 – 4.63 Item 7 – 4.65 Item 8 – 4.65 100% of part-time nursing faculty were members of a nursing team committee and attended other committee meetings as able. Adjunct Faculty Survey: Item 2 Item 2 – 4.35				and nursing program committees are ongoing. Faculty are	
	AY % FT Faculty % Part-Time % FT Faculty Nursing Faculty Nursing OCCC Committee Committee Committee				
All s com Com parti <u>Nove</u> Stud abou <u>Marc</u>	mittee me cipated in <u>ember 201</u> lents atten ut the prog <u>ch 2011 R</u>	ere given the opport etings, with the exce eetings. A schedule NSA and the NPIV s <u>10 Recommendation</u> ding the November gram and faculty. ecommendations/Ac	ption of the Team Lead was posted for them or students were active in <u>s/Activities</u> meeting of the NFO off <u>tivities</u>		 1.2b Efforts on part of the faculty to increase student involvement are ongoing. Minutes from Nursing Committee meetings reflect student attendance. <u>November 2010 Actions</u> R. Klepper explained to students regarding their opportunity to bring forward questions or concerns during the November 2010 meeting for faculty information/consideration. <u>March 2011 Actions</u> Faculty will consider concerns of students. <u>May 2011 Actions</u>

May 2011 Recommendations/Activities The faculty sponsor for the NSA, J. Frock, reported that the NSA won "best educational program" offering from The Student Life for Diabetes Seminar. J. Frock won outstanding sponsor. New officers elected for AY 2012. Student Exit Survey: Items 6, 7 Item 6 – 4.23 Item 7 – 4.21					Congratulations to NSA! Stephanie Wallace and Heather Worden volunteered to support the NSA as co-sponsors for AY 2012. Continue to monitor.	
AY 2		- 4.21				<u>AY 2012</u>
	1.2a: met					1.2a
 100% of full-time nursing faculty were members of at least one nursing program committee. 43% of full-time nursing faculty who have completed at least one year of employment, were members of at least one college committee. Membership dropped from last two years (AY10 was 55%). Faculty workloads have prevented greater participation on OCCC institutional committees. Total Program Evaluation – Faculty Survey: Items 5, 6, 7, 8 Item 5 – 4.80 Item 7 – 4.67 Item 8 – 4.87 				Continue efforts to provide opportunities for faculty to participate on college and nursing program committees. Continue to maintain participation in committees and monitor for changes in membership.		
atten	of part-tin d other cor	ne nursing faculty w nmittee meetings a y Survey: Item 2		rsing team committee a	and	Continue to encourage part-time faculty participation on nursing program committees.
	AY	% FT Faculty	% PT Faculty	% FT Faculty	7	
		Nursing Committee	Nursing Committee	OCCC Committee		
	2011	100%	100%	60.8%		
	2012	100%	100%	43.0%		
All st comr Comr	ELA 1.2b: met All students were given the opportunity to attend and participate in nursing program committee meetings, with the exception of the Team Leader and Admission Committee meetings. A schedule was posted for them on ANGEL. Students participated in NSA and the NPIV students were active in the Pinning Committee.				1.2b Efforts on part of the faculty to increase student involvement are ongoing to include students earning activity points for committee attendance. Nursing Committee meetings' minutes reflect student attendance.	

September 2011 Recommendations/Activities Students attending the NFO meeting posed questions related to clinical assignments. October 2011 Recommendations/Activities Student related issue to not having used simulation or the Neighborhood enough during the semester. One related difficulty receiving e-mails and another stated difficulty with financial aid related to program credit hours of 9 – less than fulltime. November 2011 Recommendations/Activities Cindy Milam was congratulated by students for obtaining the iPads for use in the classroom. A student made the suggestion for quizzes after labs. Another students requested more active learning strategies be used in the classroom. April 2012 Recommendations/Activities Students attending the NFO meeting brought up the issue of having vital simulations after they started clinical. They would like to have them before as the information would have improved their clinical experience. Overall satisfaction with the program was expressed. Student Exit Survey: Items 6, 7 Item 6 – 4.26 Item 7 – 4.33	<u>September 2011 Actions</u> D. Myers responded to the students' questions providing rationale for the process we use for clinical assignments. <u>October 2011 Actions</u> Student issues were addressed. <u>November 2011 Actions</u> Student issues were addressed. Continue to monitor.
AY 2013ELA 1.2a: met100% of full-time nursing faculty were members of at least one nursing program committee. 61.9% (13 out of the total 21 faculty members) of full-time faculty, who have completed at least one year of employment, were members of at least one college committeeMay 7, 2013 Recommendations/Activities Committee Assignments were reviewed.Total Program Evaluation – Faculty Survey: Items 5, 6, 7, 8 Item 6 – 4.89 Item 7 – 4.95 Item 8 – 4.95	AY 2013 1.2a Continue efforts to provide opportunities for faculty to participate on college and nursing program committees. Continue to maintain participation in committees and monitor for changes in membership. <u>May 7 2013 Actions</u> New committee assignments will begin fall 2013.
100% of part-time faculty are members of a nursing team committee and attend other committee meetings as able.	Continue to encourage participation in committees by part-time faculty.

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Adjunct Faculty Survey: Item 2 Item 2 – 4.64

AY	% FT Faculty Nursing Committee	Nursing Nursing Committee	
2011	100%	100%	60.8%
2012	100%	100%	43.0%
2013	100%	100%	61.9%

ELA 1.2b: met

All students are given the opportunity to attend and participate in nursing program committee meetings, with the exception of the Team Leader and Admission

Committee meetings. Incentives are offered such as activity points.

September 2012 Recommendations/Activities

The NSA report to the NFO contained multiple activities to include participation in the Lifesaver 5K, speakers for their meetings, and the ONSA Cool Conference.

February 2013 Recommendations/Activities

D. Myers polled students present at the NFO meeting for input on curriculum changes on placement of LTC facility clinical. Varying viewpoints received from students.

April 2013 Recommendations/Activities

A student brought forth an issue with care plans related to chart documentation at the NFO meeting.

B. Butcher took her clinical students to Bridges to Access. The students were asked about what they learned and what they would change about their service learning projects. Students overwhelmingly stated they want more health-related opportunities.

Student Exit Survey: Items 6, 7

ltem 6 – 4.35

ltem 7 – 4.44

1.2b

Efforts ongoing. Continue to work on ideas to encourage student attendance to committee meetings. Nursing Committee minutes reflect student attendance as does the NFO Monthly Committee Report.

April 2013 Actions

After much discussion, the faculty will take the issue into consideration and seek solutions.

As a result of the report on the Bridges to Access, faculty will begin looking into more health related service learning opportunities.

Component	Expected Level of Achievement
Communities of interest	1.3a
have input into program	Community healthcare agencies will have input into program processes and decision making.
processes and decision making:	 Response rate of 50% or higher on the Graduate Evaluation by Employer Survey administered by the Department of Institutional Effectiveness.
1.3a	 NESA Evaluation of Clinical Experience Surveys will be administered at the end of all clinical rotations to agency staff and OCCC faculty and students. Evidence of input will be provided through program's course team meeting minutes.
Healthcare Agencies	1.3b
1.3b	• Program will meet all Oklahoma Board of Nursing Standards as evidenced by continuing approval status by the OBN.
Oklahoma Board of	1.3c
Nursing 1.3c	 Program will utilize input from the Public/Advisory Committee. Evidence of input in program processes and decision making will be provided in Advisory Committee minutes.
Public/Nursing Advisory Committee	 Mean score of at least 3.5 on a scale of 5 on the OCCC Nursing Advisory Committee Survey: Item 2 (implemented AY12)
1.3d	1.3d
Graduates	 100% of nursing program graduates have the opportunity to participate in the Nursing Program Post Graduate Survey administered by the Department of Institutional Effectiveness with an expected response rate of 30% or higher.

Frequency of Assessment	Assessment Method
 1.3a Graduate Evaluation by Employer Survey: January/July – data collected by Department of Institutional Effectiveness October – reviewed by NEC November – reviewed by NCC December – reviewed by NFO 	 Administration of Graduate Survey by Employer is conducted by the Department of Institutional Effectiveness. The process for graduate survey administration occurs as follows: Each year in June IE sends out the first letters to the previous Summer and Fall graduates with a follow-up letter to be sent sometime during the summer followed by phone calls. Each year starting in late November/December IE sends out the first letters to the previous fiscal year's Spring graduates. A second follow-up letter is sent in February with phone calls to follow. Employer surveys are sent as the names are received from the graduates. Survey data is then forwarded to the chair of the NEC with review/analysis of survey data. NEC recommends action to NCC who makes recommendations to NFO.

NESA - Evaluation of Clinical Experience Administration of NESA Evaluation of Clinical Experience to agency November/April - data collected by NEC staff and OCCC faculty and students with review/analysis of data ٠ December/May - reviewed by NEC results by NEC and NFO. • January/August - reviewed by NFO 1.3b 1.3b Every 5 years or more often as necessary. Review of Self Study report and on-site visit • • Annually through report to OBN (July). . 1.3c 1.3c Review minutes of Advisory Committee (NFO). The Nursing • Meets semi-annually. • Advisory Committee membership consists of service representatives, educational representatives, part-time clinical OCCC Nursing Advisory Committee Survey: (initiated AY12) faculty, and past as well as present students. The purpose of the October/March – data collected by NEC • survey is to evaluate how the OCCCC Nursing Program September – reviewed by NEC with recommendations to NFO . communicates information to communities of interest. Survey data October – reviewed by NFO is reviewed/analyzed by the NEC. NEC recommends action to the NFO. 1.3d 1.3d Administration of Nursing Program Post Graduation Survey is • **Nursing Program Post Graduation Survey:** conducted by the Department of Institutional Effectiveness. The • January/July- data collected by Department of Institutional process for post graduate survey administration occurs as follows: Effectiveness and forwarded to chair of NEC Each year in June IE sends out the first letters to the previous **October** – reviewed by NEC ٠ Summer and Fall graduates with a follow-up letter to be sent **November** – reviewed by NCC • sometime during the summer followed by phone calls. Each year December - reviewed by NFO starting in late November/December IE sends out the first letters to the previous fiscal year's Spring graduates. A second follow-up letter is sent in February with phone calls to follow. Employer surveys are sent as the names are received from the graduates. The results are forwarded to the chair of the NEC for review and analysis. The NEC recommends action to NCC who makes recommendations to NFO.

COMPONENT 1.3 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2009 - 2010	<u>AY2011</u>
1.3a: not met	1.3a
AY 2009 Response rate of 25 of 59 or 42.37%	Response rate for previous years did not meet the ELA of 50%
AY 2010 Response rate of 7 of 25 or 38.89%	The Department of Institutional Effectiveness's plan, which they
<u>AY 2011</u>	have already put in place, is to contact employers within one week
ELA 1.3a: partially met (4 of 4)	of contacting the graduate. In addition, they have emphasized with
There was a response rate of less than 50% on the Graduate Evaluation by	the phone caller to obtain the graduate's supervisor's name (There
Employer Survey administered by the Department of Institutional Effectiveness (IE).	were 35 of the addresses which included a company name but not
Four responses were received with questions 1 to 17 answered. Nursing questions	the name of the supervisor for OCCC). Hopefully, this will improve
were not asked or evaluated. Unfortunately, the person in IE who normally handles	the response rate. They will keep the NEC posted.
this survey had medical issues this past year and the department head was unaware that the phone calls were not made to the employers as they received the Nursing	Continue to outreach to communities of interest for participation.
Program Post Graduate surveys. So the 2011 graduates who were asked to provide	
the names of their supervisor for IE to survey were not called in a prompt	
fashion. When head of IE discovered the error, they immediately began phone	
calling but some of this information was over a year old so success was minimal.	
	Continue to monitor clinical experiences through careful review of
NESA Evaluation of Clinical Experience surveys were administered at the end of all	survey results by staff, students and faculty which occurs within
clinical rotations to agency staff and OCCC faculty and students with results	individual team, evaluation committee, curriculum committee, and
forwarded to team leaders for the nursing courses, NCC, and NFO. Evidence of	nursing faculty organization meetings. To maintain a positive
input is provided through program's course team meeting minutes and through NEC,	relationship with clinical sites.
NCC and NFO minutes.	
ELA 1.3b: met	1.3b
The Nursing Program meets all Oklahoma Board of Nursing Standards as evidenced	Continued full program approval from the Oklahoma Board of
by continuing approval status by the OBN.	Nursing until 2014.
ELA 1.3c: met	1.3c
The Nursing Program utilizes input from the Public/Advisory Committee. Evidence of	A survey was developed to provide a means of input for evaluation
input in program processes and decision making is provided in Advisory Committee	of the components of the OCCC Nursing Program by T. Walker
minutes. There were concerns related to public participation that has prompted an	(Chair Evaluation Committee). The information will be used to

increased effort to improve committee attendance. <u>March 2011 Recommendations/Activities</u> To improve attendance and improve planning for the committee meetings, a recommendation was brought forward by L. Cowan (Chair) to standardize the dates for the Fall and Spring Advisory Committee meetings. <u>April 2011 Recommendations/Activities</u> NFO membership received a summary of Advisory Committee discussion/input from the March 2011 Advisory committee meeting. Items included QSEN and Social Networking Guidelines. The Advisory Committee also agreed regarding the standardized dates for meetings as being helpful	identify areas that need improvement with initial administration in Fall 2011. Earlier and more frequent notification of meeting dates/times was incorporated. <u>March 2011 Actions</u> The NFO approved standardizing the dates for the Fall and Spring meetings to the third Wednesday in October and the fourth Wednesday in March. <u>April 2011 Actions</u> Tentative topic for the October Advisory Committee meeting is the IOM's recommendation on the future of nursing.
ELA 1.3d: met 100% of the nursing program graduates had the opportunity to participate in the Nursing Program Post Graduate Survey administered by the Department of Institutional Effectiveness. Our expected response rate is 30% or higher. All graduates for FY2011 were sent the survey to include follow-up. The response rate for FY2011 was 64.8% or 34.8% over the benchmark. This was an improvement from FY 2010 response rate of 25.5%.	1.3d To continue to encourage student participation/response to the survey through meetings with those students graduating, informing them of the surveys importance and when to expect it. Continue to monitor.
AY 2012 ELA 1.3a met Community healthcare agencies have input into program processes and decision making. There was a response rate of 90.3% (28 out of 31 surveyed) on the Graduate Evaluation by Employer Survey administered by the Department of Institutional Effectiveness. However with transition of employees again nursing questions were not asked or evaluated.	AY 2012 1.3a IE stated nursing questions were sent out with AY 2013 employer surveys. Will continue to monitor.
NESA Evaluation of Clinical Experience surveys were administered at the end of all clinical rotations to agency staff and OCCC faculty and students with results forwarded to team leaders for the nursing courses, NCC, and NFO. Evidence of input is provided through program's course team meeting minutes and through NEC, NCC and NFO minutes.	Continue to monitor clinical experiences through careful review of survey results by staff, students and faculty which occurs within individual team, evaluation committee, and nursing faculty organization meetings. To maintain a positive relationship with clinical sites.
ELA 1.3b: met The Nursing Program meets all Oklahoma Board of Nursing Standards as evidenced	1.3b Continued full program approval from the Oklahoma Board of

by continuing approval status by the OBN.	Nursing until 2014.
 ELA 1.3c: met The Nursing Program utilizes input from the Public/Advisory Committee. Evidence of input in program processes and decision making is provided in Advisory Committee minutes review of item 2 of the OCCC Nursing Advisory Committee Survey. <u>October 2011 Recommendations/Activities The NFO was advised of the discussion planned for the Advisory Committee meeting that will take place on October 26, 2011 related to QSEN. <u>November 2011 Recommendations/Activities NFO membership discussed the Advisory Committee meeting findings from October 26, 2011. <u>April 2012 Recommendations/Activities The NFO was informed of the input from the Advisory Committee meeting that took place on March 28, 2012 on simulation. </u></u></u> OCCC Nursing Advisory Committee Survey Item: 2 Item 2 – 4.34 	1.3c Administration of the Nursing Advisory Committee Survey was initiated in AY2012 with data collection planned biannually in the Fall and Spring semesters of the academic year. An increased effort to improve committee attendance is ongoing. Earlier and more frequent notification of meeting dates/times was incorporated and continues. Survey results demonstrate communities of interest have input into the nursing program. Will continue to monitor.
ELA 1.3d: met 100% of nursing program graduates had the opportunity to participate in the Nursing Program Post Graduate Survey administered by the Department of Institutional Effectiveness with an expected response rate of 30% or higher. All graduates for FY2012 were sent the survey to include follow-up. The response rate for FY2012 was 23.6% or 6.4% under the benchmark. This was a decrease from FY 2011's response rate of 64.6% and FY 2010's response rate of 25.5%.	1.3d The Program continues to work toward improved response rates. Students graduating from the program are educated on the importance and use of the information for program improvement. Continue to monitor.
AY 2013 ELA 1.3a: Community healthcare agencies have input into program processes and decision making. Response rate on the Graduate Evaluation by Employer Survey administered by the Department of Institutional Effectiveness was .	AY 2013 1.3a Awaiting results.
NESA Evaluation of Clinical Experience surveys were administered at the end of all clinical rotations to agency staff and OCCC faculty and students with results forwarded to team leaders for the nursing courses, NCC, and NFO. Evidence of	Results distributed to Team Leaders for individual team and team leader committees discussion Fall 13. Continue to monitor.

input is provided through program's course team meeting minutes and through NEC, NCC and NFO minutes. ELA 1.3b: met Program meets all Oklahoma Board of Nursing Standards as evidenced by continuing approval status by the OBN.	1.3b Continued approval. Continue to monitor
 ELA 1.3c: met Program utilizes input from the Public/Advisory Committee. Evidence of input in program processes and decision making is provided in Advisory Committee minutes. <u>April 2013 Recommendations/Activities</u> The Advisory Committee met on March 27 with input discussed during the NFO meeting. OCCC Nursing Advisory Committee Survey Item: 2 Item 2 – 4.75 	1.3c Continue to monitor
ELA 1.3d:	1.3d Awaiting results.

Component	Expected Level of Achievement
Partnerships exist that promote excellence in	 The Nursing Program will maintain partnerships that promote excellence in nursing education, enhance the profession, and benefit the community. Examples are:
nursing education, enhance the profession, and benefit the community	 Item One: OCCC/OU Collaborative BSN Program (collaboration dissolved May 2012) Item Two: I + I Program with INTEGRIS Health Item Three: Articulation Agreements with Higher Education (change to Item Two for AY13)

Frequency of Assessment	Assessment Method
Item One: Twice annually Periodic (determined by dates on MOU) Annually (September) (collaboration dissolved May 2012) 	 Item One: Annual review of student evaluations College and program review of MOU NCLEX RN performance/pass rate
Item Two: January/May August/December Annually (September/March) Item Three:	 Item Two: Completion rate of I + I students who are admitted to NPIII Number of referred students who complete program within 2-year framework. NCLEX RN performance/pass rate for all I + I students
Annually (change to Item Two for AY13)	 Item Three: Annual review of articulation agreements with institutions of higher education (change to Item Two for AY13)

COMPONENT 1.4 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
	•
AY 2011 ELA 1.4 met The Nursing Program maintains current partnerships that promote excellence in nursing education, enhance the profession, and benefit the community. Examples are:	AY2011 Item One: The Nursing Program continues to accept 24 students each Fall and teach the junior year content of the curriculum for OCCC/OU Collaborative BSN Program. Item Two: The Nursing Program continues to review and maintain participation in I + I program with decreased funding and part-time faculty support from INTEGRIS Health. The Program Director, Associate Director or their designees regularly attend and participate in advisory committee meetings at area technical centers that participate in I + I program. Item Three: Continue to review and maintain articulation agreements with OSRHE, UCO and UOP. <u>April 2011 Actions</u> Agreement facilitates the transfer of OCCC graduates into their
AY 2012 ELA 1.4 met The Nursing Program maintains current partnerships that promote excellence in nursing education, enhance the profession, and benefit the community. Examples are:	AY 2012 Item One: The Nursing Program accepted 24 students in the Fall and taught the junior year content of the curriculum for OCCC/OU Collaborative BSN Program. Dissolution of the CBSN collaboration post the Spring 2012 semester. OU nursing program focus in different direction. Item Two: The Nursing Program continues to review and maintain participation in I + I program with decreased funding and part-time faculty support from INTEGRIS Health. The Program Director, Associate Director or their designees regularly attend and participate in advisory committee meetings at area technical centers that participate in I + I program. Item Three: The Nursing Program continues to review and maintain articulation agreements with OSRHE, UCO and UOP. (change to Item Two for AY13)

AY 2013	AY 2013
ELA 1.4; met	Continue to seek partnerships that promote excellence in nursing
Preliminary discussions occurred Fall 2012 involving a potential partnership with the	education, enhance the profession, and benefit the community
Oklahoma Department of Mental Health and Substance Abuse Services	Item One: The Nursing Program continues to review and maintain
(ODMHSAS) and the Nursing Program to provide educational opportunity for	its participation in I + I program with area technical centers with no
ODMHSAS employees with LPN licensure and CNA certification to become	funding from INTEGRIS Health. The Program Director, Associate
registered nurses. The partnership would involve developing a separate cohort for	Director or designees attend and participate in advisory committee
ODMHSAS. The Nursing Program continues to maintain current partnerships that	meetings at area technical centers that participate in I + I program.
promote excellence in nursing education, enhance the profession, and benefit the	Item Two: The Nursing Program continues to review and maintain
community. Examples are:	articulation agreements with OSRHE, UCO and UOP.
Item One: I + I Program with INTEGRIS Health	October 2012 Actions
Item Two: Articulation Agreements with OSRHE, UCO, UOP	Faculty will follow the Graduate Student Preceptorship guidelines.
October 2012 Recommendations/Activities	Graduate Student Preceptorship Agreements with area programs
A new procedure for Graduate Student Preceptorships is available.	offering master's degree education will be implemented as Item
	Three for AY 2014.

Component	Expected Level of Achievement
The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing.	 The Nursing Program Director, Nursing Program Associate Director and Assistant Program Director (eliminated Spring 2012) will have a minimum of the following qualifications: Licensed as a registered nurse in the State of Oklahoma Master's degree in nursing from a regionally accredited university Three years of educational and/or management experience
Nursing Program Director (NPD)	
Nursing Program Associate Director (NPAD)	
Assistant Nursing	

Program Director	
(ASNPD) (eliminated	
Spring 2012)	

Frequency of Assessment	Assessment Method		
Upon hire and as needed if changes in education or experience occur, or if	Review of the Oklahoma Board of Nursing requirements, Nursing Program		
job description changes	Director job description, academic records, and curriculum vitae.		

COMPONENT 1.5 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011	AY2011
ELA 1.5: met	Qualifications met.
The Nursing Program Director, Nursing Program Associate Director and Assistant	
Program Director have a minimum of the following qualifications:	
 Licensed as a registered nurse in the State of Oklahoma 	
Master's degree in nursing from a regionally accredited university	
Three years of educational and/or management experience	
AY 2012	AY 2012
ELA 1.5: met	Qualifications met.
The Nursing Program Director, Nursing Program Associate Director and Assistant	Nursing Assistant Program Director position eliminated Spring
Program Director have a minimum of the following qualifications:	2012.
 Licensed as a registered nurse in the State of Oklahoma 	
Master's degree in nursing from a regionally accredited university	
Three years of educational and/or management experience	
<u>AY 2013</u>	<u>AY 2013</u>
ELA 1.5: met	Qualifications met
The Nursing Program Director and Nursing Program Associate Director have a	
minimum of the following qualifications:	
 Licensed as a registered nurse in the State of Oklahoma 	
Master's degree in nursing from a regionally accredited university	
Three years of educational and/or management experience	

Component	Expected Level of Achievement
The nurse administrator has authority and responsibility for the development and administration of the program and has adequate time and resources to fulfill the role responsibilities.	 1.6a The job description for the Nursing Program Director, the Nursing Program Associate Director and the Assistant Nursing Program Director (eliminated Spring 2012) provides for the authority and responsibility for the development and administration of the program. 1.6b The Nursing Program Director, the Nursing Program Associate Director and the Assistant Nursing Program Director (eliminated Spring 2012) have adequate time and resources to fulfill their roles and responsibilities.
Nursing Program Director (NPD)	
Nursing Program Associate Director (NPAD)	
Assistant Nursing Program Director (ASNPD) (eliminated Spring 2012)	

Frequency of Assessment	Assessment Method		
 1.6a: Annually: February – performance appraisal September/October – professional development plan 	 Evaluation according to administrative guidelines. Review of job descriptions. 		
1.6bAnnually and as indicated	 1.6b: The Board of Nursing Rules and Regulations related to authority, responsibilities, time and resources. 		

Comparison of like roles within the community considering
appropriate variables

COMPONENT 1.6 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2011</u>	AY2011
ELA 1.6a: met	1.6a
The job description for the Nursing Program Director, the Nursing Program Associate Director, and the Assistant Nursing Program Director provide for the authority and	Continue to monitor, evaluating and updating job descriptions as needed.
responsibility for the development and administration of the program.	needed.
ELA 1.6b: met	1.6b
The Nursing Program Director, the Nursing Program Associate Director, and the	Continue to monitor.
	AV 2012
Nursing Assistant Program Director position eliminated Spring 2012.	needed.
The job description for the Nursing Program Director, the Nursing Program Associate	
responsibility for the development and administration of the program.	
ELA 1.6b: met	1.6b
	Continue to monitor.
Assistant Nursing Program Director have adequate time and resources to fulfill their	
roles and responsibilities.	
The Nursing Program Director, the Nursing Program Associate Director, and the Assistant Nursing Program Director have adequate time and resources to fulfill their roles and responsibilities. <u>AY 2012</u> <u>ELA 1.6a: met</u> Job descriptions for the NPD and NPAD were updated for the AY12 academic year. <u>Nursing Assistant Program Director position eliminated Spring 2012</u> . The job description for the Nursing Program Director, the Nursing Program Associate Director, and the Assistant Nursing Program Director provide for the authority and responsibility for the development and administration of the program. <u>ELA 1.6b: met</u> The Nursing Program Director, the Nursing Program Associate Director, and the Assistant Nursing Program Director have adequate time and resources to fulfill their	Continue to monitor. AY 2012 1.6a Continue to monitor, evaluating and updating job descriptions as needed. 1.6b

ELA 1.6b: met	1.6b
The Nursing Program Director and the Nursing Program Associate Director have	Continue to monitor.
adequate time and resources to fulfill their roles and responsibilities.	

Component	Expected Level of Achievement
With faculty input, the	1.7a
nurse administrator has	 The job description for the Nursing Program Director provides for the authority to prepare and administer the program
the authority to prepare	budget.
and administer the	1.7b
program budget and	 The nursing program budget will be comparable within the unit and among other units at OCCC.
advocates for equity	1.7c
within the unit and	 Faculty will have input into program budget.
among other units of the	 Mean score of at least 3.5 on a scale of 5.0 of the Total Program Evaluation-Faculty Survey: Item 46
governing organization.	

Frequency of Assessment	Assessment Method			
 1.7a: Annually: February – performance appraisal, job description September/October – professional development plan 	 1.7a: Evaluation according to administrative guidelines. Review of job description. 			
1.7b: • Annually Carl Perkins Allotment • March	1.7b:Comparison of budget requests with budget allotments			
 1.7c: February Total Program Evaluation-Faculty Survey: May – data collected by NEC 	 Faculty have the opportunity to submit a Faculty Fiscal Resource Planning Form to HPS/Nursing Lab Coordinator for compilation and submission to NPD each February. Prioritization of requests occurs 			

٠	September – reviewed by NEC with recommendations to NFO	
٠	October – reviewed by NFO	

through program administrative review. To NFO for approval. Analysis of Total Program Evaluation – Faculty Survey by NEC and NFO.

COMPONENT 1.7 RESULTS

			f Data Colle actual leve	Actions for Program Development, Maintenance, or Revision			
(including actual level of achievement) AY 2011 ELA 1.7a: met The job description for the Nursing Program Director provides for the authority to prepare and administer the program budget as follows: Assist the Dean of Health Professions in the preparation of proposed program budget requests. Provide necessary over-sight for grants, internal and external, to benefit the program and submit to Dean of Health Professions Division and VP for Academic Affairs for approval. Determine and document the needs list for grants, such as Carl Perkins, which are awarded to the program.						AY2011 1.7a Continue to monitor performance. Evaluating and updating as necessary.	
ELA 1.7b: met The nursing program budget is comparable within the unit and among other units at OCCC. • Comparison of Carl Perkins Allotment Year Carl Perkins Allotment Carl Perkins Allotment						1.7b Continue to monitor. Budget requests verses allotments are reviewed annually.	
A	Y11	\$105,20	1.06		HP Division \$137,439.84		
Carl Perkins allotment for AY11 totals \$105,201.06. OTA received \$3,919.50; PTA received \$8,928.47; and EMS received \$19,390.84 for a total for Health Professions of \$137,390.87 Nursing Budget for AY2011							
Academic Year							

AY2011	1,139,	238	27,500	\$6,250	\$200	\$6,110	\$7,200	
ELA 1.7c: met Faculty submitted program requests including supporting documentation to the NPD throughout year. An upward trend is noted from AY10. Total Program Evaluation – Faculty Survey: Item 46 Item 46 – 3.81						1.7c The NPD continues to encourage Faculty to submit program requests including supporting documentation to her throughout year. Faculty concerns related to the nursing program budget are voiced and submitted to the Dean of HP for review.		
AY 2012 ELA 1.7a: m	ot							AY 2012 1.7a
	ription fo		•	ogram Direc	tor provides	for the authority to	prepare and	Continue to monitor.
ELA 1.7b: m	et							1.7b
Carl Perkins a 12 equaled \$ received \$792	The nursing program budget is comparable within the unit and among other units at OCCC. Carl Perkins allotment for AY12 totals \$47,899.93. Total allotment for Health Professions AY 12 equaled \$134,410.30. OTA received \$2512.57; PTA received \$4715.80; and EMS received \$79282.00.						Continue to monitor. Budget requests verses allotments are reviewed annually.	
Y	Year Carl Perkins Allotment Carl Perkins Allotment Total HP Division							
A	/11		\$105,20	1.06		\$137,439.84		
A	(12		\$47,899			\$134,410.30		
			Nursing	Budget for <i>I</i>	AY2011-AY	2012		
Academic Year					Budget			
AY2011	1,139,		27,500	\$6,250	\$200	\$6,110	\$7,200	
AY2012	1,158,2	247	27,500	\$6,250	\$200	\$6,110	\$7,200	

Faculty submithroughout ye Total Program Item October 2011 At the NFO m	 ELA 1.7c: met Faculty submitted program requests including supporting documentation to the NPD throughout year. Trending remains same from previous year. Total Program Evaluation – Faculty Survey: Item 46 Item 46 – 3.80 October 2011 Recommendations/Actions At the NFO meeting faculty were instructed of a November 1 deadline to submit items for the strategic plan. 						1.7c The NPD continues to encourage Faculty to submit program requests including supporting documentation to her throughout year. Faculty concerns related to the nursing program budget are voiced and submitted to the Dean of HP for review. <u>October 2011 Actions</u> Faculty to submit items for the strategic plan by November 1.
The job descr	AY 2013 ELA 1.7a: met The job description for the Nursing Program Director provides for the authority to prepare and administer the program budget.						AY 2013 1.7a Continue to monitor.
The nursing p OCCC. Carl Perkins a 13 equaled \$1 received \$36,	 ELA 1.7b: met The nursing program budget will be comparable within the unit and among other units at OCCC. Carl Perkins allotment for AY13 totals \$58,124.68. Total allotment for Health Professions AY 13 equaled \$109,774.98. OTA received \$4471.25; PTA received \$10,500.40; and EMS received \$36,678.65. SLPA did not request funds. Comparison of Carl Perkins Allotment 					1.7b Continue to monitor. Budget requests verses allotments are reviewed annually.	
Y	ear C	arl Perkins	Allotment		rkins Allotment T HP Division	otal	
AY	′11	\$105,20	1.06		\$137,439.84		
AY		\$47,89	9.93		\$134,410.30		
AY	AY13 \$58,124.68 \$109,477.98						
		Nursing	Budget for A	AY2011-AY	2013		
Academic	Faculty/	Clerical/	Materials	Services	Dues/	Travel/	
Year	Director	Staff	and	Budget	Organizational	Continuing	
	Salaries	Salaries	Supplies	Pool	Fees	Education	

AY2011	1,139,238	27,500	\$6,250	\$200	\$6,110	\$7,200	
AY2012	1,158,247	27,500	\$6,250	\$200	\$6,110	\$7,200	
AY2013	1,186,364	51,208	\$6,250	\$200	\$6,110	\$7,200	1.7c
ELA 1.7c: m	et				Continue to monitor. The NPD encourages the faculty to		
Slight decrease in trending for item related to faculty input in to budget for nursing. (AY11 =							submit program requests including supporting
3.81; AY12 =	,				documentation throughout year. Faculty concerns related		
February 2013 Recommendations/Activities							to the nursing program budget are voiced and submitted
Faculty were informed that D. Myers had e-mailed them the request forms for Carl Perkins							to the Dean of HP for review.
purchases.							February 2013 Actions
April 2013 Recommendations/Activities							Faculty requests are due by end of the spring break.
The Carl Perkins Faculty Request forms are due nw.						April 2013 Actions	
Total Program Evaluation – Faculty Survey: Item 46							Faculty will turn in Carl Perkins requests by April 5 to D.
ltem 46 – 3.68							Myers.

Component	Expected Level of Achievement
Policies of the nursing education unit are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the goals and outcomes of the nursing education unit.	 Policies of the Nursing Program are: Comprehensive and provide for the welfare of the faculty/staff Consistent with the OCCC policies or are justified by the nursing education purposes. Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 9.1-9.3, 10

Frequency of Assessment	Assessment Method
Annually:	Comparative analysis of the OCCC policies and the nursing
• July	program policies.

Total Program Evaluation-Faculty Survey:

- May data collected by NEC
- September reviewed by NEC with recommendations to NFO
- October reviewed by NFO

• Review and analysis of the Total Program Evaluation-Faculty Survey by NEC and NFO.

COMPONENT 1.8 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2011</u>	<u>AY2011</u>
ELA 1.8: met	Continue to monitor for inconsistencies.
Nursing policies were reviewed and found consistent with OCCC policies except for	
those policies that are necessary to meet clinical agency and accreditation	
requirements (i.e.: licensure, faculty workload, lab faculty requirements, clinical	
agency requirements). Policies were found to provide for the welfare of staff and	
faculty.	
Total Program Evaluation-Faculty Survey: Items 9.1-9.3, 10	
ltem 9.1 – 4.32	
Item 9.2 – 4.10	
ltem 9.3 – 4.03	
ltem 10 – 4.25	
<u>AY 2012</u>	<u>AY 2012</u>
ELA 1.8: met	Continue to monitor for inconsistencies.
Nursing policies were reviewed and found consistent with OCCC policies except for	
those policies necessary to meet clinical agency and accreditation requirements (i.e.:	
licensure, faculty workload, lab faculty requirements, clinical agency requirements).	
Policies provide for the welfare of staff and faculty. Slight increase noted in trending	
on Total Program Evaluation Faculty Survey.	
Total Program Evaluation-Faculty Survey: Items 9.1-9.3, 10	
ltem 9.1 – 4.47	
Item 9.2 – 4.40	
ltem 9.3 – 4.14	
Item 10 – 4.43	

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AY 2013	AY 2013
ELA 1.8: met	Continue to monitor for inconsistencies.
Nursing policies were reviewed and found consistent with OCCC policies except for	September 2012 Actions
those policies necessary to meet clinical agency and accreditation requirements (i.e.:	NFO Rules and Regulations were approved and will take effect
licensure, faculty workload, lab faculty requirements, clinical agency requirements).	immediately. A revised copy is available on the "O" drive.
Policies continue to provide for the welfare of staff and faculty. Slight increase noted	
in trending.	
September 2012 Recommendations/Activities	
New revised NFO Rules and Regulations were distributed to the NFO membership	
for approval.	
Total Program Evaluation-Faculty Survey: Items 9.1-9.3, 10	
ltem 9.1 – 4.74	
Item 9.2 – 4.42	
ltem 9.3 – 4.58	
Item 10 – 4.47	

Component	Expected Level of Achievement
Records reflect that program complaints and grievances receive due process and include evidence of resolution.	 100% of complaints will be documented and addressed according to established methods and policies, which include due process and evidence of resolution.

Frequency of Assessment	Assessment Method	
When complaints occur.	Review of complaints for correct procedure	

COMPONENT 1.9 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011 ELA 1.9: met Complaint received per student for failing grade in course NUR2539. Appeal process followed with student appearing before Grade Appeal Committee. Resolved with grade given standing.	AY2011 Continue to monitor. Respond appropriately if complaint received.
AY 2012 ELA 1.9: met Complaint received per student for failing grade in course NUR 2539. Appeal process followed with student appearing before Grade Appeal Committee. Resolved with grade given standing.	AY 2012 Continue to monitor. Respond appropriately if complaint received.
AY 2013 ELA 1.9 No complaints received.	AY 2013 Continue to monitor. Respond appropriately if complaint received.

Component	Expected Level of Achievement
Distance education, as	Not Applicable – No Distance Education Program
defined by the nursing	
education unit, is	
congruent with the	
mission of the governing	
organization and the	
mission/philosophy of the	
nursing education unit.	

Frequency of Assessment	Assessment Method
Not Applicable	Not Applicable

COMPONENT 1.10 RESULTS AND TRENDS ANALYSIS

	Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2011</u> ELA 1.10		<u>AY2011</u>
AY 2012 ELA 1.10		<u>AY 2012</u>
<u>AY 2013</u> ELA 1.10		<u>AY 2013</u>

STANDARD II: FACULTY AND STAFF

Qualified faculty and staff provide leadership and support necessary to attain the goals and outcomes of the nursing education unit.

Component	Expected Level of Achievement
Full-time faculty are credentialed with a minimum of a master's	 2.1a 100% of full-time faculty members will have a Master's degree in nursing from a regionally accredited university. 2.1b
degree with a major in nursing and maintain expertise in their areas	 100% of full-time faculty will attend at least one educational offering relevant to their teaching responsibilities or take one academic course per academic year.
of responsibilities.	 Mean score of a least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 12.1-12.3
2.1a Academic preparation and experience	
2.1b Maintenance of faculty expertise	

Frequency of Assessment	Assessment Method
 2.1a Upon employment and if changes in education, experience, or license occur. 	 2.1a Employment process Review of transcripts Ongoing review as changes in education or experience occurs.
 2.1b Annually in February Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC October – reviewed by NFO 	 2.1b Annual appraisal process Review of CEU form by NPD and NPAD Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO.

COMPONENT 2.1 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011 ELA 2.1a: partially met Twenty-one (91%) of the twenty-three faculty have a master's degree in nursing from a regionally accredited university. Two (9%) are currently enrolled in a master's degree program and are within one calendar year of completion. One (4%) faculty member is enrolled in a Doctoral degree program.	AY2011 2.1a Continue to monitor and work toward all master's credentialed faculty.
 ELA 2.1b: met Faculty were encouraged to submit offsite education/travel requests at the beginning of the Fall semester. \$7200 allotted for education for AY 2011. 100% of full-time nursing faculty have attended at least one educational offering relevant to their teaching responsibilities or take one academic course this academic year. Decreases in the state budget has impacted travel funds and funding for offsite educational opportunities. Total Program Evaluation-Faculty Survey: Items 12.1-12.3 Item 12.1 – 4.34 Item 12.2 – 4.31 Item 12.3 – 4.16 	2.1b Considering percentage of the division professional staff who are nursing faculty, percentage allocation of travel funds is important to monitor (7200.00 allotted). Strategies to meet the educational needs of the nursing faculty are ongoing.
AY 2012 ELA 2.1a: partially met Twenty (87%) of the twenty-three faculty have a master's degree in nursing from a regionally accredited university. Three (13%) are currently enrolled in a master's degree program and are within one calendar year of completion. Two (8%) faculty members are enrolled in a Doctoral degree program.	AY 2012 2.1a Continue to monitor and work toward all master's credentialed faculty.
ELA 2.1b: met Faculty are strongly encouraged to submit offsite education/travel requests at the beginning of each Fall semester (\$7200 allotted for AY 12). 100% of full-time nursing faculty have attended/participated in at least one educational offering relevant to their teaching responsibilities or have taken at least one academic course this academic year. Slight increase in trending for items related to education/travel.	2.1b Considering percentage of the division professional staff who are nursing faculty, percentage allocation of travel funds is important to monitor (continues at \$7200). Strategies to meet the educational needs of the nursing faculty are ongoing. A solution was the inclusion of Nurse Tim webinars which has given the faculty

Total Program Evaluation-Faculty Survey: Items 12.1-12.3 Item 12.1 – 4.57 Item 12.2 – 4.43 Item 12.3 – 4.20	increased opportunity to participate in educational offerings and earn CEUs. Assessment Technologies Institute (ATI) has developed their ATI Academy for faculty which also provides educational offerings. Both the Nurse Tim and ATI Academy are accessed online and are available year round. Both are provided free to the OCCC nursing faculty.
AY 2013 ELA 2.1a: met During Fall 2012, 100% of full-time nursing faculty members (21) held a Master's degree in nursing from a regionally accredited university. Two faculty members are currently enrolled in doctorial programs. Have hired two faculty positions for Fall 13 with one of the new faculty to achieve masters by December 2013. Currently one position open.	AY 2013 2.1a Will continue to monitor
ELA 2.1b: met Decreases in the state budget have continued to impact travel funds and funding for offsite educational opportunities for faculty (allotment remains at \$7200). 100% of full-time nursing faculty have attended at least one educational offering relevant to their teaching responsibilities or have taken one academic course this academic year. Carl Perkins used to fund Spring 13 NLNAC Self Study Forum for NPD and NPAD. Slight increase in trending for items related to education/travel. Total Program Evaluation-Faculty Survey: Items 12.1-12.3 Item 12.1 – 4.63 Item 12.2 – 4.58 Item 12.3 – 4.47	2.1b Continue to monitor. Funds allotted remained at \$7200. KeithRN offered as additional option for CEUs. Strategies to meet the educational needs of the nursing faculty are ongoing.

Component	Expected Level of Achievement
The majority of part-time faculty are credentialed with a minimum of a master's degree with a major in nursing; the remaining part-time faculty hold a minimum of a baccalaureate degree with a major in nursing.	 The majority of part-time faculty members will have a Master's degree in nursing from a regionally accredited university or evidence of continued progression toward a master's degree in nursing The remaining part-time faculty members hold a minimum of a baccalaureate degree with a major in nursing

Frequency of Assessment	Assessment Method
Upon employment and if changes in education, experience, or license occur.	 Employment process Review of transcripts Ongoing review as changes in education or experience occurs.

COMPONENT 2.1.1 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2011</u>	<u>AY2011</u>
ELA 2.1.1: partially met	Encourage current part-time faculty to pursue a master's degree in
There are thirty-five part-time faculty. Of those, all hold a minimum of a Bachelor's	nursing. Efforts are made to hire masters prepared RNs. Continue
degree in nursing and sixteen (45.7%) hold a master's degree in nursing. Four (11%)	to monitor and work toward all master's credentialed part-time
are currently enrolled in a master's degree program in nursing.	faculty.
AY 2012	<u>AY 2012</u>
ELA 2.1.1: partially met	Encourage current part-time faculty to pursue a master's degree in
There are forty-three part-time faculty. Of those, all hold a minimum of a Bachelor's	nursing. Efforts are made to hire masters prepared RNs. Continue
degree in nursing and sixteen (37%) hold a master's degree in nursing. Ten (23%)	to monitor and work toward all master's credentialed part-time

are currently enrolled in a master's degree program in nursing.	faculty.
AY 2013	AY 2013
ELA 2.1.1: partially met	Improved. Efforts are made to hire masters prepared RNs.
Seventeen (48.57%) of the thirty-five part-time faculty on contract for AY2013 hold	Continue to monitor and work toward 50% or higher master's
a master's degree in nursing with remaining holding minimum of BS/BSN degree in	credentialed part-time faculty.
nursing. Several of those with BS/BSN are currently enrolled in graduate programs.	

Component	Expected Level of Achievement
Rationale is provided for utilization of faculty who do not meet the minimum credential.	 100% of faculty will meet the minimum credential as defined by Administrative Rules of the OBN 485:10-5-5.2. Faculty for nursing education programs (f)

Frequency of Assessment	Assessment Method
Upon employment and if changes in education, experience, or license occur.	 Qualifications are verified before initial appointment All faculty must obtain OBN approval Review of transcript

COMPONENT 2.1.2 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2011</u>	<u>AY2011</u>
ELA 2.1.2: met	Continue to monitor and work towards all fulltime faculty
All faculty, to include part-time faculty, meet the minimum OBN requirements.	credentialed with a master's degree in nursing and majority of part-
OBN 485:10-5-5.2. Faculty for nursing education programs (f)	time same.
All programs leading to licensure as a Registered Nurse in this state shall establish	
comparable educational qualifications for the nursing faculty as required for other	
teaching faculty in the controlling institution. The minimum requirements shall be as	
follows:	
(1) a master's or higher degree in nursing; or	
(2) a baccalaureate degree in nursing plus evidence of continued progress toward a	
master's or higher degree in nursing with completion of a minimum of six (6)	
semester hours per calendar year; and	
(3) at least one-half of the full-time faculty having a master's or higher degree in	
nursing; and	
(4) part-time clinical instructors, regardless of title used, having a minimum of a	
baccalaureate degree in nursing.	
Continue to work towards all full-time faculty credentialed with a master's degree in	
nursing and majority of part-time same.	
<u>AY 2012</u>	<u>AY 2012</u>
ELA 2.1.2: met	Continue to work towards all full-time faculty credentialed with a
All faculty, to include part-time faculty, meet the minimum OBN requirements.	master's degree in nursing and majority of part-time same.
<u>AY 2013</u>	<u>AY 2013</u>
ELA 2.1.2: met	Continue to work towards all full-time faculty credentialed with a
All faculty, to include part-time faculty, meet the minimum OBN requirements.	master's degree in nursing and majority of part-time same.

Component	Expected Level of Achievement
Faculty (full-and part- time) credentials meet	 2.2a 100% of full-time faculty will meet the employment requirements of OCCC.
governing organization and state requirements.	 100% of full-time faculty will meet OBN faculty requirements. 100 % of full-time faculty will hold a valid unencumbered license.
2.2a Full-time Faculty 2.2b Part-time Faculty	 2.2b 100% of part-time faculty will meet the employment requirements of OCCC. 100% of part-time faculty will meet OBN faculty requirements. 100 % of part-time faculty will hold a valid unencumbered license.

Frequency of Assessment	Assessment Method			
2.2a/2.2b	 2.2a/2.2b Compliance with OCCC employee/faculty requirements. Verify compliance with OBN employment processes including			
Upon hire and annually in August	Faculty Qualification Report. Verify license.			

COMPONENT 2.2 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011 Requirement that all full-time and part-time faculty submit documentation of Oklahoma licensure upon renewal. Verify compliance with OCCC employee/faculty requirements and OBN employment processes upon hire. Documentation including licensure on file. Faculty Qualification Record on file.	AY2011 2.2a/2.2b Continue to monitor and update as necessary.
ELA 2.2a: met All full-time nursing faculty meets the employment requirements of OCCC. All full-time nursing faculty meets OBN faculty requirements.	

All full-time nursing faculty holds a valid unencumbered license.	
ELA 2.2b: met Employment documentation including licensure on file. All part-time nursing faculty meets the employment requirements of OCCC.	
All part-time nursing faculty meets OBN faculty requirements. All part-time nursing faculty holds a valid unencumbered license.	
AY 2012	AY 2012
 ELA 2.2a: met Employment documentation including licensure on file. All part-time nursing faculty meets the employment requirements of OCCC. All part-time nursing faculty meets OBN faculty requirements. All part-time nursing faculty holds a valid unencumbered license. 	2.2a/2.2b Continue to monitor and update as necessary.
ELA 2.2b: met	
Employment documentation including licensure on file.	
All part-time nursing faculty meets the employment requirements of OCCC.	
All part-time nursing faculty meets OBN faculty requirements. All part-time nursing faculty holds a valid unencumbered license.	
AY 2013	AY 2013
ELA 2.2a:	2.2a/2.2b
Employment documentation including licensure on file.	Continue to monitor and update as necessary.
All full-time nursing faculty meets the employment requirements of OCCC.	
All full-time nursing faculty meets OBN faculty requirements.	
All full-time nursing faculty holds a valid unencumbered license.	
ELA 2.2b: met	
All part-time nursing faculty meets the employment requirements of OCCC.	
All part-time nursing faculty meets OBN faculty requirements.	
All part-time nursing faculty holds a valid unencumbered license.	

Component	Expected Level of Achievement
Credentials of practice	100% of the practice laboratory personnel with instructional responsibilities will have a master's degree in nursing from a
laboratory personnel are	regionally accredited university or hold a minimum of a baccalaureate degree in nursing and are enrolled in a master's in
commensurate with their	nursing program.
level of responsibilities.	

Frequency of Assessment	Assessment Method
Upon employment and if changes in education, experience, or license	Employment process
occur.	 Ongoing review as changes in education or experience occur Annual faculty qualification process.

COMPONENT 2.3 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011 ELA 2.3 All practice laboratory personnel with instructional responsibilities hold a master's degree in nursing.	AY2011 Continue to monitor. Evaluating and updating job descriptions as needed.
AY 2012 ELA 2.3 All practice laboratory personnel with instructional responsibilities hold a master's degree in nursing.	AY 2012 Continue to monitor
AY 2013 ELA 2.3 All practice laboratory personnel with instructional responsibilities hold a master's degree in nursing.	AY 2013 Continue to monitor

Component	Expected Level of Achievement
The number and	2.4a
utilization of faculty (full- and part-time) ensure	 100% of the full-time faculty (after the first full year of employment) will maintain a minimum workload equivalent to 15 credit hours per semester.
that program outcomes are achieved.	 100% of on campus classroom instruction will comply with a ratio of 1 faculty member per 24 - 36 students or 2 - 4 faculty members for a maximum of 72 students.
2.4a	 100% of online classroom instruction will comply with a ratio of 1 faculty member per 25 students with overload paid for additional students (Pharmacology and Overview courses)
Faculty workload 2.4b Clinical instruction	 100% of learning experiences are developed and or supervised by faculty with a Master's degree in nursing Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 13, 14 2.4b
	 100% of pre-licensure clinical groups in the traditional program will have no more than 9 students under direct supervision per faculty member
	 100% of clinical groups in the BADNAP program will have no more than 9 students under direct supervision per faculty member
	 100% of previously licensed (LPN, paramedic) clinical groups will have no more than 10 students under direct supervision per faculty member (Change to 9 students AY2013)
	 100% of OUCN CBSN clinical groups will have no more than 8 students under direct supervision per faculty member (Program dissolution Spring 2012 semester)

Frequency of Assessment	Assessment Method
2.4a	2.4a
August and January	 Review of faculty workload documents by the NPD
 Total Program Evaluation-Faculty Survey: May – data collected by NEC 	 Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO. Review of ACEN Self Study.
 September – reviewed by NEC October – reviewed by NFO 	
2.4b	2.4b
August and January	Review of clinical instruction schedules

COMPONENT 2.4 RESULTS

			ollection & A evel of achie	Actions for Program Development, Maintenance, or Revision		
<u>AY 2011</u>				<u>AY2011</u>		
ELA 2.4a: met		=		2.4a		
				ester with adjustments m	nade	Continue to monitor.
				ull year of employment)		
		•		it hours (15/semester)		
			•	mer semester, NPII and I . Each 8 week session is		
				thways. Overload is ava		
				r semester equal to 21.5		
hours.			nonaoda po		orount	
Semester	Summer	Fall	Spring	Average		
Academic	2010	2010	2011	Workload/		
Year				Semester		
AY 2011	22.5	19.5	20.4	20.8		
Campus classroom instruction complies with a ratio of 1 faculty member per 24 - 36 students or 3 faculty for all courses except NUR 1519, which has 4 faculty members for a maximum of 72 students. Online classroom instruction (Pharmacology and Overview courses) complies with a						
	· ·			d paid for additional stude		
to maximum.	ember her 20	SUUCIIIS			GIIIO	
	ces are develo	pped and	or supervise	d by faculty with a Maste	r's	
degree in nursing.						
Total Program Ev Item 13 – Item 14 –	3.84	aculty Su	rvey: Items			
ELA 2.4b: met				2.4b		
Pre-licensure clinic under direct super	•			Continue to monitor.		

 100% of clinical groups in the BADNAP program have no more than 9 students under direct supervision per faculty member Previously licensed (LPN, paramedic) clinical groups have no more than 10 students under direct supervision per faculty member. OUCN CBSN clinical groups have no more than 8 students under direct supervision per faculty member. <u>AY 2012</u> ELA 2.4a: met Faculty workloads are reviewed by the NPD each semester with adjustments made if needed. 						AY 2012 2.4a Continue to monitor.
Semester Academic Year	Summer 2011	Fall 2011	Spring 2012			
AY 2011	22.5	19.5	20.4	20.8		
AY 2012	21.2	19.4	19.4	20.0	1	
Total Program Ev Item 13 – Item 14 –	4.00	aculty Su	rvey: Items 1			
ELA 2.4b: met Pre-licensure clinical groups in the traditional program have no more than 9 students under direct supervision per faculty member 100% of clinical groups in the BADNAP program have no more than 9 students under direct supervision per faculty member Previously licensed (LPN, paramedic) clinical groups have no more than 9 students under direct supervision per faculty member						2.4b Continue to monitor. The LPN/Paramedic clinical groups (CLP pathway) will change to a faculty student ratio of 1:9 for clinical beginning with Fall 2012. The OUCN CBSN program will be dissolved at the end of the Spring 2012 semester.
AY 2013 ELA 2.4a: met Faculty workloads are reviewed by the NPD each semester with adjustments made if needed.						AY 2013 2.4a <u>February 2013 Actions</u> M. Collin to e-mail all part-time faculty of the full-time position that has been posted.
				Continue to monitor.		

	Semester Academic	Summer 2012	r Fall 2012	Spring 2013	Average Workload/		
	Year	2012	2012	2013	Semester		
ľ	AY 2011	22.5	19.5	20.4	20.8		
	AY 2012	21.2	19.4	19.4	20.0		
[AY 2013	20.3	18.3	18.4	19.0		
D. Fe Dı ha Mi be co	ebruary 2013 Re uring the NFO m as been posted. arch 2013 Recor FO membership	to NFO mem commendation neeting Facul mmendations/ was informed e to resignatio at position in valuation – Fa - 4.16	embership th ations/Activiti culty were no <u>ns/Activities</u> ned that the i ation of NUR in April from	ne new hours ies iotified that th interviews for 1519 faculty incurrent pool		osition culty will	
	A 2.4b: met	-					
100% of pre-licensure clinical groups in the traditional program have no more than 9 students under direct supervision per faculty member 100% of clinical groups in the BADNAP program have no more than 9 students							
un	nder direct super	vision per fac	faculty memb	ber			
	udents under dir		, , , ,	,	groups have no more	man 9	

Component	Expected Level of Achievement
Faculty (full- and part-	2.5a
time) performance reflects scholarship and evidence-based teaching and clinical practices.	 100% of full-time faculty performance will demonstrate participation in activities that reflect faculty scholarship through annual performance appraisal process and submission of supporting documents to include CEU reports. 100% of full-time faculty performance will reflect evidence-based teaching and clinical practices. Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 15.1-15.3 Mean score of at least 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey: Items 4.1-4.11
2.5a Full-time faculty 2.5b Part-time faculty	 2.5b 100% of part-time faculty performance will demonstrate participation in activities that reflect faculty scholarship through annual evaluation process and submission of supporting documents to include CEU reports. 100% of part-time faculty performance will reflect evidence-based teaching and clinical practices. Mean score of at least 3.5 on a scale of 5 on the Adjunct Nursing Survey: Items 4.1-4.3 Mean score of at least 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey: Items 4.1-4.11

Frequency of Assessment	Assessment Method
 2.5a Student Surveys: Student Input on Instruction (SIIs): Annually (November/April) – data collected Faculty Performance Appraisal Review Form: February/March Nursing Faculty Performance Appraisal Review Form Addendum: February/March CEU Reports February/March Faculty Professional Development Plans September/October Nursing Program Faculty Instructional Observation Form 	 2.5a Review of data from Student Input on Instruction annually and as needed by NPD and NPAD Review of annual faculty performance appraisal and supporting documents to include CEU reports. NPD's input into appraisals Review of Faculty Professional Development Plans. Review of annual faculty classroom observations by the NPD, NPAD. Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO. Review and analysis of Student Evaluation of Clinical Faculty semi-annually, and as needed by NPD and NPAD

October/November Part-time Faculty Survey May – data collected by NEC September – reviewed by NEC October – reviewed by NFO Student Evaluation of Clinical Faculty: May/December – data collected by NEC
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COMPONENT 2.5 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011 ELA 2.5a: met Full-time nursing faculty performance demonstrated participation in activities that reflected faculty scholarship as verified through the annual performance appraisal process and submission of supporting documents to include CEU reports, SIIs, Student Evaluation of Clinical Faculty, Development Plans, and instructional observation. Full-time nursing faculty performance reflected evidence-based teaching and clinical practices as documented through annual performance appraisal and instructional observation. May 2011 Recommendations/Activities Prep and Planning activities to include orientation to simulation, clickers, Smartboard/MOBI were reported to the NFO membership. Total Program Evaluation – Faculty Survey: Items 15.1-15.3 Item 15.1 – 3.97 Item 15.2 – 4.09 Item 15.3 – 4.06 Student Evaluation of Clinical Faculty Survey: Items 4.1 – 4.11 Mean Low/High Items 4.1-4.11 – Mean Low: 4.44/High: 4.75	AY 2011 2.5a The Program supports and encourages full-time faculty participation in activities that reflect scholarship and evidence- based teaching and clinical practices. Funding is provided each academic year for continuing education. Continue to monitor with detailed plan for improvement developed when deficits are identified. <u>May 2011 Actions</u> Faculty urged to attend these activities
 ELA 2.5b: met Part-time nursing faculty performance demonstrated participation in activities that reflect faculty scholarship as verified through the annual evaluation process and submission of supporting documents to include CEU reports, SIIs, and Student Evaluation of Clinical Faculty. Part-time nursing faculty performance reflected evidence-based teaching and clinical practices as documented via oversite visits by Team Leaders. Adjunct Faculty Survey: Items 4.1-4.3 Item 4.1 – 4.57 Item 4.2 – 4.61 	 2.5b The Program supports and encourages part-time faculty participation in activities that reflect scholarship and evidence-based teaching and clinical practices. Continue to monitor with detailed plan for improvement developed when deficits are identified. <u>December 2011 Actions</u> Greg Gardner, The Associate Vice President for Academic Affairs will present an inservice on Plagarism to faculty in January during NFO.

Item 4.3 – 4.26	
Student Evaluation of Clinical Faculty Survey: Items 4.1 – 4.11	
Mean Low/High	
Items 4.1-4.11 – Mean Low: 4.36/High: 4.77	
AY 2012	AY 2012
ELA 2.5a: met	2.5a
Full-time nursing faculty performance demonstrated participation in activities that	The inclusion of Nurse Tim webinars has given the faculty
reflect faculty scholarship as verified through the annual performance appraisal	increased opportunity to participate in educational offerings and
process and submission of supporting documents to include CEU reports, SIIs,	earn CEUs. Assessment Technologies Institute (ATI) has
Student Evaluation of Clinical Faculty, Development Plans, and instructional	developed their ATI Academy for faculty which also provides
observation. Full-time nursing faculty performance reflected evidence-based	educational offerings. Both the Nurse Tim and ATI Academy are
teaching and clinical practices as documented through annual performance appraisal	accessed online and are available year round. Both are provided
and instructional observation.	free to the OCCC nursing faculty. Continue to monitor with detailed
August 2011 Recommendations/Activities	plan for improvement developed when deficits are identified.
Two faculty members participated in Collaborative Learning Cadre IV. They	August 2011 Actions
presented a brief presentation of what they learned at the Cadre.	Faculty has more opportunities to attend future cadres. To use
December 2011 Recommendations/Activities	what was presented today in class.
K. Jordan presented information learned from attending 16th Annual Midwest	January 2013 Actions
Regional Nursing Educators Conference.	Faculty are to review their SIIs. If no link was received they will
January 2012 Recommendations/Activities	need to contact J. Perry. Team leaders can get a copy of the SIIs
J Peters and K. Wetmore presented information from their attendance of the HPSN	for part-time faculty results if desired.
Workshop in Tampa, Fla.	
March 2012 Recommendations/Activities	
Faculty viewed the NLN Webinar featuring Susan Luparell on Incivility after NFO	
convened.	
May 2012 Recommendations/Activities	
A clinical update was presented by B. Schaeffer including content such as the legal	
pitfalls of nursing communication.	
January 2013 Recommendations/Activities	
Faculty were informed during NFO of the SII survey link that was e-mailed to all	
faculty.	
May 7 2013 Recommendations/Activities	
Faculty were informed that there is money left over in the travel budget and if	
interested in attending a conference before the close of the fiscal, to contact her.	
May 21 2013 Recommendations/Activities	

Faculty were reminded during NFO that they will need to submit their travel requests for AY 2014 in September. Total Program Evaluation – Faculty Survey: Items 15.1-15.3 Item 15.1 – 4.27 Item 15.2 – 4.53 Item 15.3 – 4.47 Student Evaluation of Clinical Faculty Survey: Items 4.1 – 4.11 Mean Low/High Items 4.1-4.11 – Mean Low: 4.51 /High: 4.74	
 ELA 2.5b: met Part-time nursing faculty performance demonstrated participation in activities that reflect faculty scholarship as verified through the annual evaluation process and submission of supporting documents to include CEU reports, SIIs, and Student Evaluation of Clinical Faculty. Part-time nursing faculty performance reflected evidence-based teaching and clinical practices as documented via oversite visits by Team Leaders. Adjunct Faculty Survey: Items 4.1-4.3 	2.5b Continue to monitor with detailed plan for improvement developed when deficits are identified.
Adjunct Faculty Survey: Items 4.1-4.3 Item 4.1 – 4.93 Item 4.2 – 4.93 Item 4.3 – 4.60 Student Evaluation of Clinical Faculty Survey: Items 4.1 – 4.11 Mean Low/High Items 4.1-4.11 – Mean Low: 4.56 /High: 4.80	
<u>AY 2013</u>	AY 2013
ELA 2.5a	2.5a
Full-time nursing faculty performance continues to demonstrate participation in activities that reflect faculty scholarship as verified through the annual performance	All full-time faculty have access to free resources for development to include ATI Faculty Academy and Nurse Tim. They were also
appraisal process and submission of supporting documents to include CEU reports,	informed of and encouraged to use a new website KeithRN.
SIIs, Student Evaluation of Clinical Faculty, Development Plans, and instructional	Continue to monitor and find appropriate resources for
observation. Full-time nursing faculty performance reflected evidence-based	development.
teaching and clinical practices as documented through annual performance appraisal and instructional observation.	August 2012 Actions D. Myers to post the Fall 2012 Observation Schedule on the "O"

August 2012 Recommendations/Activities	drive. Team leaders are to post three potential dates for their
The NFO reviewed the new Faculty Observation Form.	observation. All faculty to review the form thoroughly.
November 2012 Recommendations/Activities	November 2012 Actions
During NFO, D. Myers asked that any faculty wanting to have their observations	Faculty are to contact D. Myers to schedule their observation.
completed that the team leader observations are now complete and they can	
schedule their observation now.	
December 2012 Recommendations/Activities	
NFO membership informed that appraisals to begin in January 2013.	
Total Program Evaluation – Faculty Survey: Items 15.1-15.3	
Item 15.1 – 4.63	
Item 15.2 – 4.63	
Item 15.3 – 4.61	
Student Evaluation of Clinical Faculty Survey: Items 4.1 –	
4.11 Mean Low/High	
Items 4.1-4.11 – Mean Low: 2.73/High: 5.00	2.5b
ELA 2.5b	All part-time faculty were provided free educational opportunities
Part-time nursing faculty performance demonstrated participation in activities that	through use of ATI Faculty Academy and Nurse Tim beginning Fall
reflect faculty scholarship as verified through the annual evaluation process and	2012. They were also informed of and encouraged to use a new
submission of supporting documents to include CEU reports, SIIs, and Student	website KeithRN. Continue to monitor and find appropriate
Evaluation of Clinical Faculty.	resources for development.
Part-time nursing faculty performance continues to reflect evidence-based teaching	
and clinical practices.	
Adjunct Faculty Survey: Items 4.1-4.3	
ltem 4.1 – 4.64	
ltem 4.2 – 4.68	
ltem 4.3 – 4.41	
Student Evaluation of Clinical Faculty Survey: Items 4.1 –	
4.11 Mean Low/High	
Items 4.1-4.11 – Mean Low: 3.69/High 5.00	

Component	Expected Level of Achievement
The number, utilization and credentials of non- nurse faculty and staff are sufficient to achieve the program goals and outcomes.	 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Items 16, 17

Frequency of Assessment	Assessment Method
Total Program Evaluation-Faculty Survey:	Review and analysis of Total Program Evaluation-faculty Survey by
May – data collected by NEC	NEC and NFO.
September – reviewed by NEC	 NFO recommendations forwarded to NPD who reports to the Dean
October – reviewed by NFO	of HP Division.

COMPONENT 2.6 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011 ELA 2.6: met The number, utilization and credentials of non-nurse faculty and staff were found to be sufficient to achieve the program goals and outcomes. Total Program Evaluation – Faculty Survey: Items 16, 17 Item 16 – 3.90	AY2011 Continue to monitor as program requirements evolve due to program growth and/or changes to accreditation standards.
Item 17 – 4.04 AY 2012 ELA 2.6: met The number, utilization and credentials of non-nurse faculty and staff were found to be sufficient to achieve the program goals and outcomes. Noted increase in trending data supports this. May 2012 Recommendations/Activities	AY 2012 Continue to monitor as program requirements evolve due to program growth and/or changes to accreditation standards. <u>May 2012 Actions</u> To fill position in Summer 2012.

D. Myers presented an update to the new secretarial position. Total Program Evaluation – Faculty Survey: Items 16, 17 Item 16 – 4.27 Item 17 – 4.00	
AY 2013 ELA 2.6: not met <u>August 2012 Recommendations/Activities</u> D. Myers reported that a new secretary was hired and will begin on August 20, 2012.	<u>AY 2013</u>
A decrease was noted in trending for items related to clerical support and HPS coordinator services, which include availability of work study students to assist with needs to include, set up and tear down. It was announced that for AY 2014 Health Professions would lose the Division Clerical Assistant position due to restructuring. Faculty has submitted complaints related to room/supply issues for the lab area. October 2013 Recommendations/Activities The Evaluation Committee reported a drop in trending for Item 16 of the AY 13 Total Program Evaluation – Faculty Survey related to secretarial services within the division. Discussed this was possibly due to news that the division was losing a secretarial position due to restructuring.	Review of complaints in progress. Continue to monitor as program requirements evolve due to program growth and/or changes to accreditation standards. <u>October 2013 Actions</u> Faculty to e-mail T. Walker with complaints related to secretarial services. One received was directed toward rudeness of staff member toward faculty and students. Others related to los of position.
Total Program Evaluation – Faculty Survey: Items 16, 17 Item 16 – 3.00 Item 17 – 3.42	

Component	Expected Level of Achievement	
Faculty (full- and part- time) are oriented and mentored in their areas of responsibilities.	 2.7a 100% of full-time faculty will participate in a mentoring program during their first year of employment. 100% of full-time faculty will participate in new faculty orientation processes. 2.7b 	
2.7a Full-time faculty 2.7b Part-time faculty	 100% of part-time faculty will participate in orientation at least annually. 100% of part-time faculty will be mentored through the team leader clinical oversite process. Mean score of at least 3.5 on a scale of 5.0 on the Adjunct Faculty Survey: Items 5, 6 	

Frequency of Assessment	Assessment Method
2.7 a Annually and as necessary	 2.7a A mentor is chosen for each new nursing faculty member upon hire from the nursing faculty. OCCC holds a mentor training/orientation session, the Introduction to the Faculty Mentoring Program, each semester with new faculty/mentors visitation held after the orientation session. The mentorship lasts two semesters with meetings held between the mentor and new faculty throughout. OCCC holds new faculty orientation sessions beginning prior to the start of the semester and additional meetings throughout the first year. Department/program orientations are held during the first semester of hire. Completion and review of faculty mentoring evaluation forms and meeting logs by Dean. Successful completion of new faculty orientation
 2.7b Adjunct Faculty Survey May – data collected by NEC September – reviewed by NEC 	 Part-time faculty attended the program orientation sessions held each semester and were provided with an orientation manual along with faculty resources. Team Leaders provided mentorship for part- time faculty through several visits to the clinical site during the

October – reviewed by NFO	semester and individual meetings as needed.
·	 Analysis of Adjunct Faculty Survey by NEC and NFO.

COMPONENT 2.7 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011	AY2011
ELA 2.7a: met	2.7a
Mentors were assigned for new faculty members upon hire with meeting logs and	Monitor effectiveness of orientation/mentoring process for new FT
mentoring evaluation forms submitted to and reviewed by the Dean of Health	faculty revising when needed.
Professions. New faculty attended OCCC new faculty orientation as well as program	
orientation.	
ELA 2.7b: met	2.7b
Part-time Faculty orientation was held prior to the start of the Fall 2010 and Spring	Monitor effectiveness of orientation/mentoring process for new part-
2011 semesters. All new part-time faculty were mentored through the team leader	time faculty revising when needed.
clinical oversite process.	
Adjunct Faculty Survey: Items 5, 6 Item 5 – 4.48	
1 Item 6 - 4.26	
Data reflected part-time faculty agrees with adequacy of orientation and mentorship.	
AY 2012	AY 2012
ELA 2.7a; met	2.7a
Mentors were assigned for new faculty members upon hire with meeting logs and	Revisions to the program orientation process included revision of
mentoring evaluation forms submitted and reviewed by the Dean of Health	the orientation manual and inclusion of an orientation checklist for
Professions. New faculty attended OCCC new faculty orientation as well as program	AY 2013. Input to this process was provided by faculty including
orientation. Deficits to the fulltime nursing faculty orientation process were	those faculty recently hired during AY 2012. Continue to monitor
discovered during the AY12 academic year.	effectiveness of orientation/mentoring process for new full-time
November 2011 Recommendations/Activities	faculty revising when needed.
Simulations Committee informed the NFO of orientation sessions to cover the	
features of each of the simulators.	
ELA 2.7b: met	2.7b

 Part-time Faculty orientation was held prior to the start of the Fall 2010 and Spring 2011 semesters. All new part-time faculty were mentored through the team leader clinical oversite process. Adjunct Faculty Survey: Items 5, 6 Item 5 – 4.60 Item 6 – 4.60 Data reflected an upward trend demonstrating an improvement and continued agreement. 	Updates to part-time faculty orientation ongoing. Continue to monitor effectiveness of orientation/mentoring process for new PT faculty revising when needed.
AY 2013 ELA 2.7a: met 100% of new full-time nursing faculty participated in mentoring program during their first year of employment. 100% of new full-time nursing faculty participated in new faculty orientation processes. ELA 2.7b: met 100% of part-time nursing faculty participate in orientation at least annually. 100% of part-time nursing faculty are mentored through the team leader clinical oversite process. Downward trend noted for items related to orientation and mentoring process for part-time faculty. August 2012 Recommendations/Activities T. Walker reported that part-time faculty received training on the Clinical HUB Portal to include how to mark attendance and reassign students during the orientation Tuesday, August 14, 2012. Adjunct Faculty Survey: Items 5, 6 Item 5 – 4.18 Item 6 – 4.00	 <u>AY 2013</u> 2.7a Fulltime faculty orientation manuals updated for next academic year. Continue to monitor effectiveness of orientation/mentoring process for all fulltime faculty. 2.7b Part-time faculty orientation manuals updated for next academic year. Continue to monitor effectiveness of orientation/mentoring process for all part-time faculty. <u>August 2012 Actions</u> T. Walker to notify team leaders with sign-on and passwords for part-time faculty when she completes registering them in the HUB.

Component	Expected Level of Achievement
Systematic assessment	2.8a
of faculty (full- and part-	 100% of full-time faculty will be evaluated by students through the SII process to provide evidence of competency.
time) performance	 100% of full-time faculty are rated as meeting or exceeding expectations on their annual performance evaluations
demonstrates competencies that are	 100% of full-time faculty will receive an overall score of 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey
consistent with program	 100% of full-time faculty will be observed by the NPD or NPAD for the purpose of instructional enhancement.
goals and outcomes.	 Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Item 18
2.8a	2.8b
Full-time faculty	 100% of part-time faculty will be evaluated by students through the SII process to provide evidence of competency.
2.8b	 100% of part-time faculty will be evaluated by team leaders to provide evidence for performance that demonstrates competence and is consistent with program goals and outcomes
Part-time faculty	 100% of part-time faculty will receive an overall score of 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey
	 Mean score of at least 3.5 on a scale of 5 on the Adjunct Faculty Survey: Items 7

Frequency of Assessment	Assessment Method
 2.8a Student Surveys: Student Input on Instruction (SIIs): Annually (November/April) – data collected Faculty Performance Appraisal Review Form: February/March 	 2.8a Review and analysis of data from Student Input on Instruction annually and Student Evaluation of Clinical Faculty semi-annually, and as needed by NPD and NPAD Review and analysis of Student Evaluation of Clinical Faculty by NPD and NPAD NPD's input into appraisals
Nursing Faculty Performance Appraisal Review Form Addendum: • February/March Student Evaluation of Clinical Faculty: • May/December – data collected by NEC • February – reviewed by NPD and NPAD Nursing Program Instructional Observation Form • Annually (February/March/April)	 Observations will be scheduled throughout the year and reviewed annually in February and March Review and analysis of Total Program Evaluation-faculty Survey by NEC and NFO.

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Total Program Evaluation-Faculty Survey: • May – data collected by NEC • September – reviewed by NEC • October – reviewed by NFO 2.8b Student Surveys: Student Input on Instruction (SIIs): • Annually (November/April) – data collected Part-Time Faculty Evaluation • October/November (or as indicated) Student Evaluation of Clinical Faculty: • May/December – data collected by NEC • February – reviewed by NPD and NPAD Adjunct Faculty Survey • May – data collected by NEC • September – reviewed by NEC • October – reviewed by NEC	 2.8b Review of data from Student Input on Instruction annually and Student Evaluation of Clinical Faculty semi-annually, and as needed by NPD and NPAD Review of annual part-time faculty evaluation and supporting documents. Analysis of Student Evaluation of Clinical Faculty by NPD and NPAD Analysis of Adjunct Faculty Survey by NEC and NFO.
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COMPONENT 2.8 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
AY 2011	<u>AY 2011</u>
ELA 2.8a: met	2.8a
All full-time nursing faculty were evaluated by students through the SII process to provide evidence of competency. All full-time nursing faculty were rated as meeting or exceeding expectations on their annual performance evaluations	Continue to monitor with detailed plan for improvement developed when deficits are identified.

All full-time nursing faculty were observed by the NPD and NPAD for the purpose of instructional enhancement. All full-time faculty received an overall score of 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey Total Program Evaluation – Faculty Survey: Item 18 Item 18 – 4.03	
Student Evaluation of Clinical Faculty Survey: Items 4.1 –	
4.11 Mean Low/High Items 4.1-4.11 – Mean Low: 4.44/High: 4.75	
ELA 2.8b: met	2.8b
All part-time nursing faculty were evaluated by students through the SII process to provide evidence of competency.	Continue to monitor with detailed plan for improvement developed when deficits are identified.
All part-time nursing faculty were evaluated by team leaders to provide evidence for performance that demonstrates competence and is consistent with program goals and outcomes	
All part-time nursing faculty received an overall score of 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey	
Adjunct Faculty Survey: Item 7 Item 7 – 4.39	
Student Evaluation of Clinical Faculty Survey: Items 4.1 –	
4.11 Mean Low/High Items 4.1-4.11 – Mean Low: 4.36/High: 4.49	
AY 2012 ELA 2.8a: met	<u>AY 2012</u> 2.8a
All full-time nursing faculty were evaluated by students through the SII process to	Counseling occurs with any faculty member who does not meet
provide evidence of competency.	expectations on performance appraisal and classroom observation.
95.7% of full-time nursing faculty were rated as meeting or exceeding expectations on their annual performance evaluations	A detailed plan of improvement is developed and progress is monitored.
All full-time nursing faculty were observed by the NPD and NPAD for the purpose of instructional enhancement.	Continue to monitor and maintain current practice.
All full-time faculty received an overall score of 3.5 on a scale of 5 on the Student	
Evaluation of Clinical Faculty Survey. Total Program Evaluation – Faculty Survey: Item 18	
Item 18 – 4.60	

Student Evaluation of Clinical Faculty Survey: Items 4.1 – 4.11 Mean Low/High Items 4.1-4.11 – Mean Low: 4.51/High: 4.74	
 ELA 2.8b: met All part-time nursing faculty were evaluated by students through the SII process to provide evidence of competency. All part-time nursing faculty were evaluated by team leaders to provide evidence for performance that demonstrates competence and is consistent with program goals and outcomes All part-time nursing faculty received an overall score of 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey. Adjunct Faculty Survey: Item 7 	2.8b Continue to monitor with detailed plan for improvement developed when deficits are identified.
Item 7 – 4.67 Student Evaluation of Clinical Faculty Survey: Items 4.1 – 4.11 Mean Low/High Items 4.1-4.11 – Mean Low: 4.56/High: 4.80 AY 2013	AY 2013
 ELA 2.8a: 100% of full-time nursing faculty were evaluated by students through the SII process to provide evidence of competency. 95% of full-time nursing faculty were rated as meeting or exceeding expectations on their annual performance evaluations 100% of full-time nursing faculty were observed by the NPD or NPAD for the purpose of instructional enhancement. 100% of full-time nursing faculty received an overall score of 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey Total Program Evaluation – Faculty Survey: Item 18 Item 18 – 4.53 Student Evaluation of Clinical Faculty Survey: Items 4.1 – 	 2.8a Counseling occurs with any faculty member who does not meet expectations on performance appraisal and classroom observation. A detailed plan of improvement is developed and progress is monitored. Continue to monitor and maintain current practice.
 4.11 Mean Low/High Items 4.1-4.11 – Mean Low: 2.73/High: 5.00 Two faculty members received ratings of "1" from students with positive comments. It is felt that the 2.73 low was in error related to confusion over which rating was better. 	

 ELA 2.8b: All part-time nursing faculty were evaluated by students through the SII process to provide evidence of competency. All part-time nursing faculty are evaluated by team leaders to provide evidence for performance that demonstrates competence and is consistent with program goals and outcomes 100% of part-time nursing faculty received an overall score of 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey Adjunct Faculty Survey: Item 7 Item 7 – 4.43 	2.8b Continue to monitor with detailed plan for improvement developed when deficits are identified.
Student Evaluation of Clinical Faculty Survey: Items 4.1 – 4.11 Mean Low/High Items 4.1-4.11 – Mean Low: 3.69/High: 5.00	

Component	Expected Level of Achievement
Non-nurse faculty and staff performance is regularly reviewed in accordance with the policies of the governing organization.	 Non-nurse faculty and staff performance is regularly reviewed.

Frequency of Assessment	Assessment Method
	Review of annual non-nurse faculty and staff performance appraisals, and supporting documents by NPD and NPAD.

COMPONENT 2.9 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011 ELA 2.9: met Non-nurse faculty and staff performance were regularly reviewed in accordance with governing institution policies.	AY2011 Continue to monitor. Evaluating and updating job description as needed.
AY 2012 ELA 2.9: met Non-nurse faculty and staff performance were regularly reviewed in accordance with governing institution policies.	AY 2012 Job descriptions for both clerical positions that report primarily to nursing were reviewed and updated to reflect increasing accountability for knowledge and proficiency of software applications vital to nursing program data maintenance. Continue to monitor. Evaluating and updating job description as needed.
AY 2013 ELA 2.9 Non-nurse faculty and staff performance were regularly reviewed.	AY 2013 Continue to monitor

Component	Expected Level of Achievement
Faculty (full- and part-	Not Applicable – No Distance Education Program
time) engage in ongoing	
development and	
receive support in	
distance education	
modalities including	
instructional methods	
and evaluation.	

Frequency of Assessment	Assessment Method
requency of Assessment	

Not Applicable	Not Applicable

COMPONENT 2.10 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2011</u>	<u>AY2011</u>
ELA 2.10	
<u>AY 2012</u>	<u>AY 2012</u>
ELA 2.10	
AY 2013	AY 2013
ELA 2.10	

STANDARD III: STUDENTS

Student policies, development, and services support the goals and outcomes of the nursing education unit.

Component	Expected Level of Achievement
Student policies of the nursing education unit are congruent with those of the governing organization, publicly accessible, non- discriminatory, and consistently applied; differences are justified by the goals and outcomes of the nursing education unit.	 100% of nursing program policies are: congruent with OCCC student policies publicly accessible non-discriminatory consistently applied differences justified to maintain the integrity of the nursing program Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 20.1-20.4, 21 Mean score of at least 3.5 on a scale of 5 on the Student Exit Survey: Items 9.1-9.4

Frequency of Assessment	Assessment Method
Annually in the Spring	NPD review of policies prior to printing OCCC catalog
	 NPD and NPAD review Nursing Web Page
Nursing policies reviewed:	 Nursing Admissions Committee (NAC) reviews nursing student
 February – reviewed by NAC with recommendations to NFO 	policies for
April – reviewed by NFO	congruent with OCCC student policies
	publicly accessible
Total Program Evaluation-Faculty Survey:	non-discriminatory
May – data collected by NEC	consistently applied
September – reviewed by NEC	differences justified
October – reviewed by NFO	Recommendations are presented to NFO
	Review and analysis of Total Program Evaluation-Faculty Survey by
Student Exit Survey:	NEC and NFO
November/April – data collected by NEC	 Review and analysis of Student Exit Survey by NEC and NFO
• March – reviewed by NEC	
April – reviewed by NFO	

COMPONENT 3.1 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011	AY2011
ELA: met	Continue to monitor.
Nursing program policies were reviewed by NAC with recommendations forwarded	
to NFO. The web page and catalog were reviewed by the NPD. The policies were	
found to meet standards.	
Total Program Evaluation – Faculty Survey Items 20.1-20.4, 21	
Item 20.1 – 4.44	
ltem 20.2 – 4.47	
ltem 20.3 – 4.47	
ltem 20.4 – 4.22	
ltem 21 – 4.35	
Student Exit Survey: Items 9.1 – 9.4	
ltem 9.1 – 4.21	
ltem 9.2 – 4.29	
ltem 9.3 – 4.19	
ltem 9.4 – 4.21	
AY 2012	AY 2012
ELA: met	Continue to monitor.
Nursing program policies were reviewed by NAC with recommendations forwarded	September 2011 Actions
to NFO. The web page and catalog were reviewed and updated by the NPD. The	Proposal approved by NFO to change BADNAP readmission policy.
policies were found to meet standards.	October 2011 Actions
September 2011 Recommendations/Activities	The Social Networking Policy was approved. The special committee
Recommendation brought forward to the NFO to approve changes to BADNAP	was dissolved at this time.
readmission policy.	April 2012 Actions
October 2011 Recommendations/Activities	The Admissions Committee has distributed the handbook to all
The Social Networking Special Committee brought forth to the NFO the Social	faculty for review.
Networking Policy for approval.	
April 2012 Recommendations/Activities	
The Admissions Committee reported completion of the revisions to the Nursing	
Student Handbook to the NFO membership.	
Total Program Evaluation – Faculty Survey Items 20.1-20.4, 21	

$\begin{array}{c} \mbox{Item 20.1 - 4.73} \\ \mbox{Item 20.2 - 4.80} \\ \mbox{Item 20.3 - 4.87} \\ \mbox{Item 20.4 - 4.33} \\ \mbox{Item 21 - 4.57} \end{array}$	
AY 2013 ELA: Nursing program policies were reviewed by NAC with recommendations forwarded to NFO. The web page and catalog was reviewed and updated. The policies were found to meet standards. <u>September 2012 Recommendations/Activities</u> The NFO Committee discussed the new OCCC Policy # 3070. <u>December 2012 Recommendations/Activities</u> Student attendance policy was revisited during NFO. Total Program Evaluation – Faculty Survey Items 20.1-20.4, 21 Item 20.1 – 4.89 Item 20.2 – 4.95 Item 20.3 – 4.95 Item 20.4 – 4.58 Item 9.1 – 4.57 Item 9.2 – 4.74 Item 9.3 – 4.62 Item 9.4 – 4.50	AY 2013 September 2012 Actions Policy will be sent out to all part-time clinical faculty and included in all future part-time faculty orientations. December 2012 Actions D. Myers to e-mail new attendance policy to faculty. It will be included as an addendum to the Nursing Student Handbook and uploaded to Moodle. Continue to monitor

Component	Expected Level of Achievement
Student services are commensurate with the	 Students will rate satisfaction with OCCC student support services at 3.5 or higher on a 5.0 scale on the Student Exit Survey: Item 11.1-11.11(11.1-11.13 AY13)
needs of students pursuing or completing the associate program, including those receiving instruction using alternative methods of delivery.	 Faculty will rate satisfaction with OCCC student support services at 3.5 or higher on a 5.0 scale on the Total Program Evaluation – Faculty Survey: Item 22.1-22.11(22.1-22.13 AY13)

Frequency of Assessment	Assessment Method
 Student Exit Survey: November/April – data collected by NEC October – reviewed by NEC and reported to NPD 	 Review of published services Review and analysis of Student Exit Survey data by NEC with recommendations to NPD Review and analysis of Total Program Evaluation-Faculty Survey
 Total Program Evaluation-Faculty Survey: May – data collected by NEC October – reviewed by NEC and reported to NPD 	data with recommendations to NPD

COMPONENT 3.2 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2011</u>	AY2011
ELA: met	Will continue to monitor use and satisfaction of student support
Students have access to support services. All published services were reviewed.	services for future trends.
Student Exit Survey shows slight decrease in trending from AY 2010.	
Student Exit Survey: Items 11.1-11.11	
Academic Advising Item 11.1 - 4.14	

	Deeletere	ltom 11.0	
	Bookstore	Item 11.2 – 4.27	
	Bursar	Item 11.3 – 4.18	
	Employment & Career	ltem 11.4 – 4.21	
	Services		
	Records & Graduation	ltem 11.5 – 4.19	
	Services		
	Recruitment and	ltem 11.6 – 4.21	
	Admissions		
	Student Financial Support	ltem 11.7 – 4.24	
	Services		
	Student Life	ltem 11.8 – 4.16	
	Student Support Services	ltem 11.9 – 4.19	
	(Disability, Learning		
	Support, Counseling)		
	Testing & Assessment	Item 11.10-4.24	
	Safety & Security	Item 11.11-4.29	
Total F	Program Evaluation – Facult		
	Academic Advising	Item 22.1 – 4.19	
	Bookstore	Item 22.2 – 4.44	
	Bursar	Item 22.3 – 4.34	
	Employment & Career	ltem 22.4 – 4.38	
	Services		
	Records & Graduation	Item 22.5 – 4.41	
	Services		
	Recruitment and	Item 22.6 – 4.38	
	Admissions		
	Student Financial Support	Item 22.7 – 4.34	
	Services		
	Student Life	Item 22.8 – 4.44	
	Student Support Services	Item 22.9 – 4.53	
	(Disability, Learning		
	Support, Counseling)		
	Testing & Assessment	ltem 22.10 – 4.47	
	Safety & Security	ltem 22.11 – 4.53	

AY 2012		AY 2012
ELA: met		Published services were reviewed and the list revised for AY2013.
Students have access to support services. All published services were reviewed.		Will continue to monitor use and satisfaction of student support
Slight increase in trending for AY12.		services.
Student Exit Survey: Items 11.1-11	.11	
Academic Advising	Item 11.1 – 4.36	
Bookstore	Item 11.2 – 4.39	
Bursar	Item 11.3 – 4.32	
Employment & Career Services	Item 11.4 – 4.40	
Records & Graduation Services	Item 11.5 – 4.41	
Recruitment and Admissions	Item 11.6 – 4.36	
Student Financial Support Services	Item 11.7 – 4.28	
Student Life	Item 11.8 – 4.39	
Student Support Services (Disability, Learning	Item 11.9 – 4.42	
Support, Counseling) Testing & Assessment	ltem 11.10 – 4.41	
Safety & Security	Item $11.10 - 4.41$	
Total Program Evaluation – Faculty		
Academic Advising	Item 22.1 – 4.40	
Bookstore	Item 22.2 – 4.87	
Bursar	Item 22.3 – 4.87	
Employment & Career Services	Item 22.4 – 4.80	
Records & Graduation Services	Item 22.5 – 4.80	
Recruitment and Admissions	Item 22.6 – 4.67	
Student Financial Support Services	Item 22.7 – 4.60	
Student Life	ltem 22.8 – 4.87	

Student Support Services	ltem 22.9 – 4.80	
(Disability, Learning		
Support, Counseling)		
Testing & Assessment	ltem 22.10 – 4.73	
Safety & Security	Item 22.11 – 4.87	
AY 2013		AY 2013
ELA: met		<u>/// 2010</u>
All published services were reviewed.		
Student Exit Survey: Items 11.1-11.	13	
Academic Advising	Item 11.1 – 4.50	
Bookstore	ltem 11.2 – 4.63	
Bursar	ltem 11.3 – 4.68	
Child Development Center	ltem 11.4 – 4.41	
Records & Graduation	ltem 11.5 – 4.58	
Services		
Recreation & Fitness	ltem 11.6 – 4.60	
Recruitment and	ltem 11.7 – 4.57	
Admissions		
Student Employment &	ltem 11.8 – 4.47	
Career Services		
Student Financial Support	ltem 11.9 – 4.65	
Services		
Student Life	ltem 11.10 – 4.54	
Student Support Services	ltem 11.11 – 4.55	
(Disability, Learning		
Support, Counseling)		
Testing & Assessment	ltem 11.12 – 4.51	
Safety & Security	ltem 11.13 – 4.60	
Total Program Evaluation – Faculty		
Academic Advising	ltem 22.1 – 4.84	
Bookstore	ltem 22.2 – 4.84	
Bursar	ltem 22.3 – 4.84	
Child Development Center	ltem 22.4 – 4.61	
Records & Graduation	ltem 22.5 – 4.74	
Services		

Recreation & Fitness	Item 22.6 – 4.79	
Recruitment and	ltem 22.7 – 4.79	
Admissions		
Student Employment &	ltem 22.8 – 4.79	
Career Services		
Student Financial Support	ltem 22.9 – 4.84	
Services		
Student Life	ltem 22.10 – 4.84	
Student Support Services	ltem 22.11 – 4.89	
(Disability, Learning		
Support, Counseling)		
Testing & Assessment	ltem 22.12 – 4.79	
Safety & Security	ltem 22.13 – 4.84	

Component	Expected Level of Achievement
Student educational and financial records are in compliance with the policies of the governing organization and state and federal guidelines.	 Policies concerned with maintenance of educational and financial records will be followed 100% of the time.

Frequency of Assessment	Assessment Method
 Regular and ongoing depending on specific programs or process. Additional and more formal internal audit every 3 years, and potential external audit on annual basis. 	 Checks and balances have been incorporated within our student system and within our processing strategies which ensure compliance with institutional, state, and federal guidelines. Verify with the Registrar and Dean of Student Financial Support Services.
Annually by external auditors and every three years by internal	

auditors.	Randomly selected records are reviewed by auditors
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COMPONENT 3.3 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011 ELA: met Corrections are made as errors are identified. Policies concerned with maintenance of educational records were followed. 100% accuracy was expected and met within all record keeping practices. All formal audits have resulted in positive reports. Transcripts are kept in Registrar's office.	AY2011 Continue to maintain records in compliance with all laws and appropriate guidelines. FERPA guidelines and practices reviewed on an annual basis and initiate policy updates as required.
OCCC complies with all guidelines within the Family Education Records and Privacy Act (FERPA) and makes its policy available to students via the college website <u>http://www.occc.edu/aboutus/Privacy.html</u> ; the college catalog, and the OCCC student handbook <u>http://www.occc.edu/handbook/index.html</u>	
AY 2012 ELA: met Corrections are made as errors are identified. Policies concerned with maintenance of educational records were followed. 100% accuracy was expected and met within all record keeping practices. All formal audits have resulted in positive reports. Transcripts are kept in Registrar's office.	AY2012 Continue to maintain records in compliance with all laws and appropriate guidelines. FERPA guidelines and practices reviewed on an annual basis and initiate policy updates as required.
OCCC complies with all guidelines within the Family Education Records and Privacy Act (FERPA) and makes its policy available to students via the college website <u>http://www.occc.edu/aboutus/Privacy.html</u> ; the college catalog, and the OCCC student handbook <u>http://www.occc.edu/handbook/index.html</u>	
AY 2013 ELA: met OCCC records are mostly imaged and retrievable. Hard copy records are managed consistent with federal, state, and college requirements. Corrections are made as errors are identified. 100% accuracy was expected and met within all record keeping practices. All formal audits have resulted in positive reports. Transcripts are kept in	AY2013 Continue to maintain records in compliance with all laws and appropriate guidelines. FERPA guidelines and practices reviewed on an annual basis and initiate policy updates as required.

Registra	ar's office.
Act (FEI http://wv	complies with all guidelines within the Family Education Records and Privacy RPA) and makes its policy available to students via the college website <u>ww.occc.edu/aboutus/Privacy.html</u> ; the college catalog, and the OCCC handbook http://www.occc.edu/handbook/index.html

Component	Expected Level of Achievement
Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained. (incorporates 3.4.1/3.4.2)	 A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available. 100% of students will be informed of their ethical responsibilities regarding financial assistance. 100% of the nursing faculty will comply with college policies and practices regarding attendance reporting to maintain compliance with Title IV requirements.

Frequency of Assessment	Assessment Method
Annually in conjunction with Dean of Student Financial Support Services	 Direct contact with Dean of Student Financial Support Services provides annual assurance that OCCC is compliant with the Higher Education Reauthorization Act Title IV. Written report addresses these components and is available for review.

COMPONENT 3.4 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011	AY2011
ELA: met	3.4.1/3.4.2
The Dean of Student Financial Support Services reported that the institution and the Nursing Program are in compliance with the Higher Education Reauthorization Act. 3.4.1 Oklahoma City Community College provides extensive information on the College webpage <u>www.occc.edu</u> . From the initial page of the webpage current and	A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available to students.
prospective students can link to the Financial Aid Webpage. Under types of financial aid an individual can find information on student loan programs, how to apply, and loan consolidation.	Students are informed of their ethical responsibilities regarding financial assistance.
The College Financial Aid Office monitors student borrowing to help avoid excessive debt. A Fact sheet on the Financial Aid Office Loan Monitoring Policy has been in place for many years. Students are provided this Fact sheet as their debt exceeds \$15,000 or when they have questions about borrowing or debt management. Students who accept their student loan offer by completing the OCCC Loan Request	OCCC complies with all guidelines within the Family Education Records and Privacy Act (FERPA) and makes its policy available to students via the college website, the college catalog, and the OCCC student handbook.
form are then required to go online to the Direct Loan website where they complete an online Master Promissory Note and Loan Entrance Counseling. These documents clearly meet the Federal Title IV requirements for student loan	Nursing faculty maintain accurate attendance reporting records. Will continue to maintain current review procedures.
 information, debt management, and counseling. 3.4.2 Individuals who are awarded Federal Title IV Student Assistance are provided with email notification that their awards have been placed on the College MineOnline Account with instructions on how to view the Award Letter and accompanying text. The text of the Award Letter informs the individual they must use Federal Title IV Student Assistance funds for educationally related expenses and that they must report additional resources they receive for their educational expenses to the Financial Aid Office to be added to their assistance package. They are further informed that their assistance may be adjusted to avoid an over-award of federal funds. The default rate for 2007 is 10.5% (official two year rate) The default rate for 2009 is 14.8% (draft/official two year rate) 	

The default rate for 2010 is 18.3% (official two year rate)	
AY 2012	AY 2012
ELA: met	3.4.1/3.4.2
The Dean of Student Financial Support Services reported that the institution and the	A written, comprehensive student loan repayment program
Nursing Program are in compliance with the Higher Education Reauthorization Act.	addressing student loan information, counseling, monitoring, and
3.4.1 Oklahoma City Community College provides extensive information on the	cooperation with lenders is available to students.
College webpage <u>www.occc.edu</u> . From the initial page of the webpage current and	
prospective students can link to the Financial Aid Webpage. Under types of financial	Students are informed of their ethical responsibilities regarding
aid an individual can find information on student loan programs, how to apply, and	financial assistance.
loan consolidation.	
The College Financial Aid Office monitors student borrowing to help avoid excessive	OCCC complies with all guidelines within the Family Education
debt. A Fact sheet on the Financial Aid Office Loan Monitoring Policy has been in	Records and Privacy Act (FERPA) and makes its policy available to
place for many years. Students are provided this Fact sheet as their debt exceeds	students via the college website, the college catalog, and the
\$15,000 or when they have questions about borrowing or debt management.	OCCC student handbook.
Students who accept their student loan offer by completing the OCCC Loan Request	
form are then required to go online to the Direct Loan website where they complete	Nursing faculty maintain accurate attendance reporting records.
an online Master Promissory Note and Loan Entrance Counseling. These	
documents clearly meet the Federal Title IV requirements for student loan	Will continue to maintain current review procedures.
information, debt management, and counseling.	
3.4.2 Individuals who are awarded Federal Title IV Student Assistance are	
provided with email notification that their awards have been placed on the College	
MineOnline Account with instructions on how to view the Award Letter and	
accompanying text. The text of the Award Letter informs the individual they must	
use Federal Title IV Student Assistance funds for educationally related expenses	
and that they must report additional resources they receive for their educational	
expenses to the Financial Aid Office to be added to their assistance package. They	
are further informed that their assistance may be adjusted to avoid an over-award of	
federal funds.	
The default rate for 2007 is 10.5% (official two year rate) The default rate for 2008 is 10.2% (draft two year rate)	
The default rate for 2009 is 14.8% (draft/official two year rate)	
The default rate for 2010 is 18.3% (official two year rate)	
The default rate for 2011 is 16.7% (draft two year rate)	

<u>AY 2013</u>	<u>AY 2013</u>
ELA: met	3.4/3.4.1/3.4.2
3.4 Per Harold Case, Dean of Student Financial Support Services: OCCC is	Continue to monitor
compliant with Title IV regulations for determining eligibility and certifying student	
loans. OCCC has had clean audits the past two years. The default rate is going up	
as it is for all schools due to a change in the way the rate is now calculated. Right	
now OCCC is not at risk of any penalties due to our default rate. The draft default	
rate for the most recent year used will be out in late February 2013.	
3.4.1 The OCCC Financial Aid Office has written procedures and consumer	
information for students on loan information, online loan counseling, monitoring	
student loan debt, and we do Federal Direct Loans, the Government is the lender so	
we use their online services and there is cooperation. OCCC does not advocate or	
promote the use of private loans and therefore have very little interaction with	
lenders outside the U.S. Department of Education.	
3.4.2 On page 26 of the current OCCC Catalog there is a section on Rights and	
Responsibilities for students receiving financial assistance. Extensive consumer	
information requirements for students and prospective students require the College	
to address a wide range of topics in a formal way. Check pages 11 and 12 of the	
current Catalog for more examples. OCCC has extensive information on our	
webpage, Catalog, Student Handbook, and hardcopy Fact Sheets available in the	
FA Office. OCCC FA makes extensive use of email to inform students throughout the	
year.	
The default rate for 2007 is 10.5% (official two year rate)	
The default rate for 2008 is 10.2% (draft two year rate)	
The default rate for 2009 is 14.8% (draft/official two year rate)	
The default rate for 2010 is 18.3% (official two year rate)	
The default rate for 2011 is 16.7% (draft two year rate)	
The default rate for 2012 is pending	

Component	Expected Level of Achievement
Integrity and consistency exist for all information intended to inform the public, including the program's accreditation status and NLNAC contact information.	 There is consensus among committee chairpersons, Nursing Program Director, Dean of Health Professions, Web Administrator, and OCCC Administrators that information regarding the nursing program is current, accurate, clear, and consistent. 1 = OCCC College Catalog 1a = Class schedules 2 = OCCC Student Handbook 3 = Information letter to prospective students 4 - Nursing Student Handbook 5 = Nursing Webpage(s) Mean score of at least 3.5 on a scale of 5 on the OCCC Nursing Advisory Committee Survey: Item 3 (implemented AY12) Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Items 13.1-13.6, 14.1-14.6, 15.1-15.6 Mean score of 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Items 23.1-23.6, 24.1-24.6, 25.1-25.6

Frequency of Assessment	Assessment Method
Item 1:	Items 1-2:
Annually in April	Review and comparison of all published materials for accuracy,
Item 2:	clarity, currency, and consistency by NPD, NAC
Annually in April	
Item 3:	Item 3:
 Annually in June and as needed for updates 	 Letters are initiated and reviewed by the NPD prior to distribution.
literen Ar	Items 4-5:
Item 4:	
Annually in February	NPD/NAC Material states (NIDAD
ltern Frihtten/human egge edu/liegith/Numeinen html	Web Administrator/NPAD The NDD and NDAD review all information prior to publication
Item 5: http://www.occc.edu/Health/Nursing.html	The NPD and NPAD review all information prior to publication
At the time of publication by the NPD and the Web Administrator	on the Web. The Web Administrator ensures that all Web
Annually in April and as needed	content is ADA compliant prior to publication.

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 OCCC Nursing Advisory Committee Survey: (initiated AY12) October/March – data collected by NEC September – reviewed by NEC with recommendations to NFO October – reviewed by NFO Student Exit Survey: November/April – data collected by NEC October – reviewed by NEC and reported to NPD 	 Review and analysis of OCCC Nursing Advisory Committee data by NEC with recommendations to NPD Review and analysis of Student Exit Survey data by NEC with recommendations to NPD Review and analysis of Total Program Evaluation-Faculty Survey data with recommendations to NPD
 Total Program Evaluation-Faculty Survey: May – data collected by NEC October – reviewed by NEC and reported to NPD 	

COMPONENT 3.5 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
AY 2011 ELA: met The OCCC catalog, OCCC Student Handbook, the Nursing Student Handbook, nursing webpage, and prospective student letters were reviewed and updated to reflect information current with curriculum revision and program requirements. There is consensus among committee chairpersons, Nursing Program Director, Dean of Health Professions, Web Administrator, and OCCC Administrators that information regarding the nursing programs is current, accurate, clear, and consistent. Student Exit Survey: Items 13.1-13.6, 14.1-14.6, 15.1-15.6 Item 13.1 – 4.16 Item 13.2 – 4.21 Item 13.4 – 4.41 Item 13.5 – 4.19 Item 13.6 – 4.23	AY2011 Necessary revisions are ongoing. To maintain current procedure for review.

14 m 14 1 4 16	
Item 14.1 – 4.16	
Item 14.2 – 4.26	
ltem 14.3 – 4.21	
ltem 14.4 – 4.16	
ltem 14.5 – 4.26	
ltem 14.6 – 4.21	
Item 15.1 – 4.19	
ltem 15.2 – 4.24	
Item 15.3 – 4.24	
Item 15.4 – 4.24	
ltem 15.5 – 4.24	
Item 15.6 – 4.21	
Total Program Evaluation - Faculty Survey: Items 23.1-23.6, 24.1-24.6, 25.1-	
25.6	
Item 23.1 – 4.38	
Item 23.2 – 4.33	
Item 23.3 – 4.37	
Item 23.4 – 4.33	
Item 23.5 – 4.33	
ltem 23.6 – 4.20	
ltem 24.1 – 4.37	
ltem 24.2 – 4.33	
ltem 24.3 - 4.40	
ltem 24.4 - 4.38	
ltem 24.5 - 4.31	
Item 24.6 – 4.28	
Item 25.1 – 4.33	
ltem 25.2 - 4.27	
Item 25.3 – 4.40	
ltem 25.4 - 4.33	
ltem 25.5 - 4.20	
Item 25.6 – 4.14	
AY 2012	AY 2012
ELA: met	The NPD met with C. Kinyon of Academic Affairs to correct the
The OCCC catalog, OCCC Student Handbook, the Nursing Student Handbook,	discrepancies. No approval was necessary for the revisions
	uiscrepancies. No approval was necessary for the revisions

	· · · · · · · · · · · · · · · · · · ·
nursing webpage, and prospective student letters were reviewed and updated to	needed. A grace period is in effect to allow students time to take
reflect information current with curriculum revision and program requirements. A	necessary pre-requisite and co-requisite courses.
discrepancy was discovered between the OCCC catalog, Nursing Student	To maintain current procedure for review.
Handbook, and nursing webpage (suggested degree plan) and the degree check	
sheet and application. This information related to placement of co- and pre-	
requisites. Consensus was found among committee chairpersons, Nursing Program	
Director, Dean of Health Professions, Web Administrator, and OCCC Administrators	
that information regarding the nursing programs is current, accurate, clear, and	
consistent.	
OCCC Nursing Advisory Committee Survey: Item 3	
ltem 3 – 4.60	
Student Exit Survey: Items 13.1-13.6, 14.1-14.6, 15.1-15.6	
ltem 13.1 – 4.44	
ltem 13.2 – 4.44	
ltem 13.3 – 4.44	
ltem 13.4 – 4.42	
Item 13.5 - 4.44	
ltem 13.6 – 4.41	
Item 14.1 – 4.48	
Item 14.2 – 4.48	
ltem 14.3 – 4.50	
ltem 14.4 – 4.46	
ltem 14.5 – 4.48	
ltem 14.6 – 4.49	
ltem 15.1 – 4.42	
ltem 15.2 – 4.45	
ltem 15.3 – 4.46	
ltem 15.4 – 4.43	
ltem 15.5 – 4.46	
ltem 15.6 – 4.45	
Total Program Evaluation - Faculty Survey: Items 23.1-23.6, 24.1-24.6, 25.1-	
25.6	
ltem 23.1 – 4.80	
ltem 23.2 – 4.86	
ltem 23.3 – 4.80	

ltem 23.4 – 4.87	
ltem 23.5 – 4.80	
Item 23.6 – 4.67	
Item 24.1 – 4.87	
Item 24.2 – 4.87	
Item 24.3 – 4.80	
Item 24.4 – 4.87	
Item 24.5 – 4.80	
Item 24.6 – 4.73	
Item 25.1 – 4.87	
Item 25.2 – 4.87	
Item 25.3 – 4.87	
Item 25.4 – 4.80	
Item 25.5 – 4.80	
Item 25.6 – 4.79	
AY 2013	<u>AY2013</u>
ELA: met	Continue to monitor
There is consensus among committee chairpersons, Nursing Program Director,	
Dean of Health Professions, Web Administrator, and OCCC Administrators that	
information regarding the nursing programs is current, accurate, clear, and	
consistent. Trend demonstrates that students are in agreement.	
OCCC Nursing Advisory Committee Survey: Item 3	
Item 3 – 4.95	
Student Exit Survey: Items 13.1-13.6, 14.1-14.6, 15.1-15.6	
Item 13.1 – 4.51	
Item 13.2 – 4.55	
Item 13.3 – 4.58	
Item 13.4 – 4.61	
Item 13.5 – 4.62	
Item 13.6 – 4.58	
Item 14.1 – 4.47	
Item 14.2 – 4.47	
Item 14.3 – 4.53	
Item 14.4 – 4.64	
Item 14.5 – 4.59	

Item 14.6 – 4.60	
Item 15.1 – 4.55	
Item 15.2 – 4.50	
Item 15.3 – 4.53	
Item 15.4 – 4.62	
Item 15.5 – 4.59	
Item 15.6 – 4.60	
Total Program Evaluation - Faculty Survey: Items 23.1-23.6, 24.1-24.6, 25.1-	
25.6	
ltem 23.1 – 4.95	
ltem 23.2 – 4.95	
Item 23.3 – 4.95	
Item 23.4 – 4.89	
ltem 23.5 – 4.95	
ltem 23.6 – 4.74	
ltem 24.1 – 4.95	
ltem 24.2 – 4.95	
ltem 24.3 – 4.95	
ltem 24.4 – 4.89	
ltem 24.5 – 4.95	
ltem 24.6 – 4.79	
ltem 25.1 – 4.95	
ltem 25.2 – 4.95	
ltem 25.3 – 4.95	
ltem 25.4 – 4.89	
ltem 25.5 – 4.94	
ltem 25.6 – 4.78	

Component	Expected Level of Achievement
Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.	 Mean score of 3.5 on a scale of 5.0 on the Student Exit Survey: Item 17.1-17.3 Mean score of at least 3.5 on a scale of 5 on the OCCC Nursing Advisory Committee Survey: Item 4 (implemented AY12)

Frequency of Assessment	Assessment Method
Student Exit Survey:	 Review and analysis of Student Exit Survey by NEC and NFO.
 November/April – data collected by NEC 	
March – reviewed by NEC	
April – reviewed by NFO	Review and analysis of OCCC Nursing Advisory Committee Survey
OCCC Nursing Advisory Committee Survey	by NEC and NFO
October/March – data collected by NEC	
September – reviewed by NEC	
October – reviewed by NFO	

COMPONENT 3.6 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2011</u>	<u>AY2011</u>
ELA: met	Continue to monitor.
Student Exit Survey: Items 17.1-17.3	
ltem 17.1 – 4.10	
ltem 17.2 – 4.10	
ltem 17.3 - 4.00	
<u>AY 2012</u>	<u>AY 2012</u>
ELA: met	Slight increase in trending. Continue to monitor.
Student Exit Survey: Items 17.1-17.3	
ltem 17.1 – 4.40	
ltem 17.2 – 4.40	
Item 17.3 - 4.36	
OCCC Nursing Advisory Committee Survey: Item 4	Will monitor for changes in trending.
ltem 4 – 4.54	
<u>AY 2013</u>	<u>AY 2013</u>
ELA: met	Slight increase in trending. Continue to monitor.
Student Exit Survey: Items 17.1-17.3	
ltem 17.1 – 4.52	
ltem 17.2 – 4.51	
ltem 17.3 - 4.53	
OCCC Nursing Advisory Committee Survey: Item 4	Will monitor for changes in trending.
Item 4 - 4.75	

Component	Expected Level of Achievement
Orientation to technology is provided and technological support is available to students in a timely manner.	 Mean score of 3.5 on a scale of 5.0 on the Student Exit Survey: Item 19.1-19.5, 20.1-20.5 Mean score of 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Item 26.1-26.5, 27.1-27.5

Frequency of Assessment	Assessment Method
Student Exit Survey: November/April – data collected by NEC March – reviewed by NEC April – reviewed by NFO Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC October – reviewed by NFO	 Review and analysis of Student Exit Survey by NEC and NFO Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO

COMPONENT 3.7 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2011</u>	<u>AY2011</u>
ELA: met	Maintain current process for orientation and level of technological
Student Exit Survey: Items 19.1-19.5, 20.1-20.5	support. Continue to monitor.
Item 19.1 – 4.10	
Item 19.2 – 4.16	
Item 19.3 – 4.14	
Item 19.4 – 4.08	

	1
Item 19.5 – 4.11	
ltem 20.1 – 4.13	
ltem 20.2 – 4.16	
Item 20.3 – 4.19	
Item 20.4 – 4.16	
Item 20.5 – 4.52	
Total Program Evaluation – Faculty Survey: Items 26.1-26.5, 27.1-27.5	
Item 26.1 – 4.23	
Item 26.2 – 4.43	
Item 26.3 – 4.30	
Item 26.4 – 4.17	
Item 26.5 – 4.13	
Item 27.1 – 4.28	
Item 27.2 – 4.31	
Item 27.3 – 4.28	
Item 27.4 – 4.24	
Item 27.5 – 4.35	
AY 2012	AY 2012
ELA: met	Slight increase in trending. Maintain current process for orientation
Student Exit Survey: Items 19.1-19.5, 20.1-20.5	and level of technological support. Continue to monitor.
Item 19.1 – 4.39	
Item 19.2 – 4.29	
Item 19.3 – 4.34	
Item 19.4 – 4.34	
Item 19.5 – 4.30	
Item 20.1 – 4.39	
Item 20.2 – 4.34	
Item 20.3 – 4.35	
Item 20.4 – 4.37	
Item 20.5 – 4.37	
Total Program Evaluation – Faculty Survey: Items 26.1-26.5, 27.1-27.5	
Item 26.1 – 4.73	
Item 26.2 – 4.53	
Item 26.3 – 4.73 Item 26.4 – 4.73	

Item 26.5 – 4.40	
Item 27.1 – 4.47	
Item 27.2 – 4.60	
Item 27.3 – 4.60	
ltem 27.4 – 4.60	
Item 27.5 – 4.47	
<u>AY 2013</u>	<u>AY 2013</u>
ELA: met	Slight increase in trending. Maintain current process for orientation
Instruction to Moodle, library database, e-mail, mine-online, simulators provided via	and level of technological support. Continue to monitor.
online tech support and telephone with orientation and support for simulators	
provided through HPS/Lab personnel. Trends show students and faculty agree.	
Student Exit Survey: Items 19.1-19.5, 20.1-20.5	
ltem 19.1 – 4.55	
ltem 19.2 – 4.46	
ltem 19.3 – 4.61	
ltem 19.4 – 4.50	
ltem 19.5 – 4.41	
ltem 20.1 – 4.47	
ltem 20.2 – 4.54	
ltem 20.3 – 4.61	
ltem 20.4 – 4.53	
ltem 20.5 – 4.53	
Total Program Evaluation – Faculty Survey: Items 26.1-26.5, 27.1-27.5	
ltem 26.1 – 4.89	
Item $26.2 - 4.63$	
ltem 26.3 – 4.84	
ltem 26.4 – 4.74	
ltem 26.5 – 4.53	
ltem 27.1 – 4.89	
ltem 27.2 – 4.89	
ltem 27.3 – 4.95	
ltem 27.4 – 4.95	
ltem 27.5 – 4.58	

Component	Expected Level of Achievement
Information related to	Not Applicable – No Distance Education Program
technology requirements	
and policies specific to	
distance education is	
clear, accurate,	
consistent, and	
accessible.	

Frequency of Assessment	Assessment Method
Not Applicable	Not Applicable

COMPONENT 3.8 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
AY 2011	<u>AY2011</u>
ELA	
AY 2012	<u>AY 2012</u>
ELA	
AY 2013	<u>AY 2013</u>
ELA	

STANDARD IV: CURRICULUM

The curriculum prepares students to achieve the outcomes of the nursing education unit, including safe practice in contemporary health care environments.

STANDARD IV COMPONENT 4.1

Component	Expected Level of Achievement	
The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning and program outcomes.	 Review of program design with 100% compliance of standards set forth by the Oklahoma Board of Nursing, the National League for Nursing Accrediting Commission, Inc., and the Oklahoma State Regents for Higher Education Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 29, 30 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Items 22, 23 Mean score of at least 3.5 on a scale of 5 on the OCCC Nursing Advisory Committee Survey: Item 5 (implemented AY12) Mean score of at least 3.5 on a scale 0f 5.0 on the Nursing Program Post Graduate Survey: Items 4 & 6 Mean score of at least 3.5 on a scale of 5.0 on the Graduate Evaluation by Employer Survey: Items (General Education Skills, Interpersonal Skills, and the following nursing questions: Nursing Process, Knowledge/Critical Thinking, Communication, and Professional Behaviors). 	

Frequency of Assessment	Assessment Method
Program design:	Program Design:
 Every five years or more often if indicated 	Review of self study report and on-site visit by OBN (5
 Every eight years or more often if indicated 	years) and NLNAC (8 years)
	Review by Oklahoma State Regents for Higher Education
Review of Curriculum	as necessary
Annually and as necessary	 Review of curriculum by NAC to ensure clearly articulated student learning and program outcomes as well as professional standards,
Total Program Evaluation-Faculty Survey:	guidelines, and competencies including QSEN, IOM with
May – data collected by NEC	recommendations to NFO
• September – reviewed by NEC	Review and analysis of Total Program Evaluation-Faculty Survey by
October – reviewed by NFO	NEC and NFO
	 Review and analysis of Student Survey by NEC and NFO
Student Exit Survey:	Review and analysis of OCCC Nursing Advisory Committee Survey
 November/April – data collected by NEC 	by NEC and NFO
• March – reviewed by NEC and recommendations forwarded to	 Nursing Program Post Graduate Survey is conducted by the
NCC	Department of Institutional Effectiveness through a series of
 April – reviewed by NCC and recommendations forwarded to 	mailings and telephone follow-up. Survey data is then forwarded to
NFO	the chair of the NEC. Review and analysis of NPPGS by NEC, NCC
May – reviewed by NFO	and NFO

 OCCC Nursing Advisory Committee Survey: (implemented AY12) October/March – data collected by NEC September – reviewed by NEC with recommendations to NFO October – reviewed by NFO 	 Graduate Evaluation by Employer Survey is conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Review and analysis of GEES by NEC, NCC and NFO
Nursing Program Post Graduation Survey:	
 January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of NEC 	
 March – reviewed by NEC and recommendations forwarded to NCC 	
 April – reviewed by NCC and recommendations forwarded to NFO 	
May – reviewed by NFO	
Graduate Evaluation by Employer:	
 January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of NEC 	
 March – reviewed by NEC and recommendations forwarded to NCC 	
 April – reviewed by NCC and recommendations forwarded to NFO 	
May – reviewed by NFO	

COMPONENT 4.1 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
AY2010 ELA: met Two Items on the Nursing Program Post Graduation Survey are related to the curriculum ensuring opportunities for graduates to meet program objectives and outcomes. The mean scores were as follows: (data not available at this time) Item 4 = 4.40	AY 2010: Graduates and employer data confirms that the curriculum ensures opportunities for the graduates to meet program objectives and outcomes.

Item 6 = 4.00	Data continues to support program quality. Will continue to
Item 12 = 4.30	monitor.
Eleven Items on the Graduate Evaluation by Employer are related to the	
curriculum ensuring opportunities for graduates to meet program objectives and	
outcomes. The mean scores were as follows: (data not available at this time)	
Nursing Questions	
ltem 1 = 4.33	
ltem 2 = 4.33	
Item 3 = 4.33	
1 tem 4 = 4.33	
ltem 5 = 4.67	
ltem 6 = 4.33	
ltem 7 = 4.33	
ltem 8 = 4.33	
Item 9 = 4.67	
Item 10 = 4.88	
General Education Skills: Items 1 - 7	
ltem 1 – 4.63	
Item 2 – 4.63	
Item 3 – 4.63	
ltem 4 – 4.63	
Item 5 – 4.50	
ltem 6 – 4.00	
ltem 7 – 4.63	
Interpersonal Skills: Items 8-13	
Item 8 – 4.50	
Item 9 – 4.63	
Item 10 – 4.38	
Item 11 – 4.50	
Item 12 – 4.43	
Item 13 – 4.50	
<u>AY 2011</u>	<u>AY2011</u>
ELA: met	Continue to monitor.
The OCCC Nursing Program design was reviewed and is in compliance with	

standards set forth by the Oklahoma Board of Nursing, the National League for	
Nursing Accrediting Commission, Inc., and the Oklahoma State Regents for Higher	
Education. The curriculum was reviewed and found to incorporate the established	
standards, guidelines and competencies. Student learning and program outcomes	
are articulated.	
Total Program Evaluation – Faculty Survey: Items 29-30	
ltem 29 – 4.27	
ltem 30 – 4.17	
Student Exit Survey: Items 22-23	
Item 22 – 4.23	
ltem 23 – 4.20	
Nursing Program Graduate Survey: Items 4, 6	
Item 4 – 4.35	
ltem 6 – 4.05	
Graduate Evaluation by Employer Survey	
General Education Skills: Items 1 - 7	
Item 1 – 4.67	
ltem 2 – 4.67	
Item 3 – 4.67	
ltem 4 – 4.67	
ltem 5 – 4.33	
ltem 6 – 4.33	
ltem 7 – 4.33	
Interpersonal Skills: Items 8-13	
ltem 8 – 5.00	
ltem 9 – 4.33	
Item 10 – 3.00	
ltem 11 – 4.33	
Item 12 – 4.00	
ltem 13 – 4.33	
Nursing Questions:	
 Nursing Process (nursing questions 1, 2, and 3) = 	
 Nursing Knowledge/Critical Thinking (nursing question 4) 	
=Communication (nursing question 5) =	
 Accountability (nursing questions 6 and 7) = 	

• Professional Growth (nursing questions 8 and 9) = There was a response rate of less than 50% on the Graduate Evaluation by Employer Survey administered by the Department of Institutional Effectiveness (IE). <u>Four responses</u> were received with questions 1 to 17 answered. Nursing questions were not asked or evaluated. Unfortunately, the person in IE who normally handles this survey had medical issues this past year and the department head was unaware that the phone calls were not made to the employers as they received the Nursing Program Post Graduate surveys. So the 2011 graduates who were asked to provide the names of their supervisor for us to survey them did not get called in a prompt fashion. When head of IE discovered the error, they immediately began phone calling but some of this information was over a year old so success was minimal.	The Department of Institutional Effectiveness' plan, which they have already put in place, is to contact employers within one week of contacting the graduate. In addition, they have emphasized with the phone caller to obtain the graduate's supervisor's name (There were 35 of the addresses which included a company name but not the name of the supervisor for OCCC). Hopefully, this will improve the response rate. They will keep the NEC posted. Continue to outreach to communities of interest for participation.
Item 10 in the Graduate Evaluation by Employer has shown slight downward trending from 4.59 in AY08, 4.57 in AY09, and 4.38 in AY10. For AY11 item 10 decreased to 3.00. The item deals with the interpersonal skill of leadership – takes initiative and has vision. Due to poor response of the AY 11 survey current trending does not effectively represent employer views about the graduates' leadership skills.	Continue to monitor.
AY 2012 ELA: met The OCCC Nursing Program design was reviewed and continues to be in compliance with standards set forth by the Oklahoma Board of Nursing, the National League for Nursing Accrediting Commission, Inc., and the Oklahoma State Regents for Higher Education. The curriculum was reviewed and incorporates the established standards, guidelines and competencies. Student learning and program outcomes are clearly articulated. Curriculum revision has been ongoing during AY 12 with notification to OBN, ACEN and the OSRHE. December 2011 Recommendations/Activities K. Jordan reported on the Oklahoma Geriatrics Nurse Educators Workshop to include AACN Geriatric Nursing Competencies. Total Program Evaluation – Faculty Survey: Items 29-30 Item 29 – 4.67 Item 30 – 4.73 Student Exit Survey: Items 22-23 Item 22 – 4.42	 <u>AY 2012</u> The process for curriculum revision is as follows: proposals for curriculum changes are generally initiated on the program or division level. Proposals must have division dean approval before being sent to the Director of Curriculum and Assessment. Non-Substantive curricular changes are processed and forwarded to the Associate Vice President of Academic Affairs and Vice-President of Academic Affairs for final approval before implementation. Approved non-substantive curriculum changes are moved forward to the Registrars' office to be entered into Datatel. Some changes are initiated immediately and others will be made with the next catalog year. Substantive curricular changes are brought before the OCCC Curriculum Committee and if approved, are forwarded to the Associate Vice President of Academic

OCCC Nursing Advisory Committee Survey: Item 5	Affairs and Vice-President of Academic Affairs for final
ltem 5 – 4.73	approval before implementation. If the change(s)
Nursing Program Graduate Survey: Items 4, 6	requested warrant Oklahoma State Regent of Higher
Item 4 – 4.22	Education approval, then more paper work and/or
ltem 6 – 3.67	
Item 6 has demonstrated a downward trend to 3.67 for FY12. In FY11 it was it was	approvals may be needed before the approval process and
4.05 and in FY10 4.00. Comments made by students referred to the clinical	implementation process can be completed.
experience with clinical facility staff not caring for students to follow them. Another	
comment was stated as clinical being at least 50% a waste of time.	Each year the catalog is updated to reflect the changes made by
Graduate Evaluation by Employer Survey	the curriculum process. After the OCCC Curriculum Committee
General Education Skills: Items 1 - 7	meetings end each academic year, a list of approved changes is
ltem 1 – 4.86	sent out to all areas of the college impacted by curricular changes.
ltem 2 – 4.67	One of the responsibilities of membership on the OCCC Curriculum
ltem 3 – 4.61	Committee is communicating curriculum changes across the
ltem 4 – 4.50	campus. Since the initiation of the non-substantive process has
ltem 5 – 4.39	been created, the curriculum agenda has been amended to include
ltem 6 – 4.54	the information piece of non-substantive changes to keep
ltem 7 – 4.50	information moving back out college wide.
Interpersonal Skills: Items 8-13	December 2011 Actions File added to "O" drive, link for Oklahoma Geriatric Education
ltem 8 – 4.68	Center and geriatric education resources.
Item 9 – 4.61	Continue to monitor
Item 10 – 4.25	
ltem 11 – 4.29	
ltem 12 – 4.11	
Item 13 – 4.21	
Nursing Questions:	
 Nursing Process (nursing questions 1, 2, and 3) = 	
 Nursing Knowledge/Critical Thinking (nursing question 4) 	
=Communication (nursing question 5) =	
 Accountability (nursing questions 6 and 7) = 	
 Professional Growth (nursing questions 8 and 9) = 	
There was a response rate of 90.3% (28 out of 31 surveyed) on the Graduate	IE reported that they are in the process of asking the nursing
Evaluation by Employer Survey administered by the Department of Institutional	questions to the FY 13 graduates so data will be available for that
Effectiveness (IE). Nursing questions were not asked or evaluated. This was	time period.
reported as related to transitions within the department. Item 10 in the Graduate	

Evaluation by Employer has shown improved upward trending from 3.00 in AY11 to Data continues to support program quality. Will continue to 4.25 in FY12. (It was 4.59 in AY08, 4.57 in AY09, and 4.38 in AY10.) The item deals monitor. with the interpersonal skill of leadership – takes initiative and has vision. Due to better response to the AY 12 survey current trending more effectively represents employer views about the graduates' leadership skills. AY 2013 ELA: Program design is in compliance with standards set forth by the Oklahoma Board of Nursing, the Accreditation Commission for Education in Nursing, Inc., and the Oklahoma State Regents for Higher Education. Approval received for curriculum revisions per OBN, ACEN and OSRHE. September 2012 Recommendations/Activities K. Jordan updated the NFO on the Geriatric File on the "O" drive. Total Program Evaluation – Faculty Survey: Items 29-30 Item 29 – 5.00 Item 29 – 5.00
with the interpersonal skill of leadership – takes initiative and has vision. Due to better response to the AY 12 survey current trending more effectively represents employer views about the graduates' leadership skills. AY 2013 ELA: Program design is in compliance with standards set forth by the Oklahoma Board of Nursing, the Accreditation Commission for Education in Nursing, Inc., and the Oklahoma State Regents for Higher Education. Approval received for curriculum revisions per OBN, ACEN and OSRHE. September 2012 Recommendations/Activities K. Jordan updated the NFO on the Geriatric File on the "O" drive. Total Program Evaluation – Faculty Survey: Items 29-30
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AY 2013 AY 2013 ELA: Program design is in compliance with standards set forth by the Oklahoma Board of Nursing, the Accreditation Commission for Education in Nursing, Inc., and the Oklahoma State Regents for Higher Education. Approval received for curriculum revisions per OBN, ACEN and OSRHE. AY 2013 September 2012 Recommendations/Activities K. Jordan updated the NFO on the Geriatric File on the "O" drive. Total Program Evaluation – Faculty Survey: Items 29-30
ELA: Continue to monitor. Program design is in compliance with standards set forth by the Oklahoma Board of Nursing, the Accreditation Commission for Education in Nursing, Inc., and the Oklahoma State Regents for Higher Education. Approval received for curriculum revisions per OBN, ACEN and OSRHE. Continue to monitor. September 2012 Recommendations/Activities K. Jordan updated the NFO on the Geriatric File on the "O" drive. Total Program Evaluation – Faculty Survey: Items 29-30
Program design is in compliance with standards set forth by the Oklahoma Board of Nursing, the Accreditation Commission for Education in Nursing, Inc., and the Oklahoma State Regents for Higher Education. Approval received for curriculum revisions per OBN, ACEN and OSRHE. <u>September 2012 Recommendations/Activities</u> K. Jordan updated the NFO on the Geriatric File on the "O" drive. Total Program Evaluation – Faculty Survey: Items 29-30
Nursing, the Accreditation Commission for Education in Nursing, Inc., and the Oklahoma State Regents for Higher Education. Approval received for curriculum revisions per OBN, ACEN and OSRHE. <u>September 2012 Recommendations/Activities</u> K. Jordan updated the NFO on the Geriatric File on the "O" drive. Total Program Evaluation – Faculty Survey: Items 29-30
Oklahoma State Regents for Higher Education. Approval received for curriculum revisions per OBN, ACEN and OSRHE. <u>September 2012 Recommendations/Activities</u> K. Jordan updated the NFO on the Geriatric File on the "O" drive. Total Program Evaluation – Faculty Survey: Items 29-30
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Total Program Evaluation – Faculty Survey: Items 29-30
Item 29 – 5.00
Item 30 – 4.95
Student Exit Survey: Items 22-23
ltem 22 – 4.60
ltem 23 – 4.54
OCCC Nursing Advisory Committee Survey: Item 5
ltem 5 – 4.88
Nursing Program Graduate Survey: Items 4, 6
Item 4 Awaiting results.
Item 6
Graduate Evaluation by Employer Survey
General Education Skills: Items 1 - 7
Item 1
Item 2
Item 3
Item 4
Item 5
Item 6
Item 7
Interpersonal Skills: Items 8-13
Item 8

Item 9	
Item 10	
Item 11	
Item 12	
Item 13	
Nursing Questions:	
 Nursing Process (nursing questions 1, 2, and 3) = 	
 Nursing Knowledge/Critical Thinking (nursing question 4) 	
=Communication (nursing question 5) =	
 Accountability (nursing questions 6 and 7) = 	
 Professional Growth (nursing questions 8 and 9) = 	

STANDARD IV COMPONENT 4.2

Component	Expected Level of Achievement
The curriculum is developed by the faculty and regularly reviewed for rigor and currency.	 Annual review of curriculum for rigor and currency Support courses are appropriate for the Nursing Program curriculum and assist students to achieve the Nursing Program outcomes. (initiated AY 2013) Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 31.1-31.2

Frequency of Assessment	Assessment Method
 Curriculum Review April – reviewed by NCC May – reviewed by NFO Support Courses Review NPI – Government (POLSC 1113), Anatomy and Physiology (BIO 1314 or BIO 2255 Human Anatomy) NPII – English I (ENGL 1113), Principles of Chemistry and Lab (CHEM 1123 & CHEM 1131) NPIII – Developmental Psychology (PSY 2403) and General Chemistry (CHEM 1115) 	 Review of curriculum by NCC with recommendations to NFO Review and analysis of Support Courses (course description, objectives, substantive changes) by Nursing Teams (NT), NCC and NFO (added AY 2013) Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO

NPIV – US History (HIST 1483 or 1493) and Anatomy and Device and the second	
Physiology II (BIO 1414 or BIO 2234 Human Physiology)	
BADNAP – Psychology (PSY 1113) and Microbiology (BIO	
2125)	
CLP – English II (ENGL 1213) and Nutrition (BIO 1023)	
 Biennial (odd years) (initiated AY 2013) 	
 January-May – data collection by Nursing Teams (NT) 	
September – reviewed by NT	
October – reviewed by NCC	
November – reviewed by NFO	
Total Program Evaluation-Faculty Survey:	
May – data collected by NEC	
September – reviewed by NEC	
October – reviewed by NFO	

COMPONENT 4.2 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011	AY2011
ELA: met	A timeline for completion for curriculum revision was developed and
Identified need to revise curriculum during Spring 2010 semester. Current	a QSEN consultant was secured to begin work with the faculty
curriculum was reviewed for deficiencies.	during the summer of 2011.
February 2011 Recommendations/Activities	February 2011 Actions
Report to NFO of ongoing curriculum revision.	Work dates set for curriculum revision of philosophy and organizing
April 2011 Recommendations/Activities	framework. The faculty reviewed recommendations from the IOM,
The Curriculum Committee forwarded a recommendation to approve the mission and	Carnegie Report on Nursing Education, and QSEN.
philosophy for the new curriculum (revision 4).	April 2011 Actions
May 2011 Recommendations/Activities	The new Mission and Philosophy was approved by the NFO.
Recommendations were brought forth to the NFO for consideration and approval by	May 2011 Actions
the Pediatric Special Committee.	All recommendations brought forth to NFO by the Pediatric Special
The results of the QSEN Delphi Survey were reported to the NFO and a	Committee were approved.

recommendation to approve as a guide for the curriculum revision was brought	The Delphi survey results were approved as a guide for the
forward.	curriculum revision as work continues
	cumculum revision as work continues
Total Program Evaluation – Faculty Survey: Items 31.1-31.2	
Item 31.1 – 4.20	
Item 31.2 – 4.07	
<u>AY 2012</u>	<u>AY 2012</u>
ELA: met	Plan to begin implementation of new curriculum Fall 12 with NUR
Revision of the curriculum has been ongoing during AY 2012 with all faculty involved	1519. Continue to monitor.
in the process. Consultation with JoAnn Mulready-Shick, EdD, RN, CNE, Faculty,	Nursing Teams review of support courses will begin Spring AY
Undergraduate Nursing Program Director UMASS Boston, College of Nursing and	2013.
Health Sciences	October 2011 Actions
Boston, MA during summer 2011 and assist by Rosemary Klepper, former NPD of	Faculty are asked to submit pediatric-related items to the file on the
OCCC Nursing Program during AY12.	"O" drive. The Pediatric Committee are looking at pediatric based
October 2011 Recommendations/Activities	videos for Carl Perkins purchase.
NFO membership was informed of a new file for pediatric resources on the "O" drive.	November 2011 Actions
November 2011 Recommendations/Activities	Faculty will meet on November 8 to begin work on the curriculum
It was reported to the NFO membership that work is beginning on curriculum	mapping document.
mapping.	December 2011 Actions
December 2011 Recommendations/Activities	The NFO approved the new course descriptions as written.
The Evaluation Committee brought forth to the NFO a recommendation to approve	January 2012 Actions
new course descriptions.	Teamwork and Collaboration reviewed as well as Patient-Centered
January 2012 Recommendations/Activities	Care for inclusion into curriculum. Will review Evidence-Based
Faculty reviewed QSEN competency focus for curriculum during NFO.	Practice in classroom activities for next few months.
Also discussed was curriculum revision final paperwork to be sent to Board of	Faculties to send information to D. Myers as meetings are
Nursing and NLNAC for approval.	scheduled for final revisions.
May 2012 Recommendations/Activities	May 2012 Actions
The curriculum mapping document was presented to the NFO for approval by the	The NFO approved the mapping document as well as the NUR
Curriculum Committee as well as the NUR 1519 objectives.	1519 objectives.
Total Program Evaluation – Faculty Survey: Items 31.1-31.2	
Item 31.1 – 4.93	
Item $31.2 - 4.73$	
AY 2013	AY 2013
ELA:	Continued work on unit objectives in NUR 1529, NUR 2539, and
New curriculum reviewed and implemented for NPI (Fall 2012) and NPII (Spring	NUR 2549. Curriculum implemented with Fall 2012 NUR 1519
2013).	class (NPI). Plan to begin implementation in NUR 1529 Spring 13.

Total Program Evaluation – Faculty Survey: Items 31.1-31.2	Continue to monitor.
ltem 31.1 – 4.84	
ltem 31.2 – 4.84	
	August 2012 Actions
August 2012 Recommendations/Activities	C. Heitkamper and K. Jordan volunteered to meet with Ms.
Volunteers were sought from the NFO membership to meet with B. Breeding	Breeding.
regarding the Nutrition course (BIO 1023)	
	Continue to review courses as scheduled and continue to monitor
Support course review occurred for all general education courses by the nursing	for relevance.
teams as assigned. Post review by the teams in September, 2013, data received will	
be forwarded to the NCC for review and recommendations October, 2013.	February 2013 Actions
	A pilot project for health promotion assessments will be piloted by
February 2013 Recommendations/Activities	J. Cole's NUR 2539 clinical group with results shared during the
The Health Promotion/maintenance Special Committee reported to the NFO	May 2013 NFO meeting.
information regarding current activity by the group.	

STANDARD IV COMPONENT 4.3

Component	Expected Level of Achievement
The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.	 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 32.1-32.4 Mean score of at least 3.5 on a scale of 5.0 on the Student Evaluation of Nursing Course: Item 40.1-40.4 (AY12 38.1-38.4) Mean score of at least 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course: Item 11.1-11.4 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Items 25.1-25.4 Mean score of at least 3.5 on a scale of 5.0 on the Adjunct Faculty Survey: Items 9.1-9.4 Nursing Program Post Graduate Survey: Items 4 and 12

Frequency of Assessment	Assessment Method
Total Program Evaluation – Faculty Survey:	Review and analysis of Total Program Evaluation-Faculty Survey by
May - data collected by NEC	NEC, NCC and NFO
January – reviewed by NEC	Review and analysis of the Student Evaluation of Nursing Course by

 March – reviewed by NCC 	NEC, NCC and NFO
April - reviewed by NFO	 Review and analysis of the Faculty Evaluation of Nursing Course by NEC, NCC and NFO
Student Evaluation of Nursing Course:	Review and analysis of Student Exit Survey by NEC, NCC and
November/April – data collected by NEC	NFO
October – reviewed by NEC	Review and analysis of Adjunct Faculty Survey by NEC, NCC and
November – reviewed by NCC	NFO
December – reviewed by NFO	Nursing Program Post Graduate Survey is conducted by the Dependence of least triangle of the struggle of the server of
	Department of Institutional Effectiveness through a series of
Faculty Evaluation of Nursing Course:	mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Analysis of NPPGS by NEC, NCC and NFO
• May - data collected by NEC	the chair of the NEC. Analysis of NPPGS by NEC, NCC and NPC
January – reviewed by NEC	
March – reviewed by NCC	
April - reviewed by NFO	
Student Exit Survey:	
 November/April – data collected by NEC 	
 March – reviewed by NEC and recommendations forwarded to NCC 	
April – reviewed by NCC and recommendations forwarded to	
NFO	
May – reviewed by NFO	
Adjunct Faculty Survey:	
May - data collected by NEC	
January – reviewed by NEC	
March – reviewed by NCC	
April - reviewed by NFO	
Nursing Program Post Graduation Survey:	
 January/July – data collected by Department of Institutional 	
Effectiveness and results forwarded to chair of NEC	
 March – reviewed by NEC and recommendations forwarded to NCC 	

•	April – reviewed by NCC and recommendations forwarded to	
	NFO	
•	May – reviewed by NFO	

COMPONENT 4.3 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2011</u>	<u>AY2011</u>
ELA: met	December 2010 Actions
December 2010 Recommendations/Activities	NFO Committee membership approved changes to the care plan
The Nursing Process Committee brought forward recommendations approve by the	December 2010.
Curriculum Committee regarding the care plan.	March 2011 Actions
March 2011 Recommendations/Activities	The NFO Committee approved recommendations for textbook
Curriculum Committee brought forth recommendations to approve new editions of	changes.
textbooks to the NFO	May 2011 Actions
May 2011 Recommendations/Activities	The revision of the care plan with the addition of QSEN content was
The Nursing Process Special Committee completed work on the QSEN content for	approved by the NFO.
the care plan. This content was added to the care plan and brought forward to the	Power point to be revised prior to Fall 11 adjunct orientation.
NFO for approval.	NFO approved the recommendations by the Math Committee with
D. Myers noted need to clean up power point on grading care plans.	R. Klepper to incorporate the revisions in the 2011-2012 Handbook
Recommendations were brought forward to the NFO by the Math Committee related	and course syllabi.
to the course objectives.	October 2011 Actions
November 2011 Recommendations/Activities	QSEN teams are to let D. Myers know if they do not want to use
D. Myers and T. Walker presented posters to the individual QSEN committees that	posters for their projects.
they had made.	March 2012 Actions
March 2012 Recommendations/Activities	NFO committee to review textbook. T. Walker to provide textbook
The Curriculum Committee brought forth textbook recommendations to the NFO.	adoption forms for membership.
Online vote held by Curriculum Committee.	December 2012 Actions
December 2012 Recommendations/Activities	All five documents brought forward by the Nursing Process
The Nursing Process Committee brought forward to NFO five documents for	Committee were approved.
approval.	
Total Program Evaluation – Faculty Survey Items 32.1-32.4	
Item 32.1 – 4.07	

Item 32.2 – 4.00	
Item 32.3 – 4.13	
ltem 32.4 – 4.07	
Student Evaluation of Nursing Course Items 40.1-40.4	
ltem 40.1 – 3.89	
Item 40.2 – 3.98	
Item 40.3 – 3.99	
Item 40.4 – 3.97	
Faculty Evaluation of Nursing Course Items 11.1-11.4	
Item 11.1 – 4.83 (CBSN – 3.90)	
Item 11.2 – 4.75 (CBSN – 3.90)	
Item $11.3 - 4.79$ (CBSN $- 3.90$)	
Item $11.4 - 4.83$ (CBSN $- 3.80$)	
Student Exit Survey Items 25.1-25.4	
1000000000000000000000000000000000000	
ltem 25.2 - 4.20	
Item 25.3 – 4.09	
1000 = 1000	
Adjunct Faculty Survey Items 9.1-9.4	
1 tem 9.1 - 4.52	
1000000000000000000000000000000000000	
1000000000000000000000000000000000000	
1 tem 9.4 - 4.61	
Nursing Post Graduate Survey Items 4, 12 (See 4.1 for 09-10 data)	
12 (322 4.110 03-10 000)	
12 - 4.33	
	AV 2012
AY 2012 ELA: met	AY 2012 December 2011 Actions
	December 2011 Actions
December 2011 Recommendations/Activities	Both forms were approved as written.
The Nursing Process Committee (through Curriculum Committee) brought forth	
recommendations for approval of two new form to be used for curriculum: Clinical	
Worksheet and the NUR 2549 Care Plan.	
Total Program Evaluation – Faculty Survey Items 32.1-32.4	
Item 32.1 – 4.73	
Item 32.2 – 4.73	

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ltem 32.3 – 4.73	
ltem 32.4 – 4.73	
Student Evaluation of Nursing Course Items 38.1-38.4	
ltem 38.1 – 4.18	
ltem 38.2 – 4.21	
Item 38.3 – 4.20	
ltem 38.4 – 4.24	
Faculty Evaluation of Nursing Course Items 11.1-11.4	
Item 11.1 – 4.60	
ltem 11.2 – 4.60	
ltem 11.3 – 4.60	
ltem 11.4 – 4.60	
Student Exit Survey Items 25.1-25.4	
ltem 25.1 – 4.25	
ltem 25.2 – 4.21	
ltem 25.3 – 4.26	
ltem 25.4 – 4.29	
Adjunct Faculty Survey Items 9.1-9.4	
ltem 9.1 – 4.60	
ltem 9.2 – 4.67	
ltem 9.3 - 4.60	
ltem 9.4 – 4.73	
Nursing Post Graduate Survey Items 4, 12	
Item 4 – 4.22	
ltem 12 – 4.20	
AY 2013	AY 2013
ELA: met	May 21 2013 Actions
May 21 2013 Recommendations/Activities	All documents were approved for use.
The Nursing Process Committee brought forth several documents for approval by	
the NFO from the Curriculum Committee.	
Total Program Evaluation – Faculty Survey Items 32.1-32.4	
ltem 32.1 – 4.89	
ltem 32.2 – 4.89	
ltem 32.3 – 4.89	
ltem 32.4 – 4.89	

Student Evaluation of Nursing Course Items 38.1-38.44	
Item 38.1 – 4.34	
Item 38.2 – 4.37	
Item 38.3 – 4.37	
Item 38.4 – 4.36	
Faculty Evaluation of Nursing Course Items 11.1-11.4	
ltem 11.1 – 4.88	
Item 11.2 – 4.90	
Item 11.3 – 4.92	
Item 11.4 – 4.90	
Student Exit Survey Items 25.1-25.4	
Item 25.1 – 4.40	
Item 25.2 – 4.57	
Item 25.3 – 4.58	
Item 25.4 – 4.55	
Adjunct Faculty Survey Items 9.1-9.4	
Item 9.1 – 4.54	
Item 9.2 – 4.50	
Item 9.3 – 4.54	
Item 9.4 – 4.57	
Nursing Post Graduate Survey Items 4, 12	Awaiting results.
Item 4	
Item 12	

Component	Expected Level of Achievement
The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives.	 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 33.1-33.2 Mean score of 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course: Item 13.1-13.2 Mean score of 3.5 on a scale of 5.0 on the Student Evaluation of Nursing Course: Item 42.1-42.2 (AY12 40.1-40.2) Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Items 27.1-27.2

Frequency of Assessment	Assessment Method
Total Program Evaluation – Faculty Survey:	Review and analysis of Total Program Evaluation – Faculty Survey
May - data collected by NEC	by NEC, NCC and NFO
January – reviewed by NEC	Review and analysis of the Faculty Evaluation of Nursing Course by
March – reviewed by NCC	NEC, NCC and NFO
April - reviewed by NFO	 Review and analysis of the Student Evaluation of Nursing Course by NEC, NCC and NFO
Faculty Evaluation of Nursing Course:	Review and analysis of Student Exit Survey by NEC, NCC and
May - data collected by NEC	NFO
January – reviewed by NEC	
March – reviewed by NCC	
April - reviewed by NFO	
Student Evaluation of Nursing Course:	
 November/April – data collected by NEC 	
October – reviewed by NEC	
November – reviewed by NCC	
December – reviewed by NFO	
Student Exit Survey:	
November/April – data collected by NEC	
March – reviewed by NEC and recommendations forwarded to NCC	

•	April – reviewed by NCC and recommendations forwarded to NFO	
•	May – reviewed by NFO	

COMPONENT 4.4 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2011</u>	<u>AY2011</u>
ELA: met	Continue to monitor.
Analysis of data reflects consensus between faculty and students that Nursing	
Program curriculum includes cultural, ethnic, and socially diverse concepts.	
Experiences from regional, national, or global perspectives are reflected in activities	
such as:	
NUR 1529: Students will choose a health-related topic of interest and compare the	
general American culture with another culture or country related to that health topic.	
NUR 2539: Analyze the implications of a global healthcare issue on global nursing	
practice.	
NUR 2549: Students are to search internet sites or other sources for the nursing	
scope of practice for registered nurses in a selected country.	
Total Program Evaluation – Faculty Survey Items 33.1-33.2	
ltem 33.1 – 4.37	
ltem 33.2 – 4.30	
Faculty Evaluation of Nursing Course Items 13.1-13.2	
ltem 13.1 – 4.79	
ltem 13.2 – 4.88	
Student Evaluation of Nursing Course Items 42.1-42.2	
ltem 42.1 – 4.07	
ltem 42.2 – 4.03	
Student Exit Survey Items 27.1-27.2	
ltem 27.1 – 4.07	
ltem 27.2 – 4.01	

AY 2012	AY 2012
ELA: met	Increase in trending noted. Continue to monitor.
Analysis of data reflects and increase in trending for all components continuing to	
reflect a consensus among faculty and students that Nursing Program curriculum	
includes cultural, ethnic, and socially diverse concepts. Experiences from regional,	
national, or global perspectives are reflected in activities such as:	
NUR 1529: Students will choose a health-related topic of interest and compare the	
general American culture with another culture or country related to that health topic.	
NUR 2539: Analyze the implications of a global healthcare issue on global nursing	
practice.	
NUR 2549: Compares and contrasts the nursing scope of practice for registered	
nurses in the United States to that of the selected country and discusses the	
challenges faced by nurses working in that country.	
CLP NUR 2539: Complete the cultural competency module from the Office of	
Minority Health.	
Total Program Evaluation – Faculty Survey Items 33.1-33.2	
Item 33.1 – 4.73	
ltem 33.2 – 4.73	
Faculty Evaluation of Nursing Course Items 13.1-13.2	
Item 13.1 – 4.71	
ltem 13.2 – 4.67	
Student Evaluation of Nursing Course Items 40.1-40.2	
Item 40.1 – 4.41	
ltem 40.2 – 4.21	
Student Exit Survey Items 27.1-27.2	
ltem 27.1 – 4.34	
ltem 27.2 – 4.35	
AY 2013	AY 2013
ELA: met	Increase in trending noted. Continue to monitor.
Total Program Evaluation – Faculty Survey Items 33.1-33.2	
ltem 33.1 – 4.89	
Item 33.2 – 4.84	
Faculty Evaluation of Nursing Course Items 13.1-13.2	
ltem 13.1 – 4.79	
ltem 13.2 – 4.75	

Student Evaluation of Nursing Course Items 40.1-40.2 Item 40.1 – 4.46 Item 40.2 – 4.42 Student Exit Survey Items 27.1-27.2 Item 27.1 – 4.58 Item 27.2 – 4.60

Component	Expected Level of Achievement
Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes	 Review of evaluation methodologies that measure achievement of student learning and program outcomes Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 34.1-34.3 Mean score of 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course: Item 15.1-15.3 Mean score of 3.5 on a scale of 5.0 on the Adjunct Faculty Survey: Item 10.1-10.3 Mean score of 3.5 on a scale of 5.0 on the Student Evaluation of Nursing Course: Item 44.1-44.3 (AY12 42.1-42.3) Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Items 29.1-29.3

Frequency of Assessment	Assessment Method
Evaluation Methodologies reviewed annually	Review and analysis of current Nursing Program evaluation
Testing Committee	methodologies to include theory exams, quizzes, ATI progression
NCC and NCC Sub-Committees	exams, clinical evaluation, NCLEX results by Testing Committee,
NFO	NCC (and Sub-Committees) and NFO.
Total Program Evaluation – Faculty Survey:	 Review and analysis of Total Program Evaluation-Faculty Survey by NEC, NCC and NFO
May - data collected by NEC	Review and analysis of the Faculty Evaluation of Nursing Course by
January – reviewed by NEC	NEC, NCC and NFO
March – reviewed by NCC	 Review and analysis of Adjunct Faculty Survey by NEC, NCC and
April - reviewed by NFO	NFO

Faculty Evaluation of Nursing Course:	 Review and analysis of the Student Evaluation of Nursing Course by NEC, NCC and NFO
May - data collected by NEC	 Review and analysis of Student Exit Survey by NEC, NCC and
• January – reviewed by NEC	NFO
• March – reviewed by NCC	
April - reviewed by NFO	
Adjunct Faculty Survey:	
May - data collected by NEC	
January – reviewed by NEC	
March – reviewed by NCC	
April - reviewed by NFO	
Student Evaluation of Nursing Course:	
 November/April – data collected by NEC 	
October – reviewed by NEC	
November – reviewed by NCC	
December – reviewed by NFO	
Student Exit Survey:	
 November/April – data collected by NEC 	
 March – reviewed by NEC and recommendations forwarded to NCC 	
 April – reviewed by NCC and recommendations forwarded to 	
NFO	
May – reviewed by NFO	

COMPONENT 4.5 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011	AY2011
ELA: met	October 2010 Actions
Review and analysis of current Nursing Program evaluation methodologies to	The NFO voted to maintain use of the ATI testing with no changes

include theory exams, quizzes, ATI progression exams, clinical evaluation, NCLEX	at this time. C. Heitkamper will report findings to NFO when
results by Testing Committee, NCC and the NFO continues. Two individuals failed	completed on the Comprehensive Predictor minimum level of
to progress secondary to ATI (one in NUR 2539-Mental Health Progression Exam;	achievement
	with a recommendation for consideration.
one in NUR 2549-Comprehensive Predictor Exam)	
October 2010 Recommendations/Activities	November 2010 Actions
Curriculum Committee brought forward recommendation to the NFO to continue	After discussion the NFO Committee voted to approve the minimum
using ATI testing.	level of achievement for the Comprehensive Predictor to 93% from
Testing Committee brought forward that C. Heitkamper is reviewing the ATI	91% during the November 2010 meeting.
Comprehensive Predictor, specifically data that would support the decision to	Recommendations from the Math Committee at the NFO meeting
increase the minimum level of achievement to 93% from 91%. ATI has provided	were reviewed with one approved and one not. The two remaining
reports to support the review.	will be reconsidered at a later time.
November 2010 Recommendations/Activities	December 2010 Actions
C. Heitkamper (Testing Committee) presented a recommendation to the NFO during	The NFO Committee voted to approve recommendations from the
the November 2010 meeting to increase the minimum level of achievement to 93%	Math Committee for revisions December 2010.
from 91% on the Comprehensive Predictor.	The NFO forwarded a recommendation by the NEC to the Clinical
S. Wallace brought forward four recommendations to the NFO Committee for the	Evaluation Committee for consideration as needs no formal
Math Committee.	approval from the NFO.
December 2010 Recommendations/Activities	No action taken on ATI report at this time.
S. Wallace brought forth recommendations for revisions from the Math Committee	The Clinical Evaluation Survey Tool will be available for
for NFO approval at the December 2010 meeting.	administration soon.
The NEC brought forward a recommendation to the NFO on the Clinical Evaluation	January 2011 Actions
Tool based on results of the Student Evaluation of Nursing Course after review by	NUR 2539 will need to review test items for their course as a final
the Curriculum Committee.	review. CBSN and NUR 1519 test items were referred to the
The Testing Committee provided an ATI report for review by the NFO. Faculty	February 2011 Testing Committee meeting.
groups were to review the ATI report for "gaps".	February Recommendations/Activities
January 2011 Recommendations/Activities	Crib Sheet policy approved by NFO.
The Testing Committee reviewed test items and reported findings to NFO.	March 2011 Actions
The Clinical Evaluation Committee reported to the NFO that T. Walker has	The NFO approved all five recommendations related to the clinical
developed a tool to survey the students to evaluate the Clinical Evaluation Tool.	evaluation tool brought forward by the Clinical EVALUATION
February 2011 Recommendations/Activities	Special Committee.
The Testing Committee brought recommendation forward to the NFO on the Crib	May 2011 Actions
Sheet policy.	The ATI Alignment document was approved and is located in the
March 2011 Recommendations/Activities	"O" drive under the Testing Committee 2011.
The Clinical Evaluation Special Committee brought forward five recommendations to	Continue to monitor the review and analysis of evaluation
the NFO related to the clinical evaluation tool.	methodologies.

May 2011 Recommendations/Activities	October 2011 Actions
The Testing Committee brought forward the recommendation to approve the ATI	The testing policy will be reviewed further.
Curriculum Alignment document which was approved by the Curriculum Committee.	March 2012 Actions
October 2011 Recommendations/Activities	The Testing Committee requested that the Math Committee
The Testing Committee brought forth the revised testing policy for approval of the	perform a full evaluation on eDose. Faculty will be reviewing the
NFO.	Meti Learning eDose during a thirty day free trial
March 2012 Recommendations/Activities	
The Math Committee presented information to the NFO on eDose. J. Peters and K.	
Wetmore presented feedback on the system to the faculty.	
Total Program Evaluation – Faculty Survey Items 34.1-34.3	
Item 34.1 – 4.20	
Item $34.2 - 4.20$	
Item 34.3 – 4.13	
Faculty Evaluation of Nursing Course Items 15.1-15.3	
Item 15.1 – 4.83	
ltem 15.2 – 4.71	
ltem 15.3 – 4.75	
Adjunct Faculty Survey Items 10.1-10.3	
Item 10.1 – 4.39	
Item 10.2 – 4.61	
Item 10.3 – 4.57	
Student Evaluation of Nursing Course Items 44.1-44.3	
Item 44.1 – 3.92	
Item 44.2 – 4.04	
Item 44.3 – 3.95	
Student Exit Survey Items 29.1-29.3	
Item 29.1 – 4.00	
Item 29.2 – 4.16	
Item 29.3 – 4.19	
AY 2012	AY 2012
ELA: met	Continue to monitor.
Review and analysis of current Nursing Program evaluation methodologies to	September 2011 Actions
include theory exams, quizzes, ATI progression exams, clinical evaluation (revisions	Math Committee plans to re-evaluate math practice exams. Faculty
in progress NPI and NPII), NCLEX results by Testing Committee, NCC and the NFO	are to submit math artifacts to Jon Inglett in Arts and Humanities.
continues.	November 2011 Actions

September 2011 Recommendations/Activities	Current blueprints used in courses will not change.
Math Committee reports math resource information is now up and running on the	January 2012 Actions
Campus Lab ANGEL course.	Faculty to begin using new version ParScore.
November 2011 Recommendations/Activities	Testing Committee revised five medical-surgical test items for NUR
The Testing Committee brought forth to the NFO information on how blueprints are	1529 and three for NUR 2539. These items will be corrected and
used in each course. The committee decided to not change the current practices.	available for January 2012.
January 2012 Recommendations/Activities	
A new version of ParScore (7.0) installed.	
The Testing Committee reported review of test items during December 2011	
meeting.	
Total Program Evaluation – Faculty Survey Items 34.1-34.3	
ltem 34.1 – 4.53	
ltem 34.2 – 4.60	
ltem 34.3 – 4.60	
Faculty Evaluation of Nursing Course Items 15.1-15.3	
Item 15.1 – 4.52	
ltem 15.2 – 4.63	
ltem 15.3 – 4.63	
Adjunct Faculty Survey Items 10.1-10.3	
ltem 10.1 – 4.33	
ltem 10.2 – 4.50	
ltem 10.3 – 4.47	
Student Evaluation of Nursing Course Items 42.1-42.3	
ltem 42.1 – 4.13	
ltem 42.2 – 4.27	
ltem 42.3 – 4.13	
Student Exit Survey Items 29.1-29.3	
ltem 29.1 – 4.25	
ltem 29.2 – 4.33	
Item 29.3 – 4.32	
<u>AY 2013</u>	<u>AY 2013</u>
ELA: met	The use of ATI exams for progression testing was reviewed and
Review and analysis of current Nursing Program evaluation methodologies to	revised for the 2014 academic year. The ATI exams for each
include theory exams, quizzes, ATI progression exams, clinical evaluation (revisions	course (NUR 1519: Fundamentals, NUR 1529: Maternal/Newborn.
for NPIII and NPIV), NCLEX results by Testing Committee, NCC and the NFO	NUR 2539: Mental Health, and NUR 2549: Comprehensive

continues.	Predictor) will now become part of the final exam process and
October 2012 Recommendations/Activities	worth 10% of the final exam grade (5% for NUR 1529 and NUR
The Testing Committee reported to the NFO that they will begin review of the use of	2539 secondary to split courses).
group points during course unit exams.	October 2012 Actions
January 2013 Recommendations/Activities	The Testing Committee will begin data collection on groups points
Clinical Remediation Plan discussed in the NFO.	and student success throughout the program and on first time
February 2013 Recommendations/Activities	testing on NCLEX.
The Evaluation Committee reported to the NFO that they have completed their	January 2013 Actions
review of the ATI Comprehensive Predictor results.	Team Leaders to inform part-time faculty of new remediation plan
Survey response was also discussed during the last meeting on January 31.	and importance of timely documentation.
Membership will continue to review the AY 2011-AY 2013 SPEP for revision and	February 2013 Actions
errors. The AY 2014-AY 2016 SPEP is currently under construction and is based on	Results of the ATI review were forwarded to the team Leaders for
new NLNAC standards. Surveys are also under revision.	review with their teams. A recommendation is also being forwarded
March 2013 Recommendations/Activities	to the Curriculum Committee for discussion. Team leaders also
The Curriculum Committee brought forth to NFO, the ATI review for Fall 2011 to	received results of surveys to include response numbers to discuss
Spring 2012 with recommendations.	with their teams. Nursing teams were reminded to complete the
The Clinical Evaluation Special Committee presented that the clinical evaluation tool	support course reviews by the end of the semester.
for NUR 2539 and NUR 2549 has been completed for review and will be submitting	March 2013 Actions
to the curriculum Committee when review is complete.	Teaching teams will review the ATI data and discuss ways to better
April 2013 Recommendations/Activities	implement concepts into their courses. Each team will submit their
The Curriculum Committee report to the NFO included recommendations on group	plan to the Curriculum Committee for review and then it will be
points for unit exams.	forwarded to the Evaluation Committee.
The Clinical Evaluation Committee brought forward the NUR 2539 and NUR 2549	Faculty will review the results of group points data and each
clinical evaluation tools for approval by the NFO.	teaching team will develop a plan to submit to the Curriculum
May 21 2013 Recommendations/Activities	Committee who will develop options to present at a future NFO
The NFO membership voted on the new testing procedure for ATI. The exams will	meeting.
now be part of the final exams in each course.	April 2013 Action
Total Program Evaluation – Faculty Survey Items 34.1-34.3	The revised group testing policy was approved and will be
Item 34.1 – 4.79	implemented during the summer 2013 with the BADNAP NUR 1519
Item 34.2 – 4.84	group and all other courses in the fall 2013.
Item 34.3 – 4.79	The clinical evaluation tools for NUR 2539 and NUR 2549 were
Faculty Evaluation of Nursing Course Items 15.1-15.3	approved for use.
Item 15.1 – 4.75	May 21 2013 Actions
Item 15.2 – 4.71	The new ATI testing procedure was approved and to begin during
ltem 15.3 – 4.76	summer 2013 with BADNAP NUR 1519

Adjunct Faculty Survey Items 10.1-10.3	
ltem 10.1 – 4.41	
ltem 10.2 – 4.48	
ltem 10.3 – 4.48	
Student Evaluation of Nursing Course Items 42.1-42.3	
ltem 42.1 – 4.32	
ltem 42.2 – 4.38	
ltem 42.3 – 4.41	
Student Exit Survey Items 29.1-29.3	
ltem 29.1 – 4.58	
ltem 29.2 – 4.54	
ltem 29.3 – 4.59	

Component	Expected Level of Achievement
The curriculum and instructional processes	 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 35.1-35.4, 36.1- 36.3, 37.1-37.4, 38.1-38.3
reflect educational theory, interdisciplinary	 Mean score of 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course: Item 17.1-17.4, 18.1-18.3, 19.1-19.4, 20.1-20.3
collaboration, research, and best practice	 Mean score of 3.5 on a scale of 5.0 on the Adjunct Faculty Survey: Item 11.1-11.4, 12.1-12.3, 13.1-13.4, 14.1-14.3 Mean score of 3.5 on a scale of 5.0 on the Student Evaluation of Nursing Course: Item 46.1-46.4, 47.1-47.3, 48.1-48.4,
standards, while allowing	49.1-49.3 (AY12 44.1-44.4, 45.1-45.3, 46.1-46.4, 47.1-47.3)
for innovation, flexibility, and technological advances.	 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Items 31.1-31.4, 32.1-32.3, 33.1-33.4, 34.1-34.3

Frequency of Assessment	Assessment Method
Total Program Evaluation – Faculty Survey:	Review and analysis of Total Program Evaluation-Faculty Survey by
May - data collected by NEC	NEC, NCC and NFO
 January – reviewed by NEC 	Review and analysis of the Faculty Evaluation of Nursing Course by
March – reviewed by NCC	NEC, NCC and NFO

 April - reviewed by NFO Faculty Evaluation of Nursing Course: May - data collected by NEC January – reviewed by NEC March – reviewed by NCC April - reviewed by NFO Adjunct Faculty Survey: May - data collected by NEC January – reviewed by NEC March – reviewed by NCC April - reviewed by NFO Student Evaluation of Nursing Course: November/April – data collected by NEC October – reviewed by NEC November – reviewed by NEC December – reviewed by NFO 	 Review and analysis of the Adjunct Faculty Survey by NEC, NCC and NFO Review and analysis of the Student Evaluation of Nursing Course by NEC, NCC and NFO Review and analysis of Student Exit Survey by NEC, NCC and NFO
 Student Exit Survey: November/April – data collected by NEC March – reviewed by NEC and recommendations forwarded to NCC April – reviewed by NCC and recommendations forwarded to NFO May – reviewed by NFO 	

COMPONENT 4.6 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2011</u>	<u>AY2011</u>
ELA: met	Continue to monitor.
Faculty evaluative data confirms that the curriculum and instructional processes	
reflect educational theory, interdisciplinary collaboration, research, and best practice	

standards, while allowing for innovation, flexibility, and technological advances.	
Total Program Evaluation – Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4,	
38.1-38.3	
ltem 35.1 – 4.20	
ltem 35.2 – 4.17	
ltem 35.3 – 4.23	
ltem 35.4 – 4.31	
ltem 36.1 – 4.00	
ltem 36.2 – 3.83	
ltem 36.3 – 4.20	
ltem 37.1 – 4.27	
ltem 37.2 – 4.17	
ltem 37.3 – 4.30	
ltem 37.4 – 4.33	
ltem 38.1 – 4.10	
ltem 38.2 – 3.87	
ltem 38.3 – 4.27	
Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	
20.1-20.3	
ltem 17.1 – 4.83	
ltem 17.2 – 4.71	
Item 17.3 – 4.71	
Item 17.4 – 4.78	
Item 18.1 – 4.75	
Item 18.2 – 4.75	
Item 18.3 – 4.75	
Item 19.1 – 4.75	
Item 19.2 – 4.67	
Item 19.3 – 4.63	
Item 19.4 – 4.75 Item 20.1 – 4.75	
ltem 20.2 - 4.73	
ltem 20.3 - 4.75	
Adjunct Faculty Survey Items 11.1-11.4, 12.1-12.3, 13.1-13.4, 14.1-14.3	
Item 11.1 – 4.39	
1.011 11.1 - 4.33	

W 44.0 4.05	T
Item 11.2 – 4.65	
ltem 11.3 – 4.48	
ltem 11.4 – 4.65	
ltem 12.1 – 4.52	
ltem 12.2 – 4.52	
ltem 12.3 – 4.65	
Item 13.1 – 4.39	
Item 13.2 – 4.61	
ltem 13.3 – 4.39	
ltem 13.4 – 4.65	
Item 14.1 – 4.48	
Item 14.2 – 4.48	
Item 14.3 – 4.52	
Student evaluative data confirms that the curriculum and instructional processes	
reflect educational theory, interdisciplinary collaboration, research, and best practice	Continue to monitor.
standards, while allowing for innovation, flexibility, and technological advances.	
Student Evaluation of Nursing Course Items 46.1-46.4, 47.1-47.3, 48.1-48.4,	
49.1-49.3	
ltem 46.1 – 4.12	
ltem 46.2 – 4.11	
ltem 46.3 – 4.04	
ltem 46.4 – 4.14	
Item 47.1 – 4.05	
Item 47.2 – 3.89	
ltem 47.3 – 4.02	
ltem 48.1 – 4.11	
Item 48.2 – 4.07	
Item 48.3 – 4.02	
Item 48.4 – 4.14	
ltem 49.1 – 4.07	
Item 49.2 – 3.95	
ltem 49.3 – 4.05	
Student Exit Survey Items 31.1-31.4, 32.1-32.3, 33.1-33.4, 34.1-34.3	
ltem 31.1 – 4.14	

$\frac{\text{Item 31} 2 - 4.14}{\text{Item 33} - 4.10}$ $\frac{\text{Item 31} 4 - 4.11}{\text{Item 32} - 4.11}$ $\frac{\text{Item 32} - 4.11}{\text{Item 33} - 4.14}$ $\frac{\text{Item 33} - 4.14}{\text{Item 33} - 4.15}$ $\frac{\text{AY 2012}}{\text{Item 34} - 4.15}$ $\frac{\text{AY 2012}}{\text{ELA: met}}$ Trending remains stable in the faculty evaluation of each item. Total Program Evaluation – Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 $\frac{\text{Item 35.1} - 4.87}{\text{Item 35.2} - 4.60}$ $\frac{\text{Item 35.2} - 4.60}{\text{Item 35.3} - 4.47}$ $\frac{\text{Item 35.4} - 4.64}{\text{Item 36.3} - 4.73}$ $\frac{\text{Item 36.1} - 4.47}{\text{Item 36.3} - 4.73}$ $\frac{\text{Item 37.1} - 4.67}{\text{Item 37.1} - 4.67}$ $\frac{\text{Item 37.2} - 4.40}{\text{Item 37.3} - 4.33}$ $\frac{\text{Item 37.4} - 4.47}{\text{Item 38.2} - 4.67}$ $\frac{\text{Item 38.3} - 4.67}{\text{Item 38.3} - 4.67}$		
Item 314 - 4.11 Item 32.1 - 4.11 Item 32.2 - 4.00 Item 32.3 - 4.11 Item 33.1 - 4.14 Item 33.2 - 4.14 Item 33.4 - 4.15 Item 33.4 - 4.15 Item 34.2 - 4.16 Item 34.2 - 4.16 Item 34.2 - 4.16 Item 34.3 - 4.19 Item 34.2 - 4.16 Item 34.3 - 4.19 Item 34.3 - 4.19 Item 35.4 - 4.16 Item 35.1 - 4.87 Item 35.2 - 4.60 Item 35.4 - 4.64 Item 35.4 - 4.64 Item 35.4 - 4.64 Item 36.3 - 4.40 Item 36.3 - 4.40 Item 36.3 - 4.40 Item 37.3 - 4.63 Item 37.3 - 4.63 Item 37.4 - 4.47 Item 37.4 - 4.47 Item 38.1 - 4.60 Item 38.2 - 4.67 Item 38.3 - 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,		
Item 32.1 - 4.11 Item 32.2 - 4.00 Item 33.1 - 4.14 Item 33.1 - 4.14 Item 33.2 - 4.14 Item 33.4 - 4.15 Item 34.1 - 4.19 Item 34.2 - 4.16 Item 34.2 - 4.16 Item 34.2 - 4.19 AY 2012 ELA: met Trending remains stable in the faculty evaluation of each item. Total Program Evaluation - Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 - 4.87 Item 35.2 - 4.60 Item 35.4 - 4.64 Item 36.4 - 4.64 Item 36.4 - 4.64 Item 37.1 - 4.67 Item 37.2 - 4.40 Item 37.2 - 4.40 Item 37.4 - 4.37 Item 38.1 - 4.60 Item 38.1 - 4.60 Item 38.1 - 4.60 Item 38.1 - 4.60 Item 38.1 - 4.67 Item 38.1 - 4.60 Item 38.1 - 4.67 Item 38.1 - 4.60 Item 38.2 - 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,		
Item 32.2 - 4.00 Item 32.3 - 4.11 Item 33.1 - 4.14 Item 33.2 - 4.14 Item 33.4 - 4.15 Item 34.1 - 4.19 Item 34.2 - 4.16 Item 34.3 - 4.19 ELA: met Trending remains stable in the faculty evaluation of each item. Total Program Evaluation - Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 - 4.87 Item 35.4 - 4.60 Item 35.4 - 4.61 Item 36.3 - 4.40 Item 36.4 - 4.61 Item 36.1 - 4.87 Item 36.2 - 4.53 Item 37.1 - 4.67 Item 37.2 - 4.40 Item 37.4 - 4.47 Item 37.4 - 4.47 Item 38.1 - 4.60 Item 38.1 - 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,		
Item 32.3 - 4.11 Item 33.1 - 4.14 Item 33.2 - 4.14 Item 33.3 - 4.14 Item 33.4 - 4.15 Item 34.1 - 4.19 Item 34.2 - 4.16 Item 34.2 - 4.16 Item 34.3 - 4.19 AY 2012 ELA: met Trending remains stable in the faculty evaluation of each item. Total Program Evaluation - Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 - 4.87 Item 35.4 - 4.64 Item 35.4 - 4.64 Item 35.4 - 4.64 Item 35.4 - 4.64 Item 35.4 - 4.67 Item 37.1 - 4.67 Item 37.4 - 4.47 Item 38.1 - 4.60 Item 38.1 - 4.60 Item 38.1 - 4.60 Item 38.2 - 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,		
Item 33.1 – 4.14 Item 33.2 – 4.14 Item 33.3 – 4.14 Item 33.4 – 4.15 Item 34.1 – 4.19 Item 34.2 – 4.16 Item 34.3 – 4.19 AY 2012 ELA: met Trending remains stable in the faculty evaluation of each item. Total Program Evaluation – Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 – 4.87 Item 35.2 – 4.60 Item 35.2 – 4.60 Item 35.4 – 4.64 Item 36.1 – 4.47 Item 36.2 – 4.53 Item 36.1 – 4.47 Item 36.3 – 4.73 Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,		
Item 33.2 - 4.14 Item 33.3 - 4.14 Item 33.4 - 4.15 Item 34.1 - 4.19 Item 34.2 - 4.16 Item 34.3 - 4.19 AY 2012 ELA: met Trending remains stable in the faculty evaluation of each item. Total Program Evaluation - Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 - 4.87 Item 35.2 - 4.60 Item 35.4 - 4.64 Item 36.3 - 4.47 Item 36.1 - 4.47 Item 36.2 - 4.53 Item 37.1 - 4.67 Item 37.4 - 4.47 Item 38.1 - 4.60 Item 38.1 - 4.67 Item 38.3 - 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,		
Item 33.3 - 4.14 Item 33.4 - 4.15 Item 34.2 - 4.16 Item 34.2 - 4.16 Item 34.3 - 4.19 AY 2012 ELA: met Continue to monitor. Trending remains stable in the faculty evaluation of each item. Total Program Evaluation – Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 - 4.87 Item 35.2 - 4.60 Item 35.4 - 4.64 Item 36.4 - 4.64 Item 36.4 - 4.64 Item 36.3 - 4.73 Item 37.1 - 4.67 Item 37.3 - 4.33 Item 37.4 - 4.47 Item 37.4 - 4.47 Item 37.4 - 4.60 Item 37.4 - 4.67 Item 38.1 - 4.60 Item 38.1 - 4.60 Item 38.1 - 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,		
Item 33.4 - 4.15 Item 34.1 - 4.19 Item 34.2 - 4.16 Item 34.3 - 4.19 AY 2012 ELA: met Trending remains stable in the faculty evaluation of each item. Total Program Evaluation - Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 - 4.87 Item 35.2 - 4.60 Item 35.4 - 4.64 Item 36.2 - 4.63 Item 36.2 - 4.63 Item 37.1 - 4.67 Item 37.2 - 4.40 Item 37.2 - 4.40 Item 37.4 - 4.47 Item 37.4 - 4.47 Item 38.1 - 4.66 Item 37.4 - 4.67 Item 38.1 - 4.67 Item 38.3 - 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,		
Item 34.1 - 4.19 Item 34.2 - 4.16 Item 34.3 - 4.19 AY 2012 ELA: met Trending remains stable in the faculty evaluation of each item. Total Program Evaluation - Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 - 4.87 Item 35.2 - 4.60 Item 35.4 - 4.64 Item 35.4 - 4.64 Item 36.3 - 4.73 Item 37.1 - 4.67 Item 37.2 - 4.40 Item 37.4 - 4.47 Item 37.4 - 4.47 Item 37.4 - 4.47 Item 37.4 - 4.47 Item 38.1 - 4.60 Item 38.1 - 4.60 Item 38.2 - 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,		
Item 34.2 - 4.16 Item 34.3 - 4.19 AY 2012 ELA: met Trending remains stable in the faculty evaluation of each item. Total Program Evaluation - Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 - 4.87 Item 35.2 - 4.60 Item 35.4 - 4.64 Item 36.1 - 4.47 Item 36.2 - 4.53 Item 37.1 - 4.67 Item 37.2 - 4.40 Item 37.4 - 4.47 Item 37.4 - 4.47 Item 38.1 - 4.60 Item 38.1 - 4.60 Item 38.1 - 4.67 Item 38.2 - 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	Item 33.4 – 4.15	
Item 34.3 – 4.19 AY 2012 ELA: met Trending remains stable in the faculty evaluation of each item. Total Program Evaluation – Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 – 4.87 Item 35.2 – 4.60 Item 35.3 – 4.40 Item 35.4 – 4.64 Item 36.1 – 4.47 Item 36.2 – 4.53 Item 36.3 – 4.73 Item 37.1 – 4.67 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.1 – 4.60 Item 38.2 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	Item 34.1 – 4.19	
AY 2012 ELA: met AY 2012 Continue to monitor. Trending remains stable in the faculty evaluation of each item. Continue to monitor. Total Program Evaluation – Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 – 4.87 Item 35.2 – 4.60 Item 35.3 – 4.40 Item 36.1 – 4.47 Item 36.1 – 4.47 Item 36.2 – 4.53 Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.1 – 4.67 Here State	Item 34.2 – 4.16	
ELA: met Continue to monitor. Trending remains stable in the faculty evaluation of each item. Continue to monitor. Total Program Evaluation – Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 – 4.87 Item 35.2 – 4.60 Item 35.4 – 4.64 Item 36.1 – 4.47 Item 36.2 – 4.53 Item 36.3 – 4.73 Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.1 – 4.67 Item 38.1 – 4.60 Item 38.1 – 4.60 Item 38.1 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4, Item 38.3 – 4.67	ltem 34.3 – 4.19	
Trending remains stable in the faculty evaluation of each item. Total Program Evaluation – Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 – 4.87 Item 35.2 – 4.60 Item 35.3 – 4.40 Item 36.1 – 4.47 Item 36.2 – 4.53 Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	<u>AY 2012</u>	<u>AY 2012</u>
Total Program Evaluation – Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4, 38.1-38.3 Item 35.1 – 4.87 Item 35.2 – 4.60 Item 35.3 – 4.40 Item 36.1 – 4.47 Item 36.2 – 4.53 Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.4 – 4.47 Item 38.1 – 4.67 Item 38.1 – 4.60 Item 38.1 – 4.67 Item 38.1 – 4.67 Item 38.1 – 4.67 Item 38.1 – 4.60 Item 38.3 – 4.67 Item 38.3 – 4.67 Item 38.3 – 4.67	ELA: met	Continue to monitor.
38.1-38.3 Item 35.1 – 4.87 Item 35.2 – 4.60 Item 35.3 – 4.40 Item 36.1 – 4.47 Item 36.2 – 4.53 Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	Trending remains stable in the faculty evaluation of each item.	
Item 35.1 – 4.87 Item 35.2 – 4.60 Item 35.3 – 4.40 Item 35.4 – 4.64 Item 36.1 – 4.47 Item 36.2 – 4.53 Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	Total Program Evaluation – Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4,	
Item 35.2 – 4.60 Item 35.3 – 4.40 Item 35.4 – 4.64 Item 36.1 – 4.47 Item 36.2 – 4.53 Item 36.3 – 4.73 Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	38.1-38.3	
Item 35.3 – 4.40 Item 35.4 – 4.64 Item 36.1 – 4.47 Item 36.2 – 4.53 Item 36.3 – 4.73 Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	Item 35.1 – 4.87	
Item 35.4 – 4.64 Item 36.1 – 4.47 Item 36.2 – 4.53 Item 36.3 – 4.73 Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	Item 35.2 – 4.60	
Item $36.1 - 4.47$ Item $36.2 - 4.53$ Item $36.3 - 4.73$ Item $37.1 - 4.67$ Item $37.2 - 4.40$ Item $37.3 - 4.33$ Item $37.4 - 4.47$ Item $38.1 - 4.60$ Item $38.2 - 4.67$ Item $38.3 - 4.67$ Faculty Evaluation of Nursing Course Items $17.1-17.4$, $18.1-18.3$, $19.1-19.4$,	ltem 35.3 – 4.40	
Item 36.2 – 4.53 Item 36.3 – 4.73 Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	ltem 35.4 – 4.64	
Item 36.3 – 4.73 Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	ltem 36.1 – 4.47	
Item 37.1 – 4.67 Item 37.2 – 4.40 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	ltem 36.2 – 4.53	
Item 37.2 – 4.40 Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	ltem 36.3 – 4.73	
Item 37.3 – 4.33 Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	ltem 37.1 – 4.67	
Item 37.4 – 4.47 Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	ltem 37.2 – 4.40	
Item 38.1 – 4.60 Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	ltem 37.3 – 4.33	
Item 38.2 – 4.67 Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	ltem 37.4 – 4.47	
Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	ltem 38.1 – 4.60	
Item 38.3 – 4.67 Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	ltem 38.2 – 4.67	
Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,		
Item 17.1 – 4.65	ltem 17.1 – 4.65	

Item 17.2 – 4.44 Item 17.3 – 4.45 Item 17.4 – 4.56	
Item 17.4 – 4.56	
ltem 18.1 – 4.49	
ltem 18.2 – 4.54	
ltem 18.3 – 4.59	
Item 19.1 – 4.72	
Item 19.2 – 4.53	
ltem 19.3 – 4.54	
ltem 19.4 – 4.68	
ltem 20.1 – 4.69	
ltem 20.2 – 4.69	
Item 20.3 – 4.71	
Adjunct Faculty Survey Items 11.1-11.4, 12.1-12.3, 13.1-13.4, 14.1-14.3	
Item 11.1 – 4.60	
Item 11.2 – 4.53	
Item 11.3 – 4.47	
ltem 11.4 – 4.60	
ltem 12.1 – 4.40	
ltem 12.2 – 4.40	
Item 12.3 – 4.20	
Item 13.1 – 4.53	
ltem 13.2 – 4.53	
Item 13.3 - 4.53	
ltem 13.4 – 4.57	
Item 14.1 – 4.53	
Item 14.2 – 4.53	
Item 14.3 – 4.33	
Trending remains stable in the student evaluation of each item.	
Student Evaluation of Nursing Course Items 44.1-44.4, 45.1-45.3, 46.1-46.4, Continue to monitor.	
47.1-47.3	
ltem 44.1 – 4.34	
Item 44.2 – 4.27	
Item 44.3 – 4.22	
ltem 44.4 – 4.43	

ltem 45.1 – 4.23	
Item 45.2 – 4.06	
Item 45.3 – 4.22	
Item 46.1 – 4.30	
ltem 46.2 – 4.22	
ltem 46.3 – 4.19	
ltem 46.4 – 4.40	
ltem 47.1 – 4.14	
ltem 47.2 – 4.05	
Item 47.3 – 4.17	
Student Exit Survey Items 31.1-31.4, 32.1-32.3, 33.1-33.4, 34.1-34.3	
ltem 31.1 – 4.31	
ltem 31.2 – 4.31	
ltem 31.3 – 4.32	
ltem 31.4 – 4.33	
ltem 32.1 – 4.29	
ltem 32.2 – 4.22	
ltem 32.3 – 4.28	
ltem 33.1 – 4.32	
ltem 33.2 – 4.30	
Item 33.3 – 4.30	
Item 33.4 – 4.31	
Item 34.1 – 4.31	
Item 34.2 – 4.29	
Item 34.3 – 4.29	
AY 2013	AY 2013
ELA: met	December 2012 Actions
December 2012 Recommendations/Activities	Training for PNCI will be scheduled for faculty.
The report to the NFO from the Simulation Committee indicated receipt of the PNCI.	Continue to monitor.
Total Program Evaluation – Faculty Survey Items 35.1-35.4, 36.1-36.3, 37.1-37.4,	
38.1-38.3	
Item 35.1 – 4.79	
ltem 35.2 – 4.53	
Item 35.3 – 4.56	
ltem 35.4 – 4.79	

		128

Item 36.1 – 4.79	
Item 36.2 – 4.68	
Item 36.3 – 4.89	
Item 37.1 – 4.63	
Item 37.2 – 4.42	
Item 37.3 – 4.47	
Item 37.4 – 4.63	
Item 38.1 – 4.84	
Item 38.2 – 4.79	
Item 38.3 – 4.89	
Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.3, 19.1-19.4,	
20.1-20.3	
Item 17.1 – 4.90	
Item 17.2 – 4.64	
Item 17.3 – 4.68	
Item 17.4 – 4.72	
Item 18.1 – 4.90	
Item 18.2 – 4.77	
Item 18.3 – 4.93	
Item 19.1 – 4.89	
Item 19.2 – 4.70	
Item 19.3 – 4.70	
Item 19.4 – 4.90	
Item 20.1 – 4.92	
Item 20.2 – 4.77	
Item 20.3 – 4.93	
Adjunct Faculty Survey Items 11.1-11.4, 12.1-12.3, 13.1-13.4, 14.1-14.3	
Item 11.1 – 4.64	
Item 11.2 – 4.54	
Item 11.3 – 4.36	
Item 11.4 – 4.64	
Item 12.1 – 4.57	
Item 12.2 – 4.54	
Item 12.3 – 4.50	
Item 13.1 – 4.57	

Item 13.2 – 4.52	
Item 13.3 – 4.46	
Item 13.4 – 4.68	
Item 14.1 – 4.64	
Item 14.2 – 4.64	
Item 14.3 – 4.63	
Student Evaluation of Nursing Course Items 44.1-44.4, 45.1-45.3, 46.1-46.4,	
47.1-47.3	
Item 44.1 – 4.47	
Item 44.2 – 4.43	
Item 44.3 – 4.38	
Item 44.4 – 4.50	
Item 45.1 – 4.34	
Item 45.2 – 4.17	
Item 45.3 – 4.37	
Item 46.1 – 4.44	
ltem 46.2 – 4.41	
ltem 46.3 – 4.38	
ltem 46.4 – 4.46	
ltem 47.1 – 4.35	
Item 47.2 – 4.24	
Item 47.3 – 4.37	
Student Exit Survey Items 31.1-31.4, 32.1-32.3, 33.1-33.4, 34.1-34.3	
Item 31.1 – 4.60	
Item 31.2 – 4.55	
Item 31.3 – 4.57	
Item 31.4 – 4.60	
Item 32.1 – 4.54	
Item 32.2 – 4.45	
Item 32.3 – 4.49	
Item 33.1 – 4.62	
Item 33.2 – 4.55	
Item 33.3 – 4.58	
Item 33.4 – 4.68	
Item 34.1 – 4.49	

Item 34.3 – 4.47	

Component	Expected Level of Achievement
Program length is congruent with the attainment of identified outcomes and consistent with the policies of the governing organization, state, and national standards, and best practices.	 80% of students will complete the program within 6 semesters (traditional), 6 semesters (baccalaureate to associate degree nurse accelerated pathway), 4 semesters (career ladder pathway) (changed to 70% from 80% for AY13) Program length is consistent with the policies of OCCC, state and national standards, and best practices. Program meets curriculum requirements of the Oklahoma Board of Nursing (OBN), Oklahoma State Regents Higher Education (OSRHE), and the National League of Nursing Accreditation Commission (ACEN)

Frequency of Assessment	Assessment Method
May of even years	Review of curriculum plan
	Review of tracking form

COMPONENT 4.7 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
AY 2010 ELA: partially met In AY10 the completion rate was as follows: Traditional (6 semesters) 80% BADNAP (6 semesters) 94% CLP (4 semesters) 78%	AY 2011 The completion rate decreased for AY11 in Traditional as it did with the BADNAP program with CLP showing an increase as compared to AY10. Will continue to monitor.

AY 2011

ELA: partially met

The traditional pathway has six semesters in which to complete the program. To provide complete data (covering the allotted six semesters), the classes admitted in spring and fall 2009 were utilized to obtain the annualized Completion/Graduation rate for the traditional pathway.

In spring 2009, 69 students were admitted to the first (core) nursing major course, NUR 1519, Nursing Process I (NPI). Thirteen students failed or withdrew from the course. The total becomes 56. Seven of the (13) students were subsequently readmitted with three graduating within the specified timeframe. The total is now 59. In the fall of 2009, one student progressing from NPI never returned and two new transfer students were admitted making the total 60. Twelve students failed NPII and one student withdrew for personal reasons. The total is now 47. Ten of the (13) students who withdrew in NPII were readmitted, and five completed the program within the specified timeframe. The total number of students becomes 52. In spring 2010, there were no new students admitted to NPIII, the total remains 52. One student failed NPIII, was subsequently readmitted but was unsuccessful in graduating. The total is now 51. In the fall of 2010, there were no new students admitted to NPIV, therefore the total remains 51. There were no withdrawals from NPIV with all 51 students graduating within the specified timeframe. The **Completion/Graduation Rate for the spring class of 2009 is 74%.**

In fall 2009, 68 students were admitted to NUR 1519, Nursing Process I (NPI). Eight students withdrew from the course, three for personal reasons and five due to academic failure. The total becomes 60. Four of the (8) students were readmitted with two graduating within the specified timeframe. The total is now 62. In the spring of 2010, one student progressing from NPI transferred out of state and there were no new students admitted. The total is now 61. Twenty-five students failed NPII in the spring of 2010. Nineteen students were readmitted and twelve students graduated within the allotted time. The total number of students becomes 48. There were no new students admitted to NPIII and no failures. The total remains 48. There were no withdrawals from NPIV with all 48 students graduating within the specified timeframe. The **Completion/Graduation Rate for the fall class of 2010 is 71%.**

The average Completion/Graduation Rate for the traditional pathway, academic year 2011, is 72.5%.

The career ladder pathway (CLP) has four semesters for completing the program. To provide complete data (covering the allotted four semesters), the class admitted in fall 2009 was utilized to obtain the Completion/Graduation rate for the CLP. In fall 2010, 43 students were admitted with advanced standing into NPIII, CLP. There were six academic failures, five of whom were readmitted and subsequently completed the program in the specified timeframe. The total becomes 42. In spring 2011, one student progressing from NPIII did attend NPIV due to personal reasons. The total is now 41. One student failed NPIV, was readmitted and completed the program in four semesters. The total remains 41. The Completion/Graduation Rate for the fall 2010 CLP class is 95%.

The baccalaureate to associate degree nurse accelerated pathway (BADNAP) has one summer term and four subsequent semesters for completing the program. Forty-four students were admitted in the summer of 2010 into NUR 1519, Nursing Process I (NPI). Ten students failed NPI with no readmits. The new total becomes 34. Five students failed NPII in the fall of 2010 with four students readmitting into the traditional pathway and two subsequently graduating within the specified timeframe. The total is now 31. One student failed NPIII in the last 8 week semester of fall 2010. This student was readmitted into the traditional program but failed to complete. The new total is 30. No students withdrew or failed from NPIV. The total completing the BADNAP cohort of summer 2010 was 30 for a Completion/Graduation Rate of 68%.

Program length is consistent with the policies of OCCC. Program length approved by the Oklahoma Board of Nursing (OBN) Fall 2009; Oklahoma State Regents Higher Education (OSRHE) Fall 2009; and the National League of Nursing Accreditation Commission (ACEN) on March 26, 2010. Changed from 72 hours in 5 semesters to 74-75 hours in 5 to 6 semesters.

Program meets curriculum requirements of the Oklahoma Board of Nursing (OBN), Oklahoma State Regents Higher Education (OSRHE), and the National League of

Nursing Accred	itation Comn	nission (ACI	EN)			
Total cred	its in the cu	rriculum ar	e 74-75 and	are distribute	ed as follows:	
Program	Nursing	Other	Total Creatite	% Nursing		
Traditional	Credits 36	Credits 38-39	Credits 74-75	50	-	
BADNAP	36	38-39	74-75	50	-	
CLP	36	38-39	74-75	50	-	
AY 2012	00	00 00	1410	00		AY 2012
ELA: partially	met					Admission criteria for the BADNAP program, was revised as a
The traditional		six semeste	ers in which	to complete the	e program. To	result of a recommendation by the Student Success Committee.
provide comple	te data (cove	ering the allo	otted six sen	nesters), the cla	asses admitted in	The BADNAP application process now includes the TEAS test as
spring and fall 2			ain the annu	alized Comple	tion/Graduation	criteria for admission. Students must obtain a minimum of 70% to
rate for the trad	itional pathw	ay.				be eligible for admission to BADNAP. (Approval was received from
In opting 2010	70 atudanta	wara admitt	ad to the fire	at (aara) auraia		the OCCC Curriculum Committee and Student Success
In spring 2010,					cessfully complete	Committee)
	•	· · ·			,	
· · ·	the course (12 failures + 1 personal withdrawal). The total becomes 59. Two of the (13) students were subsequently readmitted with two graduating within the specified					
timeframe. The total is now 61. Eleven students failed NPII which makes the total						
now 50. Eight of the (11) students who unsuccessful in NPII were readmitted, and						
six completed th	he program v	within the sp	ecified time	frame. The tot	al number of	
					admitted to NPIII,	
the total remain						
readmitted and		•	•			
					total remains 55.	
There were no				•	ng class of 2010 is	
76.38%.		ompletion/G		ate for the spir	19 0855 01 2010 15	
10.0070.						
In fall 2010, 69	students we	re admitted	to NUR 151	9, Nursing Pro	cess I (NPI). Ten	
students withdr						
					were readmitted	
•					In the spring of	
2011, seven stu						
reaumilieu ano	seven slude	nis graduat		e anotteu time.	The total number	

of students becomes 60. There was one student who transferred in to NPIII making the total 61. One student withdrew for personal reasons from NPIII and did not readmit or graduate in the allotted time. The total is now 60. There were no withdrawals from NPIV with all 60 students graduating within the specified timeframe. The Completion/Graduation Rate for the fall class of 2010 is 86.95%.	
The average Completion/Graduation Rate for the traditional pathway, calendar year 2010, is 81.66%.	
The career ladder pathway (CLP) has four semesters for completing the program. To provide complete data (covering the allotted four semesters), the class admitted in fall 2011 was utilized to obtain the Completion/Graduation rate for the CLP. In fall 2011, 49 students were admitted with advanced standing into NPIII, CLP. There were 5 students who did not progress (4 failures + 1 personal withdrawal). The total is now 44. Three students were readmitted and two subsequently completed the program in the specified timeframe. The total becomes 46. In spring 2012, one student withdrew prior to the start of NPIV due to personal reasons but was subsequently readmitted and completed the program in the allotted time. The total remains 46. One student failed NPIV, was readmitted and completed the program in four semesters. The total graduating within the allotted time is 46. The Completion/Graduation Rate for the fall 2011 CLP class is 93.87%.	
The baccalaureate to associate degree nurse accelerated pathway (BADNAP) has one summer term and four subsequent semesters for completing the program. To provide complete data (covering the allotted four semesters + one summer), the class admitted in the summer of 2011 was utilized to obtain the Completion/Graduation rate for the BADNAP.	
Fifty-six students were admitted in the summer of 2011 into NUR 1519, Nursing Process I (NPI), BADNAP. Seven students failed NPI with no readmits. The new total becomes 49. Two students failed NPII in the early 8 weeks fall semester of 2011 with two students readmitting into the traditional pathway and one subsequently graduating within the specified timeframe. The total is now 48. Two students failed NPIII in the last 8 week semester of fall 2011. Both students were readmitted into the traditional program and completed within the allotted time. The	

total remains 48. Two students withdrew from NPIV with one student readmitting and graduating within the allotted time. The number is graduating within the allotted time is 47. The Completion/Graduation Rate for the BADNAP cohort of summer 2011 is 83.92%.						
Program length is consistent with the policies of OCCC, state and national standards and best practices.					Continue to monitor	
Program meets curriculum requirements of the Oklahoma Board of Nursing (OBN), Oklahoma State Regents Higher Education (OSRHE), and the National League of Nursing Accreditation Commission (ACEN) Total credits in the curriculum are 74-75 and are distributed as follows:				Curriculum revisions approved by OBN, ACEN, OSRHE. Continue to monitor		
Program	Nursing	Other	Total	% Nursing		
	Credits	Credits	Credits	-	-	
Traditional	36	38-39	74-75	50	-	
BADNAP	36	38-39	74-75	50	-	
CLP	36	38-39	74-75	50		
<u>AY 2013</u>						<u>AY 2013</u>
ELA:					Awaiting results.	
??% of students will complete the program within 6 semesters (traditional), 6						
semesters (baccalaureate to associate degree nurse accelerated pathway), 4						
semesters (career ladder pathway)						
Program length is consistent with the policies of OCCC, state and national standards						
and best practices. Program meets curriculum requirements of the Oklahoma Board of Nursing (OBN),					Continue to monitor.	
Oklahoma State Regents Higher Education (OSRHE), and the National League of						
Nursing Accreditation Commission (ACEN)						
Total credits in the curriculum are 74-75 and are distributed as follows:				l are distribute		
Program	Nursing	Other	Total	% Nursing		
Ŭ	Credits	Credits	Credits	Ŭ		
Traditional	36	38-39	74-75	50	1	
BADNAP	36	38-39	74-75	50	1	
CLP	36	38-39	74-75	50		

Component	Expected Level of Achievement
Practice learning environments are appropriate for student learning and support the achievement of student learning and program outcomes; current written agreements specify expectations for all parties and ensure the protection of students. 4.8a Practice learning environments 4.8b Written agreements	 4.8a Mean score of 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course: Item 22.1-22.2 Mean score of 3.5 on a scale of 5.0 on the Adjunct Faculty Survey: Items 15.1-15.2 Mean score of 3.5 on a scale of 5.0 on the Student Evaluation of Nursing Course: Item 51.1-51.2 (AY12 49.1-49.2) Mean score of 3.5 on a scale of 5.0 on the Student Exit Survey: Item 36.1-36.2 Mean score of 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Item 39.1-39.2 Mean score of 3.5 on a scale of 5.0 on the OCCC Nursing Advisory Committee Survey: Item 6 Mean score of 2.8 on a scale of 4.0 on the NESA Faculty Evaluation of Clinical Experience Survey: Item 6 4.8b 100% of contracts with clinical agencies are current, specify student/faculty/staff expectations and ensure the safety of students.

Frequency of Assessment	Assessment Method
4.8a	4.8a
Faculty Evaluation of Nursing Course:	 Review and analysis of the Faculty Evaluation of Nursing
 May - data collected by NEC 	Course by NEC, NCC and NFO
 January – reviewed by NEC 	 Review and analysis of the Adjunct Faculty Survey by NEC,
March – reviewed by NCC	NCC and NFO
April - reviewed by NFO	 Review and analysis of the Student Evaluation of Nursing Course by NEC, NCC and NFO
Adjunct Faculty Survey:	 Review and analysis of Student Exit Survey by NEC, NCC
May - data collected by NEC	and NFO
 January – reviewed by NEC 	 Review and analysis of the Total Program Evaluation –
March – reviewed by NCC	Faculty Survey by NEC, NCC and NFO
April - reviewed by NFO	 Review and analysis of the OCCC Nursing Advisory

Student Evaluation of Nursing Course:

- November/April data collected by NEC
- October reviewed by NEC
- November reviewed by NCC
- December reviewed by NFO

Student Exit Survey:

- November/April data collected by NEC
- March reviewed by NEC and recommendations forwarded to NCC
- April reviewed by NCC and recommendations forwarded to NFO
- May reviewed by NFO

Total Program Evaluation – Faculty Survey:

- May data collected by NEC
- January reviewed by NEC
- March reviewed by NCC
- April reviewed by NFO

OCCC Nursing Advisory Committee Survey

- October/March data collected by NEC
- October reviewed by NEC
- November reviewed by NCC
- December reviewed by NFO

NESA Faculty Evaluation of Clinical Experience

- November/April data collected by NEC
- **November** reviewed by NEC
- December reviewed by NFO

NESA Student Evaluation of Clinical Experience

- November/April data collected by NEC
- November reviewed by NEC
- December reviewed by NFO

Committee Survey by the NEC, NCC, and NFO

- Administration of NESA Evaluation surveys:
 - Faculty Evaluation of Clinical Experience
 - Student Evaluation of Clinical Experience
- Review and analysis of NESA Evaluation Surveys by NEC and NFO

4.8b	
Upon initiation and annually (June/July)	4.8b
	List of contracts and expiration dates maintained in CAC and
	NPD's offices. Contracts reviewed by CAC and NPD.

COMPONENT 4.8 RESULTS

Actions for Program Development,
Maintenance, or Revision
AY2011
4.8a
Continue to monitor

 4.8b ELA: met 100% of agency contracts are current and do specify expectations and responsibilities of all parties. Standard contract developed by Oklahoma Hospital Association (OHA). As well as other contracts as required by individual facilities, following review/recommendations by OCCC Legal Counsel. 	4.8b Continue to monitor agency contracts and to work with facilities to determine the need for new/additional contracts. NPD, NPAD and CAC remain active in the NESA organization to ensure ongoing affiliation with new, as well as existing, clinical agencies.
 <u>AY 2012</u> 4.8a ELA: met Data supports that practice learning environments are appropriate for student learning and support the achievement of student learning and program outcomes. <u>August 2011 Recommendations/Activities</u> The Clinical Hub was introduced to faculty with all clinical requests to be entered into the Clinical HuB Portal. <u>December 2011 Recommendations/Activities</u> Orientation for Clinical HUB Portal is scheduled. <u>January 2012 Recommendations/Activities</u> Health fair opportunities available for students to earn service learning hours. <u>August 2012 Recommendations/Activities</u> Student participation was urged for the Alzheimer's Walk during the NFO meeting for Service Learning. Faculty Evaluation of Nursing Course Items 22.1-22.2 Item 22.1 – 4.55 Item 22.2 – 4.56 Adjunct Faculty Survey Items 15.1-15.2 Item 15.1 – 4.67 Item 15.2 – 4.67 Student Evaluation of Nursing Course Items 49.1-49.2 Item 49.1 – 4.22 Item 49.2 – 4.21 Student Exit Survey Items 36.1-36.2 Item 36.1 – 4.34 Item 36.2 – 4.37 Total Program Evaluation – Faculty Survey Items 39.1-39.2 Item 39.1 – 4.87 	AY 2012 4.8a Continue to monitor <u>December 2011 Actions</u> Team Leaders are to attend orientation on 1/9/12. They may bring another faculty with them to learn how to use the HUB.

Ham 20.0 4.07	
Item 39.2 – 4.87	
OCCC Nursing Advisory Committee Survey Item 6 Item 6 – 4.67	
NESA Faculty Evaluation of Clinical Experience Items 5-6 Item 5 – 3.93	
1 = 10000000000000000000000000000000000	
Student Evaluation of Clinical Experience Item 6 Item 6 – 3.37	
item 6 – 5.57	
4.8b ELA: met	4.8b
100% of agency contracts are current and do specify expectations and	Continue to monitor agency contracts and to work with facilities to
responsibilities of all parties.	determine the need for new/additional contracts.
Standard contract developed by Oklahoma Hospital Association (OHA). As well as	NPD, NPAD and CAC remain active in the NESA organization to
other contracts as required by individual facilities, following review/recommendations	ensure ongoing affiliation with new, as well as existing, clinical
by OCCC Legal Counsel.	agencies.
AY 2013	AY 2013
4.8a ELA: met	4.8a
November 2012 Recommendations/Activities	November 2012 Actions
Faculty requested during NFO that the lab carry current items that students are using	Faculty are to compile a list of items they would like to see in the
in the clinical areas.	labs.
Faculty Evaluation of Nursing Course Items 22.1-22.2	
Item 22.1 – 4.92	
Item 22.2 – 4.92	
Adjunct Faculty Survey Items 15.1-15.2	
ltem 15.1 – 4.68	
ltem 15.2 – 4.68	
Student Evaluation of Nursing Course Items 49.1-49.2	
ltem 49.1 – 4.45	
ltem 49.2 – 4.44	
Student Exit Survey Items 36.1-36.2	
Item 36.1 – 4.60	
ltem 36.2 – 4.61	
Total Program Evaluation – Faculty Survey Items 39.1-39.2	
Item 39.1 – 4.89	

Item 39.2 – 4.89 OCCC Nursing Advisory Committee Survey Item 6 Item 6 – 4.91 NESA Faculty Evaluation of Clinical Experience Items 5-6 Item 5 – 3.77 Item 6 – 3.79 Student Evaluation of Clinical Experience Item 6 Item 6 – 3.48	
4.8b ELA: met 100% of agency contracts are current and do specify expectations and responsibilities of all parties.	4.8b Continue to monitor.
Standard contract developed by Oklahoma Hospital Association (OHA). As well as other contracts as required by individual facilities, following review/recommendations by OCCC Legal Counsel.	

Component	Expected Level of Achievement
Student clinical experiences reflect best	 Mean score of 2.8 on a scale of 4.0 on the NESA Faculty Evaluation of Clinical Experience: Item 7,8 Mean score of 3.5 on a scale of 5.0 on the Adjunct Faculty Survey: Item 16, 17
practices and nationally established patient health and safety goals.	 Mean score of 2.8 on a scale of 4.0 on the NESA Student Evaluation of Clinical Experience: Item 7,8 Mean score of 3.5 on a scale of 5.0 on the Student Exit Survey: Item 38, 39

Frequency of Assessment	Assessment Method
NESA Faculty Evaluation of Clinical Experience	 Administration of NESA Evaluation surveys:
November/April -	Faculty Evaluation of Clinical Experience
data collected by NEC	Student Evaluation of Clinical Experience
November – reviewed by NEC	Review and analysis of NESA Evaluation Surveys by NEC and NFO
December – reviewed by NFO	Review and analysis of Adjunct Faculty Survey by NEC, NCC and

	NFO	
•	Review and analysis of Student Exit Survey by NEC, NCC and NFO	

 NESA Student Evaluation of Clinical Experience November/April - data collected by NEC November – reviewed by NEC December – reviewed by NFO 	Review and analysis of Student Exit Survey by NEC, NCC and NFO
 Adjunct Faculty Survey May – data collected by NEC September – reviewed by NEC with recommendations to NFO October – reviewed by NFO 	
 Student Exit Survey November/April – data collected by NEC March – reviewed by NEC April – reviewed by NFO 	

COMPONENT 4.8.1 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2011</u>	<u>AY2011</u>
ELA: met	Will continue to monitor with close monitoring of the facilities below
All clinical facilities were rated above 2.8 on the NESA evaluations for both items 7	the ELA.
and 8 except for three facilities who did not meet ELA for one item for either Fall 10	
or Spring 11 semesters by faculty and students. No trending for these facilities seen.	
NESA Faculty Evaluation of Clinical Experience Items 7,8	
ltem 7 – 3.50	
ltem 8 – 3.58	
Student Evaluation of Clinical Experience Items 7,8	
ltem 7 – 3.52	
ltem 8 – 3.31	
Adjunct Faculty Survey Items 16, 17	

Item 16 – 4.55	
10 - 4.55	
Student Exit Survey Items 38, 39	
Item 38 – 4.25	
Item 39 – 4.14	
<u>AY 2012</u>	AY 2012
ELA: met	Will continue to monitor with close monitoring of the facilities below
All clinical facilities were rated above 2.8 on the NESA evaluations for both items 7	the ELA.
and 8 except for three facilities who did not meet one item or both for Spring 11 by	
faculty and students. No trending for these facilities seen.	
In Spring 2010 items were added to the NESA Faculty and Student surveys to	
support Standard IV Component 4.8.1. These items asked if the faculty's and	The recommendation forwarded to NFO by the NEC asked that
students' clinical experiences reflect best practices and nationally established health	options be discussed for improvement and how to share concerns
and safety goals. Overall trending reflected in the Faculty surveys has increased	with clinical facilities. Ideas brought forward from NEC meeting
while the trending reflected in the Student surveys has slowly decreased. While	discussion and shared with NFO included having students perform
meeting ELA, this is still a concern. NEC discussion brought forward that since we	small QI projects that could be presented to unit directors and staff
have been including best practice and health and safety goals within our curriculum	on students' assigned nursing units and also for students to present
the students are more able to see when it is not evidenced at their clinical facility.	in post conference as a learning activity. From NFO discussion
The fact that the data is trending downward may be good in that the students are	suggestions included having students review the bulletin boards
picking up the problems on the units to which they are assigned, However, students	usually found on the clinical facilities' nursing units that address
did not provide comments to explain the data reflected.	safety and evidence-based practice issues and ask questions of
NESA Faculty Evaluation of Clinical Experience Items 7,8	the staff. Continue to seek options for improvement. Continue to
Item 7 – 3.69	monitor.
ltem 8 – 3.75	
Student Evaluation of Clinical Experience Items 7,8	
ltem 7 – 3.48	
ltem 8 – 3.34	
Adjunct Faculty Survey Items 16, 17	
ltem 16 – 4.50	
ltem 17 – 4.67	
Student Exit Survey Items 38, 39	
Item 38 – 4.29	
Item 39 – 4.35	
AY 2013	AY 2013
ELA: met	OCCC No longer is sending students to Grace Living Center South.

The overall mean for all facilities was above 2.8 with minor variation with the exception of Grace Living Center South. The overall mean for the facility was 2.05 (see appendix). Survey results shared with nursing teams. Working to improve facility response rates.	Continue to monitor. Continue to work to improve response ate to NESA surveys.
NESA Faculty Evaluation of Clinical Experience Items 7,8	
Item 7 – 3.61	
Item 8 – 3.72	
Adjunct Faculty Survey Items 16, 17	
Item 16 – 4.50	
Item 17 – 4.57	
Student Evaluation of Clinical Experience Items 7,8	
Item 7 – 3.54	
Item 8 – 3.54	
Student Exit Survey Items 38, 39	
Item 38 – 4.63	
Item 39 – 4.70	

Component	Expected Level of Achievement
Learning activities,	Not Applicable – No Distance Education Program
instructional materials,	
and evaluation methods	
are appropriate for the	
delivery format and	
consistent with student	
learning outcomes.	

Frequency of Assessment	Assessment Method
Not Applicable	Not Applicable

COMPONENT 4.9 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision

STANDARD V: RESOURCES

Fiscal, physical, and learning resources promote the achievement of the goals and outcomes of the nursing education unit.

Component	Expected Level of Achievement
Fiscal resources are sufficient to ensure the achievement of the nursing education unit outcomes and commensurate with the resources of the governing organization.	 5.1a The nursing program budget will be adequate to meet program purposes The nursing program budget will be comparable with other educational units at OCCC 5.1b Mean score of at least 3.5 on a scale of 5.0 of the Total Program Evaluation-Faculty Survey: Item 43, 44, 45, 46
 5.1a Budget adequacy and comparability 5.1b Faculty evaluation of budgetary adequacy 	

Frequency of Assessment	Assessment Method
 5.1a March Reviewed annually: February/March during the faculty appraisal process 5.1b 	 5.1a Each March faculty submit a Faculty Fiscal Resource Planning form to NFO for prioritization and submission to NPD Comparison of budget requests with budget allotments Faculty appraisal process
 Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC with recommendations to NFO October – reviewed by NFO 	 5.1b Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO. NFO recommendations forwarded to NPD who reports to Dean of HP division

COMPONENT 5.1 RESULTS

		Results of l (including a		Actions for Program Development, Maintenance, or Revision			
<u>AY 2011</u>							<u>AY2011</u>
ELA 5.1a:				5.1a			
The nursing OCCC.	g program b	udget was found	l comparable	Travel/continuing education was addressed by R. Klepper. Consensus of the membership was that faculty,			
• Co	omparison of	f Carl Perkins Al	lotment				who has not been funded, will be high considerations for
				nually. Carl Perki			fund allocation. Continue to monitor.
				received \$8,928.4	7; and EMS rece	eived	
\$19,390.84	for a total for	or Health Profes	sions of \$13	7,390.87			
	Veer	Carl Darkina Al	laturant	Carl Darking All	latmant Tatal		
	Year	Carl Perkins Al	lotment	Carl Perkins All HP Div			
-	AY11	105,201.0	16	137,43			
L	ATT	105,201.0	10	157,45	5.04		
Health Prof salaries is r at a lower s professions who are als	fession's pro members of salary than t s faculty and so members fference is \$	grams, which do the nursing facu hose faculty who	bes affect the lity who do n b have their i program dir faculty. onth difference	9 month	fecting the different ter's degree and of other health ealth profession p 10 month	ences in are paid	
Fiscal	9 mo	10 mo	12 mo	other HP	other HP		
Year	Nursing	nursing	nursing	faculty	faculty		
2011	\$43,544	\$47,556	N/A	\$50,784	\$53,814		
		Ų.		010 NFO regardin inuing education.	0 0		

Academic Year	Faculty/ Director	Clerical/ Staff	Materials and	Services Budget	Dues/ Organizational	Travel/ Continuing	
AY2011	Salaries 1,139,238	Salaries 27,500	Supplies \$6,250	Pool \$200	Fees \$6,110	Education \$7,200	5.1b Continue to monitor
Item Item Item Item	43 - 3.87 44 - 3.93 45 - 3.69 46 - 3.81		Survey Item		,		
Budget reque	orogram budg ests verses a				d among other unit arl Perkins allotme		AY 2012 5.1a Continue to monitor
ELA 5.1a: mo The nursing p Budget reque otals \$47,899	program budg ests verses a 9.93.		e reviewed a	annually. Ca	•	nt for AY12	5.1a
A 5.1a: mo e nursing p dget reque als \$47,899	program budg ests verses a 9.93.	lotments ar	e reviewed a	annually. Ca	arl Perkins allotme	nt for AY12	5.1a

Fiscal Year	9 mo Nursing	10 mo Nursing	12 mo Nursing	9 mor Other facul	HP Other	HP	
2011	\$43,544	\$47,556	N/A	\$50,7	\$50,784 \$53,814		
2012	\$ 42,632	\$ 49,428	N/A	\$ 49,2	259 \$54,6	642	
Academic	dget for AY2 Faculty/	Clerical/	Materials	Services	Dues/	Travel/	
Year	Director Salaries	Staff Salaries	and Supplies	Budget Pool	Organizational Fees	Continuing Education	
AY2011	1,139,238	27,500	\$6,250	\$200	\$6,110	\$7,200	
AY2012	1,158,247	27,500	\$6,250	\$200	\$6,110	\$7,200	
ELA 5.1b: m		27,500	ψ0,230	φ200	ψ0,110	ψ1,200	5.1b
ELA 5.1b: m Concerns co continually u Fotal Progra Item Item Item	net	to the recru y salary issu	litment and l	retention of	quality nursing fac		5.1b Continue to monitor.
ELA 5.1b: m Concerns co continually u Fotal Progra Item Item Item AY 2013	net ntinue related nderscored b am Evaluatio 1 43 – 3.93 1 44 – 3.87 1 45 – 3.93 1 46 – 3.80	to the recru y salary issu	litment and l	retention of	quality nursing fac		Continue to monitor.
ELA 5.1b: m Concerns co continually u Total Progra Item Item Item Item AY 2013 ELA 5.1a: m	net ntinue related nderscored b am Evaluatio 1 43 – 3.93 1 44 – 3.87 1 45 – 3.93 1 46 – 3.80 1 46 – 3.80	I to the recru y salary issu n-Faculty S	uitment and i es. urvey Items	etention of 3 43, 44, 45	quality nursing fac	culty that are	Continue to monitor.
ELA 5.1b: m Concerns co continually u Fotal Progra Item Item Item AY 2013 ELA 5.1a: m The nursing DCCC. Carl	net ntinue related nderscored b am Evaluatio 1 43 – 3.93 1 44 – 3.87 1 45 – 3.93 1 46 – 3.80 net program budg Perkins	I to the recru y salary issu n-Faculty S	uitment and r es. Survey Items	etention of 3 43, 44, 45 ithin the uni	quality nursing fac	r units at	Continue to monitor. AY 2013 5.1a

The nursing program budget is adequate to meet program purposes and is comparable with other educational units at OCCC.

BADNAP Faculty went to 12 month contracts for AY2013.

Nursing Faculty Salaries:

Fiscal Year	9 month Nursing	10 month nursing	12 month nursing	9 month other HP faculty	10 month other HP faculty
2011	\$43,544	\$47,556	N/A	\$50,784	\$53,814
2012	\$ 42,632	\$ 49,428	N/A	\$ 49,259	\$54,642
2013	\$42,873	\$50,210	\$59,080	\$52,358	\$55,741

Nursing Budget for AY2011-AY2013

Academic Year	Faculty/ Director Salaries	Clerical/ Staff Salaries	Materials and Supplies	Services Budget Pool	Dues/ Organizational Fees	Travel/ Continuing Education
AY2011	1,139,238	27,500	\$6,250	\$200	\$6,110	\$7,200
AY2012	1,158,247	27,500	\$6,250	\$200	\$6,110	\$7,200
AY2013	1,186,364	51,208	\$6,250	\$200	\$6,110	\$7,200

ELA 5.1b: met

Total Program Evaluation-Faculty Survey Items 43, 44, 45, 46

ltem 43 – 4.05
ltem 44 – 4.11
ltem 45 – 3.89
ltem 46 – 3.68



Continue to monitor.

Component	Expected Level of Achievement
Physical resources (classrooms, laboratories, offices, etc.) are sufficient to ensure the achievement of the nursing education unit outcomes and meet the needs of the faculty, staff, and students.	 5.2a Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 41, 42, 43 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 47, 48, 49 5.2b Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 44, 45, 46 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 50, 51, 52 5.2c Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 47 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 50, 51, 52
5.2a Classroom and common space 5.2b Learning resource space 5.2c Office space	

Frequency of Assessment	Assessment Method
 5.2b Student Exit Survey: November/April – data collected by NEC September – reviewed by NEC October – reviewed by NFO 	 5.2a Review and analysis of Student Exit Survey by NEC and NFO. Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO.
 Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC October – reviewed by NFO 	

5.2b	5.2b
Student Exit Survey:	 Review and analysis of Student Exit Survey by NEC and NFO.
 November/April – data collected by NEC 	Review and analysis of Total Program Evaluation-Faculty Survey by
• September – reviewed by NEC	NEC and NFO.
October – reviewed by NFO	
 Total Program Evaluation-Faculty Survey: May – data collected by NEC 	
 May – data collected by NEC September – reviewed by NEC 	
 October – reviewed by NEC October – reviewed by NFO 	
5.2c	5.2c
Student Exit Survey:	 Review and analysis of Student Exit Survey by NEC and NFO.
November/April – data collected by NEC	Review and analysis of Total Program Evaluation-Faculty Survey by
• September – reviewed by NEC	NEC and NFO.
October – reviewed by NFO	
Total Program Evaluation-Faculty Survey:	
May – data collected by NEC	
• September – reviewed by NEC	
October – reviewed by NFO	

COMPONENT 5.2 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011	AY2011
ELA 5.2a: met	5.2a
December 2010 Recommendations/Activities	December 2010 Actions
M. Holland reported the creation of the Campus Lab Course on ANGEL.	The Campus Lab ANGEL course will be completed during the
January 2011 Recommendations/Activities	Christmas break.
In January 2011, M. Holland reported a process change for the Campus Lab related	January 2011 Actions
to scheduling and student referral to the NFO. She also reported information related	Faculty to use forms provided online to request lab services
to the Campus lab Guidelines, ANGEL course, and Equipment received.	Continue to monitor

May 2011 Decommondations/Activities	May 2011 Actions
May 2011 Recommendations/Activities	May 2011 Actions IV Simulator orientation scheduled 5/31/11.
Campus Lab updates provided to the NFO membership.	IV Simulator orientation scheduled 5/31/11.
Classroom and Common Space	
Student Exit Survey Items 41, 42, 43	
Item 41 – 4.33	
Item 42 – 4.16	
Item 43 – 4.26	
Total Program Evaluation-Faculty Survey Items 47, 48, 49	
ltem 47 – 4.13	
Item 48 – 4.00	
Item 49 – 3.90	
	5 0h
ELA 5.2b: met	5.2b Continue to monitor
Learning Resources	Continue to monitor
Student Exit Survey Items 44, 45, 46	
Item 44 – 4.16	
Item 45 – 3.90	
Item 46 – 4.02	
Total Program Evaluation-Faculty Survey Item 50, 51, 52	
ltem 50 – 4.00	
Item 51 – 3.53	
Item 52 – 3.76	
ELA 5.2c: met	5.2c
Office Space	Continue to monitor
Student Exit Survey Item 47	
Item 47 – 4.11	
Total Program Evaluation-Faculty Survey Item 53	
ltem 53 – 4.25	
AY 2012 FLA 5 201 mot	<u>AY 2012</u> 5.2a
ELA 5.2a: met	
Upward trend noted due to improvements in physical space providing more student	Continue to monitor.
friendly areas. Reorganization of the campus lab provided more lab space which	
improved traffic flow and increased student opportunities for practice.	
Classroom and Common Space	
Student Exit Survey Items 41, 42, 43	

Item 41- 4.34	
Item 42 – 4.26	
ltem 43 – 4.27	
Total Program Evaluation-Faculty Survey Items 47, 48, 49	
ltem 47 – 4.60	
ltem 48 – 4.60	
ltem 49 – 4.53	
ELA 5.2b: met	5.2b
Learning Resources	Continue to monitor
Student Exit Survey Items 44, 45, 46	
ltem 44 – 4.23	
ltem 45 – 4.14	
ltem 46 – 4.22	
Total Program Evaluation-Faculty Survey Item 50, 51, 52	
ltem 50 – 4.33	
ltem 51 – 4.07	
ltem 52 – 4.27	
ELA 5.2c: met	5.2c
Office Space	Continue to monitor
Student Exit Survey Item 47	
1 tem 47 - 4.32	
Total Program Evaluation-Faculty Survey Item 53	
10000 + 10000 + 1000000 + 10000000 + 1000000 + 100000000	
AY 2013	AY 2013
ELA 5.2a: met	5.2a
Classroom and Common Space	Continue to monitor.
Student Exit Survey Items 41, 42, 43	
ltem 41 – 4.68	
ltem 42 – 4.50	
1 tem 43 - 4.41	
Total Program Evaluation-Faculty Survey Items 47, 48, 49	
Item $47 - 4.47$	
1000 term = 10000 term = 10000 term = 10000 term = 100000 term = 100000 term = 100000 term = 100	

ltem 49 – 4.16	
ELA 5.2b: met Learning Resources Student Exit Survey Items 44, 45, 46	5.2b Continue to monitor.
Item 44 – 4.51 Item 45 – 4.42 Item 46 – 4.67	
Total Program Evaluation-Faculty Survey Item 50, 51, 52 Item 50 – 4.37 Item 51 – 4.11 Item 52 – 4.42	
ELA 5.2c: met Office Space Student Exit Survey Item 47 Item 47 – 4.46 Total Program Evaluation-Faculty Survey Item 53 Item 53 – 4.47	5.2c Continue to monitor.

Component	Expected Level of Achievement
Learning resources and technology are selected by the faculty and are comprehensive, current, and accessible to faculty and students, including those	 5.3a College Wide Learning Resources (Communications Lab, Math Lab) Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 49.1-49.4, 50.1-50.4 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 54.1-54.4, 55.1-55.4 5.3b
engaged in alternative methods of delivery.	 Library Resources Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 51.1-51.4 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 56.1-56.4

5.3a	5.3c
College Wide:	Nursing Program Specific (Computer Lab, Nursing Campus Clinical Lab, and HPS Lab)
 Communications Lab Math Lab 	 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 53.1-53.4, 54.1-54.4, 55.1-55.4 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 57.1-57.4, 58.1-58.4, 59.1-59.4, 60
5.3b	
Library Resources	
5.3c	
Nursing Program Specific:	
Computer Lab	
 Nursing Campus 	
Clinical Laboratory	
Human Patient	
Simulator Lab	

Frequency of Assessment	Assessment Method
 5.3a Student Exit Survey: November/April – data collected by NEC September – reviewed by NEC October – reviewed by NCC November – reviewed by NFO 	 5.3a Review and analysis of Student Exit Survey by NEC, NCC, and NFO Review and analysis of Total Program Evaluation-Faculty Survey by NEC, NCC, and NFO
Total Program Evaluation-Faculty Survey: • May – data collected by NEC • September – reviewed by NEC • October – reviewed by NCC • November – reviewed by NFO 5.3b Student Exit Survey: • November – reviewed by NEC • September – reviewed by NEC • October – reviewed by NEC • November – reviewed by NEC • October – reviewed by NEC • October – reviewed by NEC • November – reviewed by NEC • November – reviewed by NFO	 5.3b Review and analysis of Student Exit Survey by NEC, NCC, and NFO Review and analysis of Total Program Evaluation-Faculty Survey by NEC, NCC, and NFO

 Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC October – reviewed by NCC November – reviewed by NFO Reviews are made as a result of survey data and on an ongoing basis as needs arise. 5.3c Student Exit Survey: November/April – data collected by NEC September – reviewed by NEC October – reviewed by NEC November/April – data collected by NEC September – reviewed by NEC October – reviewed by NEC November – reviewed by NEC November – reviewed by NEC 	 HP Division's library liaison recommends books and media to be considered for removal to the nursing faculty. NCC reviews holdings, digital sources, and media annually for currency and scope to support the nursing program. Library computer/Internet journal databases are available for students on and off campus. Online journals are available via EBSCO Host. NEC reports to NCC who makes recommendations to the Circulation Librarian and to NFO. 5.3c Analysis of Student Exit Survey by NEC, NCC, and NFO Analysis of Total Program Evaluation-Faculty Survey by NEC, NCC, and NFO Ongoing evaluations of the HPS are gathered by the HPS Assistant and presented to the NCC for faculty consideration.
 Total Program Evaluation-Faculty Survey: May – data collected by NEC 	
 September – reviewed by NEC October – reviewed by NCC 	
 October – reviewed by NCC November – reviewed by NFO 	

COMPONENT 5.3 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011	AY2011
ELA 5.3a: met	5.3a
September 2011 Recommendations/Activities	September 2011 Actions
The Learning Resources are adequate to meet the needs of the students in the	NFO Committee agreed that S. Wallace will collect math materials
Nursing Program. S. Wallace brought forward report/recommendation from the Math	to include practice exams from each course and provide to the
Committee regarding the Math Lab (NFO).	Math Lab personnel to use to assist the nursing students. The Math
College Wide Learning Resources (Communications Lab, Math Lab)	Committee will continue to seek ways to assist the students in math
Student Exit Survey: Item 49.1-49.4, 50.1-50.4	competency.
Item 49.1 – 4.10	
Item 49.2 – 4.16	Continue to monitor.
Item 49.3 – 4.13	
Item 49.4 – 4.10	
Item 50.1 – 4.10	
ltem 50.2 – 4.07	
Item 50.3 – 4.12	
ltem 50.4 – 4.21	
Total Program Evaluation-Faculty Survey: Item 54.1-54.4, 55.1-55.4	
ltem 54.1 – 4.14	
ltem 54.2 – 4.39	
ltem 54.3 – 4.38	
Item 54.4 – 4.43	
Item 55.1 – 4.00	
Item 55.2 – 4.27	
Item 55.3 – 4.30	
Item 55.4 – 4.32	
ELA 5.3b: met	5.3b
Library Resources	January 2011 Actions
Students and faculty view the library learning resources as significant strengths to	Faculty may view list of new HPM resources on hand in Library on
the program.	the "O" drive.
January 2011 Recommendations/Activities	Continue to monitor.

The Health Promotion/Maintenance Committee reported that the Library purchased books on HPM during NFO. Student Exit Survey: Item 51.1-51.4 Item 51.1 - 4.10 Item 51.2 - 4.13 Item 51.3 - 4.19 Item 51.4 - 4.16 Total Program Evaluation-Faculty Survey: Item 56.1-56.4 Item 56.1 - 4.24 Item 56.2 - 4.38 Item 56.3 - 4.41 Item 56.4 - 4.39 ELA 5.3c: met Students and faculty view the computer lab, nursing campus clinical lab, and HPS
Student Exit Survey: Item 51.1-51.4 Item 51.1 - 4.10 Item 51.2 - 4.13 Item 51.3 - 4.19 Item 51.4 - 4.16 Total Program Evaluation-Faculty Survey: Item 56.1-56.4 Item 56.1 - 4.24 Item 56.2 - 4.38 Item 56.3 - 4.41 Item 56.4 - 4.39 ELA 5.3c: met Students and faculty view the computer lab, nursing campus clinical lab, and HPS 5.3c Continue to monitor.
Item $51.1 - 4.10$ Item $51.2 - 4.13$ Item $51.3 - 4.19$ Item $51.4 - 4.16$ Total Program Evaluation-Faculty Survey: Item $56.1-56.4$ Item $56.1 - 4.24$ Item $56.2 - 4.38$ Item $56.3 - 4.41$ Item $56.4 - 4.39$ ELA 5.3c: met Students and faculty view the computer lab, nursing campus clinical lab, and HPS5.3c Continue to monitor.
Item 51.2 - 4.13 Item 51.3 - 4.19 Item 51.4 - 4.16 Total Program Evaluation-Faculty Survey: Item 56.1-56.4 Item 56.1 - 4.24 Item 56.2 - 4.38 Item 56.3 - 4.41 Item 56.4 - 4.39 ELA 5.3c: met Students and faculty view the computer lab, nursing campus clinical lab, and HPS 5.3c Continue to monitor.
Item 51.3 – 4.19 Item 51.4 – 4.16 Total Program Evaluation-Faculty Survey: Item 56.1-56.4 Item 56.1 – 4.24 Item 56.2 – 4.38 Item 56.3 – 4.41 Item 56.4 – 4.39 ELA 5.3c: met Students and faculty view the computer lab, nursing campus clinical lab, and HPS 5.3c Continue to monitor.
Item 51.4 – 4.16 Total Program Evaluation-Faculty Survey: Item 56.1-56.4 Item 56.1 – 4.24 Item 56.2 – 4.38 Item 56.3 – 4.41 Item 56.4 – 4.39 ELA 5.3c: met Students and faculty view the computer lab, nursing campus clinical lab, and HPS 5.3c Continue to monitor.
Total Program Evaluation-Faculty Survey: Item 56.1-56.4 Item 56.1 – 4.24 Item 56.2 – 4.38 Item 56.3 – 4.41 Item 56.4 – 4.39 ELA 5.3c: met Students and faculty view the computer lab, nursing campus clinical lab, and HPS 5.3c Continue to monitor.
Item 56.1 – 4.24 Item 56.2 – 4.38 Item 56.3 – 4.41 Item 56.4 – 4.39 ELA 5.3c: met Students and faculty view the computer lab, nursing campus clinical lab, and HPS 5.3c Continue to monitor.
Item 56.2 – 4.38 Item 56.3 – 4.41 Item 56.4 – 4.39 ELA 5.3c: met Students and faculty view the computer lab, nursing campus clinical lab, and HPS 5.3c
Item 56.3 – 4.41 Item 56.4 – 4.39 ELA 5.3c: met Students and faculty view the computer lab, nursing campus clinical lab, and HPS 5.3c Continue to monitor.
Item 56.4 – 4.39 ELA 5.3c: met Students and faculty view the computer lab, nursing campus clinical lab, and HPS 5.3c Continue to monitor.
ELA 5.3c: met 5.3c Students and faculty view the computer lab, nursing campus clinical lab, and HPS Continue to monitor.
Students and faculty view the computer lab, nursing campus clinical lab, and HPS Continue to monitor.
Students and faculty view the computer lab, nursing campus clinical lab, and HPS Continue to monitor.
lab as significant strengths to the program.
Nursing Program Specific (Computer Lab, Nursing Campus Clinical Lab, and
HPS Lab)
Student Exit Survey: Item 53.1-53.4, 54.1-54.4, 55.1-55.4
ltem 53.1 – 4.08
ltem 53.2 – 3.92
ltem 53.3 – 3.95
ltem 53.4 – 3.95
1 tem 54.1 - 4.07
1 tem 54.2 - 4.07
1000 Jm^{-1}
1000 tem 54.4 - 4.05
ltem 55.1 – 4.17
Item 55.2 – 4.19
Item 55.3 – 4.22
Item 55.4 – 3.99
Total Program Evaluation-Faculty Survey: Item 57.1-57.4, 58.1-58.4, 59.1-59.4,
60
ltem 57.1 – 4.14
Item 57.2 – 3.93

$\begin{array}{c} \text{Item } 57.3 - 3.80 \\ \text{Item } 57.4 - 4.10 \\ \text{Item } 58.1 - 4.21 \\ \text{Item } 58.2 - 4.07 \\ \text{Item } 58.3 - 4.07 \\ \text{Item } 58.4 - 4.07 \\ \text{Item } 59.1 - 4.07 \\ \text{Item } 59.2 - 3.93 \\ \text{Item } 59.3 - 4.10 \\ \text{Item } 59.4 - 3.75 \\ \text{Item } 60 - 3.97 \end{array}$	
AY 2012 ELA 5.3a: met	AY 2012 5.3a
Upward trend noted. Students and faculty view the college-wide learning resources	Continue to monitor.
as significant strengths to the program.	
College Wide Learning Resources (Communications Lab, Math Lab) Student Exit Survey: Item 49.1-49.4, 50.1-50.4	
Item 49.1 – 4.32	
ltem 49.2 - 4.32	
Item 49.3 – 4.32	
ltem 49.4 – 4.31	
Item 50.1 – 4.35	
Item 50.2 – 4.35	
Item 50.3 – 4.36 Item 50.4 – 4.39	
Total Program Evaluation-Faculty Survey: Item 54.1-54.4, 55.1-55.4	
Item 54 – 4.60	

Item 54.2 – 4.60	
ltem 54.3 – 4.60	
ltem 54.4 – 4.60	
ltem 55.1 – 4.40	
Item 55.2 – 4.33	
ltem 55.3 – 4.33	
ltem 55.4 – 4.29	
ELA 5.3b: met	5.3b
Upward trend noted. Students and faculty continue to view the library learning	Continue to monitor.
resources as significant strengths to the program.	
Library Resources	
Student Exit Survey: Item 51.1-51.4	
1000000000000000000000000000000000000	
120 Item 51.2 – 4.30	
Item 51.3 – 4.30	
ltem 51.4 - 4.30	
Total Program Evaluation-Faculty Survey: Item 56.1-56.4	
Item 56.1 – 4.80	
Item 56.2 – 4.80	
Item 56.3 – 4.80	
ltem 56.4 - 4.80	
10011 30.4 – 4.00	
ELA 5.3c: met	5.3c
Students and faculty continue to view the computer lab, nursing campus clinical lab,	Continue to monitor.
and HPS lab as significant strengths to the program.	Improvements for AY 2012 include:
	 Increased Work-Study/STEP positions to address set-
Nursing Program Specific (Computer Lab, Nursing Campus Clinical Lab, and	up/teardown of lab stations, thereby freeing lab coordinator
HPS Lab)	and part-time lab faculty for student assistance
Student Exit Survey: Item 53.1-53.4, 54.1-54.4, 55.1-55.4	 Planned/implemented independent sessions on care
ltem 53.1 – 4.38	planning, dosage calculation and test-taking strategies
ltem 53.2 – 4.37	 Planned/offered independent simulation sessions with a
Item 53.3 – 4.35	focus on assessment and development of the plan of care
ltem 53.4 – 4.36	for the Fundamentals students to compliment theory and
1000 tem 54.1 - 4.38	lab curriculum

Item 54.2 – 4.38	Dispused/offered remediation accessions for allills to white
ltem 54.3 - 4.30	 Planned/offered remediation sessions for skills taught
	across the curriculum to be led by the lab coordinator
Item 54.4 – 4.35	and/or part-time lab faculty
Item 55.1 – 4.34	Developed orientation materials for the nursing student
Item 55.2 – 4.35	and faculty to the campus lab and selected simulators
Item 55.3 – 4.33	 Offer SSI/student tutoring sessions
Item 55.4 – 4.26	 Developed Moodle Learning Management System to
Total Program Evaluation-Faculty Survey: Item 57.1-57.4, 58.1-58.4, 59.1-59.4,	support lab activities
60	 Increased learning spaces to support pediatric
Item 57.1 – 4.80	simulations/curriculum (two designated rooms)
Item 57.2 – 4.86	Installed/utilize second HPS and Noelle Birthing Simulator
Item 57.3 – 4.87	• Four designated high-fidelity simulation spaces (Dan, Fred,
Item 57.4 – 4.73	Noelle, Baby Hal)
Item 58.1 – 4.80	 Created/implemented three new simulation
Item 58.2 – 4.80	scenarios/activities
Item 58.3 – 4.93	 Restructured/repurposed existing lab spaces to
Item 58.4 – 4.60	support/increase laboratory learning (old supply room and
Item 59.1 – 4.60	HP167A)
ltem 59.2 – 4.87	,
ltem 59.3 – 4.87	 Restructured the inventory management system/supply
ltem 59.4 – 4.07	room
ltem 60 – 4.53	Increased bed capacity in the nursing laboratory by 4 beds
	• 4 new VitalSims, 1 new PediSim
	 Repurposed Campus Lab 3 as an open practice lab to
	support student access throughout the week during regular
	business hours, with extended weekends and evenings as
	available. This space supports all skills within the
	curriculum.
	Added 2 IV simulators
	 Repurposed wound and medication carts
	• Reorganized crash carts to align with agency setup's in the
	metro area (one new crashcart and defibrillator)
	Two designated physical examination stations (lab 2 and
	lab 3)
	 Developed example notebooks for policies and procedures

AY 2013 ELA 5.3a College Wide Learning Resources (Communications Lab, Math Lab) Student Exit Survey: Item 49.1-49.4, 50.1-50.4 Item 49.1 – 4.54 Item 49.2 – 4.56	 for student reference/simulation Census boards Repurposed/staged the computers in Lab 1 to support simulations by placing the computers into the simulation rooms (5 total) Increased storage in all campus lab 1 rooms Acquired a ventilator and an 12-lead EKG for simulation/instructional purposes Restructured the Omnicell to support simulation/instructional activities Implemented a fall management system/protocols for the "clients" in the nursing laboratory Established a study area for students to access during regular hours in campus lab 3 Piloting software to track utilization of the campus laboratory spaces using time-clock software Thirty-two new computers to be installed in the nursing computer lab (January 2012).
Item 49.3 – 4.59 Item 49.4 – 4.63	
Item 50.1 – 4.63	
Item 50.2 – 4.63	
ltem 50.3 – 4.64	
Item 50.4 – 4.58	
Total Program Evaluation-Faculty Survey: Item 54.1-54.4, 55.1-55.4	
Item 54.1 – 4.16	
Item 54.2 – 4.53 Item 54.3 – 4.53	
ILEIII J4.J = 4.JJ	

tem 54.4 - 4.56 $tem 55.1 - 4.06$ $tem 55.2 - 4.58$ $tem 55.4 - 4.58$ $ELA 5.3b$ $Library Resources$ August 2012 Recommendations/Activities M. Holland presented to the NFO availability of new videos available in the Library. Captioning was discussed. Student Exit Survey: Item 51.1 - 51.4 Item 51.2 - 4.50 Item 51.3 - 4.50 Item 51.4 - 4.54 Total Program Evaluation-Faculty Survey: Item 56.1 - 56.4 Item 56.1 - 4.68 Item 56.2 - 4.68 Item 56.3 - 4.61 Item 53.1 - 4.64 Item 53.1 - 4.55 Item 53.4 - 4.59 Item 54.1 - 4.59 Item 54.2 - 4.57 Item 54.2 - 4.57 Item 54.2 - 4.52		
	ltem 54.4 – 4.56	
Item 55.3 - 4.58 Item 55.4 - 4.585.3bELA 5.3b Library Resources August 2012 Recommendations/Activities M. Holland presented to the NFO availability of new videos available in the Library. Captioning was discussed.5.3bStudent Exit Survey: Item 51.1-51.4 Item 51.1 - 4.48 Item 51.2 - 4.50 Item 51.3 - 4.50 Item 51.4 - 4.545.3bTotal Program Evaluation-Faculty Survey: Item 56.1-56.4 Item 56.1 - 4.68 Item 56.2 - 4.68 Item 56.3 - 4.61 Item 53.3 - 4.61 Item 53.1 - 4.64 Item 53.1 - 4.64 Item 53.1 - 4.64 Item 53.1 - 4.64 Item 53.1 - 4.63 Item 53.1 - 4.64 Item 53.1 - 4.64 Item 53.1 - 4.63 Item 53.1 - 4.64 Item 53.1 - 4.63 Item 53.1 - 4.64 Item 53.1 - 4.64 Item 53.1 - 4.63 Item 53.1 - 4.64 Item 53.1 - 4.64 Item 53.1 - 4.63 Item 53.4 - 4.59 Item 54.2 - 4.57 Item 54.4 - 4.465.3c Continue to monitor.	Item 55.1 – 4.05	
Item 55.4 - 4.585.3bELA 5.3bAugust 2012 Recommendations/ActivitiesM. Holland presented to the NFO availability of new videos available in the Library. Captioning was discussed.5.3bStudent Exit Survey: Item 51.1-51.4 Item 51.1 - 4.48 Item 51.2 - 4.50 Item 51.4 - 4.545.3cTotal Program Evaluation-Faculty Survey: Item 56.1-56.4 Item 56.1 - 4.58 Item 56.3 - 4.61 Item 56.3 - 4.61 Item 53.1 - 4.685.3cELA 5.3cStudent Exit Survey: Item 53.1-53.4, 54.1-54.4, 55.1-55.4 Item 53.1 - 4.59 Item 53.1 - 4.63 Item 53.1 - 4.64 Item 53.1 - 4.63 Item 53.1 - 4.64 Item 53.1 - 4.645.3cStudent Exit Survey: Item 53.1-53.4, 54.1-54.4, 55.1-55.4 Item 53.1 - 4.63 Item 53.1 - 4.64 Item 53.1 - 4.64 Item 53.1 - 4.645.3c	Item 55.2 – 4.58	
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Item 55.3 – 4.45	
Item 55.4 – 4.49	
Total Program Evaluation-Faculty Survey: Item 57.1-57.4, 58.1-58.4, 59.1-59.4,	
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Item 57.1 – 4.47	
Item 57.2 – 4.47	
Item 57.3 – 4.47	
Item 57.4 – 4.42	
Item 58.1 – 4.47	
ltem 58.2 – 4.58	
ltem 58.3 – 4.58	
Item 58.4 – 4.42	
ltem 59.1 – 4.21	
Item 59.2 – 4.53	
Item 59.3 – 4.44	
ltem 59.4 – 3.74	
Item 60 – 4.63	

Component	Expected Level of Achievement
Fiscal, physical, technological, and learning resources are sufficient to meet the needs of the faculty and	Not Applicable – No Distance Education Program
students and ensure that students achieve learning outcomes.	

Frequency of Assessment	Assessment Method
Not applicable	Not applicable

COMPONENT 5.4 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision

STANDARD VI: OUTCOMES

Evaluation of student learning demonstrates that graduates have achieved identified competencies with the institutional mission and professional standards and that the outcomes of the nursing education unit have been achieved.

Component	Expected Level of Achievement
The systematic plan for evaluation emphasizes the ongoing assessment and evaluation of the student learning and program outcomes of the nursing education unit and NLNAC standards.	 Mean score of 3.5 on a scale of 5 on the Total Program Evaluation – Faculty Survey: Item 62.1-62.3

Frequency of Assessment	Assessment Method
Total Program Evaluation-Faculty Survey:	Review and analysis of Total Program Evaluation-Faculty Survey by
May – data collected by NEC	NEC and NFO
September – reviewed by NEC	
October – reviewed by NCC	
November – reviewed by NFO	

COMPONENT 6.1 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
AY 2011	<u>AY2011</u>
ELA met	September/October 2010 Actions
September/October 2010 Recommendations/Activities	The AY2011-AY2013 SPEP was approved after use of online
Revisions to the AY11-AY13 Systematic Plan For Evaluation for the Nursing	voting (September) and reported at the October 2010 meeting of
Program (SPEP) were made during summer 2010 with review by R. Klepper, D.	the NFO. Surveys were also approved. Copies will be provided to
Myers, T. Walker, and L. Cowan to ensure compliance with 2008 NLNAC	all members. (The AY2008-AY2010 SPEP was reviewed and
accreditation requirements. Surveys that accompany the plan were revised. After	approved by the NFO in May 2010 for trending ad completion in
review and approval by the NEC in August 2010, a recommendation was forwarded	AY2011.) Continue to make necessary revisions as needed and
to the NFO for the September 2010 meeting for approval of the document as a "work	maintain process for ongoing assessment and evaluation of student

in progress" (can be modified and edited as needed with updates posted on the shared drive) The AY2008-AY2010 SPEP was reviewed and approved by the NFO in May 2010 for trending and completion in AY2011. Total Program Evaluation – Faculty Survey: Item 62.1-62.3 Item 62.1 – 4.23 Item 62.2 – 4.23 Item 62.3 – 4.27 AY 2012 ELA met The SPEP was reviewed, edited, and approved by members of the Nursing Evaluation Committee (NEC) and forwarded to the Nursing Faculty Organization (NFO) as a "work in progress" (can be modified and edited as needed with updates posted on the shared drive). The Evaluation Committee reviewed and analyzed results from program surveys submitting recommendations for improvement to the NCC and NFO meeting monthly during the academic year. All results of data collection and analysis as well as actions for program development, maintenance, or revision are recorded within the document. <u>August 2011 Recommendations/Activities</u> Revised AY 2011-2012 Systematic Plan For Evaluation distributed to faculty during NFO. <u>August 2012 Recommendations/Activities</u> Continued preparations for the NLNAC accreditation visit in 2014. The Testing Notebook was updated and distributed to faculty.	 learning and program outcomes. The NEC reviewed and analyzed results from program surveys submitting recommendations for improvement to the NCC and NFO, meeting monthly during the academic year. All results of data collection and analysis as well as actions for program development, maintenance, or revision are recorded within the document. The AY2011-AY2013 SPEP was reviewed and approved by the NFO in May 2011 for continued utilization in AY2012. <u>AY 2012</u> Increase in trending noted from AY2011. Continue to make necessary revisions as needed and maintain process for ongoing assessment and evaluation of student learning and program outcomes. The AY2011-AY2013 SPEP was reviewed and approved by the NFO in May 2012 for continued utilization in AY2013. <u>August 2011 Actions</u> Faculty began work on the accreditation process for the visit scheduled in 2014. <u>August 2012 Actions</u> A standard template for all meetings to be distributed to committee chairs. All minutes to be placed on "O" drive. <u>April 2013 Actions</u> Faculty are to continue work on their NLNAC self-study assignments.
August 2012 Recommendations/Activities	April 2013 Actions
Continued preparations for the NLNAC accreditation visit in 2014.	Faculty are to continue work on their NLNAC self-study
AY 2013	AY 2013
ELA	SPEP to change with new ACEN standards beginning January
The SPEP was reviewed, edited, and approved by members of the Nursing	2013.
Evaluation Committee (NEC) and forwarded to the Nursing Faculty Organization	The AY2011-AY2013 SPEP was reviewed and approved by the

(NFO) as a "work in progress" (can be modified and edited as needed with updates	NFO in May 2013 for trending and completion in AY2014.
posted on the shared drive). The SPEP is a fluid document and is subject to	August 2012 Actions
continuous updates and revisions. The Evaluation Committee reviewed and	Faculty are to push for completion of the NESA surveys as well as
analyzed results from program surveys submitting recommendations for	all surveys.
improvement to the NCC and NFO meeting monthly during the academic year. All	September 2012 Actions
results of data collection and analysis as well as actions for program development,	M. Collin to inservice the faculty on the minute maker during
maintenance, or revision are recorded within the document.	October 2012 NFO meeting.
August 2012 Recommendations/Activities	November 2012 Actions
T. Walker reported difficulty with getting the NESA surveys completed and numbers	Faculty will begin collecting the required information for the NLNAC
of responses are down.	Accreditation visit.
September 2012 Recommendations/Activities	<u>May 7, 2013 Actions</u>
D. Myers reported that M. Collins has created a minute maker that will streamline	The NFO approved the new AY 2014-AY 2016 SPEP. The new
writing agendas and minutes and provide the NEC with ongoing actions from the	document will be e-mailed to all faculty.
committees.	All faculty were in favor of using the revised surveys.
November 2012 Recommendations/Activities	Faculty decided which standards they would like to review for Fall
The NFO discussed further needs for the NLNAC Accreditation Visit which will	2013.
possibly be scheduled in February of 2014.	
May 7 2013 Recommendations/Activities	
The NFO reviewed the new SPEP for AY 2014-AY 2016 which includes the new	
2013 accreditation standards. Surveys were reviewed for revisions.	
Standards review was discussed for Fall 2013	
Total Program Evaluation – Faculty Survey: Item 62.1-62.3	
ltem 62.1 – 5.00	
ltem 62.2 – 5.00	
ltem 62.3 – 5.00	

Component	Assessment Method	Evaluation Process	ELA	Actions for Program Development, Maintenance, or Improvement
The objectives of the program are to prepare graduates who will independently assume the roles of	For all outcomes NCLEX: The RN nursing	Detailed reports are received each	3 year	Pending

Provider of Care, Manager of Care,	licensure exam is taken by all	quarter and annually about the	mean
and Member within the Discipline of	graduates after graduation.	achievement of our graduates	greater
Nursing in		including pass rates and areas of	than
settings where policies and	Review and analysis of course	strengths and weaknesses in	state or
procedures are specified and	progression and graduation	numerous categories. This data is	nationa
guidance is available. Specifically,	rates by NEC, NCC, and NFO	reviewed by the NPD, NPAD, and	Imean
graduates will:		members of Program committees	
5		and is used to inform decisions	
Program Educational Outcome #1		about curriculum change, allocation	
Utilize the nursing process		of resources for students, and	
(assessment, analysis, planning,		faculty teaching assignments.	
implementation, and		active reacting assignments.	
evaluation) to provide care for clients	Total Program Evaluation -	Review and analysis of Total	3.5
across the lifespan and from diverse	Faculty Survey		5.5
•		Program Evaluation-Faculty Survey	
cultural	Standard 1:	by NEC, NCC, and NFO. This	
groups.	Criterion 1.1: Items 2.1-2.2, 3	survey is administered to Program	
	Criterion 1.8: Items 10	faculty annually in the Spring.	
Program Educational Outcome #2	Standard 2:		
Use nursing knowledge, critical	Criterion 2.4: Items 13-14		
thinking, current technology, and	Criterion 2.8: Items 18		
nursing skills to care	Standard 3:		
for clients with health care problems,	Criterion 3.1: Items 21		
from simple to complex.	Standard 4:		
	Criterion 4.1: Items 30		
Program Educational Outcome #3	Criterion 4.3: Items 32		
Integrate communication skills and	Criterion 4.5: Items 34		
knowledge with teaching-learning	Criterion 4.8: Items 39		
principles to	Standard 6:		
collaborate with individuals, significant	Criterion 6.1: Items 62		
others, communities, and the	Criterion 6.2: Items 63		
interdisciplinary	Criterion 6.5: Items		
health care team.			
	Faculty Evaluation of Nursing	Review and analysis of Faculty	3.5
Program Educational Outcome #4	Course	Evaluation of Nursing Course	
Use management skills and	Standard 4:	Survey by NEC, NCC, and NFO.	
Use management skills and	Stanuaru 4.		

knowledge to delegate tasks appropriately, follow workplace policies and chains of command, participate in evaluation of health care	Criterion 4.3: Items 11 Criterion 4.5: Items 15 Criterion 4.8: Items 22 Standard 5	This survey is administered to Program faculty annually in the Spring (and to BADNAP and CLP per semester).	
delivery, and supervise assistive personnel as well as licensed practical nurses. Program Educational Outcome #5 Maintain accountability for own actions.	Adjunct Faculty Survey Standard 2: Criterion 2.8: Items 7 Criterion 4.3: Items 9 Criterion 4.5: Items 10 Criterion 4.8: Items 15	Review and analysis of Adjunct Faculty Survey by NEC, NCC, and NFO. This survey is administered to Program part-time faculty annually in the Spring.	3.5
Program Educational Outcome #6 Demonstrate commitment to professional growth and high standards of nursing practice while functioning within the legal and ethical parameters of nursing.	Nursing Advisory Committee Survey Standard 1: Criterion 1.1: Items 1 Standard 4: Criterion 4.1: Items 5 Criterion 4.8: Items 6 Standard 6: Criterion 6.4: Items 8-12	Review and analysis of the Nursing Advisory Committee Survey by the NDP, NPAD, NEC, NCC, and NFO. This survey is administered to advisory committee membership semi-annually in March and October.	3.5
	Nursing Program Post Graduation Survey: *Standard 6: Criterion 6.4: Items 4, 6 (F13); Items 4, 7a-7c, 8-11 (S14 on) Criterion 6.4.3: Items 13 (F13); 11 (S14 on) Criterion 6.4.5: Items 1-2	Nursing Program Post Graduate Survey is conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Analysis of NPPGS by the teaching teams, NEC, NCC and NFO	3.5
	Graduate Evaluation by Employer: *Standard 6:	Graduate Evaluation by Employer Survey is conducted by the Department of Institutional	3.5

Criterion 6.4: Items 7-16 (F13), 7-17.8 (S14 on) Criterion 6.4.4: Items 1, 17-18 (F13). 18-19 (S14 on)	Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Analysis of GEES by the teaching teams, NEC, NCC and NFO	
Student Evaluation of Nursing Course Survey Standard 4: Criterion 4.3: Items 38 Criterion 4.5: Items 42 Criterion 4.8: Items 49	Review and analysis of Student Evaluation of Nursing Course Survey by Nursing Teams, NEC, NCC, and NFO. This survey is administered to Program students at the end of each course.	3.5
Student Exit Survey Standard 1: Criterion 1.1: Items 4 Standard 4: Criterion 4.3: Items 25 Criterion 4.5: Items 29 Criterion 4.8: Items 3	Review and analysis of Student Exit Survey by NEC, NCC, and NFO. This survey is administered to Program students at the end of the last course.	3.5
NESA Faculty Evaluation of Clinical Experience *Standard 6 Items 5-6 NESA Student Evaluation of Clinical Experience Standard 6 Items 6	Review and analysis of the NESA Faculty and NESA Student Evaluation of Clinical Experience by the Team Leaders, NEC, NCC, and NFO. These surveys are administered to clinical faculty and students at the end of each clinical experience.	2.8
ATI Comprehensive Predictor Exam (and other ATI exams	ATI: In-depth curriculum analysis by the teaching teams/NEC/NCC to	93% (L2)

•	tandard 6: Criterion 6.4	ensure knowledge and skills sets have been attained. Analysis includes review of aggregate data from surveys and the test scores for the ATI Comprehensive Predictor.		
Со	nical Evaluation Tool ourse Examinations/Quizzes d skills Checkoffs		Pass 74%/ Pass	

Component	Expected Level of Achievement
Aggregated evaluation findings inform program decision making and are used to maintain or improve student learning outcomes.	 Mean score of 3.5 on a scale of 5 on the Total Program Evaluation – Faculty Survey: Item 63.1-63.2 Regular review of ELA's will occur through NEC and NFO

Frequency of Assessment	Assessment Method
 Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC October – reviewed by NCC November – reviewed by NFO 	 Review and analysis of Total Program Evaluation-Faculty Survey by NEC, NCC and NFO Minutes of Evaluation Committee, NFO Committee, Curriculum Committee, and the Nursing Process Teams are reviewed
NEC meets September, October, December, January, March, and May; NFO meets monthly during academic year	

COMPONENT 6.2 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement) AY 2011	Maintenance, or Revision
ELA: met	Continue to make necessary revisions as needed and maintain
Regular review of ELA's occurred through NEC, NCC, nursing course teams,	process.
team leaders and NFO. The evaluation findings were used in program	
development, maintenance and/or revision.	
Total Program Evaluation – Faculty Survey: Item 63.1-63.2	
Item 63.1 – 4.23	
Item 63.2 – 4.20	AV 2040
AY 2012 ELA: met	AY 2012 Continue to make necessary revisions as needed and maintain
Regular review of ELA's occurred through NEC, NCC, nursing course teams,	process.
team leaders and NFO. The evaluation findings were used in program	
development, maintenance and/or revision. Increase in trending noted Total	
Program Evaluation – Faculty Survey.	
Total Program Evaluation – Faculty Survey: Item 63.1-63.2	
ltem 63.1 – 4.93	
ltem 63.2 – 4.93	
AY 2013	AY 2013
ELA: met	Continue to monitor. Making necessary revisions as necessary and
Regular review of ELA's occurred through NEC, NCC, nursing course teams,	maintain process as written.
team leaders and NFO. The evaluation findings were used in program	
development, maintenance and/or revision. Slight increase in trending noted	
Total Program Evaluation – Faculty Survey. Noted at all 5's.	
Total Program Evaluation – Faculty Survey: Item 63.1-63.2	
ltem 63.1 – 5.00	
Item 63.2 – 5.00	

Component	Expected Level of Achievement
Evaluation findings are	All NESA Student and Faculty Evaluations of Clinical Experiences are shared with clinical agencies each semester
shared with communities	 All annual reports to OBN and NLNAC will include evaluation findings
of interest.	 All OBN annual reports will be submitted to Academic Affairs to be shared with OCCC Board of Regents
	All Advisory Committee minutes will include evaluation findings
	• Mean score of 3.5 on a scale of 5 on the OCCC Nursing Advisory Committee Survey: Item 7 (implemented AY 2012)

Frequency of Assessment	Assessment Method
 NESA Student and Faculty Evaluation of Clinical Experience Two weeks post completion of each semester OBN Annual Report Annually – July NLNAC Annual Report Annually – November Academic Affairs Report Annually – July Advisory Committee Minutes Annually 	 Results of surveys are distributed to clinical agencies by chair of NEC Review of NLNAC, and OBN annual reports Review of Advisory Committee minutes by NFO Review and analysis of OCCC Nursing Advisory Committee Survey by NPD and NPAD
 OCCC Nursing Advisory Committee Survey: Item 7 (implemented AY 2012) October/March – data collected by NEC July – reviewed by NPD and NPAD 	

COMPONENT 6.3 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2011 ELA: met Evaluation findings are shared with several communities of interest.	AY2011 Continue to monitor
NESA survey results were reviewed and analyzed with survey results forwarded to the clinical agencies after tabulation. Agencies falling below ELA were reviewed. The information was shared with clinical agencies.	Continue to monitor.
Each year the Nursing Program Director prepares an annual report that is submitted to the Vice President of Academic Affairs for dissemination. The information in this report includes: Nursing curriculum, curriculum design, clinical agencies, library resources, nursing faculty and staff, student data, teaching assignments, faculty meetings, graduation attrition/retention data, student statistics, budget information, major purchases and faculty workload. In addition, the Nursing Program Director prepares annual reports for the Oklahoma Board of Nursing and the NLNAC.	Continue to monitor
The OCCC Nursing Program has a bi-annual advisory board meeting; one in the fall and one in the spring. The committee consists of representatives from clinical agencies, local nursing programs, industry, interested members of the community, the nursing faculty and adjuncts, OCCC campus administrators, currents students and graduates of the nursing program. The members of the advisory committee share agency administrative concerns, report on the implementation of new policies or technologies and offer insight into community issues and needs. The committee provides students and faculty with practical job application experiences and job opportunities for students who complete the program. Clinical survey findings are discussed at these meetings and input from members obtained.	Continue to monitor.
AY 2012 ELA: met NESA survey results were reviewed and analyzed with survey results forwarded to the clinical agencies after tabulation.	AY 2012 Continue to monitor.

Annual reports submitted to the Vice President for Academic Affairs for dissemination, to the OBN, and NLNAC	Continue to monitor
The implementation of the OCCC Nursing Advisory Committee Survey (Fall11) was used to demonstrate that the Program shares evaluation findings and also to allow input from membership for program improvement. It was administered at the end of the Advisory Committee meetings in Fall11 and Spring12 and reviewed by the NPD and NPAD. During the Fall11 and Spring12 Advisory Committee meetings, membership was updated on curriculum revisions, program outcomes (e.g.; NCLEX results) and accreditation status. Results for the Fall11 OCCC Nursing Advisory Committee Survey were presented at the Spring12 Advisory Committee meeting. Results for both Fall11 and Spring12 OCCC Nursing Advisory Committee Surveys were presented separately and annualized at the Fall 2012 Advisory Committee. Minutes from both Advisory Committee meetings were reviewed and discussed by the NFO. OCCC Nursing Advisory Committee Survey: Item 7 Item 7- 4.65	Continue to monitor.
AY 2013 ELA: met The NESA Student and Faculty Evaluations of Clinical Experience are shared with clinical agencies	AY 2013 NESA survey results were forwarded to the clinical agencies after tabulation. Agencies falling below ELA were reviewed and are monitored for continued problems.
The Academic Affairs, OBN, and NLNAC annual reports included evaluation findings.	Continue to monitor
Advisory Committee minutes were reviewed and discussed by the NFO. Results of the AY 2012 Advisory Committee Survey were shared with the Advisory Committee membership on October 24, 2012 and March 27, 2013. The membership was updated on curriculum revisions, program outcomes (e.g., NCLEX results) and accreditation status. OCCC Nursing Advisory Committee Survey: Item 7 Item 7 – 4.86	Results for both Fall 12 and Spring 13 Advisory Committee meetings and have been annualized and will be presented to the Fall 2013 Advisory Committee during the Fall 2013 meeting. Continue to monitor.

Component	Expected Level of Achievement
Graduates demonstrate achievement of	 Graduating students will score a 93% predictability of NCLEX-RN success on the ATI Comprehensive Predictor Exam (91% predictability for AY 2010).
competencies appropriate to role preparation.	 Mean score of 3.5 on a scale of 5 on the OCCC Nursing Advisory Committee Survey: Item 8 (Initiated AY12) Mean score of at least 3.5 on a scale of 5.0 on the Nursing Program Post Graduate Survey: Item 4, 6, 12 Mean score of at least 3.5 on a scale of 5.0 on the Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg)

Frequency of Assessment	Assessment Method
 ATI administered each semester with data aggregated annually. Data reviewed: January – by NEC March – by NCC April – by NFO OCCCC Nursing Advisory Committee Survey: October/March – data collected by NEC March – reviewed by NEC and recommendations forwarded to NCC April – reviewed by NCC and recommendations forwarded to NFO May – reviewed by NFO Nursing Program Post Graduation Survey: January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of NEC March – reviewed by NEC and recommendations forwarded to NCC March – reviewed by NEC and recommendations forwarded to NFO Nursing Program Post Graduation Survey: January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of NEC March – reviewed by NEC and recommendations forwarded to NCC March – reviewed by NCC and recommendations forwarded to NCC May – reviewed by NFO 	 ATI: In-depth curriculum analysis by the teaching teams/NEC/NCC to ensure knowledge and skills sets have been attained. Analysis includes review of aggregate data from surveys and the test scores for the ATI Comprehensive Predictor. Analysis of OCCC Nursing Advisory Committee Survey by NEC, NCC and NFO Nursing Program Post Graduate Survey is conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Analysis of NPPGS by the teaching teams, NEC, NCC and NFO Graduate Evaluation by Employer Survey is conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Analysis of GEES by the teaching teams, NEC, NCC and NFO

•	January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of NEC	
•	March – reviewed by NEC and recommendations forwarded to NCC	
•	April – reviewed by NCC and recommendations forwarded to NFO	
٠	May – reviewed by NFO	

COMPONENT 6.4 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2009</u>	<u>AY 2009</u>
ELA: met	Continue to monitor
Graduate Evaluation by Employer Survey: Item 8-16	
ltem 8 – 4.50	
ltem 9 – 4.60	
ltem 10 – 4.10	
ltem 11 – 4.20	
ltem 12 – 4.22	
ltem 13 – 4.10	
ltem 14 – 4.60	
ltem 15 – 4.60	
ltem 16 – 4.50	
AY 2010	AY 2010
ELA: met	Continue to monitor
Graduate Evaluation by Employer Survey: Item 8-16	
ltem 8 – 4.50	
ltem 9 – 4.63	
ltem 10 – 4.38	
ltem 11 – 4.50	
Item 12 – 4.43	

ltem 13 – 4.50	
ltem 14 – 4.38	
ltem 15 – 4.38	
ltem 16 – 4.63	
<u>AY 2011</u>	<u>AY2011</u>
ELA: partially met	Continue to monitor progress of students.
All but one of the graduating students scored a 93% predictability or greater of	
NCLEX-RN success on the ATI Comprehensive Predictor Exam (was 91%	
predictability for AY 2010).	
Nursing Program Post Graduate Survey: Item 4, 6, 12	
(See 4.1 for 09-10 data)	
Item 4- 4.35	
ltem 6 - 4.05	
Item 12 – 4.19	Item 10 result was addressed previously in document. Continue to
Graduate Evaluation by Employer Survey: Item 8-16	monitor
ltem 8 - 5.00	
ltem 9 - 4.33	
Item 10 – 3.00	
ltem 11 - 4.33	
ltem 12 – 4.00	
Item 13 – 4.33	
14 - 4.67	
Item 15 – 4.67	
Item 16 – 4.67	
AY 2012	AY 2012
ELA: met	Continue to monitor progress of students.
Graduating students scored a 93% predictability or greater of NCLEX-RN success	
on the ATI Comprehensive Predictor Exam	
OCCC Nursing Advisory Committee Survey: Item 8	
Item $8 - 4.50$	
Nursing Program Post Graduate Survey: Item 4, 6, 12	
Item 4 – 4.22	
ltem 6 - 3.67	
ltem 12 - 4.20	
Graduate Evaluation by Employer Survey: Item 8-16	
Graduate Evaluation by Employer Survey. Item 0-10	

Item 8 - 4.68 Item 10 - 4.25 Item 11 - 4.29 Item 12 - 4.11 Item 13 - 4.21 Item 14 - 4.52 Item 16 - 4.27 AY 2013 ELA met Graduating students scored a 93% predictability or greater of NCLEX-RN success on the ATI Comprehensive Predictor Exam. One student failed to meet Level 2 on the Matal Health Progression Exam for NUR 2539 (CLP) after three attempts, failing to progress to NUR 2549. OCCC Nursing Advisory Committee Survey: Item 8 Item 8 - 4.97 Nursing Program Post Graduate Survey: Item 4, 6, 12 Item 4 Item 6 Item 7 Item 8 - 4.97 Nursing Program Post Graduate Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 12 Item 13 Item 14 Item 15 Item 16	<u> </u>	
Item 10 - 4.25 Item 11 - 4.29 Item 12 - 4.11 Item 13 - 4.21 Item 14 - 4.52 Item 15 - 4.46 Item 16 - 4.27 AY 2013 ELA met Graduating students scored a 93% predictability or greater of NCLEX-RN success Continue to monitor Graduating students scored a 93% predictability or greater of NCLEX-RN success Continue to monitor Graduating students scored a 93% predictability or greater of NCLEX-RN success Avaiting registration by Employer Survey: Item 8 Item 8 - 4.97 Nursing Program Post Graduate Survey: Item 8 Avaiting results Item 4 Item 6 Avaiting results Item 8 Item 9 Avaiting results Item 8 Item 9 Item 10 Item 12 Item 13 Item 14 Item 12 Item 11 Item 12 Item 11 Item 12 Item 13 Item 14 Item 15 Item 14		
Item 12 - 4.19 Item 12 - 4.11 Item 13 - 4.21 Item 14 - 4.52 Item 15 - 4.46 Item 15 - 4.46 Item 16 - 4.27 AY 2013 ELA met Graduating students scored a 93% predictability or greater of NCLEX-RN success on the ATI Comprehensive Predictor Exam. One student failed to meet Level 2 on the Mental Health Progression Exam for NUR 2539 (CLP) after three attempts, failing to progress to NUR 2549. Continue to monitor OCCC Nursing Advisory Committee Survey: Item 8 4.97 Nursing Program Post Graduate Survey: Item 4, 6, 12 Awaiting results Item 4 Item 6 Item 12 Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 11 Item 12 Item 12 Item 13 Item 13 Item 14 Item 15 14-16 (Nsg)		
Item 12 - 4.11Item 13 - 4.21Item 13 - 4.21Item 14 - 4.52Item 15 - 4.46Item 16 - 4.27AY 2013AY 2013ELA metContinue to monitorGraduating students scored a 93% predictability or greater of NCLEX-RN success on the ATI Comprehensive Predictor Exam. One student failed to meet Level 2 on the Mental Health Progression Exam for NUR 2539 (CLP) after three attempts, failing to progress to NUR 2549.AY 2013OCCC Nursing Advisory Committee Survey: Item 8 Item 8 - 4.97Awaiting resultsNursing Program Post Graduate Survey: Item 4, 6, 12 Item 12Awaiting resultsGraduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15Awaiting results		
Item 13 - 4.21Item 14 - 4.52Item 15 - 4.46Item 15 - 4.46Item 16 - 4.27AY 2013AY 2013AY 2013Graduating students scored a 93% predictability or greater of NCLEX-RN success on the ATI Comprehensive Predictor Exam. One student failed to meet Level 2 on the Mental Health Progression Exam for NUR 2539 (CLP) after three attempts, failing to progress to NUR 2549.AY 2013OCC Nursing Advisory Committee Survey: Item 8 Item 8 - 4.97Awaiting resultsNursing Program Post Graduate Survey: Item 4, 6, 12Awaiting resultsItem 4 Item 6 Item 12Hem 8-13; 14-16 (Nsg)Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15Awaiting results		
Item 14 - 4.52 Item 15 - 4.46 Item 16 - 4.27 AY 2013 ELA met Continue to monitor Graduating students scored a 93% predictability or greater of NCLEX-RN success on the ATI Comprehensive Predictor Exam. One student failed to meet Level 2 on the Mental Health Progression Exam for NUR 2539 (CLP) after three attempts, failing to progress to NUR 2549. AY 2013 OCCC Nursing Advisory Committee Survey: Item 8 Hem 6 Item 12 Graduate Survey: Item 4, 6, 12 Item 12 Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 11 Item 12 Item 11 Item 12 Item 12 Item 11 Item 13 Item 14 Item 14 Item 15		
Item 15 - 4.46 Item 16 - 4.27 AY 2013 AY 2013 ELA met Continue to monitor Graduating students scored a 93% predictability or greater of NCLEX-RN success on the ATI Comprehensive Predictor Exam. One student failed to meet Level 2 on the Mental Health Progression Exam for NUR 2539 (CLP) after three attempts, failing to progress to NUR 2549. AY 2013 OCCC Nursing Advisory Committee Survey: Item 8 Attem 4 Item 8 - 4.97 Awaiting results Nursing Program Post Graduate Survey: Item 4, 6, 12 Awaiting results Item 12 Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Awaiting results Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 14 Item 15		
Item 16 – 4.27 AY 2013 ELA met AY 2013 Continue to monitor Graduating students scored a 93% predictability or greater of NCLEX-RN success on the ATI Comprehensive Predictor Exam. One student failed to meet Level 2 on the Mental Health Progression Exam for NUR 2539 (CLP) after three attempts, failing to progress to NUR 2549. Available OCCC Nursing Advisory Committee Survey: Item 8 Item 8 – 4.97 Awaiting results Nursing Program Post Graduate Survey: Item 4, 6, 12 Item 4 Item 6 Item 12 Awaiting results Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15 Awaiting results		
AY 2013 ELA met Graduating students scored a 93% predictability or greater of NCLEX-RN success on the ATI Comprehensive Predictor Exam. One student failed to meet Level 2 on the Mental Health Progression Exam for NUR 2539 (CLP) after three attempts, failing to progress to NUR 2549. Continue to monitor OCCC Nursing Advisory Committee Survey: Item 8 Item 8 Item 6 Item 12 Awaiting results Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Awaiting results		
ELA met Continue to monitor Graduating students scored a 93% predictability or greater of NCLEX-RN success on the ATI Comprehensive Predictor Exam. One student failed to meet Level 2 on the Mental Health Progression Exam for NUR 2539 (CLP) after three attempts, failing to progress to NUR 2549. Continue to monitor OCCC Nursing Advisory Committee Survey: Item 8 Item 8 – 4.97 Awaiting results Nursing Program Post Graduate Survey: Item 4, 6, 12 Item 4 Item 6 Item 12 Awaiting results Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Awaiting results Item 9 Item 10 Item 11 Item 12 Item 13 Item 13 Item 14 Item 15 Item 24	Item 16 – 4.27	
Graduating students scored a 93% predictability or greater of NCLEX-RN success on the ATI Comprehensive Predictor Exam. One student failed to meet Level 2 on the Mental Health Progression Exam for NUR 2539 (CLP) after three attempts, failing to progress to NUR 2549. OCCC Nursing Advisory Committee Survey: Item 8 Item 8 – 4.97 Nursing Program Post Graduate Survey: Item 4, 6, 12 Item 4 Item 6 Item 12 Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15	<u>AY 2013</u>	<u>AY 2013</u>
on the ATI Comprehensive Predictor Exam. One student failed to meet Level 2 on the Mental Health Progression Exam for NUR 2539 (CLP) after three attempts, failing to progress to NUR 2549. OCCC Nursing Advisory Committee Survey: Item 8 Item 8 – 4.97 Nursing Program Post Graduate Survey: Item 4, 6, 12 Item 4 Item 6 Item 12 Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15	ELA met	Continue to monitor
the Mental Health Progression Exam for NUR 2539 (CLP) after three attempts, failing to progress to NUR 2549. OCCC Nursing Advisory Committee Survey: Item 8 Item 8 – 4.97 Nursing Program Post Graduate Survey: Item 4, 6, 12 Item 4 Item 6 Item 12 Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 13 Item 14 Item 15	Graduating students scored a 93% predictability or greater of NCLEX-RN success	
failing to progress to NUR 2549. OCCC Nursing Advisory Committee Survey: Item 8 Item 8 – 4.97 Nursing Program Post Graduate Survey: Item 4, 6, 12 Item 4 Item 6 Item 12 Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15	on the ATI Comprehensive Predictor Exam. One student failed to meet Level 2 on	
OCCC Nursing Advisory Committee Survey: Item 8 Item 8 – 4.97Awaiting resultsNursing Program Post Graduate Survey: Item 4, 6, 12 Item 4 Item 6 Item 12Awaiting resultsGraduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 13 Item 14 Item 15Awaiting results	the Mental Health Progression Exam for NUR 2539 (CLP) after three attempts,	
OCCC Nursing Advisory Committee Survey: Item 8 Item 8 – 4.97Awaiting resultsNursing Program Post Graduate Survey: Item 4, 6, 12 Item 4 Item 6 Item 12Awaiting resultsGraduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 13 Item 14 Item 15Awaiting results	failing to progress to NUR 2549.	
Item 8 – 4.97 Nursing Program Post Graduate Survey: Item 4, 6, 12 Item 4 Item 6 Item 12 Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15		
Item 4 Item 6 Item 12 Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15		
Item 4 Item 6 Item 12 Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15	Nursing Program Post Graduate Survey: Item 4, 6, 12	Awaiting results
Item 12 Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15		
Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg) Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15	Item 6	
Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15	Item 12	
Item 8 Item 9 Item 10 Item 11 Item 12 Item 13 Item 14 Item 15	Graduate Evaluation by Employer Survey: Item 8-13; 14-16 (Nsg)	
Item 10 Item 11 Item 12 Item 13 Item 14 Item 15		
Item 11 Item 12 Item 13 Item 14 Item 15	Item 9	
Item 12 Item 13 Item 14 Item 15	Item 10	
Item 13 Item 14 Item 15	Item 11	
Item 14 Item 15	Item 12	
Item 14 Item 15	Item 13	
Item 15		
	Item 15	
	Item 16	

STANDARD VI COMPONENT 6.5

Component	Expected Level of Achievement
The program demonstrates evidence of achievement in meeting the following program	 6.5.1 The licensure exam pass rates will be at or above the national mean. 6.5.2
outcomes: 6.5.1 Performance on licensure exam	 ELAs for program completion are determined by the faculty and reflect program demographics, academic progression, and program history. Eighty percent (80%) or greater of students will complete the program within a period of six semesters (Traditional program and baccalaureate to associate degree nurse accelerated pathways) and four semesters (Career Ladder Pathway). (Seventy percent (70%) AY13) Mean score of 3.5 on a scale of 5 on the Total Program Evaluation – Faculty Survey: Item 64.1-64.3
 6.5.2 Program completion 6.5.3 Program satisfaction > Graduate satisfaction with Program > Employer satisfaction with Program 	 6.5.3 Program satisfaction measures (qualitative and quantitative) address graduates and their employers. Ninety percent (90%) or greater of graduates responding to graduate surveys will report overall satisfaction with the program. Ninety percent (90%) or greater of employers responding to employer surveys will report that graduates are adequately prepared for entry level practice. Mean score of 3.5 or higher on a 5.0 scale on the overall satisfaction item, Nursing Post Graduate Survey: Item 12 Mean score of 3.5 or higher on a 5.0 scale on the specified items, Graduate Evaluation by Employer Survey: Item 17 Mean score of 3.5 or higher on a 5.0 scale on the OCCC Nursing Advisory Committee Survey: Items 9.1 – 9.4 6.5.4
6.5.4Job placement	 Job placement rates are addressed through quantified measures that reflect program demographics and history. Mean score of 3.5 on a scale of 5 on the Nursing Program Post Graduate Survey: Item 1, 2 Ninety percent (90%) or greater of graduates seeking employment will obtain an entry level position within six (6) months after graduation. (Eighty percent (80%) AY 13)

Frequency of Assessment	Assessment Method
 6.5.1 Aggregate data reviewed annually: September – data collected for May graduates and reported to NFO 	 6.5.1 Review and analysis of data for graduating classes and comparison with national pass rate.

March – data collected for December graduates and reported to NFO	
 6.5.2 Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC October – reviewed by NFO 6.5.3 Aggregate data reviewed annually: Nursing Program Post Graduation Survey: January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of the NEC August – data reviewed by NPD/NPAD/ANPD September – NPD/NPAD/ANPD report to NFO Aggregate data reviewed annually: Graduate Evaluation by Employer Survey: January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of the NEC August – data reviewed annually: Graduate Evaluation by Employer Survey: January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of the NEC August – data reviewed by NPD/NPAD/ASNPD September – NPD/NPAD/ASNPD report to NFO OCCC Nursing Advisory Committee Survey October/March – data collected by NEC 	 6.5.2 Review and analysis of data for graduating classes Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO 6.5.3 Nursing Program Post Graduate Survey is conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Review and analysis of NPPGS by NEC Surveys are reviewed and initial data compiled by NPD/NPAD/ANPD (ANPD position eliminated Spring 2012). NPD/NPAD/ANPD reports and recommends action to NFO (ANPD position eliminated Spring 2012) Graduate Evaluation by Employer Survey is conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Review and analysis of GEES by NEC Surveys are reviewed and initial data compiled by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Review and analysis of GEES by NEC Surveys are reviewed and initial data compiled by NPD/NPAD/ANPD (ANPD position eliminated Spring 2012). NPD/NPAD/ANPD reports and recommends action to NFO (ANPD position eliminated Spring 2012).
 August – data reviewed by NPD/NPAD/ASNPD September – NPD/NPAD/ASNPD report to NFO 	 Review and analysis of OCCC Nursing Advisory Committee Survey by NEC, NCC and NFO
 6.5.4 Aggregate data reviewed annually: Nursing Program Post Graduation Survey: January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of the NEC August – data reviewed by NPD/NPAD/ANPD 	 6.5.4 Nursing Program Post Graduate Survey is conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Surveys are reviewed and analyzed and initial data compiled by

September – NPD/NPAD/ANPD report to NFO	 NPD/NPAD/ANPD (ANPD position eliminated Spring 2012). NPD/NPAD/ANPD reports and recommends action to NFO (ANPD position eliminated Spring 2012) Graduates will be contacted at six months post graduation for employment status.
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COMPONENT 6.5 RESULTS

		esults of Data Co Including actual le				Actions for Program Development, Maintenance, or Revision
AY 2011						AY2011
ELA 6.5.1:	met					6.5.1
						Continue to monitor.
The licensu	ure exam pass rate	es were at or above	e the national me	an.		
	Licensure Pass	s Rates With Thre	e Year Rolling N	lean		
	Year	OCCC Pass	Oklahoma	Nat Pass Rate		
		Rate %	Pass Rate	%		
	2008	92.78%	85.65%	86.73%		
	2009	91.75%	86.67%	88.42%		
	2010	92.57%	86.77%	87.42%		
	Mean 08-10	92.37%	86.36%	87.52%		
	2011	94.97%	86.34%	87.90%		
	Mean 09-11	93.10%	86.59%	87.91%		
	nertieller met					6.5.2
	partially met	no/Activition				August 2010 Actions
	August 2010 Recommendations/Activities					Attrition recognized as the period between Transition
The BADNAP and Traditional pathways fell below the ELA of 80%. V. McCartney, team leader for CLP reported to the NFO that enrollment for CLP was at 45 although 61 had been					courses and beginning of CLP NUR 2539 in Fall 2011.	
accepted. Reasons for the difference included failure to pass NCLEX-PN, timing concerns for					To continue to monitor.	
					October 2010 Actions	
	working students, and changing family dynamics. October 2010 Recommendations/Activities					Revision to the basic application for the BADNAP
			ollege Curriculum	n revision that will im	plement a	pathway to be considered at November 4, 2010 College Curriculum Committee meeting.

new basic application requirement for the BADNAP applicants; a minimum score of 70% on the ATI TEAS exam. Supporting data is available for review and included in the request to the College Curriculum Committee. Brought to NFO.

Program Completion Rates

Semester Admitted	Pathway	Number Admitted	Semester Graduated	Number Graduated	Program Completion
SPR 08	Traditional	72	Fall 09	51	71%
Fall 08	Traditional	71	SPR 10	48	67%
Summer 09	BADNAP	58	SPR 10	42	72%
Fall 09	CLP	62	SPR 10	58	94%
Totals		263	AY10	199	76%

Semester Admitted	Pathway	Number Admitted	Semester Graduated	Number Graduated	Program Completion
SPR 09	Traditional	69	Fall 10	51	73.91%
Fall 09	Traditional	68	SPR 11	48	70.58%
Summer 10	BADNAP	44	SPR 11	30	68.18%
Fall10	CLP	43	SPR 11	41	95.34%
Totals		224	AY11	170	75.89%

Total Program Evaluation – Faculty Survey: Item 64.1-64.3

Item 64.1 – 4.30 Item 64.2 – 4.20 Item 64.3 – 4.17

ELA 6.5.3: met

Program satisfaction measures (qualitative and quantitative) addressed graduates and their employers.

40 graduates out of 43 respondents (93%) rated satisfaction with the nursing program. Three of the three (100%) respondents to the employer survey rated satisfaction with the nursing program

Nursing Post Graduate Survey: Item 12

6.5.3

Unfortunately, the person who normally handles the employer for IE had medical issues this past year and the Director was unaware that the phone calls were not made to the employers as IE received them. So the 2011 graduates who were asked to provide the names of their supervisor for IE to survey them did not get called in a prompt fashion. When the Director discovered the error,

ltem 12 – 4.19

Graduate Program Satisfaction

Year	2008	2009	2010	2011
Indicator (mean)				
Satisfaction with preparation for	3.39	3.79	4.40	4.35
NCLEX-RN exam				
Satisfaction with preparation for	3.28	3.71	4.00	Not
clinical practice				rated
Overall satisfaction with nursing	3.76	3.88	4.30	4.19
program				

Graduate Evaluation by Employer Survey: Item 17

Item 17 – 4.33

Employer Program Satisfaction

Year	2008	2009	2010	2011
Indicator (mean)				
Satisfaction with critical thinking skills	4.28	4.40	4.50	5.00
Overall satisfaction with	4.72	4.56	4.67	4.67
demonstration of professional, social,				
and personal behaviors consistent				
with expectations of an entry-level				
registered nurse				
Overall satisfaction of the preparation	4.59	4.57	4.88	4.33
received by OCCC nursing graduates				

ELA 6.5.4: met

Job placement rates were addressed through quantified measures that reflect program demographics and history to include survey by IE at 6 to 12 months post-graduation, telephone, e-mail, and social media contact by nursing program personnel at 6 months post-graduation.

Nursing Post Graduate Survey: Items 1, 2

ltem 1 – 39

IE immediately began phone calling but some of this information was over a year old. We only had 8 responses out of the 61 viable employers overall – 3 for nursing.

IE's plan, which has already been put in place, is to contact employers within one week of contacting the graduate. In addition, they have emphasized with the phone caller to obtain the graduate's supervisor's name (There were 35 of the addresses which included a company name but not the name of the supervisor). Hopefully, this will improve the response rate. Continue to monitor

6.5.4 Continue to monitor

Of those g working pa Felephone	art-time (1 not by cl	noice). e with students g ng. 95.5% repor	graduating in 2012,	ng fulltime and 3 reporte 6 months post- graduati	
			Respondents	ents	
	Academic Year	Number of Graduates	Number Responding Number Employed	Percent of Respondents Employed	
	AY 2		73 73	100%	
	AY 2 AY 2		81 81 156 149	100% 96%	
<u>Y 2012</u> LA 6.5.1 The licens	ure exam pass rate		hree Year Rolling	Mean Nat Pass Rate	AY 2012 6.5.1 Continue to monitor.
		Rate %	Pass Rate	%	
	2008	92.78%	85.65%	86.73%	
	2009	91.75%	86.67%	88.42%	
	2010	92.57% 92.37%	86.77%	87.42% 87.52%	
	Mean 08-10	92.37% 94.97%	86.36% 86.34%	87.90%	
	2011			01.3070	
	2011 Mean 09-11	94.97 % 93.10%	86.59%	87.91%	

	Mean 10-12	94.80%	88.19	% 88	.55%	
ELA 6.5.2: me ELAs for progra demographics September 20 Discussion on Program	et ram completion , academic pro <u>11 Recommer</u> NT1/NTII attri Completion	n were determ ogression, and <u>odations/Activi</u> tion and ways Rates	nined by the facu I program histor ties to improve.	ulty and reflect p	program	6.5.2 To improve attrition and completion rates for the BADNAP pathway, the Test of Essential Skills (TEAS was added to the requirements for application. Stude must score 70% or above to be eligible for admission BADNAP (effective with Summer 12 admissions). Continue to monitor. The program completion rate El
Semester Admitted	Pathway	Number Admitted	Semester Graduated	Number Graduated	Program Completion	will be reduced to 70% from 80% effective for AY 13 a per recommendation of the QSEN consultant.
Spr10	Traditional	72	Fall 11	55	76.38%	September 2011 Actions
Fall 10	Traditional	69	SPR 12	60	86.95%	NFO to continue discussion on attrition rates for NTI/
Summer 11	BADNAP	56	SPR 12	47	83.92%	
Fall11	CLP	49	SPR 12	46	93.87%	
Totals		246	AY12	208	84.55%	
Item 6 Item 6 ELA 6.5.3: me Program satisf employers. 48 graduates 6 B1 (90%) resp Nursing Post	faction measure out of 51 respo	ondents (94%) employer sur rvey: Item 12 I.20 nployer Surve	rated satisfaction	on with the nurs	raduates and thei sing program. 28 c nursing program	

Employer Program	n Satisfa	action		
Year	2009	2010	2011	2012
Indicator (mean)				
Satisfaction with critical thinking skills	4.40	4.50	5.00	4.39
Overall satisfaction with	4.56	4.67	4.67	4.36
demonstration of professional, social, and personal behaviors consistent with expectations of an entry-level registered nurse				
Overall satisfaction of the preparation received by OCCC nursing graduates	4.57	4.88	4.33	4.62

OCCC Nursing Advisory Committee Survey: Items 9.1 – 9.4

Item 9.1 – 4.79 Item 9.2 – 4.79 Item 9.3 – 4.62 Item 9.4 – 4.77

ELA 6.5.4: met

Job placement rates are addressed through quantified measures that reflect program demographics and history.

Nursing Post Graduate Survey: Items 1,2

Of the graduates responding to the survey, 45 reported working fulltime and 4 reported working part-time (3 not by choice).

Telephone contact was made with students graduating in 2012, 6 months post- graduation, with 192 out of 218 responding. 91.7% reported employment.

6.5.4

Continue to monitor. The job placement rate ELA will be reduced to 80% of graduates from 90% of graduates effective for AY 13 as per recommendation of the QSEN consultant.

		Job Pla	cement F	Rates	
		ites	Respo	ndents	lents
	Academic Year	Number of Graduates	Number Responding	Number Employed	Percent of Respondents Employed
	AY 2	010 203	81	81	100%
	AY 2		156	149	96%
	AY 2	012 218	192	176	92%
<u>2013</u> A 6.5.1: e licens	ure exam pass rate	es are at or abo e Pass Rates \			
				lahoma	Nat Pass Rat
	Year	OCCC Pass			Nat 1 ass Nat
		Rate %	Pa	ss Rate	%
	2008	Rate % 92.78%	Pa	ss Rate 5.65%	% 86.73%
	2008 2009	Rate % 92.78% 91.75%	Pa 8 8	ss Rate 5.65% 6.67%	% 86.73% 88.42%
	2008 2009 2010	Rate % 92.78% 91.75% 92.57%	Pa 8 8 8	ss Rate 5.65% 6.67% 6.77%	% 86.73% 88.42% 87.42%
	2008 2009 2010 Mean 08-10	Rate % 92.78% 91.75% 92.57% 92.37%	Pa 8 8 8 8 8	ss Rate 5.65% 6.67% 6.77% 6.36%	% 86.73% 88.42% 87.42% 87.52%
	2008 2009 2010 Mean 08-10 2011	Rate % 92.78% 91.75% 92.57% 92.37% 94.97%	Pa 8 8 8 8 8 8 8	ss Rate 5.65% 6.67% 6.77% 6.36%	% 86.73% 88.42% 87.42% 87.52% 87.90%
	2008 2009 2010 Mean 08-10 2011 Mean 09-11	Rate % 92.78% 91.75% 92.57% 92.37% 94.97% 93.10%	Pa 8 8 8 8 8 8 8 8 8 8	ss Rate 5.65% 6.67% 6.36% 6.34% 6.59%	% 86.73% 88.42% 87.42% 87.52% 87.90% 87.91%
	2008 2009 2010 Mean 08-10 2011 Mean 09-11 2012	Rate % 92.78% 91.75% 92.57% 92.37% 94.97% 93.10% 96.85%	Pa 88 88 88 88 88 88 88 99	ss Rate 5.65% 6.67% 6.36% 6.34% 6.59% 1.45%	% 86.73% 88.42% 87.42% 87.52% 87.90% 87.91% 90.34%
	2008 2009 2010 Mean 08-10 2011 Mean 09-11 2012 Mean 10-12	Rate % 92.78% 91.75% 92.57% 92.37% 94.97% 93.10%	Pa 88 88 88 88 88 88 88 99	ss Rate 5.65% 6.67% 6.36% 6.34% 6.59%	% 86.73% 88.42% 87.42% 87.52% 87.90% 87.91%
	2008 2009 2010 Mean 08-10 2011 Mean 09-11 2012	Rate % 92.78% 91.75% 92.57% 92.37% 94.97% 93.10% 96.85%	Pa 88 88 88 88 88 88 88 99	ss Rate 5.65% 6.67% 6.36% 6.34% 6.59% 1.45%	% 86.73% 88.42% 87.42% 87.52% 87.90% 87.91% 90.34%

ELA 6.5.2:

ELAs for program completion are determined by the faculty and reflect program demographics, academic progression, and program history.

Semester Admitted	Pathway	Number Admitted	Semester Graduated	Number Graduated	Program Completion
Spr 11	Traditional		Fall 12		
Fall 11	Traditional		SPR 13		
Summer 12	BADNAP		SPR 13		
Fall 12	CLP		SPR 13		
Totals					

March 2013 Recommendations/Activities

The NFO was presented with information regarding the CLP Curriculum Change proposal. **Total Program Evaluation – Faculty Survey: Item** 64.1-64.3

Item 64.1 – 4.89 Item 64.2 – 5.00 Item 64.3 – 5.00

ELA 6.5.3:

Program satisfaction measures (qualitative and quantitative) address graduates and their employers.

Nursing Post Graduate Survey: Item 12

Item 12

Graduate Evaluation by Employer Survey: Item 17

Item 17

Employer Program Satisfaction

Year	2010	2011	2012	2013
Indicator (mean)				
Satisfaction with critical thinking skills	4.50	5.00	4.39	
Overall satisfaction with	4.67	4.67	4.36	

6.5.2

March 2013 Actions

The CLP Curriculum Change Proposal will go to the OCCC Curriculum Committee on March 7. 2013.

6.5.3 Awaiting results.

	demonstration of profe and personal behavio with expectations of registered n	ors consi an entry- urse	istent -level			
	Overall satisfaction of received by OCCC nu			4.88	4.33	4.62
ELA 6.5. Job place demogra	ursing Advisory Comm Item 9.1 – 5.00 Item 9.2 – 4.92 Item 9.3 – 4.97 Item 9.4 – 4.97 4: ement rates are address phics and history. Nursing Post Graduate Item 1 – Item 2 –	ed throug Survey Job F	gh quanti	ified meas ,2		at reflec
		es	Resp	ondents	onte	5115
	Academic Year	Number of Graduates	Number Responding	Number Employed	Dercent of Resnondents	
	AY 2010 AY 2010 AY 2010 AY 2010	Number of Graduates	· ·		1(Employed
	AY 2010	203	Number Responding	Number Employed	1(00%

Dates		Tradi	tional NP4		CLP	BADNAP		
Graduation	Survey	# Grads	# Respondents Employed	# Grads	# Respondents Employed	# Grads	# Respondents Employed	
F10	6/11	59	56/59 (95%)					
SP11	12/11	40	38/40 (95%)	33	27/29 (93%)	28	28/28 (100%)	
F11	6/12	66	61/65 (94%)					
SP12	12/12	65	48/54 (88.8%)	42	35/38 (92%)	45	32/35 (91%)	
F12	6/13	61	47/51 (92%)					
SP13	12/13	61		37		35		
F14	6/15							
SP15	12/15							
F15	6/16							

6.5.4 Nursing Employment Figures* 6 Month Post Graduation Statistics by Cohort

*Full or part-time employment

STANDARD VI COMPONENT 6.6

Component	Expected Level of Achievement
The systematic plan for evaluation encompasses students enrolled in distance education and includes evidence that student learning and program outcomes are comparable for all	Not Applicable – No Distance Education Program
students.	

Frequency of Assessment	Assessment Method
Not Applicable	Not Applicable

COMPONENT 6.6 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2011</u>	AY2011
ELA	
<u>AY 2012</u>	<u>AY 2012</u>
ELA	
<u>AY 2013</u>	<u>AY 2013</u>
ELA	

Appendix A

TREND ANALYSIS: Mean score of 2.8 on a scale of 4 on the NESA Student/Faculty Evaluations of Clinical Experience

Standard 4	Trends AY	2011	Tre	nds AY2012			Trends A	/2013	
	NESA – Student Eva Clinical Facility Surv		SA – Student Evalu vey:	ation of Clini	cal Facility	NESA – Student I	Evaluation of	Clinical Facil	ity Survey:
		-				Facility	AY2011	AY2012	AY2013
	Facility	AY2011 Annualized Mean	Facility	AY2011 Annualized Mean	AY2012 Annualized Mean		Annualized Mean Score	Mean Score	Annualized Mean Score
		Score	D "	Score	Score	Belluvue	ND	3.22	3.06
	Belluvue	ND	Belluvue	ND	3.22	Bone and Joint	ND	ND	ND
	Cedar Ridge	3.72	Bone and Joint	ND	ND	Cedar Ridge	3.72	3.19	3.43
	Deaconess @	2 55	Cedar Ridge	3.72	3.19	Community	ND	ND	ND
	Bethany	3.55 3.45	Community	ND	ND	Deaconess @	2.55	2.04	2.00
	Deaconess	3.45 2.80	Deaconess @	3.55	3.61	Bethany	3.55 3.45	3.61 3.21	3.62 3.35
	Epworth Villa Grace Living	2.00	Bethany Deaconess		3.01	Deaconess	2.80	3.21	3.35 ND
	Norman	2.56		3.45 2.80	3.21	Epworth Villa Grace Living	2.00	3.30	ND
	Grady Memorial	3.72	Epworth Villa	2.80	3.30	Norman	2.56	3.00	3.83
	Griffin	3.38	Grace Living Norman	2.56	3.00	Grace Living So	ND	ND	2.92
	IBMC	3.37	Grady Memorial	3.72	3.84	Grady Memorial	3.72	3.84	3.50
	ISMC	3.38	Griffin	3.38		Griffin	3.38	ND	ND
	Lackey BRC	3.06	IBMC	3.37	3.14	IBMC	3.37	3.14	3.41
	Lackey North	2.78	ISMC	3.38	3.48	ISMC	3.38	3.48	3.55
	Mercy	3.46	Lackey BRC	3.06	3.33	Lackey BRC	3.06	3.33	ND
	Midwest City	3.33	Lackey North	2.78	3.37	Lackey North	2.78	3.37	ND
	NRH	3.80	Manor Care	ND	ND	Manor Care	ND	ND	ND
	OUMC-Presby	3.50	McBride	ND	3.94	McBride	ND	3.94	3.40
	OUMC-		Mercy	3.46	3.60	Mercy	3.46	3.60	3.59
	Women/Children	3.77	Midwest City	3.33	3.25	Midwest City	3.33	3.25	3.34
	St. Anthony	3.50	NRH	3.80	3.72	NRH	3.80	3.72	3.44

St. Anthony So	3.60		NRH Healthplex	ND	3.69	NRH Healthplex	ND	3.69	3.72
The Children's			Norman VA	ND	ND	Norman VA	ND	ND	ND
Center	3.69		OUMC-Presby	3.50	3.44	OUMC-Presby	3.50	3.44	3.21
	1		OUMC-			OUMC-			•
			Women/Childre			Women/Childre			
			n	3.77	3.64	n	3.77	3.64	3.54
ELA: Partially met			St. Anthony	3.50	3.35	St. Anthony	3.50	3.35	3.26
			St. Anthony So	3.60	3.24	St. Anthony So	3.60	3.24	3.35
			The Children's			The Children's			
			Center	3.69	3.88	Center	3.69	3.88	4.00
		EL	A: Met	•		VA	ND	ND	2.72
						ELA: Partially met	1	•	
NESA - Faculty Eval	uation of	NES	SA – Faculty Evalua	ation of Clinic	al Facility	NESA – Faculty Ev	valuation of (Clinical Facili	tv Survev
Clinical Facility Surv			vey:		arraciity				ty Survey
Chinical Lacinty Surv	ey.	Sui	vey.						
Facility	AY2011		Facility	AY2011	AY2012	Facility	AY2011	AY2012	AY2013
	Annualized		1 cionicy	Annualized	Annualized		Annualize	Annualized	Annualize
	Mean			Mean	Mean		d Mean	Mean	Mean
	Score			Score	Score		Score	Score	Score
Belluvue			Belluvue	3.50	ND	Belluvue	3.50	ND	ND
Belluvue	3.50		Delluvue	3.50	ND	Belluvue	3.50		
	3.50 3.88		Bone and Joint	ND	ND	Bone and Joint	3.50 ND	ND	ND
Cedar Ridge Deaconess @			Bone and Joint			Bone and Joint			
Cedar Ridge				ND	ND		ND	ND	ND
Cedar Ridge Deaconess @	3.88		Bone and Joint Cedar Ridge	ND 3.88	ND 3.91	Bone and Joint Cedar Ridge	ND 3.88	ND 3.91	ND ND
Cedar Ridge Deaconess @ Bethany	3.88 3.88		Bone and Joint Cedar Ridge Community	ND 3.88	ND 3.91	Bone and Joint Cedar Ridge Community	ND 3.88	ND 3.91	ND ND
Cedar Ridge Deaconess @ Bethany Deaconess	3.88 3.88 3.73		Bone and Joint Cedar Ridge Community Deaconess @	ND 3.88 ND	ND 3.91 ND	Bone and Joint Cedar Ridge Community Deaconess @	ND 3.88 ND	ND 3.91 ND	ND ND ND
Cedar Ridge Deaconess @ Bethany Deaconess Grady Memorial	3.88 3.88 3.73		Bone and Joint Cedar Ridge Community Deaconess @ Bethany	ND 3.88 ND 3.88	ND 3.91 ND 3.50	Bone and Joint Cedar Ridge Community Deaconess @ Bethany	ND 3.88 ND 3.88	ND 3.91 ND 3.50	ND ND ND
Cedar Ridge Deaconess @ Bethany Deaconess Grady Memorial Grace Living Center Norman IBMC	3.88 3.88 3.73 3.94 ND 3.21		Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess	ND 3.88 ND 3.88 3.73	ND 3.91 ND 3.50 3.75	Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess	ND 3.88 ND 3.88 3.73	ND 3.91 ND 3.50 3.75	ND ND ND 3.88
Cedar Ridge Deaconess @ Bethany Deaconess Grady Memorial Grace Living Center Norman	3.88 3.88 3.73 3.94 ND 3.21 3.73		Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa	ND 3.88 ND 3.88 3.73	ND 3.91 ND 3.50 3.75	Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa	ND 3.88 ND 3.88 3.73	ND 3.91 ND 3.50 3.75	ND ND ND 3.88
Cedar Ridge Deaconess @ Bethany Deaconess Grady Memorial Grace Living Center Norman IBMC	3.88 3.73 3.94 ND 3.21 3.73 4.00		Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa Grace Living	ND 3.88 ND 3.88 3.73 ND ND 3.94	ND 3.91 ND 3.50 3.75 3.63 ND 4.00	Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa Grace Living	ND 3.88 ND 3.88 3.73 ND	ND 3.91 ND 3.50 3.75 3.63	ND ND ND 3.88 ND
Cedar Ridge Deaconess @ Bethany Deaconess Grady Memorial Grace Living Center Norman IBMC ISMC	3.88 3.88 3.73 3.94 ND 3.21 3.73 4.00 3.75		Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa Grace Living Norman	ND 3.88 ND 3.88 3.73 ND ND	ND 3.91 ND 3.50 3.75 3.63 ND	Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa Grace Living Norman	ND 3.88 ND 3.88 3.73 ND ND	ND 3.91 ND 3.50 3.75 3.63 ND	ND ND ND 3.88 ND 4.00
Cedar Ridge Deaconess @ Bethany Deaconess Grady Memorial Grace Living Center Norman IBMC ISMC Lackey Manor Manor Care Mercy	3.88 3.88 3.73 3.94 ND 3.21 3.73 4.00 3.75 3.75		Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa Grace Living Norman Grady Memorial	ND 3.88 ND 3.88 3.73 ND ND 3.94	ND 3.91 ND 3.50 3.75 3.63 ND 4.00	Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa Grace Living Norman Grace Living So	ND 3.88 ND 3.88 3.73 ND ND	ND 3.91 ND 3.50 3.75 3.63 ND ND	ND ND ND 3.88 ND 4.00 2.05
Cedar Ridge Deaconess @ Bethany Deaconess Grady Memorial Grace Living Center Norman IBMC ISMC Lackey Manor Manor Care	3.88 3.88 3.73 3.94 ND 3.21 3.73 4.00 3.75		Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa Grace Living Norman Grady Memorial IBMC ISMC	ND 3.88 ND 3.88 3.73 ND ND 3.94 3.21	ND 3.91 ND 3.50 3.75 3.63 ND 4.00 3.80	Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa Grace Living Norman Grace Living So Grady Memorial	ND 3.88 ND 3.88 3.73 ND ND	ND 3.91 ND 3.50 3.75 3.63 ND ND	ND ND ND 3.88 ND 4.00 2.05
Cedar Ridge Deaconess @ Bethany Deaconess Grady Memorial Grace Living Center Norman IBMC ISMC Lackey Manor Manor Care Mercy	3.88 3.88 3.73 3.94 ND 3.21 3.73 4.00 3.75 3.75		Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa Grace Living Norman Grady Memorial IBMC ISMC Lackey (BRC)	ND 3.88 ND 3.88 3.73 ND ND 3.94 3.21 3.73 ND	ND 3.91 ND 3.50 3.75 3.63 ND 4.00 3.80 3.80 4.00	Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa Grace Living Norman Grace Living So Grady Memorial Heart Hospital	ND 3.88 ND 3.88 3.73 ND ND ND 3.94	ND 3.91 ND 3.50 3.75 3.63 ND ND 4.00	ND ND ND 3.88 ND 4.00 2.05 3.75
Cedar Ridge Deaconess @ Bethany Deaconess Grady Memorial Grace Living Center Norman IBMC ISMC Lackey Manor Manor Care Mercy Midwest City	3.88 3.73 3.94 ND 3.21 3.73 4.00 3.75 3.75 3.63		Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa Grace Living Norman Grady Memorial IBMC ISMC	ND 3.88 ND 3.88 3.73 ND 3.94 3.21 3.73	ND 3.91 ND 3.50 3.75 3.63 ND 4.00 3.80	Bone and Joint Cedar Ridge Community Deaconess @ Bethany Deaconess Epworth Villa Grace Living Norman Grace Living So Grady Memorial Heart Hospital No	ND 3.88 ND 3.88 3.73 ND ND	ND 3.91 ND 3.50 3.75 3.63 ND ND 4.00 ND	ND ND ND 3.88 ND 4.00 2.05 3.75 4.00

Women/Children		Midwest City	3.63	ND	Lackey Manor	4.00	ND	ND
St. Anthony	3.66	NRH	3.97	4.00	Manor Care	3.75	ND	ND
St. Anthony So	3.87	Norman VA	ND	ND	Mercy	3.75	3.82	3.61
The Children's		OUMC-Presby	3.46	3.56	Midwest City	3.63	ND	3.63
Center	4.00	OUMC-			NRH	3.97	4.00	3.89
· · · · · · · · · · · · · · · · · · ·		Women/Childre			Norman VA	ND	ND	ND
		n	4.00	4.00	OUMC-Presby	3.46	3.56	3.54
ELA:Met		St. Anthony	3.66	3.60	OUMC-			
		St. Anthony So	3.87	3.63	Women/Children	4.00	4.00	2.88
		The Children's			St. Anthony	3.66	3.60	3.70
		Center	4.00	4.00	St. Anthony So	3.87	3.63	3.60
					The Children's			
		ELA: Met			Center	4.00	4.00	3.94
					VA	ND	ND	ND
								1
					ELA: Partially met			

Component		Trends AY			nds AY2012			Trends AY		
		Facility Staff Eva Students Survey		NESA –Facility Sta Faculty/Students S		of Clinical	NESA – Facility S Faculty/Students		n of Clinical	
		acility	AY2011	Facility	AY2011	AY2012		AY2011	AY2012	AY2013
		aciiity	Annualized	Facility	Annualized	Annualized	Facility	Annualized	Annualized	Annualized
			Mean		Mean	Mean		Mean	Mean	Mean
			Score		Score	Score		Score	Score	Score
	B	elluvue	ND	Belluvue	ND	ND	Belluvue	ND	ND	ND
	С	edar Ridge	ND	Bone and Joint	ND	ND	Bone and Joint	ND	ND	ND
	D	eaconess @		Cedar Ridge	ND	4.00	Cedar Ridge	ND	4.00	ND
	B	ethany	ND	Community	ND	ND	Community	ND	ND	ND
	D	eaconess	3.91	Deaconess @			Deaconess @			
	E	pworth Villa	ND	Bethany	ND	4.00	Bethany	ND	4.00	4.00
	G	race Living		Deaconess	3.91	3.72	Deaconess	3.91	3.72	3.81
	Ν	orman	ND	Grace Living	ND	3.99	Grace Living	ND	3.99	4.00

Grady Memorial	3.76	Norman			Norman			
Griffin	ND	Grady Memorial	3.76	3.87	Grace Living So			4.00
IBMC	3.79	Griffin	ND	4.00	Grady Memorial	3.76	3.87	3.96
ISMC	3.90	IBMC	3.79	3.72	Griffin	ND	4.00	ND
Lackey BRC	ND	ISMC	3.90	3.88	IBMC	3.79	3.72	3.83
Lackey North	ND	Lackey BRC	ND	4.00	ISMC	3.90	3.88	3.88
Mercy	3.68	Lackey North	ND	ND	Lackey BRC	ND	4.00	ND
Midwest City	3.87	Manor Care	ND	ND	Lackey North	ND	ND	ND
NRH	3.89	Mercy	3.68	3.90	Manor Care	ND	ND	ND
OUMC-Presby	3.76	Midwest City	3.87	3.39	Mercy	3.68	3.90	3.9
OUMC-		NRH	3.89	3.83	Midwest City	3.87	3.39	ND
Women/Children	3.71	Norman VA	ND	ND	NRH	3.89	3.83	3.9
St. Anthony	3.81	OUMC-Presby	3.76	3.71	Norman VA	ND	ND	ND
St. Anthony So	4.00	OUMC-			OUMC-Presby	3.76	3.71	3.2
The Children's		Women/Childre			OUMC-			
Center	ND	n	3.71	ND	Women/Childre			
		St. Anthony	3.81	3.66	n	3.71	ND	3.8
		St. Anthony So	4.00	3.91	St. Anthony	3.81	3.66	3.8
		The Children's			St. Anthony So	4.00	3.91	3.8
ELA: Met		Center	ND	3.55	The Children's			
					Center	ND	3.55	NE
		ELA: Met			VA	ND	ND	3.9
					ELA: Met			

ND = No Data either we do not use of no surveys received.

SPE Activity Calendar AY 2014

CRITERION	1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	1.10	1.11	2.1	2.2	2.3	2.4	2.5
MONTH	BR		NPD NPAD		HPD	HPD	HPD									
August			NFO	NPD										NPD NPAD		NPD
Sept	NEC	NEC	NEC	NPD					NEC	NEC						NEC
Oct	NFO NCC ***	NFO	NEC NFO ***						NFO	NFO						NFO
Nov	NEC ***	***	NCC ***													
Dec			NEC NFO	NPD												
Jan			NFO IE	NPD												NPD
Feb	NPD NPAD							HPD	HPD NPD							
March	***		***	NPD												
April	***	***	***													
May	***	***	NEC	NPD					***	***						***
June			W.	NPD				81000		8 1000		81000				
July			IE	NPD CACA				NPD NPAD		NPD NPAD		NPD NPAD	NPD NPAD			

CRITERION	2.6	0.7	0.0	2.9	2.10	2.1	3.2	3.3	3.4	2.5	26	261	3.6.2	262	3.7	3.8
MONTH	2.6	2.7	2.8	2.9	2.10	3.1	3.2	3.3	3.4	3.5	3.6 DSFS	3.6.1	3.0.2	3.6.3	3.7 NPD	3.0
August																
Sept	NEC NPD	NEC	NEC	NEC	NEC	NEC	NEC	NEC								NEC
Oct	NFO NPD TL	NFO	NFO	NFO NPD TL	NFO	NFO	NEC NFO ***	NFO	NEC							NFO
Nov	TL IE			NPD NFO TL		***	***	***	***	***						
Dec	***			***												
Jan																
Feb	NPD NPAD			NPD NPAD		NAC	NAC									
March	NPD NPAD			NPD		NEC NPD NPAD	NEC ***									NEC
April	NPD NPAD IE			NPD IE		NFO ***	NAC NFO NPD ***	***	***							NFO ***
May	***	***	***	**	**	***	**	***	**							***
June							NPD									
July																

RITERION															
MONTH CRITERION	3.9	4.1	4.2	4.3	4.4	4.5	4.6	4.7	4.8	4.9	4.10	4.11	4.12	5.1	5.2
August															
Sept		NEC		NEC	NEC NT						NEC		NEC	NEC	NEC
Oct		NCC ***	NEC	NFO	NCC	NEC	NEC	NEC		NEC ***	NCC		NCC	NFO	NFO
Nov		NFO ***	NCC ***		NFO ***	NCC	NCC ***	NCC ***	***	NEC NCC ***	NFO ***		NFO ***		***
Dec			NFO			NFO	NFO	NFO		NFO					
Jan			NEC	NT		NEC IE	NEC	NEC	NEC	NEC			NEC		
Feb				NT										NPD/ NFO	
March		NEC ***	NEC NCC		NT	NEC NCC	NEC NCC	NEC NCC TC	NCC	NEC NCC ***			NCC	NPD	
April		NCC ***	NCC NFO ***	NCC	NT ***	NCC NFO ***	NCC NFO ***	NCC NFO ***	NFO	NCC NFO ***	***		NFO ***		***
May		NFO ***	NFO ***	NFO ***	NT ***	NFO ***	NFO ***	NFO ***	NEC	NFO ***	***		***	***	***
June		СР										NPD CACA			
ylul						IE						NPD CACA			

MONTH CRITERION	5.3	5.4	6.1	6.2	6.3	6.4	6.4.1	6.4.2	6.4.3	6.4.4	6.4.5	Outcomes
MONTH												
August									NPD NPAD	NPD NPAD	NPD NPAD	
Sept	NEC	NEC		NEC			NPD/ NFO			NFO	NFO	NEC
Oct	NCC	NFO		NCC	***	***						NCC
Nov	NFO ***			NFO	NPD						***	NFO
Dec												
Jan					NEC	NEC IE			IE	IE	IE	IE
Feb												
March					***	NEC NC C ***	NPD/ NFO	NEC				NEC
April	***					NC C NFO		NCC				NCC
May	***	***	NF O	***		NFO		NFO ***				NFO ***
June					NEC						**	
July					NPD NPA D	IE		NPD	IE	IE	IE	IE

Key:

NEC – Nursing Evaluation Committee

- NCC Nursing Curriculum Committee
- NAC Nursing Admissions Committee
- NFO Nursing Faculty Organization
- HPD –Health Professions Dean
- **NPD Nursing Program Director**
- NPAD –Nursing Program Associate Director
- TL Team Leader

IE – Department of Institutional Effectiveness

- CACA Clinical Affiliations Compliance Administrator
- NT Nursing Team
- **BR OCCC Board of Regents**
- **CP Clinical Partners**
- **TC Testing Committee**

*** data collection

OKLAHOMA CITY COMMUNITY COLLEGE NURSING PROGRAM SYSTEMATIC PLAN EVALUATION RESULTS AY 2014-2016

Systematic Plan Evaluation

STANDARD I: MISSION AND ADMINISTRATIVE CAPACITY

The mission of the nursing education unit reflects the governing organization's core values and is congruent with its mission/goals. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified program outcomes.

STANDARD II: FACULTY AND STAFF

Qualified and credentialed faculty ensures the achievement of the student learning outcomes and program outcomes. Sufficient qualified staff is available to support the nursing education unit.

STANDARD III: STUDENTS

Student policies and services support the achievement of the student learning outcomes and program outcomes of the nursing education unit.

STANDARD IV: CURRICULUM

The curriculum prepares students to achieve the student learning outcomes and program outcomes of the nursing education unit consistent with safe practice in contemporary healthcare environments.

STANDARD V: RESOURCES

Fiscal, physical, and learning resources are sustainable and sufficient to ensure the achievement of the student learning outcomes and program outcomes of the nursing education unit.

STANDARD VI: OUTCOMES

Program evaluation demonstrates that students and graduates have achieved the established student learning outcomes and program outcomes of the nursing education unit consistent with the mission of the governing organization.

SYSTEMATIC PLAN FOR EVALUATION

The Systematic Plan Evaluation (SPE) has been developed by the nursing program to assess the quality, consistency, and effectiveness of its program. SPE is a guide for the overall evaluation of the program. When areas of need are identified, at times other than those specified, appropriate action is taken. This evaluation plan demonstrates our commitment to excellence and provides evidence of quality improvement. The SPE was reviewed, edited, and approved by members of the Nursing Evaluation Committee (NEC) and the Nursing Faculty Organization (NFO) as a "work in progress" (can be modified and edited as needed with updates posted on the shared drive) The plan was reviewed and approved by the NEC on May 7, 2013 and the entire faculty on May 7, 2013 during NFO special meeting. The SPE is a fluid document and is subject to continuous updates and revisions. All results of data collection and analysis as well as actions for program development, maintenance, or revision are recorded on a separate document entitled "SPE Implementation Results and Trends".

In addition to the Oklahoma City Community College (OCCC) and nursing program evidentiary sources identified in the plan, the following professional documents and publications are utilized:

- Oklahoma Board of Nursing (OBN) standards
- Accreditation Commission for Education in Nursing (ACEN) Interpretive Guidelines, 2013

Data are collected from the OCCC Nursing program community of interest – students, alumni, and local health care agencies – as follows:

- Student evaluations are completed every semester and consist of the following
 - Student Evaluation of Nursing Course (online)
 - Student Evaluation of Clinical Faculty (online)
 - NESA Student Evaluation of Clinical Experience (online)
 - Student Exit Survey (NP4 students only online)
 - Student Input on Instruction (online)
- Community advisory meetings are held every fall and spring.
 - OCCC Nursing Advisory Committee Survey
- NESA Staff Evaluation of Clinical Experience (distributed to staff by faculty prior to departure from clinical facility or completed online each semester)
- Nursing Program Post Graduation Surveys are completed 6-12 months post-graduation (per mailing via the Department of Institutional Effectiveness)
- Employers of alumni are asked to complete a Graduate Evaluation by Employer survey every 6 months (per mailing via the Department of Institutional Effectiveness)

Additional data are collected from the OCCC nursing faculty – as follows:

- Total Program Evaluation Faculty Survey (online-annually)
- Adjunct Faculty Survey (online annually)

- Faculty Evaluation of Nursing Course (online-annually)
- NESA Faculty Evaluation of Clinical Experience (online-each semester)

The OCCC web site is found at <u>www.occc.edu</u> and the nursing program web site is found at <u>www.occc.edu/Health/Nursing.html</u>. Online survey data is stored electronically and is password protected for faculty viewing. The data is maintained on the "S" drive of the OCCC Intranet.

The OCCC nursing program standing committees are identified in the SPE as follows:

- Nursing Faculty Organization (NFO)
- Nursing Curriculum Committee (NCC)
- Nursing Evaluation Committee (NEC)
- Nursing Admissions Committee (NAC)

The OCCC nursing program special committees for AY2014 are as follows:

- Clinical Evaluation Committee
- Overview of Nursing Committee
- Pediatric Committee

- Nursing Process
 Committee
- Health Promotion/Maintenance
 Committee
- Leadership Committee

The OCCC nursing program ongoing committees are identified in the SPE as follows:

• Team Leader Committee

Individual Course Team Committees

Nursing Program Director (NPD) Nursing Program Associate Director (NPAD)

- Nursing Advisory Committee (NAdC)
- Testing Committee
- Pinning Committee
- Pharmacology for Nursing Practice Committee
- Simulation Committee
- Math Committee

STANDARD I: MISSION AND ADMINISTRATIVE CAPACITY

The mission of the nursing education unit reflects the governing organization's core values and is congruent with its mission/goals. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified program outcomes.

STANDARD I CRITERION 1.1

Criterion	Expected Level of Achievement
The mission/philosophy and program outcomes of the nursing education unit are congruent with the core values and mission/goals of the governing organization.	 There is 100% congruency between the mission/philosophy and program outcomes of the nursing program and the OCCC stated core values. There is 100% congruency between the mission/philosophy and program outcomes of the nursing program and the OCCC mission/goals. Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 2.1-2.3 Mean score of at least 3.5 on a scale of 5 on the Student Exit Survey: Items 3.1-3.3 Mean score of at least 3.5 on a scale of 5 on the Adjunct Faculty Survey: Items 2.1-2.3 Mean score of at least 3.5 on a scale of 5 on the OCCC Nursing Advisory Committee Survey: Item 1.1-1.3

Frequency of Assessment	Assessment Method
OCCC Board of Regents • Every 5 – 7 years Nursing Student Handbook: • February Total Program Evaluation-Faculty Survey:	 Review of all pertinent literature/documents, actions by Board of Regents Review and analysis of statements of mission/philosophy and program outcomes and their congruency to OCCC core values and mission/goals, including review of relevant survey data. Review of the Nursing Student Handbook. Review and analysis of Total Program Evaluation – Faculty Survey
 May – data collected by NEC September – reviewed by NEC with recommendations to NCC October – reviewed by NCC with recommendations to NFO November – reviewed by NFO 	 by NEC, NCC, and NFO. Review and analysis of Student Exit Survey by NEC, NCC, and NFO. Review and analysis of Adjunct (Part-time) Faculty Survey by NEC, NCC, and NFO.
 Student Exit Survey: November/April – data collected by NEC September – reviewed by NEC October – reviewed by NFO 	 Review and analysis of OCCC Nursing Advisory Committee Survey by NEC and NFO
Adjunct (Part-time) Faculty Survey:	

 May – data collected by NEC 	
• September – reviewed by NEC with recommendations to NCC	
October – reviewed by NCC with recommendations to NFO	
November – reviewed by NFO	
·	
OCCC Nursing Advisory Committee Survey:	
 October/March – data collected by NEC 	
• September – reviewed by NEC with recommendations to NFO	
October – reviewed by NFO	

CRITERION 1.1 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2014</u>	<u>AY2014</u>
ELA 1.1:	Continue to monitor
The Board of Regents conducts a comprehensive review of the statements of vision,	
mission, outcomes, and core values every five to seven years. This review is	
generally done in conjunction with the approval of a new strategic plan. Each year,	
the Board of Regents approves an Annual Plan that aligns with the current vision,	
mission, outcomes, and core values statements, and the initiatives of the current	
strategic plan. While drafts are discussed by the Board throughout meetings each	
Spring, final approval of each year's annual plan is part of the final budget approvals	
that are generally done in June prior to the start of the upcoming fiscal year in July.	
The most recent review took place 2012 and culminated with approval of revised	
statements in March of 2013. The revised statements are included in the new	
strategic plan, The OCCC Roadmap 2018, that was approved by the Board of	
Regents in March 2013. A comparison between OCCC vision, mission, and core	
values and that of the nursing program was made and both were found congruent.	
Revisions to the nursing program's mission, philosophy, objectives and outcomes	
were implemented during the Summer 13 semester for NUR 1519 in the BADNAP	
pathway and Fall 13 for NUR 2539 in the Traditional pathway and Career Ladder	
Pathway as part of a curriculum revision. Implementation for NUR 2549 in the	

raditional oc	nurroa at the etert				
	Surreu al line Start	of the Spring 14	semester.		
	n Evaluation Fac		ms 2.1-2.3		
Item #	Traditional	BADNAP	CLP		
2.1					
2.2					
2.3					
tudent Exit	Survey: Items 3.1	1-3.3			
Item #	Traditional	BADNAP	CLP		
3.1					
3.2					
3.3					
	-11				
ltem Item					
Item Item 1 Item 1 Item 1 Item 1	2.3 I g Advisory Com I.1 I.2	mittee Survey:	ltems 1.1-1.3	AV2015	
Item Item 1 Item 1 Item 1 Item 1	2.3 I g Advisory Com I.1 I.2	mittee Survey:	Items 1.1-1.3	<u>AY2015</u>	
Item Item 1 Item 1 Item 1 Item 1 Item 1 Item 1	2.3 I g Advisory Com I.1 I.2 I.3			<u>AY2015</u>	
Item Item 1 Item 1 Item 1 Item 1 Item 1 Item 1 Item 1 Item 1 Item 1	2.3 ng Advisory Com 1.1 1.2 1.3 n Evaluation Fac	culty Survey: Ite	ms 2.1-2.3	<u>AY2015</u>	
Item Item 1 Item 1 Item 1 Item 1 Item 1 A 1.1: otal Prograr Item #	2.3 I g Advisory Com I.1 I.2 I.3			<u>AY2015</u>	
Item Item 1 Item 1 Item 1 <u>Y 2015</u> LA 1.1: otal Program Item # 2.1	2.3 ng Advisory Com 1.1 1.2 1.3 n Evaluation Fac	culty Survey: Ite	ms 2.1-2.3	<u>AY2015</u>	
Item 1 Item 2 Item 1 Item 2 Item 3 Item 3 Item 3 Item 3 Item 3 Item 4 Item 4 It	2.3 ng Advisory Com 1.1 1.2 1.3 n Evaluation Fac	culty Survey: Ite	ms 2.1-2.3	<u>AY2015</u>	
Item Item 1 Item 1 Item 1 Y 2015 LA 1.1: otal Program Item # 2.1	2.3 ng Advisory Com 1.1 1.2 1.3 n Evaluation Fac	culty Survey: Ite	ms 2.1-2.3	<u>AY2015</u>	
Item 1 Item 1 Item 1 Item 1 Item 1 Y 2015 LA 1.1: otal Program Item # 2.1 2.2 2.3	2.3 ng Advisory Com 1.1 1.2 1.3 n Evaluation Fac	culty Survey: Ite BADNAP	ms 2.1-2.3 CLP	<u>AY2015</u>	
Item 1 Item 1 Item 1 Item 1 Item 1 Y 2015 LA 1.1: otal Program Item # 2.1 2.2 2.3	2.3 ng Advisory Com 1.1 1.2 1.3 n Evaluation Fac Traditional	culty Survey: Ite BADNAP	ms 2.1-2.3	<u>AY2015</u>	
Item 1 Item 1 Item 1 Item 1 Y 2015 LA 1.1: otal Program Item # 2.1 2.2 2.3 tudent Exit	2.3 ng Advisory Com 1.1 1.2 1.3 n Evaluation Fac Traditional Survey: Items 3.	sulty Survey: Ite BADNAP	ms 2.1-2.3 CLP	<u>AY2015</u>	

3.3					
5.5					
diana ta (Dan			0.0		
	t-time) Faculty Si	urvey: items 2.1	-2.3		
Item Item					
Item					
	2.3 ng Advisory Com	mittee Survey:	Itome 1 1-1 3		
Item		innittee Ourvey.			
Item					
Item					
Y2016	-			<u>AY2016</u>	
LA 1.1:					
otal Progra	m Evaluation Fac	ulty Survey: Ite	ms 2.1-2.3		
Item #	Traditional	BADNAP	CLP		
2.1					
2.2					
2.3					
		· · · · ·			
Student Evit	Survey: Items 3.				
			CLP		
Item #	Traditional	BADNAP	GLF		
Item # 3.1	Traditional	BADNAP	ULF		
Item #	Traditional	BADNAP			

STANDARD I CRITERION 1.2

Criterion	Expected Level of Achievement
The governing organization and nursing education unit ensure representation of the nurse administrator and nursing faculty in	 1.2a The Nursing Program Director and the Nursing Program Associate Director will participate in nursing program standing committees and secondary committees as assigned and as necessary. The Nursing Program Director and the Nursing Program Associate Director will participate in at least one college committee. 1.2b
governance activities; opportunities exist for student representation in governance activities. 1.2a Nurse administrator(s) 1.2b Faculty (full- & part-time) 1.2c Students	 100% of full-time faculty will be on at least one nursing program committee 40% of full-time faculty, who have completed at least one year of employment, will be on at least one college committee Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 4.1, 4.2 Mean score of at least a 3.5 on a scale of 5 on the Faculty Evaluation of Nursing Course Survey: Item 4 50% of part-time faculty will be on at least one nursing program committee Mean score of at least 3.5 on a scale of 5 on the Adjunct (Part-time) Faculty Survey: Item 3 1.2c All students will have the opportunity to attend and participate in nursing program committee meetings (exception:
	 Team Leader and Admission Committee meetings) Mean score of at least a 3.5 on a scale of 5 on the Student Exit Survey: Items 5-7 Mean score of at least a 3.5 on a scale of 5 on the Faculty Evaluation of Nursing Course Survey: Item 3

Frequency of Assessment	Assessment Method
1.2a	1.2a
OCCC and NFO committees reviewed annually in May	Review of OCCC Institutional Committee assignments by Dean of
Total Program Evaluation-Faculty Survey:	Health Professions.
May – data collected by NEC	Review of NFO committee membership lists and minutes by NEC,
• September – reviewed by NEC with recommendations to NFO	NPD and NPAD.
October – reviewed by NFO	Review and analysis of Total Program Evaluation-Faculty Survey by
	NEC and NFO.
1.2b	1.2b
Total Program Evaluation-Faculty Survey:	Review of OCCC Institutional Committee assignments by Dean of
May – data collected by NEC	Health Professions.
September – reviewed by NEC with recommendations to NFO	Review of NFO committee membership lists and minutes and

 October – reviewed by NFO Faculty Evaluation of Nursing Course Survey: May – data collected by NEC September – reviewed by NEC with recommendations to NFO October – reviewed by NFO Adjunct Faculty Survey: 	 course team minutes by NEC, NPD and NPAD. Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO. Review and analysis of Faculty Evaluation of Nursing Course Survey by NEC and NFO. Review and analysis of Adjunct Faculty Survey by NEC and NFO.
 May – data collected by NEC September – reviewed by NEC with recommendations to NFO October – reviewed by NFO 1.2c Student Exit Survey: November/April – data collected by NEC September – reviewed by NEC October – reviewed by NEC 	 1.2c Review of NFO committee and course team minutes by NEC, NPD and NPAD. Review and analysis of Student Exit Survey by NEC and NFO. Review and analysis of Faculty Evaluation of Nursing Course Survey by NEC and NFO.
 Faculty Evaluation of Nursing Course Survey: May – data collected by NEC September – reviewed by NEC with recommendations to NFO October – reviewed by NFO 	

CRITERION 1.2 RESULTS

			Collection & Analysis I level of achievemen		Actions for Program Development, Maintenance, or Revision
<u>AY 201</u> ELA 1.2	2a:				<u>AY2014</u> 1.2a
ELA 1.	2b: AY 2014	% FT Faculty Nursing Committee	% Part-time Faculty Nursing Committee	% FT Faculty OCCC Committee	1.2b

Item #	Traditional	BADNAP	CLP	
4.1				
4.2				
aculty Evalu	ation of Nursing	Course Survey	/: Item	
Item #	Traditional	BADNAP	CLP	
4				
	•			
Adiunct Facu	Ity Survey: Item			
Item 3				
LA 1.2c:				1.2c
-	Recommendatior	ns/Activities		October 2013 Actions
	rt given in NFO w		cussed.	To consider adding NSA information and benefits to pro
	3 Recommendat			student letters.
	dent attending NF		they liked the i	guiring a <u>November 2013 Actions</u>
	from each proce			
he backgroun				using class elections to vote for representative to attend
				report back to class.
Student Exit 3	Survey: Items 5-	7		
Item #	Traditional	BADNAP	CLP	
5				
6				
7				
aculty Evalu	ation of Nursing	n Course Survey	r: Item 3	
Item #	Traditional	BADNAP	CLP	
3		BABIA		
Y 2015				<u>AY2015</u>
				1.2a
				1.2a
LA 1.2a:				
ELA 1.2a:				1.2b
	% FT Fac	aultar 0/	Part-time	1.2b

' F							
		Nursin	g	Fac	ulty Nursing	OCCC Committee	
		Commit			ommittee		
-	2015						
L						•	
Total P	rogram	Evaluation – F	aculty S	Survey	: Items 4.1, 4.2		
lterr		Traditional	BÁDI		CLP		
4.1	1						
4.2						_	
Facultv	Evaluati	ion of Nursing	Course	e Surve	ev: Item 4		
Iten		Traditional	BADI		CLP	7	
4						1	
· ·					1	<u>_</u>	
Adjunct	t Facultv	Survey: Item					
	Item 3						
ELA 1.2	c:						1.2c
		it Survey: Iten	ns 5-7				
Item		Traditional	BADI	NAP	CLP	7	
5							
6						-	
7						-	
<i>'</i>					1		
Faculty	Evaluati	ion of Nursing			w Item 3		
Iten		Traditional	BAD		CLP	7	
3		Tauluulla	BAUI			-	
<u>AY 2016</u>							<u>AY2016</u>
ELA 1.2	a:						1.2a
	a.						1.2b
ELA 1.2	:D:						
ELA 1.2	AY	% FT Fac	ulty	%	Part-time	% FT Faculty	
ELA 1.2		% FT Fac Nursin			Part-time ulty Nursing	% FT Faculty OCCC Committee	
ELA 1.2			g	Fac			

Total Program Evaluation – Faculty Survey: Items 4.1, 4.2					
Item #	Traditional	BADNAP	CLP		
4.1					
4.2					

Faculty Evaluation of Nursing Course Survey: Item 4

Item #	Traditional	BADNAP	CLP
4			

Adjunct Faculty Survey: Item Item 3

ELA 1.2c:

Student Exit Survey: Items 5-7

Item #	Traditional	BADNAP	CLP
5			
6			
7			

Faculty Evaluation of Nursing Course Survey: Item 3

Item #	Traditional	BADNAP	CLP
3			

1.2c

Criterion	Expected Level of Achievement
Communities of interest	1.3a
have input into program	Community healthcare agencies will have input into program processes and decision making.
processes and decision making.	 Response rate of 50% or higher on the Graduate Evaluation by Employer Survey administered by the Department of Institutional Effectiveness.
1.3a Healthcare Agencies	 NESA Evaluation of Clinical Experience Surveys will be administered at the end of all clinical rotations to agency staff and OCCC faculty and students. Evidence of input will be provided through program's course team meeting minutes.
1.3b	1.3b
Public/Nursing Advisory	 Program will utilize input from the Public/Advisory Committee.
Committee	 Mean score of at least 3.5 on a scale of 5 on the OCCC Nursing Advisory Committee Survey: Item 2.1-2.2
1.3c	1.3c
Graduates 1.3d	 100% of nursing program graduates has the opportunity to participate in the Nursing Program Post Graduate Survey
OCCC Board of	administered by the Department of Institutional Effectiveness with an expected response rate of 30% or higher.
Trustees	1.3d
1.3e	Program will utilize input from the OCCC Board of Trustees.
Oklahoma Board of	 Program will meet all Oklahoma Board of Nursing Standards as evidenced by continuing approval status by the OBN.
Nursing	• Program will meet all Oklahoma Board of Nursing Standards as evidenced by continuing approval status by the OBN. 1.3f
1.3f ACEN	Program will meet all ACEN Standards for accreditation as evidenced by continuing approval status by the ACEN.

Frequency of Assessment	Assessment Method	
 1.3a Graduate Evaluation by Employer Survey: January/July – data collected by Department of Institutional Effectiveness October – reviewed by NEC November – reviewed by NCC December – reviewed by NFO NESA - Evaluation of Clinical Experience: November/April – data collected by NEC December/May – reviewed by NEC 	 Administration of Graduate Survey by Employer is conducted by the Department of Institutional Effectiveness. The process for graduate survey administration occurs as follows: Each year in June IE sends out the first letters to the previous Summer and Fall graduates with a follow-up letter to be sent sometime during the summer followed by phone calls. Each year starting in late November/December IE sends out the first letters to the previous fiscal year's Spring graduates. A second follow-up letter is sent in February with phone calls to follow. Employer surveys are sent as the names are received from the graduates. Survey data is then forwarded to the 	

1	6
T	U

1	7
 January/August – reviewed by NFO 	 chair of the NEC with review/analysis of survey data. NEC recommends action to NCC who makes recommendations to NFO. Administration of NESA Evaluation of Clinical Experience to agency staff and OCCC faculty and students with review/analysis of data results by NEC and NFO.
	1.3b
 1.3b Meets semi annually. OCCC Nursing Advisory Committee Survey: October/March – data collected by NEC September – reviewed by NEC with recommendations to NFO October – reviewed by NFO 	 Review minutes of Advisory Committee (NFO). The Nursing Advisory Committee membership consists of service representatives, educational representatives, part-time clinical faculty, and past as well as present students. Evidence of input in program processes and decision making will be provided in Advisory Committee minutes. The purpose of the survey is to evaluate how the OCCCC Nursing Program communicates information to communities of interest. Survey data is reviewed/analyzed by the NEC. NEC recommends action to the NFO.
	1.3c
 1.3c Nursing Program Post Graduation Survey: January/July- data collected by Department of Institutional Effectiveness and forwarded to chair of NEC October – reviewed by NEC November – reviewed by NCC December – reviewed by NFO 	 Administration of Nursing Program Post Graduation Survey is conducted by the Department of Institutional Effectiveness. The process for post graduate survey administration occurs as follows: Each year in June IE sends out the first letters to the previous Summer and Fall graduates with a follow-up letter to be sent sometime during the summer followed by phone calls. Each year starting in late November/December IE sends out the first letters to the previous fiscal year's Spring graduates. A second follow-up letter is sent in February with phone calls to follow. Employer surveys are sent as the names are received from the graduates. The results are forwarded to the chair of the NEC for review and analysis. The NEC recommends action to NCC who makes recommendations to NFO. 1.3d
	NPD submits copy of Oklahoma Board of Nursing Annual Report to
1.3dAnnually	 Academic Affairs for review and comments. NPD requests Academic Affairs to submit report to Board of Trustees for review,

	 comments, and concerns. As necessary, in response to comments and concerns, a response submitted to Board of Trustees by NPD. Evidence of input in program processes and decision making will be provided in NFO minutes and other nursing committee minutes as deemed necessary and review of report written in response to Board of Trustees. 1.3e
1.3e	 Review of Self Study report and on-site visit.
• Every 5 years or more often as necessary.	
 Annually through report to OBN (July). 	
	1.3f
1.3f	 Review of Self Study report and on-site visit.
 Every 8 years or more often as necessary. 	
 Annually through report to ACEN (Nov). 	

CRITERION 1.3 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2014</u>	<u>AY2014</u>
ELA 1.3a:	1.3a
ELA 1.3b:	1.3b
November 2013 Recommendations/Activities	November 2013 Actions
The Nursing Advisory Committee met on October 23 with report of meeting given in	
NFO to include survey results	
OCCC Nursing Advisory Committee Survey: Item	1.3c
Item 2.1	
Item 2.2	1.3d
ELA 1.3c:	1.5U
	1.3e

ELA 1.3d:	
	1.3f
ELA 1.3e:	
ELA 1.3f:	
<u>AY 2015</u>	<u>AY2015</u>
ELA 1.3a:	1.3a
ELA 1.5a.	1.5d
	4.01
ELA 1.3b:	1.3b
OCCC Nursing Advisory Committee Survey: Item	
Item 2.1	
Item 2.2	
ELA 1.3c:	1.3c
ELA 1.3d:	1.3d
ELA 1.3e:	1.3e
ELA 1.3f:	1.3f
<u>AY 2016</u>	<u>AY2016</u>
ELA 1.3a:	1.3a
ELA I.Ja:	1.58
	4.26
ELA 1.3b:	1.3b
OCCC Nursing Advisory Committee Survey: Item	
Item 2.1	
Item 2.2	
ELA 1.3c:	1.3c
ELA 1.3d:	1.3d
	1

ELA 1.3e:	1.3e
ELA 1.3f:	1.3f

Criterion	Expected Level of Achievement
Partnerships that exist promote excellence in nursing education, enhance the profession, and benefit the community.	 The Nursing Program will maintain partnerships that promote excellence in nursing education, enhance the profession, and benefit the community. Examples are: Item One: Item Two: Articulation Agreements with Higher Education Item Three: Graduate Preceptorship Agreement for MSN/MS Students OUCN

Frequency of Assessment	Assessment Method
Item One: • January/May	Item One: Completion rate of I + I students who are admitted to NPIII
 August/December Annually (September/March) 	 Number of referred students who complete program within 2-year framework. NCLEX RN performance/pass rate for all I + I students
Item Two:	Item Two:
Annually	Annual review of articulation agreements with institutions of higher education
Item Three:	Item Three:
Annually	Annual review of preceptor agreement with OUCN

CRITERION 1.4 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2014</u>	<u>AY2014</u>
ELA	Item One:
Item One:	Item Two:
Item Two:	Item Three:
Item Three:	
<u>AY 2015</u>	<u>AY 2015</u>
ELA	Item One:
Item One:	Item Two:
Item Two:	Item Three:
Item Three:	
<u>AY 2016</u>	<u>AY 2016</u>
ELA	Item One:
Item One:	Item Two:
Item Two:	Item Three:
Item Three:	

Criterion	Expected Level of Achievement
The nursing education	The Nursing Program Director will have a minimum of the following qualifications:
unit is administered by a nurse who holds a graduate degree with a major in nursing.	 Master's degree in nursing from a regionally accredited university

Frequency of Assessment	Assessment Method
Upon hire and as needed if changes in education or experience occur, or if	Review of the Oklahoma Board of Nursing requirements, Nursing Program
job description changes	Director job description, academic records, and curriculum vitae.

CRITERION 1.5 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2014</u>	<u>AY2014</u>
ELA 1.5:	
<u>AY 2015</u>	<u>AY 2015</u>
ELA 1.5:	
<u>AY 2016</u>	<u>AY 2016</u>
ELA 1.5:	

Criterion	Expected Level of Achievement
The nurse administrator is experientially qualified, meets governing organization and state requirements, and is oriented and mentored to the role.	 The Nursing Program Director will have a minimum of the following qualifications: Licensed as a registered nurse in the State of Oklahoma Three to five years of educational and/or management experience Three to five years' experience as a competent practitioner of nursing following graduation from a beginning level nursing program. The Nursing Program Director will be oriented and mentored to role

Frequency of Assessment	Assessment Method
Upon hire and as needed if changes in experience occur, or if job description changes	 Review of the Oklahoma Board of Nursing requirements, Nursing Program Director job description, Nursing Program Associate Director job description and curriculum vitae. Review of orientation/mentoring process for NPD and NPAD

CRITERION 1.6 RESULTS

	Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2014		AY2014
ELA 1.6:		
AY 2015		AY 2015
ELA 1.6:		
<u>AY 2016</u>		<u>AY 2016</u>
ELA 1.6:		

Criterion	Expected Level of Achievement	
When present, nursing program coordinators and/or faculty who assist with program administration are academically and experientially qualified.	 1.7 a Nursing Program Associate Director will have a minimum of the following qualifications: Licensed as a registered nurse in the State of Oklahoma Master's degree with a major in nursing. Demonstrated leadership skills Three to five years teaching experience preferably in an associate degree nursing program. Three to five years' experience as a competent practitioner of nursing following graduation from a beginning level nursing program. 	
	 1.7b Course Team Leaders will have a minimum of the following qualifications: Licensed as a registered nurse in the State of Oklahoma Masters of Science Degree in Nursing Past experience in management/leadership position. One year teaching experience in the Oklahoma City Community College nursing program. 	

Frequency of Assessment	Assessment Method
1.7a/b	1.7a/b
Upon hire and as needed if changes in experience occur, or if job	Review of the Oklahoma Board of Nursing requirements, Nursing Team
description changes	Leader job description and curriculum vitae.

CRITERION 1.7 RESULTS

	Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2014		<u>AY2014</u>
ELA 1.7a:		
ELA 1.7b:		
AY 2015		AY 2015
ELA 1.7a:		
ELA 1.7b:		
AY 2016		AY 2016
ELA 1.7a:		
ELA 1.7b:		

Expected Level of Achievement
1.8a
The job description for the Nursing Program Director provides for the authority and responsibility for the development
and administration of the program.
1.8b
 The Nursing Program Director has adequate time and resources to fulfill their roles and responsibilities.

Frequency of Assessment	Assessment Method	
 1.8a Annually: February – performance appraisal 	 Evaluation according to administrative guidelines. Review of job descriptions. 	
 1.8b Annually and as indicated 	 1.8b The Board of Nursing Rules and Regulations related to authority, responsibilities, time and resources. Comparison of like roles within the community considering appropriate variables 	

CRITERION 1.8 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2014</u>	<u>AY2014</u>
ELA 1.8a:	1.8a
ELA 1.8b:	1.8b
<u>AY 2015</u>	<u>AY 2015</u>
ELA 1.8a:	1.8a
ELA 1.8b:	1.8b
AY 2016	AY 2016
ELA 1.8a	1.8a
ELA 1.8b	1.8b

Criterion	Expected Level of Achievement
The nurse administrator has the authority to prepare and administer the program budget with	 1.9a The job description for the Nursing Program Director provides for the authority to prepare and administer the program budget. 1.9b
faculty input. 1.9a Authority 1.9b Faculty input	 Faculty will have input into program budget. Mean score of at least 3.5 on a scale of 5.0 of the Total Program Evaluation-Faculty Survey: Item 5 Mean score of at least 3.5 on a scale of 5.0 of the Faculty Evaluation of Nursing Course Survey: Item 5

Frequency of Assessment	Assessment Method	
 1.9a: Annually: February – performance appraisal, job description 	 1.9a: Evaluation according to administrative guidelines. Review of job descriptions. 	
 1.9b: February Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC with recommendations to NFO October – reviewed by NFO 	 1.9b: Faculty has the opportunity to submit a Faculty Fiscal Resource Planning Form to HPS/Nursing Lab Coordinator for compilation and submission to NPD each February. Prioritization of requests occurs through program administrative review. To NFO for approval. Analysis of Total Program Evaluation – Faculty Survey by NEC and NFO. Analysis of Nursing Faculty Evaluation of Course Survey by NEC and NFO 	

CRITERION 1.9 RESULTS

		f Data Collection & A	Actions for Program Development, Maintenance, or Revision		
AY 2014	(AY2014		
ELA 1.9a:				1.9a	
ELA 1.9b:					1.9b
	013 Recommendati				September 2013 Actions
		ourchase through Carl	Perkins AY 13 de	livered.	Faculty to have students complete Carl Perkins survey by end of
	3 recommendations				September.
	arl Perkins requests				October 2013 Actions
		culty Survey: Item 5		7	A list of all approved items for Carl Perkins will be distributed as
Item #	Traditional	BADNAP	CLP	-	soon as available.
5					
	luation of Course S			7	
Item #	Traditional	BADNAP	CLP	-	
5					
AY 2015					AY 2015
ELA 1.9a:					1.9a
					1.54
ELA 1.9b: m	et				1.9b
		culty Survey: Item 5			
Item #	Traditional	BADNAP	CLP]	
5				1	
	1		1	4	
Faculty Eval	luation of Course S	Survey: Item 5			
Item #	Traditional	BADNAP	CLP]	
5				1	
				-	

			AY 2016
			1.9a
			1.9b
m Evaluation – Fac	culty Survey: Item 5		
Traditional	BADNAP	CLP	
	urvey: Item 5		
Traditional	BADNAP	CLP	
	Traditional uation of Course S	Traditional BADNAP	uation of Course Survey: Item 5

Criterion	Expected Level of Achievement
Policies for nursing faculty and staff are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the goals and outcomes of the nursing education unit. 1.10a Policies 1.10b Differences	 1.10a Policies of the Nursing Program are: Comprehensive Provide for the welfare of the faculty/staff Consistent with the OCCC policies or are justified by the nursing education purposes. Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 6.1-6.3 1.10b Differences between policies for nursing faculty and staff and with those of OCCC are justified by program goals and outcomes Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Item 7

Frequency of Assessment	Assessment Method
Frequency of Assessment	

 1.10a Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC with recommendations to NFO October – reviewed by NFO 1.10b Annually: July 	 1.10a Review and analysis of the Total Program Evaluation-Faculty Survey by NEC and NFO. 1.10b Comparative analysis of the OCCC policies and the nursing program policies.
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CRITERION 1.10 RESULTS

		Data Collection & A actual level of achie	Actions for Program Development, Maintenance, or Revision	
<u>AY 2014</u>			<u>AY2014</u>	
ELA 1.10a:			1.10a	
Total Progra	m Evaluation-Facu	Ilty Survey: Items 6.1	1-6.3	
Item #	Traditional	BADNAP	CLP	
6.1				
6.2				
6.3				
ELA 1.10b:				1.10b
Total Progra	m Evaluation-Facu	Ity Survey: Items 7		
Item #	Traditional	BADNAP	CLP	
7				
			11	

<u>AY 2015</u>				<u>AY 2015</u>
ELA 1.10a:				1.10a
Total Progra	am Evaluation-Facu	ulty Survey: Items 6	.1-6.3	
Item #	Traditional	BADNAP	CLP	
6.1				
6.2				
6.3				
ELA 1.10b:				1.10b
	am Evaluation-Facu	ulty Survey: Items 7		
Item #	Traditional	BADNAP	CLP	
7				
AY 2016				<u>AY 2016</u>
ELA 1.10a:				1.10a
Total Progra	am Evaluation-Facu	ulty Survey: Items 6	.1-6.3	
Item #	Traditional	BADNAP	CLP	
6.1				
6.2				
6.3				
ELA 1.10b:				
Total Progra	am Evaluation-Facu	ulty Survey: Items 7		1.10b
Item #	Traditional	BADNAP	CLP	
7				
			•	

Criterion	Expected Level of Achievement
Distance education,	Not Applicable – No Distance Education Program
when utilized, is	
congruent with the	
mission of the governing	
organization and the	
mission/philosophy of the	
nursing education unit.	

Frequency of Assessment	Assessment Method
Not Applicable	Not Applicable

CRITERION 1.11 RESULTS

	ollection & Analysis	Actions for Program Development,
(including actual)	level of achievement)	Maintenance, or Revision
AY 2014		AY2014
ELA 1.10		
AY 2015		AY 2015
ELA 1.10		
<u>AY 2016</u>		AY 2016
ELA 1.10		

STANDARD II: FACULTY AND STAFF

Qualified and credentialed faculty are sufficient in number to ensure the achievement of the student learning outcomes and program outcomes. Sufficient qualified staff are available to support the nursing education unit.

Expected Level of Achievement
100% of full-time faculty members will have a Master's degree in nursing from a regionally accredited university.

Frequency of Assessment	Assessment Method
Upon employment and if changes in education, experience, or license occur.	 Employment process Review of transcripts Ongoing review as changes in education or experience occurs.

CRITERION 2.1 RESULTS

	Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2014</u> ELA 2.1:		<u>AY2014</u>
<u>AY 2015</u> ELA 2.1:		<u>AY 2015</u>

<u>AY 2016</u>	<u>AY 2016</u>
ELA 2.1	

Criterion	Expected Level of Achievement
Part-time faculty hold a minimum of a baccalaureate degree with a major in nursing; a minimum of 50% of the part-time faculty also hold a graduate degree with a major in nursing.	 50% of part-time faculty members will have a Master's degree in nursing from a regionally accredited university or evidence of continued progression toward a master's degree in nursing The remaining part-time faculty members will hold a minimum of a baccalaureate degree with a major in nursing

Frequency of Assessment	Assessment Method
Upon employment and if changes in education, experience, or license occur.	 Employment process Review of transcripts Ongoing review as changes in education or experience occurs.

CRITERION 2.2 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	• • •
AY 2014	<u>AY2014</u>
ELA 2.2	
<u>AY 2015</u>	<u>AY 2015</u>
ELA 2.2	
<u>AY 2016</u>	<u>AY 2016</u>
ELA 2.2	

Criterion	Expected Level of Achievement
Faculty (full- and part- time) credentials meet governing organization and state requirements.	 2.3a 100% of full-time faculty will meet the employment requirements of OCCC. 100% of full-time faculty will meet OBN faculty requirements. 100 % of full-time faculty will hold a valid unencumbered license.
2.3a Full-time faculty 2.3b Part-time faculty	 2.3b 100% of part-time faculty will meet the employment requirements of OCCC. 100% of part-time faculty will meet OBN faculty requirements. 100 % of part-time faculty will hold a valid unencumbered license.

Frequency of Assessment	Assessment Method		
2.3a/2.3b	2.3a/2.3b		
Upon hire and annually in August	 Compliance with OCCC employee/faculty requirements. Verify compliance with OBN employment processes including Faculty Qualification Report. Verify license. 		

CRITERION 2.3 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2014</u>	<u>AY2014</u>
ELA 2.3a	2.3a/2.3b
ELA 2.3b:	
<u>AY 2015</u>	<u>AY 2015</u>
ELA 2.3a:	2.3a/2.3b
ELA 2.3b:	
<u>AY 2016</u>	<u>AY 2016</u>
ELA 2.3a:	2.3a/2.3b
ELA 2.3b:	

Criterion	Expected Level of Achievement
Preceptors, when	Preceptors not used.
utilized, are academically	
and experientially	
qualified, oriented, mentored, monitored,	
and have clearly	
documented roles and	
responsibilities.	

Assessment Method

CRITERION 2.4 RESULTS

	Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2014</u>		<u>AY2014</u>
<u>AY 2015</u>		AY 2015
<u>AY 2016</u>		<u>AY 2016</u>

Criterion	Expected Level of Achievement
The number of full-time faculty is sufficient to	 100% of the full-time faculty (after the first full year of employment) will maintain a minimum workload equivalent to 15 credit hours per semester.
ensure that student learning outcomes and	 100% of on campus classroom instruction will comply with a ratio of 1 faculty member per 24 - 36 students or 2 - 4 faculty members for a maximum of 72 students.
program outcomes are achieved.	 100% of online classroom instruction will comply with a ratio of 1 faculty member per 25 students with overload paid for additional students
	 100% of learning experiences are developed and or supervised by faculty with a Master's degree in nursing
	 Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 9.1-9.2
	 Mean score of at least 3.5 on a scale of 5 on the Faculty Evaluation of Nursing Course Survey: Items 7-8

Frequency of Assessment	Assessment Method
August and January Total Program Evaluation-Faculty Survey: • May – data collected by NEC • September – reviewed by NEC • October – reviewed by NFO Faculty Evaluation of Nursing Course Survey: Items 7-8	 Review of faculty workload documents by the NPD Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO. Review and analysis of Faculty Evaluation of Nursing Course Survey by NEC and NFO

- May data collected by NEC ٠
- September reviewed by NEC
 October reviewed by NFO

CRITERION 2.5 RESULTS

		Results of Da including ac			Actions for Program Development, Maintenance, or Revision		
AY 2014	4				<u>AY2014</u>		
ELA 2.5	5:						
	<u>ber 2013 Reco</u>						
New fac	ulty member, \	N. Watts intro	duced in	NFO. She	will be pa	art of NUR 2539	
faculty.							
F							
	Semester	Summer	Fall	Spring		Average	
	Academic Year	2013	2013	2014	Worl	kload/Semester	
	AY 2014						
Total Pr	rogram Evalua Item # 9.1		ion – Faculty Survey: Items 9.1-9.2 Traditional BADNA				
-	9.2						-
L	0.2						
aculty	Evaluation of	Nursing Co	urse Surv	vev: Items	7-8		
Ī	Item #		litional		NAP	CLP	
	7						
	8						
AY 201							<u>AY 2015</u>
ELA 2.5	5						
Γ	Semester	Summer	Fall	Spring		Average	
	Academic	2014	2014	2015	Wor	kload/Semester	

			1	1		
	Year					
	AY 2015					
-						
Total P	rogram Evalua	ation – Facul	ty Survey	y: Items 9.1	-9.2	
	Item #		litional		NAP	CLP
	9.1					
	9.2					
L		1				
Faculty	v Evaluation of	[.] Nursina Co	urse Surv	vev: Items	7-8	
	Item #		litional		NAP	CLP
	7					· · · ·
	8					
	0					1
AY 201	6					
ELA 2.						
[Semester	Summer	Fall	Spring		Average
	Academic	2015	2015	2016	Worl	kload/Semester
	Year					
	Year AY 2016					
	Year AY 2016					
Total P	AY 2016	ation - Facul	ty Survey	<i>ı</i> : Items 9 1	-92	
Total P	AY 2016 rogram Evalua					CLP
Total P	AY 2016 rogram Evalua Item #		ty Survey litional		-9.2 DNAP	CLP
Total P	AY 2016 rogram Evalua Item # 9.1					CLP
Total P	AY 2016 rogram Evalua Item #					CLP
	AY 2016 rogram Evalua Item # 9.1 9.2	Trad	litional	BAD	NAP	CLP
	AY 2016 rogram Evalua Item # 9.1 9.2 v Evaluation of	Trad	litional urse Surv	BAD vey: Items	7-8	
	AY 2016 rogram Evalua ltem # 9.1 9.2 v Evaluation of Item #	Trad	litional	BAD vey: Items	NAP	CLP
	AY 2016 rogram Evalua ltem # 9.1 9.2 v Evaluation of ltem # 7	Trad	litional urse Surv	BAD vey: Items	7-8	
	AY 2016 rogram Evalua ltem # 9.1 9.2 v Evaluation of Item #	Trad	litional urse Surv	BAD vey: Items	7-8	

Criterion	Expected Level of Achievement
time) maintains expertise in their areas of responsibility, and their performance reflects current scholarship and evidence-based teaching and clinical	 2.6a 100% of full-time faculty performance will demonstrate participation in activities that reflect faculty scholarship through annual performance appraisal process and submission of supporting documents to include CEU reports. 100% of full-time faculty performance will reflect evidence-based teaching and clinical practices. Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 10.1-10.3, 11.1-11.3 Mean score of at least 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey: Items 4.8-4.10 (FT) Mean score of at least 3.5 on a scale of 5 on the Student Evaluation of Nursing Course Survey: Item 3 Mean score of at least 3.5 on a scale of 5 on the Faculty Evaluation of Nursing Course Survey: Item 9
2.6a Full-time faculty 2.6b Part-time faculty	 2.6b 100% of part-time faculty performance will demonstrate participation in activities that reflect faculty scholarship through annual evaluation process and submission of supporting documents to include CEU reports. 100% of part-time faculty performance will reflect evidence-based teaching and clinical practices. Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 12.1-12.3, 13.1-13.3 Mean score of at least 3.5 on a scale of 5 on the Adjunct Nursing Survey: Items 5.1-5.4 Mean score of at least 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey: Items 4.8-4.10 (PT)

Frequency of Assessment	Assessment Method
2.6a	2.6a
Student Surveys:	Review of data from Student Input on Instruction annually and as
Student Input on Instruction (SIIs):	needed by NPD and NPAD
Annually (November/April) – data collected	 Review of annual faculty performance appraisal and supporting documents to include CEU reports.
Faculty Performance Appraisal Review Form:	NPD's input into appraisals
February/March	Review of Faculty Professional Development Plans.
Nursing Faculty Performance Appraisal Review Form Addendum:	 Review of annual faculty classroom observations by the NPD, NPAD.
February/March	 Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO.
CEU Reports	Review and analysis of Student Evaluation of Clinical Faculty semi-
February/March	annually, and as needed by NPD and NPAD

Faculty Professional Development Plans September/October	 Review and analysis of Student Evaluation of Nursing Course semi- annually, and as needed by NPD and NPAD
	 Review and analysis of Faculty Evaluation of Nursing Course semi-
Nursing Program Faculty Instructional Observation Form	annually, and as needed by NPD and NPAD
Annually (February/March/April)	
Total Program Evaluation-Faculty Survey:	
May – data collected by NEC	
September – reviewed by NEC	
October – reviewed by NFO	
Student Evaluation of Clinical Faculty:	
May/December – data collected by NEC	
February – reviewed by NPD and NPAD	
As needed	
Student Evaluation of Nursing Course:	
May/December – data collected by NEC	
February – reviewed by NPD and NPAD	
As needed	
Faculty Evaluation of Nursing Course	
• May/December – data collected by NEC	
February – reviewed by NPD and NPAD	
As needed	
2.6b	2.6b
Student Surveys:	 Review of data from Student Input on Instruction annually and as
Student Input on Instruction (SIIs):	needed by NPD and NPAD
 Annually (November/April) – data collected 	 Review of annual part-time (adjunct) faculty evaluation and
	supporting documents to include CEU reports.
Adjunct Faculty Evaluation	 Review and analysis of Total Program Evaluation-Faculty Survey by
 October/November (or as indicated) 	NEC and NFO.

CEU Reports	Review and analysis of Adjunct Faculty Survey by NEC and NFO.
October/November	 Review and analysis of Student Evaluation of Clinical Faculty semi- annually, and as needed by NPD and NPAD
Total Program Evaluation-Faculty Survey:	
May – data collected by NEC	
September – reviewed by NEC	
October – reviewed by NFO	
Adjunct Faculty Survey	
May – data collected by NEC	
September – reviewed by NEC	
October – reviewed by NFO	
Student Evaluation of Clinical Faculty:	
May/December – data collected by NEC	
February – reviewed by NPD and NPAD	

CRITERION 2.6 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2014</u>	<u>AY 2014</u>
ELA 2.6a:	2.6a
August 2013 Recommendations/Activities	August 2013 Actions
The new scholarship definition for the nursing program was sent out over the	Faculty approved the definition of scholarship for the nursing
summer for faculty to review. It was brought to a vote at NFO.	program.
September 2013 Recommendations/Activities	September 2013 Actions
D. Myers reported to faculty that only two travel requests for educational	All travel requests need to be in by September 13.
opportunities have been received thus far.	October 2013 Actions
October 2013 Recommendations/Activities	BADNAP to submit a Faculty Development Grant.
S. Brown presented a report on the QSEN conference attended.	
Faculty development Grants discussed.	

Total Program Evaluation – Faculty Survey: Items 10.1-10.3,11.1-11.3

Item #	Traditional	BADNAP	CLP
10.1			
10.2			
10.3			
11.1			
11.2			
11.3			

Student Evaluation of FT Clinical Faculty Survey: Items 4.8-

4.10 Mean Low/High

Items 4.8-4.10 – Mean Low: /High:

Student Evaluation of Nursing Course Survey: Item 3

Item #	Traditional	BADNAP	CLP
3			

Faculty Evaluation of Nursing Course Survey: Item 9

Item #	Traditional	BADNAP	CLP
9			

ELA 2.6b:

Total Program Evaluation – Faculty Survey: Items 12.1-12.3,13.1-13.3

Item #	Traditional	BADNAP	CLP
12.1			
12.2			
12.3			
13.1			
13.2			
13.3			

Adjunct Faculty Survey: Items 5.1-5.4

Item 5.1

Item 5.2

2.6b

Item 5	3			
Item 5				
	ation of PT Clin	ical Faculty Su	rvov: Itoms / 8	
	in Low/High	lical raculty ou	ivey. items 4.0	
	4.8-4.10 – Mean	low [.] /High [.]		
AY 2015		Lott: /ringin		AY 2015
ELA 2.6a:				2.6a
	n Evaluation – F	aculty Survey: I	tems 10.1-10.3	
Item #	Traditional	BADNAP	CLP	
10.1				
10.2				
10.3				
11.1				
11.2				
11.3				
Mean L Items 4	ation of FT Clin .ow/High 4.8-4.10 – Mean	Low: /High:	Ī	
	ation of Nursing			
Item #	Traditional	BADNAP	CLP	
3				
Faculty Evalu	ation of Nursing	g Course Surve	y: Item 9	
Item #	Traditional	BADNAP	CLP	
9				
ELA 2.6b:				2.6b
Total Program 13.1-13.3	Evaluation – F	aculty Survey: I	tems 12.1-12.3	
Item #	Traditional	BADNAP	CLP	
12.1				
14.1	1			

40.0					
12.3					
13.1					
13.2					
13.3					
Adjunct Facult	v Survev: Items	s 5.1-5.4			
Item 5.1					
Item 5.2					
Item 5.3					
Item 5.4					
Student Evalua		ical Faculty Su	rvev: Items 4 8	-	
	n Low/High	iour r uounty ou			
	.8-4.10 – Mean	low [.] /High [.]			
AY 2016					AY 2016
ELA 2.6a:					2.6a
Total Program	Evaluation – E	aculty Survey:	Itoms 10 1-10 3	11 1-11 3	2.00
Item #	Traditional	BADNAP		, 11.1-11. 0	
10.1	Trautional	DADNAF	ULF		
10.1					
10.3					
11.1					
11.2					
11.3					
	ation of FT Clin .ow/High .8-4.10 – Mean	-	rvey: Items 4.8-	- 4.10	
Student Evalua			y: Item 3		
Item #	Traditional	BADNAP	CLP		
3					
Faculty Evalua	tion of Nursing	Course Survey	v: Item 9	-	
Item #	Traditional	BADNAP	CLP		
		2/21/1	VE:	1	

1	6
-	U

		aculty Survey: It		
ltem #	Traditional	BADNAP	CLP	
12.1				
12.2				
12.3				
13.1				
13.2				
13.3				
Inct Facu Item 5 Item 5 Item 5 Item 5	.2 .3	s 5.1-5.4		

Criterion	Expected Level of Achievement
The number, utilization, and credentials of staff and non-nurse faculty within the nursing education unit are sufficient to achieve the program goals and outcomes.	Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Items 14.1-14.2

Frequency of Assessment	Assessment Method
Total Program Evaluation-Faculty Survey:	Review and analysis of Total Program Evaluation-Faculty Survey by
May – data collected by NEC	NEC and NFO. NFO recommendations forwarded to NPD who
September – reviewed by NEC	reports to the Dean of HP Division.
October – reviewed by NFO	

CRITERION 2.7 RESULTS

			ion & Analysis f achievement)	Actions for Program Development, Maintenance, or Revision
AY 2014	(including	g uotuur for or o	<i>i</i> uomovomony	AY2014
ELA 2.7:				
Total Program	Evaluation – F	aculty Survey:	Items 14.1-14.2	
Item #	Traditional	BADNAP	CLP	
14.1				
14.2				
<u>AY 2015</u>				<u>AY 2015</u>
ELA 2.7:				
Total Program Evaluation – Faculty Survey: Items 14.1-14.2				
Item #	Traditional	BADNAP	CLP	

14.1				
14.2				
<u>AY 2016</u>				<u>AY 2016</u>
ELA 2.7:				
Total Program	n Evaluation – Fa	aculty Survey: I	tems 14.1-14.2	
Item #	Traditional	BADNAP	CLP	
14.1	Traditional	BADNAP	CLP	
	Traditional	BADNAP	CLP	

Criterion	Expected Level of Achievement
Faculty (full- and part- time) are oriented and mentored in their areas of responsibilities. 2.8a Full-time faculty 2.8b Part-time faculty	 2.8a 100% of full-time faculty will participate in a mentoring program during their first year of employment. 100% of full-time faculty will participate in new faculty orientation processes. Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Items 15.1-15.2 2.8b 100% of part-time faculty will participate in orientation at least annually. 100% of part-time faculty will be mentored through the team leader clinical oversight process. Mean score of at least 3.5 on a scale of 5.0 on the Adjunct Faculty Survey: Items 6.1-6.2

Frequency of Assessment	Assessment Method
2.8 a	2.8a
Annually and as necessary	 A mentor is chosen for each new nursing faculty member upon hire from the nursing faculty. OCCC holds a mentor training/orientation
Total Program Evaluation-Faculty Survey:	session, the Introduction to the Faculty Mentoring Program, each
May – data collected by NEC	semester with new faculty/mentors visitation held after the
September – reviewed by NEC	orientation session. The mentorship lasts two semesters with

October – reviewed by NFO	 meetings held between the mentor and new faculty throughout. OCCC holds new faculty orientation sessions beginning prior to the start of the semester and additional meetings throughout the first year. Department/program orientations are held during the first semester of hire. Completion and review of faculty mentoring evaluation forms and meeting logs by Dean. Successful completion of new faculty orientation Review of orientation/mentoring process Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO.
2.8b	2.8b
Annually and as necessary Adjunct Faculty Survey	 Part-time faculty attended the program orientation sessions held each semester and were provided with an orientation manual along
May – data collected by NEC	with faculty resources. Team Leaders provided mentorship for part-
 September – reviewed by NEC 	time faculty through several visits to the clinical site during the semester and individual meetings as needed.
 October – reviewed by NEC October – reviewed by NFO 	•
	 Analysis of Adjunct Faculty Survey by NEC and NFO.

CRITERION 2.8 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2014</u>	<u>AY2014</u>
ELA 2.8a:	2.8a
Total Program Evaluation – Faculty Survey: Items 15.1-15.2	
Item # Traditional BADNAP CLP	
15.1	
15.2	
ELA 2.8b:	2.8b
Adjunct Faculty Survey: Items 6.1-6.2	
Item 6.1	
Item 6.2	
AY 2015	<u>AY2015</u>
ELA 2.8a:	2.8a
Total Program Evaluation – Faculty Survey: Items 15.1-15.2	
Item # Traditional BADNAP CLP	
15.1	
15.2	
ELA 2.8b:	2.8b
Adjunct Faculty Survey: Items 6.1-6.2	
Item 6.1	
Item 6.2	
<u>AY 2016</u>	<u>AY2016</u>
Total Program Evaluation – Faculty Survey: Items 15.1-15.2	2.8a
Item # Traditional BADNAP CLP	
15.1	
15.2	
ELA 2.8b:	2.8b
Adjunct Faculty Survey: Items 6.1-6.2	

Item 6.1		
Item 6.2		

Criterion	Expected Level of Achievement
Systematic assessment of faculty (full- and part- time) performance demonstrates competencies that are consistent with program goals and outcomes. 2.9a Full-time faculty 2.9b Part-time faculty	 2.9a 100% of full-time faculty will be evaluated by students through the SII process to provide evidence of competency. 100% of full-time faculty are rated as meeting or exceeding expectations on their annual performance evaluations 100% of full-time faculty will receive an overall score of 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey 100% of full-time faculty will be observed annually by the NPD or NPAD for the purpose of instructional enhancement. Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Item 16 2.9b 100% of part-time faculty will be evaluated by students through the SII process to provide evidence of competency. 100% of part-time faculty will be evaluated annually by team leaders to provide evidence for performance that demonstrates competence and is consistent with program goals and outcomes 100% of part-time faculty will receive an overall score of 3.5 on a scale of 5 on the Student Evaluation of Clinical Faculty Survey Mean score of at least 3.5 on a scale of 5 on the Adjunct Faculty Survey: Items 7

Frequency of Assessment	Assessment Method
2.9a	2.9a
Student Surveys:	Review and analysis of data from Student Input on Instruction
Student Input on Instruction (SIIs):	annually and Student Evaluation of Clinical Faculty semi-annually,
 Annually (November/April) – data collected 	and as needed by NPD and NPAD
	Review and analysis of Student Evaluation of Clinical Faculty by
Faculty Performance Appraisal Review Form:	NPD and NPAD
February/March	NPD's input into appraisals
Nursing Faculty Performance Appraisal Review Form Addendum:	Observations will be scheduled throughout the year and reviewed
February/March	annually in February and March
	Review and analysis of Total Program Evaluation-faculty Survey by

Student Evaluation of Clinical Faculty:	NEC and NFO.
May/December – data collected by NEC	
February – reviewed by NPD and NPAD	
Nursing Program Instructional Observation Form • Annually (February/March/April) Total Program Evaluation-Faculty Survey:	
May – data collected by NEC	
September – reviewed by NEC	
October – reviewed by NFO	
2.9b	2.9b
Student Surveys:	 Review of data from Student Input on Instruction annually and
Student Input on Instruction (SIIs):	Student Evaluation of Clinical Faculty semi-annually, and as needed
Annually (November/April) – data collected	by NPD and NPAD
	 Review of annual part-time faculty evaluation and supporting
Part-time Faculty Evaluation	documents.
October/November (or as indicated)	 Review and analysis of Student Evaluation of Clinical Faculty by
• October/November (of as indicated)	NPD and NPAD
Student Evaluation of Clinical Faculty:	 Review and analysis of Adjunct Faculty Survey by NEC and NFO.
May/December – data collected by NEC	
February – reviewed by NPD and NPAD	
Adjunct Faculty Survey	
May – data collected by NEC	
September – reviewed by NEC	
October – reviewed by NFO	

CRITERION 2.9 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2014</u>	<u>AY 2014</u>
ELA 2.9a	2.9a
Total Program Evaluation – Faculty Survey: Item 16	
Item # Traditional BADNAP CLP	
16	
Student Evaluation of FT Clinical Faculty Survey: Items 4.1- 4.16 Mean Low/High Items 4.1-4.16 – Mean Low: /High:	
ELA 2.9b	2.9b
Adjunct Faculty Survey: Item 7 Item 7	
Student Evaluation of PT Clinical Faculty Survey: Items 4.1-4.16 Mean Low/High Items 4.1-4.16 – Mean Low: /High:	
AY 2015	AY 2015
ELA 2.9a	2.9a
Total Program Evaluation – Faculty Survey: Item 16	
Item # Traditional BADNAP CLP	
16	
Student Evaluation of FT Clinical Faculty Survey: Items 4.1-4.16 Mean Low/High Items 4.1-4.16 – Mean Low: /High:	
ELA 2.9b	2.9b
Adjunct Faculty Survey: Item 7	
Item 7	
Student Evaluation of PT Clinical Faculty Survey: Items 4.1-4.16 Mean Low/High	

	s 4.1-4.16 – Mean	Low: /High:		
AY 2016				AY 2016
ELA 2.9a				2.9a
Total Program	n Evaluation – Fa	aculty Survey: It	em 16	
Item #	Traditional	BADNAP	CLP	
16				
Mean Lo	ow/High			
Items 4.	1-4.16 – Mean Lo	w: /High:		2.05
Items 4. ELA 2.9b	1-4.16 – Mean Lo	Ū		2.9b
Items 4. ELA 2.9b Adjunct Facu	1-4.16 – Mean Lo [.] Ilty Survey: Item	Ū		2.9b
Items 4. ELA 2.9b Adjunct Facu Item	1-4.16 – Mean Lo [.] I lty Survey: Item 7	7		
Items 4. ELA 2.9b Adjunct Facu Item	1-4.16 – Mean Lo [.] Ilty Survey: Item	7	v Survey: Ite	
Items 4. ELA 2.9b Adjunct Facu Item	1-4.16 – Mean Lo [.] I lty Survey: Item 7	7	v Survey: Ite	

Criterion	Expected Level of Achievement
Faculty (full- and part- time) engage in ongoing development in and receive support for instructional and distance technologies. 2.10a	 2.10a Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Item 17 2.10b Mean score of at least 3.5 on a scale of 5 on the Adjunct Faculty Survey: Item 8 (Instructional only – distance education not applicable)

Frequency of Assessment	Assessment Method
 2.10a Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC October – reviewed by NFO 	 2.10a Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO
 2.10b Adjunct Faculty Survey May – data collected by NEC September – reviewed by NEC October – reviewed by NFO 	 2.10b Review and analysis of Adjunct Faculty Survey by NEC and NFO.

CRITERION 2.10 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2014	<u>AY2014</u>
ELA 2.10a	2.10a
Total Program Evaluation – Faculty Survey: Item 17	
Item # Traditional BADNAP CLP	
17	
ELA 2.10b	2.10b
Adjunct Faculty Survey: Item 8	
Item 8	
<u>AY 2015</u>	<u>AY 2015</u>
ELA 2.10	2.10a
Total Program Evaluation – Faculty Survey: Item 17	
Item # Traditional BADNAP CLP	
17	
	0.401
ELA 2.10b	2.10b
Adjunct Faculty Survey: Item 8	
Item8	
<u>AY 2016</u>	<u>AY 2016</u>
ELA 2.10a	2.10a
Total Program Evaluation – Faculty Survey: Item 17	
Item # Traditional BADNAP CLP	
17	
	2.10b
ELA 2.10b	2.100
Adjunct Faculty Survey: Item 8	
Item 8	

STANDARD III: STUDENTS

Student policies and services support the achievement of the student learning outcomes and program outcomes of the nursing education unit.

Criterion	Expected Level of Achievement
Policies for nursing students are congruent with those of the governing organization, publicly accessible, non- discriminatory, and consistently applied; differences are justified by the student learning outcomes and program outcomes.	 100% of nursing program policies are: congruent with OCCC student policies publicly accessible non-discriminatory consistently applied differences justified to maintain the integrity of the nursing program Mean score of at least 3.5 on a scale of 5 on the Total Program Evaluation-Faculty Survey: Items 19.1-19.4, 20 Mean score of at least 3.5 on a scale of 5 on the Student Exit Survey: Items 9.1-9.4

Frequency of Assessment	Assessment Method
OCCC catalog/Nursing webpage:	 NPD review of policies prior to printing OCCC catalog
Annually in the Spring	NPD and NPAD review Nursing Web Page
	 Nursing Admissions Committee (NAC) reviews nursing student
Nursing policies reviewed:	policies for
 February – reviewed by NAC with recommendations to NFO 	congruent with OCCC student policies
April – reviewed by NFO	publicly accessible
	non-discriminatory
Total Program Evaluation-Faculty Survey:	consistently applied
May – data collected by NEC	differences justified
September – reviewed by NEC	Recommendations are presented to NFO
October – reviewed by NFO	 Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO
Student Exit Survey:	 Review and analysis of Student Exit Survey by NEC and NFO
 November/April – data collected by NEC 	
March – reviewed by NEC	
April – reviewed by NFO	

CRITERION 3.1 RESULTS

		of Data Collection		Actions for Program Development,
	(inciuain)	g actual level of	acnievement	Maintenance, or Revision
<u>AY 2014</u>				<u>AY2014</u>
ELA:		(A		August 2013 Actions
	Recommendations			The Functional Abilities Policy was approved.
The Functiona	I Abilities Policy v	vas brought to NI	-O for a vote.	
	n Evaluation – Fa			
Item #	Traditional	BADNAP	CLP	
19.1				
19.2				
19.3				
19.4				
20				
	Survey: Items 9.1			
Item #	Traditional	BADNAP	CLP	
9.1				
9.2				
9.3				
9.4				
<u>AY 2015</u>				<u>AY 2015</u>
ELA:				
	n Evaluation – Fa	aculty Survey It	ems 19.1-19.4	
Item #	Traditional	BADNAP	CLP	
19.1				
19.2				
19.3				
19.4				
20				
	I			

Student Exit S	Survey: Items 9.1	1 – 9.4	
Item #	Traditional	BADNAP	CLP
9.1			
9.2			
9.3			
9.4			
AY 2016			
ELA:			
	n Evaluation – F	aculty Survey It	ms 19 1-19
20			Ging 10.1 10
20			
Item #	Traditional	BADNAP	CLP
19.1			
19.2			
19.3			
19.4			
20			
	Exit Survey: Item		
Item #	Traditional	BADNAP	CLP
9.1			
9.2			
0.2			
9.3			

Criterion	Expected Level of Achievement
Public information is	There is consensus among committee chairpersons, Nursing Program Director, Dean of Health Professions, Web Administrator,
accurate, clear,	and OCCC administrators that information regarding the nursing program is accurate, clear, consistent, and accessible.
consistent, and	OCCC College Catalog
accessible, including the	 Class schedules
program's accreditation	OCCC Student Handbook
status and ACEN	Information letter to prospective students
contact information.	Nursing Program application
	Nursing Student Handbook
	Nursing Webpage(s)
	 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Items 11.1-11.7, 12.1-12.7, 13.1-13.7
	 Mean score of 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Items 21.1-21.7, 22.1-22.7, 23.1- 23.7
	 Mean score of at least 3.5 on a scale of 5 on the OCCC Nursing Advisory Committee Survey: Items 3.1-3.4

Frequency of Assessment	Assessment Method
OCCC College Catalog/Class Schedules:	OCCC College Catalog/Class Schedules/OCCC Student Handbook:
Annually in April	Review and comparison of all published materials for accuracy,
	clarity, currency, and consistency by NPD, NAC
OCCC Student Handbook:	
Annually in April	Information Letter to Prospective Students:
Information Letter to Prospective Students:	 Letters are initiated and reviewed by the NPD prior to distribution.
 Annually in June and as needed for updates 	
	Nursing Program Application:
Nursing Program Application:	NPD
 Annually in June and as needed for updates 	
	Nursing Student Handbook/Nursing Webpage(s):
Nursing Student Handbook:	NPD/NAC
 Annually in February 	Web Administrator/NPAD
Nursing Webpage: <u>http://www.occc.edu/Health/Nursing.html</u>	The NPD and NPAD review all information prior to publication
 At the time of publication by the NPD and the Web Administrator 	on the Web. The Web Administrator ensures that all Web
 Annually in April and as needed 	content is ADA compliant prior to publication.

Student Exit Survey: November/April – data collected by NEC October – reviewed by NEC and reported to NPD Total Program Evaluation-Faculty Survey: May – data collected by NEC October – reviewed by NEC and reported to NPD	 Review and analysis of Student Exit Survey data by NEC with recommendations to NPD Review and analysis of Total Program Evaluation-Faculty Survey data with recommendations to NPD Review and analysis of OCCC Nursing Advisory Committee data by NEC with recommendations to NPD
OCCC Nursing Advisory Committee Survey:	
 October/March – data collected by NEC 	
• September – reviewed by NEC with recommendations to NFO	
October – reviewed by NFO	

CRITERION 3.2 RESULTS

		of Data Collection gractual level of		Actions for Program Development, Maintenance, or Revision
AY 2014				<u>AY 2014</u>
ELA:				
	Survey: Items 11			
Item #	Traditional	BADNAP	CLP	
11.1				
11.2				
11.3				
11.4				
11.5				
11.6				
11.7				
12.1				
12.2				
12.3				
12.4				

1011		
13.2		
13.3		
13.4		
13.5		
13.6		
13.7		

12.5 12.6 12.7 13.1

Total Program Evaluation - Faculty Survey: Items 21.1-21.7; 22.1-22.7; 23.1-23.7

Item #	Traditional	BADNAP	CLP
21.1			
21.2			
21.3			
21.4			
21.5			
21.6			
21.7			
22.1			
22.2			
22.3			
22.4			
22.5			
22.6			
22.7			
23.1			
23.2			
23.3			
23.4			
23.5			
23.6			
23.7			

OCCC Nursin	g Advisory Com	mittee		
Item 3				
Item 3	.2			
Item 3	.3			
Item 3	.4			
AY 2015				<u>AY 2015</u>
ELA:				
Student Exit S	Survey: Items 11	.1-11.7; 12.1-12.	7; 13.1-13.7	
Item #	Traditional	BADNAP	CLP	
11.1				
11.2				
11.3				
11.4				
11.5				
11.6				
11.7				
12.1				
12.2				
12.3				
12.4				
12.5				
12.6				
12.7				
13.1				
13.2				
13.3				
13.4				
13.5				
13.6				
13.7				
Total Program	n Evaluation - Fa	culty Survey: It	ems 21.1-21.7;	-22.7; 23.1-23.7
Item #	Traditional	BADNAP	CLP	

-				
21.1				
21.2				
21.3				
21.4				
21.5				
21.6				
21.7				
22.1				
22.2				
22.3				
22.4				
22.5				
22.6				
22.7				
23.1				
23.2				
23.3				
23.4				
23.5				
23.6				
23.7				
20.7				
OCCC Nursing	g Advisory Com	mittee		
Item 3.	1			
Item 3.				
Item 3.				
Item 3.				
AY 2016	·			AY2016
<u>AY 2016</u> ELA				
Student Exit S	urvey: Items 11	.1-11.7; 12.1-12.	7; 13.1-13.7	
Item #	Traditional	BADNAP	CLP	
11.1			-	
11.2				
11.3				
11.0				

11.4		
11.5		
11.6		
11.7		
12.1		
12.2		
12.3		
12.4		
12.5		
12.6		
12.7		
13.1		
13.2		
13.3		
13.4		
13.5		
13.6		
13.7		

Total Program Evaluation - Faculty Survey: Items 21.1-21.7; 22.1-22.7; 23.1-23.7

Item #	Traditional	BADNAP	CLP
21.1			
21.2			
21.3			
21.4			
21.5			
21.6			
21.7			
22.1			
22.2			
22.3			
22.4			
22.5			
22.6			

00.7		1
22.7		
23.1		
23.2		
23.3		
23.4		
23.5		
23.6		
23.7		
OCCC Nursing Advis	an Committee	
OCCC Nursing Advise	bry Committee	
Item 3.1		
Item 3.2		
Item 3.3		
Item 3.4		

Criterion	Expected Level of Achievement
Changes in policies, procedures, and program information are	 Mean score of 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 24.1-24.2 Mean score of 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course Survey: Item 11
clearly and consistently communicated to students in a timely manner.	 Mean score of 3.5 on a scale of 5.0 on the Student Exit Survey: Items 15.1-15.2

Frequency of Assessment	Assessment Method
Total Program Evaluation-Faculty Survey:	 Review and analysis of the Total Program Evaluation – Faculty
May – data collected by NEC	Survey
September – reviewed by NEC	 Review and analysis of Student Exit Survey by NEC and NFO.
October – reviewed by NFO	

Student Exit Survey:

- November/April data collected by NEC
- March reviewed by NEC
- April reviewed by NFO

CRITERION 3.3 RESULTS

		of Data Collecti	-		Actions for Program Development,
		g actual level of	achievement,		Maintenance, or Revision
	3 Recommendat			р II а	<u>AY2014</u>
				s discussed by the	November 2013 Actions
				informed during the	The NPD and NPAD will review proposed revisions to the clinical
				ent's assigned nurse	guidelines, make changes, and present at next NFO
				ions of any kind to a	
patient. Failure	e to do so would	result in dismissa	al from the prog	iram.	
AV 2014					
<u>AY 2014</u> ELA:					
	Evaluation – Fa	aculty Survey:	tome 24 1-24 3)	
Item #	Traditional	BADNAP		1	
24.1	Traditional	DADNAF	ULF		
24.1					
24.2					
Faculty Evalua	ation of Nursing	Course Survey	/: Item 11		
Item #	Traditional	BADNAP	CLP]	
11]	
	urvey: Items 1			7	
Item #	Traditional	BADNAP	CLP	-	
15.1					
15.2					
<u>AY 2015</u>					<u>AY 2015</u>
ELA:					

Total Program		aculty Survey: I	tems 24.1-24.2
ltem #	Traditional	BADNAP	CLP
24.1			
24.2			
		g Course Survey	
ltem #	Traditional	BADNAP	CLP
11			
	Survey: Items 1	5.1-15.2	
ltem #	Traditional	BADNAP	CLP
15.1			
15.2			
AY 2016			
ELA:			
Total Program	n Evaluation – F	aculty Survey: If	tems 24.1-24
Item #	Traditional	BADNAP	CLP
24.1			
24.2			
Faculty Evaluation	ation of Nursing	g Course Survey	: Item 11
Item #	Traditional	BADNAP	CLP
11			
Student Exit S	Survey: Items 1	5.1-15.2	
Item #	Traditional	BADNAP	CLP
15.1			
15.2			

Criterion	Expected Level of Achievement
Student services are commensurate with the needs of nursing students, including those receiving instruction using alternative methods of delivery.	 Students will rate satisfaction with OCCC student support services at 3.5 or higher on a 5.0 scale on the Student Exit Survey: Items 17.1-17.13 Faculty will rate satisfaction with OCCC student support services at 3.5 or higher on a 5.0 scale on the Faculty evaluation of Nursing Course Survey: Items 12.1-12.3 Faculty will rate satisfaction with OCCC student support services at 3.5 or higher on a 5.0 scale on the Total Program Evaluation – Faculty Survey: Items 25.1-25.13

Frequency of Assessment	Assessment Method
 Student Exit Survey: November/April – data collected by NEC October – reviewed by NEC and reported to NPD 	 Review of published services Review and analysis of Student Exit Survey data by NEC with recommendations to NPD Review and analysis of Faculty Evaluation of Nursing Course
 Faculty Evaluation of Nursing Course Survey: May – data collected by NEC October – reviewed by NEC and reported to NPD 	 Survey data by NEC with recommendations to NPD Review and analysis of Total Program Evaluation-Faculty Survey data with recommendations to NPD
 Total Program Evaluation-Faculty Survey: May – data collected by NEC October – reviewed by NEC and reported to NPD 	

CRITERION 3.4 RESULTS

			ion & Analysis of achievement)		Actions for Program Development, Maintenance, or Revision
AY 2014		0	,		AY 2014
ELA					
Student Exit Survey					
Service	Item #	Traditional	BADNAP	CLP	
Academic Advising	17.1				
Bookstore	17.2				
Bursar	17.3				
Child Development Center	17.4				
Records & Graduation Services	17.5				
Recreation & Fitness	17.6				
Recruitment and Admissions	177				
Student Employment & Career Services	17.8				
Student Financial Support Services	17.9				
Student Life	17.10				
Student Support Services (Counseling, Disability, Learning Support)	17.11				
Testing & Assessment	17.12				
Safety & Security	17.13				

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aculty Evaluatio	ditional	BADNAP	CLP		
12.1					
12.2					
12.3					
tal Program Eval					_
Service	Item #	Traditional	BADNAP	CLP	
Academic Advising	25.1				
Bookstore	25.2				1
Bursar	25.3				1
Child	25.4				
Development Center					
Records &	25.5				
Graduation Services					
Recreation &	25.6				
Fitness					
Recruitment and Admissions	25.7				
Student	25.8				
Employment & Career Services					
Student Financial	25.9				
Support Services					
Student Life	25.10				
Student Support	25.11				
Services					
(Counseling,					
Disability,					
Learning Support)					
Testing &	25.12				

Assessment				
Safety & Security	25.13			
	20.10			
<u>AY 2015</u>				
ELA				
Student Exit Survey				
Service	Item #	Traditional	BADNAP	CLP
Academic	17.1			
Advising				
Bookstore	17.2			
Bursar	17.3			
Child	17.4			
Development				
Center				
Records &	17.5			
Graduation				
Services				
Recreation &	17.6			
Fitness				
Recruitment and	177			
Admissions				
Student	17.8			
Employment &				
Career Services				
Student	17.9			
Financial Support				
Services				
Student Life	17.10			
Student Support	17.11			
Services				
(Counseling,				
Disability,				
Learning				
Support)				

Testing & Assessment	17.12		
Safety & Security	17.13		

Faculty Evaluation of Nursing Course Survey: Items 12.1-12.3

Item #	Traditional	BADNAP	CLP
12.1			
12.2			
12.3			

Total Program Evaluation – Faculty Survey: Items 25.1-25.13

Service	Item #	Traditional	BADNAP	CLP
Academic	25.1			
Advising				
Bookstore	25.2			
Bursar	25.3			
Child	25.4			
Development				
Center				
Records &	25.5			
Graduation				
Services				
Recreation &	25.6			
Fitness				
Recruitment and	25.7			
Admissions				
Student	25.8			
Employment &				
Career Services				
Student Financial	25.9			
Support Services				
Student Life	25.10			
Student Support	25.11			
Services				

(Counseling,				
Disability,				
Learning Support)	05 10			
Testing &	25.12			
Assessment	05.40			
Safety & Security	25.13			
AV 2016				
<u>AY 2016</u> ELA				
Student Exit Survey	u Itoma 17	7 1 17 12		
Service	Item #	Traditional	BADNAP	CLP
Academic	17.1	Haultonai	DADNAF	
	17.1			
Advising Bookstore	17.2			
Bursar	17.3			
Child	17.4			
Development				
Center				
Records &	17.5			
Graduation				
Services				
Recreation &	17.6			
Fitness				
Recruitment and	177			
Admissions				
Student	17.8			
Employment &				
Career Services				
Student	17.9			
Financial Support				
Services				
Student Life	17.10			
Student Support	17.11			
Services				
00.11000				1

(Counseling,			
Disability,			
Learning			
Support)			
Testing &	17.12		
Assessment			
Safety & Security	17.13]

Faculty Evaluation of Nursing Course Survey: Items 12.1-12.3

Item #	Traditional	BADNAP	CLP
12.1			
12.2			
12.3			

Total Program Evaluation – Faculty Survey: Items 25.1-25.13

Service	Item #	Traditional	BADNAP	CLP
Academic	25.1			
Advising				
Bookstore	25.2			
Bursar	25.3			
Child	25.4			
Development				
Center				
Records &	25.5			
Graduation				
Services				
Recreation &	25.6			
Fitness				
Recruitment and	25.7			
Admissions				
Student	25.8			
Employment &				
Career Services				
Student Financial	25.9			

Support Services				
Student Life	25.10			
Student Support	25.11			
Services				
(Counseling,				
Disability,				
Learning Support)				
Testing &	25.12			
Assessment				
Safety & Security	25.13			
i			-	

Criterion	Expected Level of Achievement
Student educational records are in compliance with the policies of the governing organization and state and federal guidelines.	Policies concerned with maintenance of educational records will be followed 100% of the time

Frequency of Assessment	Assessment Method
 Regular and ongoing depending on specific programs or process. Additional and more formal internal audit every 3 years, and potential external audit on annual basis. 	 Checks and balances have been incorporated within our student system and within our processing strategies which ensure compliance with institutional, state, and federal guidelines. Verify with the Registrar.
 Annually by external auditors and every three years by internal auditors. 	Randomly selected records are reviewed by auditors

CRITERION 3.5 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2014</u>	<u>AY2014</u>
ELA:	
<u>AY 2015</u>	<u>AY2015</u>
ELA:	
<u>AY 2016</u>	<u>AY2016</u>
ELA:	

Criterion	Expected Level of Achievement
Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained, including default rates, and the results of financial or compliance audits.	 100% of the nursing faculty will comply with college policies and practices regarding attendance reporting to maintain compliance with Title IV requirements. Default rates will be reported annually. Results of financial and/or compliance audits will be reported annually.

Frequency of Assessment	Assessment Method
Annually in conjunction with Dean of Student Financial Support Services	 Direct contact with Dean of Student Financial Support Services provides annual assurance that OCCC is compliant with the Higher Education Reauthorization Act Title IV. Written reports address default rate and results of financial and/or compliance audits.

CRITERION 3.6 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2014</u>	<u>AY2014</u>
OCCC is compliant with Title IV regulations for determining eligibility and certifying	
student loans. OCCC has had clean audits the past two years. The default rate is	
going up as it is for all schools due to a change in the way the rate is now calculated.	
At this time OCCC is not at risk of any penalties due to the default rate. The draft	
default rate for the most recent year used was out in late February 2013. The draft	
two year rate for 2011 is 16.7% down from the official 2010 two year rate of 18.3%.	
The three year draft rate is 26.2% for 2010. That is up from 24.2% last fall.	
The default rate for 2009 is 14.8% (draft two year rate)	
The default rate for 2009 is 24.2% (draft three year rate)	
The default rate for 2010 is 18.3% (draft two year rate)	
The default rate for 2010 is 26.2% (draft three year rate)	
The default rate for 2010 is 18.3% (draft two year rate)	
The default rate for 2011 is 16.7% (draft two year rate)	
The default rate for 2012 is	
The default rate for 2013 is	
The default rate for 2014 is	
<u>AY 2015</u>	<u>AY 2015</u>
The default rate for 2012 is	
The default rate for 2013 is	
The default rate for 2014 is	
The default rate for 2015 is	
<u>AY 2016</u>	<u>AY 2016</u>
ELA:	
The default rate for 2013 is	
The default rate for 2014 is	
The default rate for 2015 is	
The default rate for 2016 is	

Criterion	Expected Level of Achievement
A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.	A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.

Frequency of Assessment	Assessment Method
Annually in conjunction with Dean of Student Financial Support Services	 Direct contact with Dean of Student Financial Support Services provides annual assurance that OCCC is compliant. Written report addresses these Criterions and is available for review.

CRITERION 3.6.1 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2014 ELA: The OCCC Student Financial Support Services has written procedures and consumer information for students on loan information, online loan counseling, monitoring student loan debt, and we do Federal Direct Loans, the Government is the lender so we use their online services and there is cooperation. OCCC does not advocate or promote the use of private loans and therefore has very little interaction with lenders outside the U. S. Department of Education.	<u>AY2014</u>
AY 2015 ELA:	<u>AY 2015</u>
<u>AY 2016</u>	<u>AY 2016</u>

ELA:

Criterion	Expected Level of Achievement
Students are informed of their ethical responsibilities regarding financial assistance.	Students are informed of their ethical responsibilities regarding financial assistance.

Frequency of Assessment	Assessment Method
Annually in conjunction with Dean of Student Financial Support Services	 Direct contact with Dean of Student Financial Support Services provides annual assurance that OCCC is compliant. Written report addresses these Criterions and is available for review.

CRITERION 3.6.2 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
AY 2014 ELA: On page 27 of the 2013-2014 OCCC Catalog there is a section on Rights and Responsibilities for students receiving financial assistance. There are extensive consumer information requirements for students and prospective students that require the College to address a wide range of topics in a formal way. Pages 12 and 13 of the 2013-2014 OCCC Catalog have more examples. The <u>Financial Aid Office</u> has extensive information on their webpage, Catalog, Student Handbook, and hardcopy Fact Sheets available in the FA Office. Student Financial Support Services	<u>AY2014</u>

makes extensive use of email to inform students throughout the year.	
AY 2015	<u>AY 2015</u>
ELA:	
AY 2016	<u>AY 2016</u>
ELA:	

Criterion	Expected Level of Achievement
Financial aid records are maintained in compliance with the policies of the governing agency, state, and federal guidelines.	Policies concerned with maintenance of financial records will be followed.

Frequency of Assessment	Assessment Method
Annually in conjunction with Dean of Student Financial Support Services	Direct contact with Dean of Student Financial Support Services provides annual assurance that OCCC is compliant. Written report addresses these Criterions and is available for review.

CRITERION 3.6.3 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2014</u>	AY2014
ELA:	
Financial aid records are mostly imaged and retrievable. Hard copy records are	
managed consistent with federal, state, and college requirements.	

<u>AY 2015</u>	<u>AY 2015</u>	
ELA:		
AV 2016	AV 2016	
AY 2016 ELA	<u>AY 2016</u>	

Criterion	Expected Level of Achievement
Records reflect that program complaints and grievances receive due process and include evidence of resolution.	100% of complaints will be documented and addressed according to established methods and policies, which include due process and evidence of resolution.

Frequency of Assessment	Assessment Method	
When complaints occur.	Review of complaints for correct procedure	

CRITERION 3.7 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2014</u>	<u>AY2014</u>
ELA 3.7:	
AY 2015	AY 2015
ELA 3.7:	
AY 2016	AY 2016
ELA 3.7:	

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STANDARD III CRITERION 3.8

Criterion	Expected Level of Achievement
Orientation to technology is provided, and technological support is available to students.	 Mean score of 3.5 on a scale of 5.0 on the Student Exit Survey: Items 19.1-19.5, 20.1-20.5 Mean score of 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Item 26.1-26.5, 27.1-27.5

Frequency of Assessment	Assessment Method		
Student Exit Survey: • November/April – data collected by NEC • March – reviewed by NEC • April – reviewed by NFO Total Program Evaluation-Faculty Survey: • May – data collected by NEC • September – reviewed by NEC • October – reviewed by NFO	 Review and analysis of Student Exit Survey by NEC and NFO Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO 		

CRITERION 3.8 RESULTS

	Results of Data Collection & Analysis (including actual level of achievement)			Actions for Program Development, Maintenance, or Revision	
<u>AY 2014</u>	AY 2014				<u>AY2014</u>
ELA:					
Student Exit S	Survey: Items 19	.1-19.5, 20.1-20.	5		
Item #	Traditional	BADNAP	CLP		
19.1					
19.2					

19.3		
19.4		
19.5		
20.1		
20.2		
20.3		
20.4		
20.5		

Total Program Evaluation – Faculty Survey: Items 26.1-26.5, 27.1-27.5

ltem #	Traditional	BADNAP	CLP
26.1			
26.2			
26.3			
26.4			
26.5			
27.1			
27.2			
27.3			
27.4			
27.5			

<u>AY 2015</u>			
ELA:			
Student Exit S	urvey: Items 19	9.1-19.5, 20.1-20).5
Item #	Traditional	BADNAP	CLP
19.1			
19.2			
19.3			
19.4			
19.5			
20.1			
20.2			

	86

20.3 20.4						
20.5				_		
	n Evaluation – Fa Traditional	aculty Survey: It BADNAP	tems 26.1-26 CLP	<u>.5,</u> 27.1-27.5		
26.1						
26.2						
26.3						
26.4						
26.5						
27.1						
27.2						
27.3						
27.3 27.4				_		
27.4 27.5 Y 2016					<u>AY 2016</u>	
27.4 27.5 Y 2016 LA: tudent Exit \$	Survey: Items 19	0.1-19.5, 20.1-20 BADNAD	.5 CI P		<u>AY 2016</u>	
27.4 27.5 Y 2016 LA: tudent Exit \$ Item #	Survey: Items 19 Traditional	9.1-19.5, 20.1-20 BADNAP	.5 CLP		<u>AY 2016</u>	
27.4 27.5 Y 2016 LA: tudent Exit s Item # 19.1	Survey: Items 19 Traditional	9.1-19.5, 20.1-20 BADNAP	.5 CLP		<u>AY 2016</u>	
27.4 27.5 Y 2016 LA: tudent Exit \$ Item # 19.1 19.2	Survey: Items 19 Traditional	9.1-19.5, 20.1-20 BADNAP	.5 CLP		<u>AY 2016</u>	
27.4 27.5 Y 2016 LA: tudent Exit s Item # 19.1 19.2 19.3	Survey: Items 19 Traditional	9.1-19.5, 20.1-20 BADNAP	.5 CLP		<u>AY 2016</u>	
27.4 27.5 Y 2016 LA: tudent Exit s Item # 19.1 19.2 19.3 19.4	Survey: Items 19 Traditional	9.1-19.5, 20.1-20 BADNAP	.5 CLP		<u>AY 2016</u>	
27.4 27.5 Y 2016 LA: tudent Exit s Item # 19.1 19.2 19.3	Survey: Items 19 Traditional	9.1-19.5, 20.1-20 BADNAP	.5 CLP		<u>AY 2016</u>	
27.4 27.5 Y 2016 LA: tudent Exit 5 Item # 19.1 19.2 19.3 19.4 19.5	Survey: Items 19 Traditional	9.1-19.5, 20.1-20 BADNAP	.5 CLP		<u>AY 2016</u>	
27.4 27.5 Y 2016 LA: tudent Exit s Item # 19.1 19.2 19.3 19.4 19.5 20.1	Survey: Items 19 Traditional	9.1-19.5, 20.1-20 BADNAP	.5 CLP		<u>AY 2016</u>	
27.4 27.5 Y 2016 LA: tudent Exit s Item # 19.1 19.2 19.3 19.4 19.5 20.1 20.2	Survey: Items 19 Traditional	9.1-19.5, 20.1-20 BADNAP	.5 CLP		<u>AY 2016</u>	

al Prograr	n Evaluation – Fa	aculty Survey: It	ems 26.1-26.5
Item #	Traditional	BADNAP	CLP
26.1			
26.2			
26.3			
26.4			
26.5			
27.1			
27.2			
27.3			
27.4			
27.5			

STANDARD III CRITERION 3.9

Criterion	Expected Level of Achievement
Information related to	Not Applicable – No Distance Education Program as per definition
technology requirements	
and policies specific to	
distance education are	
clear, accurate,	
consistent, and	
accessible.	

Frequency of Assessment	Assessment Method
Not Applicable	Not Applicable

CRITERION 3.9 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2014 ELA	<u>AY2014</u>
AY 2012 ELA	<u>AY 2015</u>
AY 2016 ELA	<u>AY 2016</u>

STANDARD IV: CURRICULUM

The curriculum supports the achievement of the identified student learning outcomes and program outcomes of the nursing education unit consistent with safe practice in contemporary healthcare environments.

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Criterion	Expected Level of Achievement
The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning outcomes and program outcomes consistent with contemporary practice.	 Annual review of curriculum mapping document for consistency with contemporary practice. Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 29.1-29.2 Mean score of at least 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course Survey: Item 13 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Items 22, 23 Mean score of at least 3.5 on a scale of 5.0 on the Student Evaluation of Nursing Course Survey: Items 5.1-5.2 Mean score of at least 3.5 on a scale of 5 on the OCCC Nursing Advisory Committee Survey: Item 4

Frequency of Assessment	Assessment Method
 Review of Curriculum Mapping Document Annually Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC and recommendations forwarded to NCC October – reviewed by NCC and recommendations forwarded to NFO November – reviewed by NFO Faculty Evaluation of Nursing Course Survey: May – data collected by NEC September – reviewed by NEC and recommendations forwarded to NFO Faculty Evaluation of Nursing Course Survey: May – data collected by NEC September – reviewed by NEC and recommendations forwarded to NCC October – reviewed by NEC and recommendations forwarded to NCC October – reviewed by NCC and recommendations forwarded to NFO November – reviewed by NFO 	 Review of curriculum mapping document by clinical agencies/partners for consistency Review and analysis of Total Program Evaluation-Faculty Survey by NEC, NCC, and NFO Review and analysis of the Faculty Evaluation of Nursing Course by NEC, NCC, and NFO Review and analysis of Student Exit Survey by NEC, NCC, and NFO Review and analysis of the Faculty Evaluation of Nursing Course by NEC, NCC, and NFO Review and analysis of the Faculty Evaluation of Nursing Course by NEC, NCC, and NFO Review and analysis of the Faculty Evaluation of Nursing Course by NEC, NCC, and NFO Review and analysis of OCCC Nursing Advisory Committee Survey by NEC, NCC, and NFO

Student Exit Survey:

- November/April data collected by NEC
- March reviewed by NEC and recommendations forwarded to NCC
- April reviewed by NCC and recommendations forwarded to NFO
- May reviewed by NFO

Student Evaluation of Nursing Course Survey:

- November/April data collected by NEC
- March reviewed by NEC and recommendations forwarded to NCC
- April reviewed by NCC and recommendations forwarded to NFO
- May reviewed by NFO

OCCC Nursing Advisory Committee Survey:

- October/March data collected by NEC
- September reviewed by NEC with recommendations to NCC
- November reviewed by NEC with recommendations to NCC
- **December** reviewed by NFO

CRITERION 4.1 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2014	AY2014
ELA:	September 2013 Recommendations/Activities
The curriculum mapping document was shared with clinical agencies/partners in the	Faculty to view their course assignments on the "O" drive.
month of August, 2013.	
September 2013 Recommendations/Activities	
PNCI course assignments as well as Medicom Trainex course assignments	

Item #	Traditional	BADNAP	CLP
29.1			
29.2			
Ecoulty Evolu	ation of Nuraina		u Itam 12
Item #	ation of Nursing	BADNAP	CLP
13	Taditional	BADIAI	
	L	I	l
Student Exit	Survey: Items 22	2-23	
Item #	Traditional	BADNAP	CLP
22			
23			
	uation of Nursing		
14 14			
Item #	Traditional	BADNAP	CLP
5.1	Iraditional	BADNAP	CLP
	Iraditional	BADNAP	CLP
5.1 5.2			
5.1 5.2 OCCC Nursir	ng Advisory Con		
5.1 5.2 OCCC Nursir Item 4	ng Advisory Con		
5.1 5.2 OCCC Nursir Item 4 AY 2015	ng Advisory Con		
5.1 5.2 OCCC Nursir Item 4 AY 2015 ELA:	ng Advisory Con	nmittee Survey:	ltem 4
5.1 5.2 OCCC Nursir Item 4 AY 2015 ELA: Fotal Progran	ng Advisory Con	nmittee Survey: aculty Survey: I	Item 4 Items 29.1-29.
5.1 5.2 OCCC Nursir Item 4 AY 2015 ELA: Fotal Progran Item #	ng Advisory Con	nmittee Survey:	ltem 4
5.1 5.2 OCCC Nursir Item 4 AY 2015 ELA: Fotal Progran Item # 29.1	ng Advisory Con	nmittee Survey: aculty Survey: I	Item 4 Items 29.1-29.
5.1 5.2 OCCC Nursir Item 4 AY 2015 ELA: Fotal Progran Item #	ng Advisory Con	nmittee Survey: aculty Survey: I	Item 4 Items 29.1-29.
5.1 5.2 OCCC Nursir Item 4 AY 2015 ELA: Fotal Program Item # 29.1 29.2	ng Advisory Con n Evaluation – F Traditional	nmittee Survey: aculty Survey: I BADNAP	Item 4 tems 29.1-29. CLP
5.1 5.2 OCCC Nursir Item 4 AY 2015 ELA: Fotal Program Item # 29.1 29.2 Faculty Evalu	ng Advisory Con n Evaluation – F Traditional	nmittee Survey: aculty Survey: I BADNAP Course Survey	Item 4 tems 29.1-29. CLP /: Item 13
5.1 5.2 OCCC Nursir Item 4 AY 2015 ELA: Fotal Program Item # 29.1 29.2	ng Advisory Con n Evaluation – F Traditional	nmittee Survey: aculty Survey: I BADNAP	Item 4 tems 29.1-29. CLP

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Student Exit S	Survey: Items 22	-23	
Item #	Traditional	BADNAP	CLP
22			
23			
Student Evalu	ation of Nursing	g Course Survey	r: Items 5.1-5.
Item #	Traditional	BADNAP	CLP
5.1			
5.2			
	g Advisory Com	mittee Survey: I	tem 4
Item 4			
<u>AY 2016</u>			
ELA:	. Evelve (* v. E		
	n Evaluation – Fa		
Item #	Traditional	BADNAP	CLP
29.1			
29.2			
Faculty Evalu	ation of Nursing	Course Survey	· Itom 12
Item #	Traditional	BADNAP	CLP
13	Tautional	DADITAI	
10	I		
Student Exit S	Survey: Items 22	-23	
Item #	Traditional	BADNAP	CLP
22	······	2/21/1	·
23			
20			
Student Evalu	ation of Nursing	a Course Survey	: Items 5 1-5 3
Item #	Traditional	BADNAP	CLP
5.1		5/1010/1	
5.2			
0.2			

Criterion	Expected Level of Achievement
The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.	 Student progress will be guided by and evaluated through the relationship of curriculum to program educational and course outcomes. Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 30.1-30.4 Mean score of at least 3.5 on a scale of 5.0 on the Student Evaluation of Nursing Course: Item 6.1-6.3, 7-9 Mean score of at least 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course: Item 14.1-14.4 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Items 24.1-24.4; 25.1-25.4 Mean score of at least 3.5 on a scale of 5.0 on the Adjunct Faculty Survey: Items 10.1-10.4

Frequency of Assessment	Assessment Method
Review of Curriculum	Review of curriculum by NCC and NFO during NFO Curriculum and
April – reviewed by NCC	Program Review meeting
May – reviewed by NFO	 Review and analysis of Total Program Evaluation-Faculty Survey by NEC, NCC and NFO
 Total Program Evaluation – Faculty Survey: May - data collected by NEC 	 Review and analysis of the Student Evaluation of Nursing Course by NEC, NCC and NFO
 January – reviewed by NEC March – reviewed by NCC 	 Review and analysis of the Faculty Evaluation of Nursing Course by NEC, NCC and NFO
April - reviewed by NFO	 Review and analysis of Student Exit Survey by NEC, NCC and NFO
Student Evaluation of Nursing Course Survey:	 Review and analysis of Adjunct Faculty Survey by NEC, NCC and
November/April – data collected by NEC	NFO
October – reviewed by NEC	
November – reviewed by NCC	
December – reviewed by NFO	

Faculty Evaluation of Nursing Course Survey:

- May data collected by NEC
- January reviewed by NEC
- March reviewed by NCC
- April reviewed by NFO

Student Exit Survey:

- November/April data collected by NEC
- March reviewed by NEC and recommendations forwarded to NCC
- April reviewed by NCC and recommendations forwarded to NFO
- May reviewed by NFO

Adjunct Faculty Survey:

- May data collected by NEC
- January reviewed by NEC
- March reviewed by NCC
- April reviewed by NFO

CRITERION 4.2 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,	
(including actual level of achievement)	Maintenance, or Revision	
<u>AY 2014</u>	<u>AY2014</u>	
ELA:	August 2013 Actions	
August 2013 Recommendations/Activities	All documents approved by NFO.	
The Nursing Process Committee brought forth to NFO five documents for approval to	September 2013 Actions	
begin using Fall 2013.	Faculty to familiarize themselves with CLP curriculum changes.	
September 2013 Recommendations/Activities	October 2013 Actions	
CLP Curriculum changes discussed.	SafeMedicate to advance to NUR 1529 for the Spring 14 semester	
October 2013 Recommendations/Activities	with progression to NUR 2539 and NUR 2549 to follow in Fall 14	
SafeMedicate (formerly eDose) discussed. Geriatric content discussed and already	and Spring 15.	

n mapping document.				Full integration of geriatric content by Fall 14.
UR 2549 Leadership objectives are being completed.				To review Leadership and Management content placement
lovember2013 Recommendations/Activities				throughout curriculum with recommendations on changes to
he Curricului	m Committee brou	ught forth the NF	the brought to NPD.	
FO		0	November 2013 Actions	
				The NFO voted to approve the NPIV objectives as written.
otal Program	m Evaluation – Fa	aculty Survey I	tems 30.1-30.4	
Item #	Traditional	BADNAP	CLP	
30.1				
30.2				
30.3				
30.4				
tudent Eval	uation of Nursing	g Course Items	6.1-6.3, 7-9	
ltem #	Traditional	BADNAP	CLP	
6.1				
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6.3				
7				
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<u>8</u> 9				
9	uation of Nursing	Course Items	14.1-14.4	
9	uation of Nursing	Course Items	14.1-14.4 CLP	
9 aculty Evalu				
9 aculty Evalu Item #				
9 aculty Evalu Item # 14.1 14.2				
9 aculty Evalu Item # 14.1				
9 aculty Evalu Item # 14.1 14.2 14.3				
9 aculty Evalu Item # 14.1 14.2 14.3 14.4	Traditional	BADNAP		
9 aculty Evalu Item # 14.1 14.2 14.3 14.4 tudent Exit		BADNAP		
9 aculty Evalu Item # 14.1 14.2 14.3 14.3 14.4 tudent Exit Item #	Traditional Survey Items 24.	BADNAP 1-24.4	CLP	
9 aculty Evalu Item # 14.1 14.2 14.3 14.4 tudent Exit	Traditional Survey Items 24.	BADNAP 1-24.4	CLP	

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24.4			
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Adjunct Facult	ty Survey Items	10.1-10.4	
Item 1	0.1		
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Item 1			
Item 1			
AY 2015			
ELA:			
	Evaluation – Fa	aculty Survey Ite	ems 30.1-30.4
Item #	Traditional	BADNAP	CLP
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Student Evalua	ation of Nursing	g Course Items 6	61-637-9
Item #	Traditional	BADNAP	CLP
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	tion of Nursian	Course Itoms 1	1 1 1 1 1
		Course Items 1	
Item #	Traditional	BADNAP	CLP
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Student Exit S	Survey Items 24.	1-24.4	
Item #	Traditional	BADNAP	CLP
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Item	Ity Survey Items	10.1-10.4	
Item			
Item 1			
Item 7	10.4		
<u>AY 2016</u>			
ELA:			
	h Evaluation – Fa	aculty Survey Ite	ms 30.1-30.4
Item #	Traditional	BADNAP	CLP
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30.2			
30.3			
30.4			
Student Evalu	ation of Nursing	g Course Items 6	6.1-6.3, 7-9
Item #	Traditional	BADNAP	CLP
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Faculty Evaluation of Nursing Course Items 14.1-14.4

Item #	Traditional	BADNAP	CLP
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14.2			
14.3			
14.4			

Student Exit Survey Items 24.1-24.4

Item #	Traditional	BADNAP	CLP
24.1			
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24.3			
24.4			
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Adjunct Faculty Survey Items 10.1-10.4

Item	10.1
Item	10.2
Item	10.3

Item 10.4

Criterion	Expected Level of Achievement
The curriculum is developed by the faculty and regularly reviewed to ensure integrity, rigor, and currency.	 Review of curricular directives annually to ensure compliance with standards set forth by the Oklahoma Board of Nursing, the National League for Nursing Accrediting Commission, Inc., and the Oklahoma State Regents for Higher Education Annual review of curriculum for integrity, rigor and currency Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 31.1-31.3

Frequency of Assessment	Assessment Method
 Review of Curriculum April – reviewed by NCC May – reviewed by NFO 	 Review of curriculum by NCC to ensure clearly articulated student learning and program outcomes, currency of curricular directives and content mapping as well as inclusion of professional standards, guidelines, and competencies including QSEN, IOM with
 Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC October – reviewed by NFO 	 recommendations to NFO. Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO

CRITERION 4.3 RESULTS

	Results of Data Collection & Analysis (including actual level of achievement)			Actions for Program Development, Maintenance, or Revision	
<u>AY 2014</u>	AY 2014				<u>AY2014</u>
ELA:	ELA:				
Total Program	Total Program Evaluation – Faculty Survey: Items 31.1-31.3				
Item #	Traditional	BADNAP	CLP		
31.1					
31.2					
31.3					

AY 2015			
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	n Evaluation – Fa	aculty Survey: If	ems 31 1-31 3
Item #	Traditional	BADNAP	CLP
31.1		27121171	
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AY 2016			
ELA:			
Total Program	n Evaluation – Fa	aculty Survey: It	ems 31.1-31.3
Item #	Traditional	BADNAP	CLP
31.1			
31.2			
31.3			

Criterion	Expected Level of Achievement
The curriculum includes general education courses that enhance professional nursing knowledge and practice.	 Support courses are appropriate for the Nursing Program curriculum and assist students to achieve the Nursing Program outcomes. Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Item 32 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 26 Mean score of at least 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course Survey: Item 15

Frequency of Assessment	Assessment Method
 Support Courses Review NPI – Government (POLSC 1113), Anatomy and Physiology (BIO 1314 or BIO 2255 Human Anatomy) NPII – English I (ENGL 1113), Principles of Chemistry and Lab (CHEM 1123 & CHEM 1131) 	 Review and analysis of Support Courses (course description, objectives, substantive changes) by Nursing Teams (NT), NCC and NFO Review and analysis of Total Program Evaluation-Faculty Survey by NEC, NCC, and NFO

 Review and analysis of Student Exit Survey by NEC, NCC, and
NFO
 Review and analysis of Faculty Evaluation of Nursing Course
Survey by NEC, NCC, and NFO
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CRITERION 4.4 RESULTS

		of Data Collection of actual level of			Actions for Program Development, Maintenance, or Revision
AV 2014	(เกิดเนินเกิยู	j actual level of	acmevement)		*
<u>AY 2014</u> ELA:					AY2014 Sectomber 2012 Actions
	2 Decommondat	tione/Activition			September 2013 Actions
	3 Recommendat		naaa fram alinia	al aganaiga	Nursing teams were reminded to turn in their support course reviews to the Curriculum Committee chair before the October
	nmittee reported				
0 0		it. Other items t	inscussed includ	led survey response	meeting. Also working to increase response rate for surveys from
and support co			to		LTC facilities.
Item #	Evaluation – Fa	BADNAP		7	
	Traditional	BADNAP	GLP	-	
32]	
Student Exit S	urvey: Item 26				
Item #	Traditional	BADNAP	CLP]	
26					
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Faculty Evalua	ation of Nursing	Course Survey	r: Item 15		
Item #	Traditional	BADNAP	CLP		
15					
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AY 2015					AY 2015
ELA:					<u>AT 2015</u>
	Evaluation – Fa	aculty Survey: I	tem 32		
Item #	Traditional	BADNAP	CLP	7	
32	Induitional	B/(BII) II	UL!		
	urvey: Item 26			_	
Item #	Traditional	BADNAP	CLP		
26					
	tion of Numerow				
	ation of Nursing			7	
Item #	Traditional	BADNAP	CLP		

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AV 2046			
<u>AY 2016</u>			
ELA:			
Total Program	n Evaluation – Fa	aculty Survey: I	tem 32
Item #	Traditional	BADNAP	CLP
32			
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Student Exit S	Survey: Item 26		
Student Exit S	Survey: Item 26 Traditional	BADNAP	CLP
Student Exit S Item # 26		BADNAP	CLP
Item #		BADNAP	CLP
Item # 26	Traditional		
Item # 26			
Item # 26 Faculty Evalue	Traditional ation of Nursing	Course Survey	r: Item 15

Criterion	Expected Level of Achievement
The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives.	 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 33.1-33.2 Mean score of 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course: Item 16.1-16.2 Mean score of 3.5 on a scale of 5.0 on the Student Evaluation of Nursing Course: Item 11.1-11.2 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Items 27.1-27.2

Frequency of Assessment	Assessment Method
Total Program Evaluation – Faculty Survey:	Review and analysis of Total Program Evaluation – Faculty Survey
May - data collected by NEC	by NEC, NCC and NFO
January – reviewed by NEC	Review and analysis of the Faculty Evaluation of Nursing Course by

March – reviewed by NCC	NEC, NCC and NFO
April - reviewed by NFO	 Review and analysis of the Student Evaluation of Nursing Course by NEC, NCC and NFO
Faculty Evaluation of Nursing Course:	 Review and analysis of Student Exit Survey by NEC, NCC and
May - data collected by NEC	NFO
January – reviewed by NEC	Nursing Program Post Graduate Survey is conducted by the
March – reviewed by NCC	Department of Institutional Effectiveness through a series of
April - reviewed by NFO	mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Review and analysis of NPPGS by NEC, NCC
Student Evaluation of Nursing Course:	and NFO
November/April – data collected by NEC	
October – reviewed by NEC	
November – reviewed by NCC	
• December – reviewed by NFO	
Student Exit Survey:	
 November/April – data collected by NEC 	
 March – reviewed by NEC and recommendations forwarded to NCC 	
 April – reviewed by NCC and recommendations forwarded to NFO 	
• May – reviewed by NFO	
Nursing Program Post Graduation Survey:	
 January/July – data collected by Department of Institutional 	
Effectiveness and results forwarded to chair of NEC	
 March – reviewed by NEC and recommendations forwarded to NCC 	
 April – reviewed by NCC and recommendations forwarded to NFO 	
May – reviewed by NFO	

CRITERION 4.5 RESULTS

Results of Data Collection & Analysis				Actions for Program Development,
(including actual level of achievement)				Maintenance, or Revision
<u>AY 2014</u>				<u>AY2014</u>
ELA:				
	Evaluation – Fa			
Item #	Traditional	BADNAP	CLP	
33.1				
33.2				
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	ation of Nursing			
Item #	Traditional	BADNAP	CLP	
16.1				
16.2				
	ation of Nursing			
Item #	Traditional	BADNAP	CLP	
11.1				
11.2				
Student Exit Survey Items 27.1-27.2				
Item #	Traditional	BADNAP	CLP	
27.1				
27.2				
AY 2015				AY2015
ELA:				
Total Program Evaluation – Faculty Survey Items 33.1-33.2			ems 33.1-33.2	
Item #	Traditional	BADNAP	CLP	
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33.2				
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Faculty Evaluation of Nursing Course Items 16.1-16.2				
Item #	Traditional	BADNAP	CLP	
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16.2			
Student Evalu	ation of Nursing	g Course Items	11.1-11.2
Item #	Traditional	BADNAP	CLP
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11.2			
Student Exit S	Survey Items 27.	1-27 2	
Item #	Traditional	BADNAP	CLP
27.1	Traditional	DADIIAI	
27.1			
21.2			
AY 2016			
ELA:			
	Evaluation – Fa	aculty Survey I	tems 33 1-33 2
Item #	Traditional	BADNAP	CLP
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33.2			
JJ.Z			
	ation of Nursing	· Course Itome	16 1 16 2
Item #	Traditional	BADNAP	CLP
	Traditional	BAUNAP	ULP
16.1			
16.2			
	ation of Nursing		
Item #	Traditional	BADNAP	CLP
11.1			
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Student Exit S	Survev Items 27.	1-27.2	
	urvey Items 27. Traditional		CLP
Item #	urvey Items 27. Traditional	1-27.2 BADNAP	CLP
			CLP

Criterion	Expected Level of Achievement
The curriculum and instructional processes	 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 34.1-34.4, 35.1- 35.4
reflect educational theory, interprofessional collaboration, research, and current practice standards.	 Mean score of 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course: Item 17.1-17.4, 18.1-18.4, 19 Mean score of 3.5 on a scale of 5.0 on the Adjunct Faculty Survey: Item 11.1-11.4, 12.1-12.4 Mean score of 3.5 on a scale of 5.0 on the Student Evaluation of Nursing Course: Items 12.1-12.4, 13.1-13.4 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Items 29.1-29.4, 30.1-30.4

Frequency of Assessment	Assessment Method
 Total Program Evaluation – Faculty Survey: May - data collected by NEC January – reviewed by NEC March – reviewed by NCC April - reviewed by NFO 	 Review and analysis of Total Program Evaluation-Faculty Survey by NEC, NCC and NFO Review and analysis of the Faculty Evaluation of Nursing Course by NEC, NCC and NFO Review and analysis of the Adjunct Faculty Survey by NEC, NCC and NFO
 Faculty Evaluation of Nursing Course: May - data collected by NEC January – reviewed by NEC March – reviewed by NCC April - reviewed by NFO 	 Review and analysis of the Student Evaluation of Nursing Course by NEC, NCC and NFO Review and analysis of Student Exit Survey by NEC, NCC and NFO
 Adjunct Faculty Survey: May - data collected by NEC January – reviewed by NEC March – reviewed by NCC April - reviewed by NFO 	
 Student Evaluation of Nursing Course: November/April – data collected by NEC October – reviewed by NEC November – reviewed by NCC 	

December – reviewed by NFO
Student Exit Survey:
 November/April – data collected by NEC
 March – reviewed by NEC and recommendations forwarded to NCC
 April – reviewed by NCC and recommendations forwarded to NFO
May – reviewed by NFO

CRITERION 4.6 RESULTS

		of Data Collection of actual level of		Actions for Program Development, Maintenance, or Revision
<u>AY 2014</u>				<u>AY2014</u>
ELA:				
Total Program	n Evaluation – Fa	aculty Survey Ite	ems 34.1-34.4	35.1- 35.4
Item #	Traditional	BADNAP	CLP	
34.1				
34.2				
34.3				
34.4				
35.1				
35.2				
35.3				
35.4				
	ation of Nursing			18.4, 19
Item #	Traditional	BADNAP	CLP	
17.1				
17.2				
17.3				
17.4				

18.1		
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18.3		
18.4		
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Adjunct Faculty Survey Items 11.1-11.4, 12.1-12.4

Item 11.1 Item 11.2 Item 11.3 Item 11.4 Item 12.1 Item 12.2 Item 12.3 Item 12.4

Student Evaluation of Nursing Course Items 12.1-12.4, 13.1-13.4

Item #	Traditional	BADNAP	CLP
12.1			
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Student Exit Survey Items 29.1-29.4, 30.1-30.4

ltem #	Traditional	BADNAP	CLP
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otal Program	n Evaluation – Fa	aculty Survey Ite	ms 34.1-34.4,
Item #	Traditional	BADNAP	CLP
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aculty Evalu	ation of Nursing	Course Items 17	7.1-17.4. 18.1-
Item #	Traditional	BADNAP	CLP
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18.4			
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Adjunct Facu	Ity Survey Items	11.1-11.4, 12.1-1	2.4
Item 1	1.1		
Item 1	1.2		
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Item	11.4
Item	12.1

Item 12.2

Item 12.3

Item 12.4

Student Evaluation of Nursing Course Items 12.1-12.4, 13.1-13.4

Item #	Traditional	BADNAP	CLP
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Student Exit Survey Items 29.1-29.4, 30.1-30.4

Item #	Traditional	BADNAP	CLP
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Total Program Evaluation – Faculty Survey Items 34.1-34.4, 35.1-35.4

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35.3 35.4		
35.4		

Faculty Evaluation of Nursing Course Items 17.1-17.4, 18.1-18.4, 19

ltem #	Traditional	BADNAP	CLP
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17.3			
17.4			
18.1			
18.2			
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18.4			
19			

Adjunct Faculty Survey Items 11.1-11.4, 12.1-12.4

Item	11.1
Item	11.2
Item	11.3
Item	11.4
Item	12.1
Item	12.2
Item	12.3
Item	12.4

Student Evaluation of Nursing Course Items 12.1-12.4,13.1-13.4

Item #	Traditional	BADNAP	CLP
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	Survey Items 29		
Item #	Traditional	BADNAP	CLP
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30.1			
30.2			
30.3			
30.4			

Criterion	Expected Level of Achievement
Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning outcomes.	 Evaluation methodologies that measure achievement of student learning and program outcomes are reviewed annually Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 36.1-36.3 Mean score of 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course: Items 20.1-20.3, 21 Mean score of 3.5 on a scale of 5.0 on the Adjunct Faculty Survey: Item 13.1-13.3 Mean score of 3.5 on a scale of 5.0 on the Student Evaluation of Nursing Course: Items 15.1-15.3, 16-18 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Items 31.1-31.3

Frequency of Assessment	Assessment Method
 Evaluation Methodologies: ATI, Exams, Quizzes, NCLEX results reviewed annually March - Testing Committee April - NCC May – NFO 	 Review and analysis of current Nursing Program evaluation methodologies to include theory exams, quizzes, ATI progression exams, clinical evaluations, e-Dose, and NCLEX results by Testing Committee, NCC (and Sub-Committees) and NFO. Review and analysis of Total Program Evaluation-Faculty Survey by NEC, NCC and NFO
Evaluation Methodologies: Clinical Evaluation, e-Dose, NCLEX results • Semi-Annually – NCC and sub committees	 Review and analysis of the Faculty Evaluation of Nursing Course by NEC, NCC and NFO Review and analysis of Adjunct Faculty Survey by NEC, NCC and NFO
 Total Program Evaluation – Faculty Survey: May - data collected by NEC January – reviewed by NEC March – reviewed by NCC April - reviewed by NFO 	 Review and analysis of the Student Evaluation of Nursing Course by NEC, NCC and NFO Review and analysis of Student Exit Survey by NEC, NCC and NFO
 Faculty Evaluation of Nursing Course: May - data collected by NEC January – reviewed by NEC March – reviewed by NCC 	

April - reviewed by NFO
Adjunct Faculty Survey:
May - data collected by NEC
January – reviewed by NEC
March – reviewed by NCC
April - reviewed by NFO
Student Evaluation of Nursing Course:
November/April – data collected by NEC
October – reviewed by NEC
November – reviewed by NCC
December – reviewed by NFO
Student Exit Survey:
 November/April – data collected by NEC
 March – reviewed by NEC and recommendations forwarded to NCC
 April – reviewed by NCC and recommendations forwarded to NFO
May – reviewed by NFO

CRITERION 4.7 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)					Actions for Program Development, Maintenance, or Revision
AY 2014 ELA: August 2013 Recommendations/Activities Faculty were reminded at NFO of the new ATI testing procedure.			sting procedure	AY2014 August 2013 Actions The NFO will re-evaluate the procedure at the December 2013 NFO meeting.	
Total Program Evaluation – Faculty Survey Items 36.1-36.3					
Item #	Traditional	BADNAP	CLP		
36.1					

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36.2			
36.3			
aculty Evalua	ation of Nursing	Course Items 2	0 1-20 3 21
Item #	Traditional	BADNAP	CLP
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21			
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	ty Survey Items	13.1-13.3	
Item 13			
Item 13			
Item 13			
Student Evaluation	ation of Nursing	g Course Items 1	15.1-15.3, 16-
Item #	Traditional	BADNAP	CLP
15.1			
15.2			
15.3			
16			
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18			
	Survey Items 31.		
ltem #	Traditional	BADNAP	CLP
31.1			
31.2			
31.3			
AY 2015			
ELA:			
	n Evolution E	aculty Survey It	ama 26 1 26 2
		aculty Survey It BADNAP	ems 30.1-30.3
Item #	Traditional	BADNAP	CLP
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36.2			

36.3			
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Faculty Evalu	uation of Nursing	a Course Items	20.1-20.3. 21
Item #	Traditional	BADNAP	CLP
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	uation of Nursing		
Item #	Traditional	BADNAP	CLP
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15.3			
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Student Exit	Survey Items 31.	.1-31.3	
Item #	Traditional	BADNAP	CLP
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31.2			
31.3			
51.5			
<u>AY 2016</u>			
ELA:			
Total Program	<u>n Evaluation – F</u>	aculty Survey It	tems 36.1-36.3
Item #	Traditional	BADNAP	CLP
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36.2

36.3		

Faculty Evaluation of Nursing Course Items 20.1-20.3, 21

Item #	Traditional	BADNAP	CLP
20.1			
20.2			
20.3			
21			

Adjunct Faculty Survey Items 13.1-13.3 Item 13.1

- Item 13.2
- Item 13.3

Student Evaluation of Nursing Course Items 15.1-15.3, 16-18

Item #	Traditional	BADNAP	CLP
15.1			
15.2			
15.3			
16			
17			
18			

Student Exit Survey Items 31.1-31.3

Item #	Traditional	BADNAP	CLP
31.1			
31.2			
31.3			
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STANDARD IV CRITERION 4.8

Criterion	E	xpected Level of Achievement		
The length of time and the credit hours required for program completion are congruent with the attainment of identified student learning outcomes and program outcomes and consistent with the policies of the governing organization, state and national standards, and best practices.	 70% of students will complete the program within 6 semesters (traditional), 6 semesters (baccalaureate to associate degree nurse accelerated pathway), 4 semesters (career ladder pathway) Program length is consistent with the policies of OCCC, state and national standards, and best practices. Mean score of 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course: Items 22 Program meets curriculum requirements of the Oklahoma Board of Nursing (OBN), Oklahoma State Regents Higher Education (OSRHE), and the Accreditation Commission for Education in Nursing (ACEN) 			
Frequency of Assessment		Assessment Method		
 May of even years Faculty Evaluation of Nursing Course: May – data collected by NEC January – reviewed by NEC March – reviewed by NCC April - reviewed by NFO 		 Review of curriculum plan Review of tracking form Review and analysis of the Faculty Evaluation of Nursing Course by NEC, NCC and NFO 		

CRITERION 4.8 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
<u>AY 2014</u>	AY 2014
ELA:	
Faculty Evaluation of Nursing Course Items 22	

ltem #	Traditional	BADNAP	CLP
22			
<u>AY 2015</u>			
ELA:			
		Course Items 2	
Item #	Traditional	BADNAP	CLP
22			
<u>AY 2016</u>			
ELA:			
Faculty Evaluation	ation of Nursing	J Course Items 2	22
Item #	Traditional	BADNAP	CLP

STANDARD IV CRITERION 4.9

Criterion	Expected Level of Achievement
Practice learning	 Mean score of 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course: Items 23.1-23.2
environments support	 Mean score of 3.5 on a scale of 5.0 on the Adjunct Faculty Survey: Items 14.1-14.2
the achievement of	 Mean score of 3.5 on a scale of 5.0 on the Student Evaluation of Nursing Course: Items 20.1-20.2, 21-23
student learning	 Mean score of 3.5 on a scale of 5.0 on the Student Exit Survey: Item 33.1-33.2
outcomes and program	 Mean score of 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Item 37.1-37.2
outcomes.	 Mean score of 3.5 on a scale of 5.0 on the OCCC Nursing Advisory Committee Survey: Item 5
	 Mean score of 2.8 on a scale of 4.0 on the NESA Faculty Evaluation of Clinical Experience Survey: Items 5-6
	 Mean score of 2.8 on a scale of 4.0 on the NESA Student Evaluation of Clinical Experience Survey: Item 6

Frequency of Assessment	Assessment Method	
Faculty Evaluation of Nursing Course:	Review and analysis of the Faculty Evaluation of Nursing Course by	
May - data collected by NEC	NEC, NCC and NFO	
January – reviewed by NEC	Review and analysis of the Adjunct Faculty Survey by NEC, NCC	

March – reviewed by NCC	and NFO
April - reviewed by NFO	 Review and analysis of the Student Evaluation of Nursing Course by NEC, NCC and NFO
Adjunct Faculty Survey:	Review and analysis of Student Exit Survey by NEC, NCC and NFO
May - data collected by NEC	 Review and analysis of the Total Program Evaluation – Faculty
January – reviewed by NEC	Survey by NEC, NCC and NFO
March – reviewed by NCC	Review and analysis of the OCCC Nursing Advisory Committee
April - reviewed by NFO	Survey by the NEC, NCC, and NFO
	 Administration of NESA Evaluation surveys:
Student Evaluation of Nursing Course:	Faculty Evaluation of Clinical Experience
 November/April – data collected by NEC 	Student Evaluation of Clinical Experience
October – reviewed by NEC	 Review and analysis of NESA Evaluation Surveys by NEC and NFO
November – reviewed by NCC	
December – reviewed by NFO	
Student Exit Survey:	
 November/April – data collected by NEC 	
• March – reviewed by NEC and recommendations forwarded to	
NCC	
 April – reviewed by NCC and recommendations forwarded to 	
NFO	
May – reviewed by NFO	
Total Program Evaluation – Faculty Survey:	
May - data collected by NEC	
 January – reviewed by NEC 	
March – reviewed by NCC	
April - reviewed by NFO	
OCCC Nursing Advisory Committee Survey	
October/March - data collected by NEC	
October – reviewed by NEC	
November – reviewed by NCC	
December - reviewed by NFO	

NESA Faculty Evaluation of Clinical Experience	
November/April - data collected by NEC	
November – reviewed by NEC	
December – reviewed by NFO	
NESA Student Evaluation of Clinical Experience	
 November/April - data collected by NEC 	
November – reviewed by NEC	
December – reviewed by NFO	

CRITERION 4.9 RESULTS

		of Data Collection gractual level of		Actions for Program Development, Maintenance, or Revision
AY 2014		-		<u>AY2014</u>
ELA:				
Faculty Evalu	ation of Nursing	Course Items 2	23.1-23.2	
ltem #	Traditional	BADNAP	CLP	
23.1				
23.2				
Item 1 Item 1 Student Evalu		Course Items	20.1-20.2, 2-23 CLP	
20.1	Traditional	DADITAI		
20.2				
21				
22				
23				
	•			

ltem #	Traditional	BADNAP	CLP
33.1			
33.2			
	•		
otal Program	n Evaluation – Fa	aculty Survey Ite	ems 37.1-37.2
ltem #	Traditional	BADNAP	CLP
37.1			
37.2			
	g Advisory Com	mittee Survey: I	tem 5
Item 5			
	Evaluation of C	linical Experien	ce Items 5-6
Item 5			
Item 6			
	t Evaluation of C	Sinical Experien	ice item 6
Item 6)		
<u>Y 2015</u>			
		0	
	ation of Nursing		
ltem #	Traditional	BADNAP	CLP
23.1 23.2			
/.5 /			
20.2			
	Ity Survey Itoma	11 1 11 2	
Adjunct Facu	Ity Survey Items	14,.1-14.2	
Adjunct Facu Item 1	4.1	14,.1-14.2	
Adjunct Facu	4.1	14,.1-14.2	
Adjunct Facu Item 1 Item 1	4.1 4.2		20.4.20.0.04.0
Adjunct Facu Item 1 Item 1	4.1 4.2 uation of Nursing	g Course Items 2	
Adjunct Facu Item 1 Item 1 Student Evalu Item #	4.1 4.2		20.1-20.2, 21-2 CLP
Adjunct Facul Item 1 Item 1 Student Evalu Item # 20.1	4.1 4.2 uation of Nursing	g Course Items 2	
Adjunct Facul Item 1 Item 1 Student Evalu Item # 20.1 20.2	4.1 4.2 uation of Nursing	g Course Items 2	
Adjunct Facul Item 1 Item 1 Student Evalu Item # 20.1	4.1 4.2 uation of Nursing	g Course Items 2	

23			
	Survey Items 33.		
Item #	Traditional	BADNAP	CLP
33.1			
33.2			
	m Evaluation – F		
ltem #	Traditional	BADNAP	CLP
37.1			
37.2			
OCCC Nursing	g Advisory Com	mittee Survey:	ltem 5
Item 5		-	
IESA Faculty	v Evaluation of C	linical Experien	ce Items 5-6
Item 5			
Item 6			
	t Evaluation of C	Clinical Experier	nce Item 6
Item 6			
AY 2016	/		
ELA:			
	ation of Nursing	Course Itoms	02 1 02 0
Item #	Traditional	BADNAP	<u>CLP</u>
23.1	Traditional	BADNAP	CLP
-			
23.2			
Adjunct Facul	Ity Survey Items	14,.1-14.2	
Item 1			
Item 1	4.2		
Student Evalu	uation of Nursing	g Course Items	20.1-20.2, 21-2
Item #	Traditional	BADNAP	CLP
20.1			• =:
20.1	1		

00.0			
20.2			
21			
22			
23			
20			
Ctual and Estit	C	1 22 0	
	Survey Items 33.		01.5
Item #	Traditional	BADNAP	CLP
33.1			
33.2			
Total Droarar	n Evaluation – E	aculty Survay It	ome 3/1_3/2
	n Evaluation – Fa		
Item #	n Evaluation – Fa	aculty Survey It BADNAP	ems 37.1-37.2 CLP
Item #			
Item # 37.1			
Item # 37.1 37.2	Traditional	BADNAP	CLP
Item # 37.1 37.2 OCCC Nursin	Traditional	BADNAP	CLP
Item # 37.1 37.2 OCCC Nursin Item 5	Traditional	BADNAP mittee Survey:	CLP Item 5
Item # 37.1 37.2 OCCC Nursin Item 5	Traditional	BADNAP mittee Survey:	CLP Item 5
Item # 37.1 37.2 OCCC Nursin Item 5	Traditional	BADNAP mittee Survey:	CLP Item 5
Item # 37.1 37.2 OCCC Nursin Item 5 NESA Faculty Item 5	Traditional Ing Advisory Com Y Evaluation of C	BADNAP mittee Survey:	CLP Item 5
Item # 37.1 37.2 OCCC Nursin Item 5 NESA Faculty Item 6	Traditional Image of the second structure Image of the second structure	BADNAP mittee Survey:	CLP Item 5 Ince Items 5-6
Item # 37.1 37.2 OCCC Nursin Item 5 NESA Faculty Item 6	Traditional	BADNAP mittee Survey:	CLP Item 5 Ince Items 5-6

STANDARD IV CRITERION 4.10

Criterion	Expected Level of Achievement
Students participate in clinical experiences that are evidence-based and reflect contemporary practice and nationally established patient health and safety goals.	 Mean score of 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 38.1-38.2 Mean score of 2.8 on a scale of 4.0 on the NESA Faculty Evaluation of Clinical Experience: Items 7,8 Mean score of 3.5 on a scale of 5.0 on the Adjunct Faculty Survey: Items 15-16 Mean score of 2.8 on a scale of 4.0 on the NESA Student Evaluation of Clinical Experience: Items 7,8 Mean score of 3.5 on a scale of 5.0 on the Student Evaluation of Clinical Experience: Items 7,8 Mean score of 3.5 on a scale of 5.0 on the Student Evaluation of Clinical Experience: Items 7,8 Mean score of 3.5 on a scale of 5.0 on the Student Evaluation of Nursing Course Survey: Items 25.1-25.3 Mean score of 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course Survey: Item 24

Frequency of Assessment	Assessment Method
 Total Program Evaluation – Faculty Survey May – data collected by NEC September – reviewed by NEC with recommendations to NCC October – reviewed by NCC with recommendations to NFO November – reviewed by NFO NESA Faculty Evaluation of Clinical Experience November/April - data collected by NEC September – reviewed by NEC with recommendations to NCC October – reviewed by NEC with recommendations to NCC October – reviewed by NEC with recommendations to NFO November – reviewed by NFO NESA Student Evaluation of Clinical Experience November/April - data collected by NFO NESA Student Evaluation of Clinical Experience November – reviewed by NEC with recommendations to NCC October – reviewed by NEC Nesptember – reviewed by NEC with recommendations to NCC November/April - data collected by NEC September – reviewed by NEC with recommendations to NCC November – reviewed by NEC with recommendations to NCC October – reviewed by NEC with recommendations to NCC October – reviewed by NEC with recommendations to NFO November – reviewed by NEC with recommendations to NFO November – reviewed by NFO 	 Review and analysis of Total Program Evaluation – Faculty Survey by NEC, NCC, and NFO Administration of NESA Evaluation surveys: Faculty Evaluation of Clinical Experience Student Evaluation of Clinical Experience Review and analysis of NESA Evaluation Surveys by NEC, NCC, and NFO Review and analysis of Adjunct Faculty Survey by NEC, NCC and NFO Review and analysis of Student Exit Survey by NEC, NCC and NFO Review and analysis of Student Evaluation of Nursing Course Survey by NEC, NCC and NFO Review and analysis of Faculty Evaluation of Nursing Course Survey by NEC, NCC and NFO Review and analysis of Faculty Evaluation of Nursing Course Survey by NEC, NCC and NFO

 May – data collected by NEC September – reviewed by NEC with recommendations to NCC 	
 October – reviewed by NCC with recommendations to NFO 	
November – reviewed by NFO	
Student Exit Survey	
 November/April – data collected by NEC 	
 September – reviewed by NEC with recommendations to NCC 	
 October – reviewed by NCC with recommendations to NFO 	
November – reviewed by NFO	
Student Evaluation of Nursing Course Survey	
 November/April – data collected by NEC 	
September – reviewed by NEC with recommendations to NCC	
 October – reviewed by NCC with recommendations to NFO 	
November – reviewed by NFO	
Faculty Evaluation of Nursing Course Survey	
 May – data collected by NEC 	
 September – reviewed by NEC with recommendations to NCC 	
 October – reviewed by NCC with recommendations to NFO 	
,	
 November – reviewed by NFO 	

CRITERION 4.10 RESULTS

		of Data Collection actual level of	-	Actions for Program Development, Maintenance, or Revision	
<u>AY 2014</u>				<u>AY2014</u>	
ELA:					
Total Program	n Evaluation – Fa	aculty Survey It	ems 38.1-38.2		
Item #	Traditional	BADNAP	CLP		
38.1					
38.2					

NESA Faculty Evaluation of Clinical Experience Items 7,8 Item 7

Item 8

NESA Student Evaluation of Clinical Experience Items 7,8 Item 7 Item 8

Adjunct Faculty Survey Items 15-16

Item 15 Item 16

Student Exit Survey Items 35-36

Item #	Traditional	BADNAP	CLP
35			
35			

Student Evaluation of Nursing Course Survey Items 25.1-25.3

Item #	Traditional	BADNAP	CLP
25.1			
25.2			
25.3			

Faculty Evaluation of Nursing Course Item 25

Item #	Traditional	BADNAP	CLP
24			

AY 2015 ELA: Total Program Evaluation – Faculty Survey Items 38.1-38.2 Item # Traditional 38.1 38.2

NESA Faculty Evaluation of Clinical Experience Items 7,8 Item 7

Item 8

NESA Student Evaluation of Clinical Experience Items 7,8 Item 7 Item 8

Adjunct Faculty Survey Items 15-16

Item 15 Item 16

Student Exit Survey Items 35-36

Item #	Traditional	BADNAP	CLP
35			
35			

Student Evaluation of Nursing Course Survey Items 25.1-25.3

Item #	Traditional	BADNAP	CLP
25.1			
25.2			
25.3			

Faculty Evaluation of Nursing Course Item 25

Item #	Traditional	BADNAP	CLP
24			

AY 2016 AY 2016 ELA: Total Program Evaluation – Faculty Survey Items 38.1-38.2 Item # Traditional 38.1 38.2

NESA Faculty Evaluation of Clinical Experience Items 7,8 Item 7

Item 8

NESA Student Evaluation of Clinical Experience Items 7,8 Item 7 Item 8

Adjunct Faculty Survey Items 15-16

Item 15 Item 16

Student Exit Survey Items 35-36

Item #	Traditional	BADNAP	CLP
35			
35			

Student Evaluation of Nursing Course Survey Items 25.1-25.3

Item #	Traditional	BADNAP	CLP
25.1			
25.2			
25.3			

Faculty Evaluation of Nursing Course Item 25

Item #	Traditional	BADNAP	CLP
24			

STANDARD IV CRITERION 4.11

Criterion	Expected Level of Achievement
Written agreements for clinical practice agencies are current, specify expectations for all parties, and ensure the protection of students.	100% of contracts with clinical agencies are current, specify student/faculty/staff expectations and ensure the protection of students.

Frequency of Assessment	Assessment Method
Upon initiation and annually (June/July)	List of contracts and expiration dates maintained in CAC and NPD's offices.
	Contracts reviewed by CAC and NPD.

CRITERION 4.11 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
AY 2014	AY2014
ELA:	
AY 2015	AY 2015
ELA:	
AY 2016	AY 2016
ELA:	

STANDARD IV CRITERION 4.12

Criterion	Expected Level of Achievement
Learning activities, instructional materials, and evaluation methods are appropriate for all delivery formats and consistent with student learning outcomes.	 Mean score of 3.5 on a scale of 5.0 on the Total Program Evaluation – Faculty Survey: Items 39.1-39.2, 40.1-40.2, 41.1-41.2 Mean score of 3.5 on a scale of 5.0 on the Student Exit Survey: Items 38.1-38.2, 39.1-39.2, 40.1-40.2 Mean score of 3.5 on a scale of 5.0 on the Faculty Evaluation of Nursing Course Survey: Item 25

Frequency of Assessment	Assessment Method
 Total Program Evaluation – Faculty Survey May – data collected by NEC January – reviewed by NEC with recommendations to NCC March – reviewed by NCC with recommendations to NFO April – reviewed by NFO Student Exit Survey November/April – data collected by NEC September – reviewed by NEC with recommendations to NCC 	 Review and analysis of Total Program Evaluation – Faculty Survey by NEC, NCC, and NFO Review and analysis of Student Exit Survey by NEC, NCC, and NFO Review and analysis of Faculty Evaluation of Nursing Course Survey by NEC, NCC, and NFO
 October – reviewed by NCC with recommendations to NFO November – reviewed by NFO Faculty Evaluation of Nursing Course Survey May – data collected by NEC September – reviewed by NEC with recommendations to NCC October – reviewed by NCC with recommendations to NFO November – reviewed by NFO 	

CRITERION 4.12 RESULTS

AY 2014	(including	i actival level of			
ΔΥ 201/			achievement)		Maintenance, or Revision
					<u>AY2014</u>
ELA:					
Total Program E			ems 39.1-39.2,	40.1-40.2, 41.1-41.2	
	Traditional	BADNAP	CLP	-	
39.1					
39.2					
40.1					
40.2					
41.1					
41.2]	
				-	
Student Exit Sur	rvey Items 38.1	1-38.2, 39.1-39.2	, 40.1-40.2		
	Traditional	BADNAP	CLP]	
38.1					
38.2					
39.1					
39.2					
40.1]	
40.2					
<u> </u>				2	
Faculty Evaluation	ion of Nursing	Course Survey	Items 25		
	Traditional	BADNAP	CLP		
25				1	
				<u>.</u>	
AY 2015					AY 2015
ELA:					
Total Program E	Evaluation – Fa	culty Survey Ite	ems 39.1-39.2,	40.1-40.2, 41.1-41.2	
	Traditional	BADNAP	CLP]	
39.1]	
39.2					

40.1					
40.2					
41.1					
41.2					
			•	-	
Student Exit	Survey Items 38.	1-38.2. 39.1-39.	2.40.1-40.2		
Item #	Traditional	BADNAP	CLP		
38.1					
38.2					
39.1					
39.2					
40.1					
40.2					
	1		1	1	
Faculty Evalu	uation of Nursing	Course Survey	/ Items 25		
Item #	Traditional	BADNAP	CLP]	
25					
J					
<u>AY 2016</u>					<u>AY 2016</u>
ELA:					
Total Program	m Evaluation – Fa	aculty Survey II	ems 39.1-39.2,	40.1-40.2, 41.1-41.2	
Item #	Traditional	BADNAP	CLP	-	
39.1					
39.2					
40.1					
40.2					
41.1					
41.2				J	
Student Exit	Survey Items 38	.1-38.2, 39.1-39	.2, 40.1-40.2		
ltem #	Traditional	BADNAP	CLP		
38.1]	
38.2]	
39.1					
L					

a Course Survey	Items 25
BADNAP	CLP
	g Course Survey BADNAP

STANDARD V: RESOURCES

Fiscal, physical, and learning resources are sustainable and sufficient to ensure the achievement of the student learning outcomes and program outcomes of the nursing education unit.

STANDARD V CRITERION 5.1

Criterion	Expected Level of Achievement
Fiscal resources are sustainable, sufficient to ensure the achievement of the student learning outcomes and program outcomes, and commensurate with the resources of the governing organization.	 The nursing program budget will be sustainable and adequate to meet program purposes The nursing program budget will be comparable with other educational units at OCCC Mean score of at least 3.5 on a scale of 5.0 of the Total Program Evaluation-Faculty Survey: Item 43.1-43.3

Frequency of Assessment	Assessment Method
February	 Each February faculty submit a Faculty Fiscal Resource Planning form to NFO for prioritization and submission to NPD
 Reviewed annually: February/March during the faculty appraisal process 	 Comparison of budget requests with budget allotments Faculty appraisal process Review and analysis of Total Program Evaluation-Faculty Survey by
Total Program Evaluation-Faculty Survey:	NEC and NFO. NFO recommendations forwarded to NPD who
May – data collected by NEC	reports to Dean of HP division
 September – reviewed by NEC with recommendations to NFO 	
October – reviewed by NFO	

CRITERION 5.1 RESULTS

			f Data Colleo actual level	Actions for Program Development, Maintenance, or Revision				
AY 2014								<u>AY2014</u>
ELA: met								
	program budg	· ·	arable within					
	<mark>y of the nursir</mark>	0 0						
	allotment for							
	AY 14 equale					A received	the remainde	r
01 \$41,188.8	9 including ar	h additional			tees.			
		Corl	Carl Perk	Carl Perk	ine Alle	transf		
	Year		otment		INS Allo IP Divis			
	ICai		rsing	i Otal I				
	AY 12		899.93	\$134	4,410.30)		
	AY 13	,	124.68		9,477.98			
	AY 14		646.48),835.37			
			·		,			
		Nursing	Budget for A	AY2012-AY	2014			
Academic	Faculty/	Clerical/	Materials	Services		ues/	Travel/	
Year	Director	Staff	and	Budget	•	izational	Continuing	
	Salaries	Salaries	Supplies	Pool		ees	Education	
AY2012	1,158,247	27,500	\$6,250	\$200		5,110	\$7,200	
AY2013	1,186,364	51,208	\$6,250	\$200		5,110	\$7,200	-
AY2014	1,202,522	31,218	\$6,250	\$200	\$6	5,110	\$7,200	
			Nursing Sal	laries:				
Fiscal	9 mo	10 mo	12 mo	9 Moi	nth	10 Mo	nth	
Year	Nursing	Nursing	Nursing	Other	-	Other	-	
	- J	J		Facu		Facu		
2011	\$43,544	\$47,556	N/A	\$50,7		\$53,8	14	
2012	\$ 42,632	\$ 49,428	N/A	\$ 49,2		\$54,6		

2013	\$42	\$42,873 \$50,210 \$59,080 \$52,358 \$55,741							
2014	ΨΤΖ			50	ψ00,1				
Total Prog	gram E	Evaluatio	on-Faculty	Survey Item	s 43.1-43.3				
Item #	I Program Evaluation-Faculty Survey Items 43.1-43.3 tem # Traditional BADNAP CLP								
43.1									
43.2									
43.3									
<u>AY 2015</u>									
ELA:					L. ¹				
1				Carl Per		ine All	lotmont To	tal	
	Year	r Ca	rl Perkins	Allotment		Carl Perkins Allotment Total HP Division			
l	AY15	5							
			Nursing	Pudget for	AV2011 AV	2014			
Academi	ic F	aculty/	Clerical	Budget for Materials	Services)ues/	Trave	/اد
Year		irector	Staff	and	Budget		nizational	Continu	
		alaries	Salaries	Supplies	Pool	-	ees	Educat	
AY2013		186,364	51,208	\$6,250	\$200		6,110	\$7,20	
AY2014	,	202,522	31,218	\$6,250	\$200	\$(6,110	\$7,20)0
AY 2015	5								
				Nursing Sa		- 4 -	40 Ma		
Fiscal	٥	mo	10 mo	12 mo	9 Moi Other		10 Mo Other		
Year		rsing	Nursing	Nursing					
2015	Nui	Sing	Nursning	Nursing	i dou	Faculty Faculty		l y	
2013									
Total Proc	oram E	Evaluatio	on-Faculty	Survey Item	s 43 1-43 3				
Item #		Traditio		ADNAP	CLP				
43.1									
43.2									

43.3									-
10.0									
AY 2016									
ELA:					•				
ſ				Carl Perl			otment To		
	Year	Ca	rl Perkins /	Allotment		HP Divis		la	
l	AY16								
			Nursing	Budget for /	AY2011-AY	2014			
Academi	ic Fa	culty/	Clerical/	Materials	Services		ues/	Travel/	
Year		ector	Staff	and	Budget		zational		
A.V.2044		laries	Salaries	Supplies	Pool			Education	
AY2014 AY 2015		02,522	31,218	\$6,250	\$200	\$6,110		\$7,200	
AY 2016									
			1	1				1	
				Nursing Sa					
Fiend	0		10	10	9 Moi		10 Mor	-	
Fiscal Year	9 m Nurs		10 mo Nursing	12 mo Nursing	Other Facu		Other Facul		
2016	Nurs	ing	Nursnig	Hurshig	1 404	ity i	1 dou	(y	
2010									
Total Prog	gram Ev	valuatio	on-Faculty S	Survey Items	s 43.1-43.3				
Item #	1	Fraditio	nal B <i>l</i>	ADNAP	CLP				
43.1									
43.2									
43.3									

STANDARD I CRITERION 5.2

Criterion	Expected Level of Achievement
Physical resources are	5.2a
sufficient to ensure the	Classroom and Common Spaces
achievement of the	 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 42-43
nursing education unit	 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 44.1-44.2
outcomes, and meet the	Learning Resource Space
needs of the faculty,	5.2b
staff, and students.	 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 44-46
5.2a	Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 44.3-44.5
Classroom and common	Office Space
space	5.2c
5.2b	 Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 47-48
Learning resource space	Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 44.6-44.7
5.2c	
Office space	

Frequency of Assessment	Assessment Method
 5.2a Student Exit Survey: November/April – data collected by NEC September – reviewed by NEC October – reviewed by NFO 	 5.2a Review and analysis of Student Exit Survey by NEC and NFO. Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO.
 Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC October – reviewed by NFO 5.2b Student Exit Survey: November/April – data collected by NEC September – reviewed by NEC October – reviewed by NEC October – reviewed by NFO 	 5.2b Review and analysis of Student Exit Survey by NEC and NFO. Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO.

Total Program Evaluation-Faculty Survey: • May – data collected by NEC • September – reviewed by NEC • October – reviewed by NFO 5.2c Student Exit Survey: • November/April – data collected by NEC • September – reviewed by NEC • October – reviewed by NEC • May – data collected by NEC • September – reviewed by NEC • October – reviewed by NEC • October – reviewed by NEC	 5.2c Review and analysis of Student Exit Survey by NEC and NFO. Review and analysis of Total Program Evaluation-Faculty Survey by NEC and NFO.
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CRITERION 5.2 RESULTS

	Results of	of Data Collectio	n & Analysis	Actions for Program Development,
	(including	g actual level of	achievement)	Maintenance, or Revision
Y 2014	•		-	AY2014
_A 5.2a:				5.2a
assroom a	nd Common Spa	ce		
udent Exit	Survey Items 42-	43		
Item #	Traditional	BADNAP	CLP	
42				
43				
-	n Evaluation-Fac			
Item #	Traditional	BADNAP	CLP	
44.1				

ELA 5.2b:			
Learning Reso			
	urvey Items 44-		
Item #	Traditional	BADNAP	CLP
44			
45			
46			
Total Program	Evaluation-Fac	ulty Survey Item	44.3-44.5
Item #	Traditional	BADNAP	CLP
44.3			
44.4			
44.5			
ELA 5.2c:			
Office Space			
	urvey Item 47-48		
Item #	Traditional	BADNAP	CLP
47			
48			
		ulty Survey Item	
Item #	Traditional	BADNAP	CLP
44.6			
44.7			
AY 2015			
ELA 5.2a:			
	d Common Spac	ce	
	urvey Items 42-4		
	Traditional	BADNAP	CLP
Student Exit S	Traditional	BADNAP	CLP

ltem #	Traditional	BADNAP	CLP
44.1	1		
44.2	1		
	<u>. </u>	N	
LA 5.2b:			
earning Reso			
	Survey Items 44-		
Item #	Traditional	BADNAP	CLP
44			
45			
46			
		K O V	44 0 44 5
	n Evaluation-Fac		
Item #	Traditional	BADNAP	CLP
44.3	ļļ		
44.4	ļ		
44.5			
1			
LA 5.2c:			
Office Space	Survey Item 47-4	8	
Item #	Traditional	BADNAP	CLP
47	Tautional	DADINAL	VLF
48	╂────┤		
40	<u> </u>		
otal Program	n Evaluation-Fac	ulty Survey Iten	n 44 6-44 7
	Traditional	BADNAP	CLP
item II			
1tem #			
44.6	+		
44.6 44.7	<u> </u>		
44.6 44.7 Y 2016			
44.6 44.7 <u>Y 2016</u> LA 5.2a:	nd Common Space		

Student Exit Survey Items 42-43

Item #	Traditional	BADNAP	CLP
42			
43			

Total Program Evaluation-Faculty Survey Items 44.1-44.2

Item #	Traditional	BADNAP	CLP
44.1			
44.2			

ELA 5.2b:

Learning Resources

Student Exit Survey Items 44-46

Item #	Traditional	BADNAP	CLP
44			
45			
46			

Total Program Evaluation-Faculty Survey Item 44.3-44.5

Item #	Traditional	BADNAP	CLP
44.3			
44.4			
44.5			

ELA 5.2c:

Office Space

Student Exit Survey Item 47-48

Item #	Traditional	BADNAP	CLP
47			
48			

Total Program Evaluation-Faculty Survey Item 44.6-44.7

Item #	Traditional	BADNAP	CLP
44.6			

5.2b

5.2c

44.7				
		-		

STANDARD V CRITERION 5.3

Criterion	Expected Level of Achievement
Learning resources and technology are selected with faculty input and are comprehensive, current, and accessible to faculty and students.	 5.3a College Wide Learning Resources (Communications Lab, Math Lab) Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 50.1-50.4, 51.1-51.4 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 45.1-45.4, 46.1-46.4
5.3a College Wide: • Communications Lab • Math Lab	 5.3b Library Resources Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 52.1-52.4 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 47.1-47.4
5.3b Library Resources 5.3c Nursing Program Specific:	 5.3c Nursing Program Specific (Computer Lab, Nursing Campus Clinical Lab, and HPS Lab) Mean score of at least 3.5 on a scale of 5.0 on the Student Exit Survey: Item 54.1-54.4, 55.1-55.4, 56.1-56.4 Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 48.1-48.4, 49.1-49.4, 50.1-50.4
 Computer Lab Nursing Campus Clinical Laboratory Human Patient Simulator Lab 	 5.3d Instructional Video (Classroom) Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 51
5.3d Instructional Video (Classroom)	

Frequency of Assessment	Assessment Method
Frequency of Assessment 5.3a Student Exit Survey: • November/April – data collected by NEC • September – reviewed by NEC • October – reviewed by NCC • November – reviewed by NFO Total Program Evaluation-Faculty Survey: • May – data collected by NEC • September – reviewed by NEC • October – reviewed by NEC • September – reviewed by NEC • October – reviewed by NEC • November – reviewed by NEC • November – reviewed by NEC • November – reviewed by NEO 5.3b Student Exit Survey: • November/April – data collected by NEC	 5.3a Review and analysis of Student Exit Survey by NEC, NCC, and NFO Review and analysis of Total Program Evaluation-Faculty Survey by NEC, NCC, and NFO 5.3b Review and analysis of Student Exit Survey by NEC, NCC, and NFO
 November/April – data collected by NEC September – reviewed by NEC October – reviewed by NCC November – reviewed by NFO Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC October – reviewed by NCC November – reviewed by NFO Reviews are made as a result of survey data and on an ongoing basis as needs arise.	 Review and analysis of Total Program Evaluation-Faculty Survey by NEC, NCC, and NFO HP Division's library liaison recommends books and media to be considered for removal to the nursing faculty. NCC reviews holdings, digital sources, and media annually for currency and scope to support the nursing program. Library computer/Internet journal databases are available for students on and off campus. Online journals are available via EBSCO Host. NEC reports to NCC who makes recommendations to the Circulation Librarian and to NFO.
 5.3c Student Exit Survey: November/April – data collected by NEC September – reviewed by NEC 	 5.3c Analysis of Student Exit Survey by NEC, NCC, and NFO Analysis of Total Program Evaluation-Faculty Survey by NEC, NCC,

 October – reviewed by NCC November – reviewed by NFO 	and NFO
 Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC October – reviewed by NCC November – reviewed by NFO 	Ongoing evaluations of the HPS are gathered by the HPS Assistant and presented to the NCC for faculty consideration.
 5.3d Total Program Evaluation-Faculty Survey: May – data collected by NEC September – reviewed by NEC October – reviewed by NCC November – reviewed by NFO 	 5.3d Analysis of Student Exit Survey by NEC, NCC, and NFO Analysis of Total Program Evaluation-Faculty Survey by NEC, NCC, and NFO

CRITERION 5.3 RESULTS

		of Data Collection of actual level of	-	Actions for Program Development, Maintenance, or Revision
<u>AY 2014</u>				<u>AY2014</u>
ELA 5.3a:				5.3a
	Learning Resou			ath Lab)
Student Exit S	Survey: Item 50.7	1-50.4, 51.1-51.4		
Item #	Traditional	BADNAP	CLP	
50.1				
50.2				
50.3				
50.4				
51.1				
51.2				
51.3				
51				

Total Program Evaluation-Faculty Survey: Item 45.1-45.4, 46.1-46.4

Item #	Traditional	BADNAP	CLP
45.1			
45.2			
45.3			
45.4			
46.1			
46.2			
46.3			
46.4			

ELA 5.3b:

Library Resources

Student Exit Survey: Item 52.1-52.4

Item #	Traditional	BADNAP	CLP
52.1			
52.2			
52.3			
52.4			

Total Program Evaluation-Faculty Survey: Item 47.1-47.4

ltem #	Traditional	BADNAP	CLP
47.1			
47.2			
47.3			
47.4			

ELA 5.3c:

Nursing Program Specific (Computer Lab, Nursing Campus Clinical Lab, and HPS Lab)

Student Exit Survey: Item 54.1-54.4, 55.1-55.4, 56.1-56.4

Item #	Traditional	BADNAP	CLP
54.1			

5.3b

5.3c

54.2		
54.3		
54.4		
55.1		
55.2		
55.3		
55,4		
56.1		
56.2		
56.3		
56.4		

Total Program Evaluation-Faculty Survey: Item 48.1-48.4, 49.1-49.4, 50.1-50.4

Item #	Traditional	BADNAP	CLP
48.1			
48.2			
48.3			
48.4			
49.1			
49.2			
49.3			
49,4			
50.1			
50.2			
50.3			
50.4			

ELA 5.3d:

Instructional Video Equipment (Classroom) Total Program Evaluation-Faculty Survey: Item 51

ltem #	Traditional	BADNAP	CLP
51			
		•	

5.3d

em #	Survey: Item 50.1 Traditional	BADNAP	CLP	7	
50.1					
50.2					
50.3					
50.4					
51.1					
51.2					
51.3					
51.					
Item #					
45.1				_	
45.1 45.2				-	
45.1 45.2 45.3				-	
45.1 45.2 45.3 45.4					
45.1 45.2 45.3 45.4 46.1					
45.1					
5.1 5.2 5.3 5.4 6.1 6.2 6.3					
45.1 45.2 45.3 45.4 46.1 46.2 46.3 46.4					
45.1 45.2 45.3 45.4 46.1 46.2 46.3 46.3 46.4 5.3b:					5.3b
45.1 45.2 45.3 45.4 46.1 46.2 46.3 46.3 46.4 5.3b: ary Resou		1-52 4			5.3b
45.1 45.2 45.3 45.4 46.1 46.2 46.3 46.3 46.4 5.3b: ary Resou ent Exit \$	Survey: Item 52.1		CLP		5.3b
45.1 45.2 45.3 45.4 46.1 46.2 46.3 46.4 5.3b: ary Resou ent Exit Stem #		1-52.4 BADNAP	CLP		5.3b
45.1 45.2 45.3 45.4 46.1 46.2 46.3 46.4 5.3b: ary Resou lent Exit \$ letem # 52.1	Survey: Item 52.1		CLP		5.3b
45.1 45.2 45.3 45.4 46.1 46.2 46.3 46.4 5.3b: ary Resou lent Exit S Item #	Survey: Item 52.1		CLP		5.3b

Total Program Evaluation-Faculty Survey: Item 47.1-47.4					
Item #	Traditional	BADNAP	CLP		
47.1					
47.2					
47.3					
47.4					

ELA 5.3c:

Nursing Program Specific (Computer Lab, Nursing Campus Clinical Lab, and HPS Lab)

Student Exit Survey: Item 54.1-54.4, 55.1-55.4, 56.1-56.4

ltem #	Traditional	BADNAP	CLP
54.1			
54.2			
54.3			
54.4			
55.1			
55.2			
55.3			
55,4			
56.1			
56.2			
56.3			
56.4			

Total Program Evaluation-Faculty Survey: Item 48.1-48.4, 49.1-49.4, 50.1-50.4

Item #	Traditional	BADNAP	CLP
48.1			
48.2			
48.3			
48.4			
49.1			
49.2			
49.3			

5.3c

39.1	49,4					
50.2						
50.3						
50.4						
ELA 5.3d: 5.3d Instructional Video Equipment (Classroom) 0 Total Program Evaluation-Faculty Survey: Item 51 6 Item # Traditional BADNAP CLP 51 0 0 AY 2016 0 0 ELA 5.3a: 0 0 College Wide Learning Resources (Communications Lab, Math Lab) 0 Student Exit Survey: Item 50.1-50.4, 51.1-51.4 0 Item # Traditional BADNAP CLP 0 0 50.1 0 0 50.2 0 0 50.3 0 0 51.1 0 0 51.2 0 0 51.3 0 0 51.1 0 0 51.2 0 0 51.3 0 0 51.1 0 0 51.2 0 0 51.3 0 0 45.1 0 0 45.1 0 0 45.3 0						
Control Statustional Video Equipment (Classroom) Item # Traditional BADNAP CLP 51	50.4				J	
Ary 2016 AY 2016 AY 2016 AY 2016 AY 2016 ELA 5.3a: College Wide Learning Resources (Communications Lab, Math Lab) Student Exit Survey: Item 50.1-50.4, 51.1-51.4 Item # Traditional BADNAP CLP 50.1 50.3 50.2						5.3d
Total Program Evaluation-Faculty Survey: Item 51 Item # Traditional BADNAP CLP 51		Video Equinmen	t (Classroom)			
Item # Traditional BADNAP CLP 51	Total Program	n Evaluation-Fac	ulty Survey: Ite	m 51		
51 AY 2016 ELA 5.3a: AY2016 College Wide Learning Resources (Communications Lab, Math Lab) 5.3a Student Exit Survey: Item 50.1-50.4, 51.1-51.4 5.3a Item # Traditional BADNAP CLP 50.1 50.2 50.4 50.4 50.2 50.4 51.1 51.2 51.1 51.2 51.3 51.2 51.2 51.3 51.1 51.2 51.3 51.1 51.1 51.1 Fotal Program Evaluation-Faculty Survey: Item 45.1-45.4, 46.1-46.4 Item # Traditional BADNAP CLP 45.1 45.2 45.3 61.4 45.4 61.4 61.4 61.4	Item #]	
AY 2016 AY 2016 ELA 5.3a: 5.3a College Wide Learning Resources (Communications Lab, Math Lab) 5.3a Student Exit Survey: Item 50.1-50.4, 51.1-51.4 5.3a Item # Traditional BADNAP CLP 50.1 0.1 0.1 0.1 50.2 0.1 0.1 0.1 50.2 0.1 0.1 0.1 50.3 0.1 0.1 0.1 50.4 0.1 0.1 0.1 51.1 0.1 0.1 0.1 51.2 0.1 0.1 0.1 51.3 0.1 0.1 0.1 51.1 0.1 0.1 0.1 51.2 0.1 0.1 0.1 51.3 0.1 0.1 0.1 51.2 0.1 0.1 0.1 45.1 0.1 0.1 0.1 45.2 0.1 0.1 0.1 45.3 0.1 0.1 0.1 45.4 0.1 0.1 0.1			2/10/17/1			
ELA 5.3a: 5.3a College Wide Learning Resources (Communications Lab, Math Lab) 5.3a Student Exit Survey: Item 50.1-50.4, 51.1-51.4 5.3a Item # Traditional BADNAP CLP 50.1 5.3a 50.2 50.3 5.3a 50.4 51.1 51.2 51.3 51.3 51.3 51 51.3 51.4 Total Program Evaluation-Faculty Survey: Item 45.1-45.4, 46.1-46.4 146.4 Item # Traditional BADNAP 45.1 45.2 61.4 45.3 61.4 61.4			<u> </u>]	
ELA 5.3a: 5.3a College Wide Learning Resources (Communications Lab, Math Lab) 5.3a Student Exit Survey: Item 50.1-50.4, 51.1-51.4 5.3a Item # Traditional BADNAP 50.1 0.1 0.1 50.2 0.1 0.1 50.3 0.1 0.1 50.4 0.1 0.1 51.1 0.1 0.1 51.2 0.1 0.1 51.3 0.1 0.1 51.3 0.1 0.1 51.1 0.1 0.1 51.2 0.1 0.1 51.3 0.1 0.1 51.1 0.1 0.1 51.2 0.1 0.1 51.3 0.1 0.1 51.3 0.1 0.1 45.1 0.1 0.1 45.2 0.1 0.1 45.3 0.1 0.1						
College Wide Learning Resources (Communications Lab, Math Lab) Student Exit Survey: Item 50.1-50.4, 51.1-51.4 Item # Traditional BADNAP CLP 50.1						
Student Exit Survey: Item 50.1-50.4, 51.1-51.4 Item # Traditional BADNAP CLP 50.1						5.3a
Student Exit Survey: Item 50.1-50.4, 51.1-51.4 Item # Traditional BADNAP CLP 50.1	College Wide	Learning Resou	rces (Commun	cations Lab, N	ath Lab)	
Item # Traditional BADNAP CLP 50.1 50.2 50.3 50.4 50.4 51.1 51.2 51.3 51.3 51.1 51.2 51.3 51.3 6tal Program Evaluation-Faculty Survey: Item 45.1-45.4, 46.1-46.4 45.1 45.2 45.3 45.4	Student Exit S	Survey: Item 50.1	1-50.4, 51.1-51.4			
50.2						
50.3	50.1					
50.4	50.2					
51.1	50.3					
51.2	50.4					
51.3	51.1					
51 Image: Constraint of the second system of th	51.2					
Total Program Evaluation-Faculty Survey: Item 45.1-45.4, 46.1-46.4 Item # Traditional BADNAP CLP 45.1	51.3					
Item # Traditional BADNAP CLP 45.1	51					
Item # Traditional BADNAP CLP 45.1		-				
Item # Traditional BADNAP CLP 45.1	Total Program	n Evaluation-Fac	ulty Survey: Ite	m 45.1-45.4, 46	6.1-46.4	
45.2		Traditional	BADNAP	CLP		
45.2	45.1				1	
45.3	45.2				1	
45.4						

155

46.2		
46.3		
46.4		

ELA 5.3b:

Library Resources

Student Exit Surv	ey: Item 52.1-52.4

Item #	Traditional	BADNAP	CLP
52.1			
52.2			
52.3			
52.4			

Total Program Evaluation-Faculty Survey: Item 47.1-47.4

Item #	Traditional	BADNAP	CLP
47.1			
47.2			
47.3			
47.4			

ELA 5.3c:

Nursing Program Specific (Computer Lab, Nursing Campus Clinical Lab, and HPS Lab)

Student Exit Survey: Item 54.1-54.4, 55.1-55.4, 56.1-56.4

Item #	Traditional	BADNAP	CLP
54.1			
54.2			
54.3			
54.4			
55.1			
55.2			
55.3			
55,4			
56.1			

5.3b

5.3c

56.2		
56.3		
56.4		

Total Program Evaluation-Faculty Survey: Item 48.1-48.4, 49.1-49.4, 50.1-50.4

Item #	Traditional	BADNAP	CLP
48.1			
48.2			
48.3			
48.4			
49.1			
49.2			
49.3			
49,4			
50.1			
50.2			
50.3			
50.4			

ELA 5.3d:
Instructional Video Equipment (Classroom)
Total Program Evaluation-Faculty Survey: Item 51

Item # 1	Fraditional	BADNAP	CLP
51			

5.3d

Criterion	Expected Level of Achievement
Fiscal, physical, technological, and learning resources are sufficient to meet the needs of the faculty and students engaged in alternative methods of delivery.	 Fiscal, technological, and learning resources will be sufficient to meet the needs of faculty and students in the Traditional, BADNAP and Career Ladder Pathways Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 52.1-52.4

Frequency of Assessment	Assessment Method
Total Program Evaluation-Faculty Survey:	Review and analysis of Total Program Evaluation-Faculty Survey by NEC
May – data collected by NEC	and NFO
September – reviewed by NEC	
October – reviewed by NFO	

CRITERION 5.4 RESULTS

		of Data Collection actual level of		Actions for Program Development, Maintenance, or Revision	
<u>AY2014</u>				<u>AY 2014</u>	
ELA:					
Total Program	n Evaluation-Fac	ulty Survey: Ite	m 52.1-52.4		
Item #	Traditional	BADNAP	CLP		
52.1					
52.2					
52.3					
52.4					

AY2015				AY 2015
ELA:				
Total Program	n Evaluation-Fac	ulty Survey: Ite	m 52.1-52.4	
ltem #	Traditional	BADNAP	CLP	
52.1				
52.2				
52.3				
EO 1				
52.4				
AY2016				<u>AY 2016</u>
<u>AY2016</u> ELA:	n Evaluation-Fac	ulty Survey: Ite	m 52.1-52.4	<u>AY 2016</u>
<u>AY2016</u> ELA:	n Evaluation-Fac	ulty Survey: Ite BADNAP	m 52.1-52.4 CLP	<u>AY 2016</u>
<u>AY2016</u> ELA: Total Progran				<u>AY 2016</u>
<u>AY2016</u> ELA: Total Progran Item #				<u>AY 2016</u>
AY2016 ELA: Total Progran Item # 52.1				<u>AY 2016</u>

STANDARD VI: OUTCOMES

Program evaluation demonstrates that students and graduates have achieved the student learning outcomes, program outcomes, and rolespecific graduate competencies of the nursing education unit.

Criterion	Expected Level of Achievement
The systematic plan	Systematic Plan for Evaluation
evaluation of the nursing education unit emphasizes the ongoing	 There is a written systematic plan for evaluation (SPE) that allows for the ongoing assessment and evaluation of program outcomes and ACEN Standards and Criteria. ACEN Standards and Criteria
assessment and evaluation of each of the following:	 The SPE will be reviewed annually and organized according to the ACEN Standards and Criteria. Mean score of at least 3.5 on a scale of 5.0 on the Total Program Evaluation-Faculty Survey: Item 54.1-54.4
 Student learning (program educational) outcomes; 	
 Program (achievement) outcomes; 	The systematic plan evaluation contains specific, measurable expected levels of achievement; appropriate assessment methods; and a minimum of three (3) years of data for each Criterion within the plan.** **Newly-established programs are required to have data from the time of the program's inception.
 Role-specific graduate competencies (program educational outcomes); and The ACEN Standards. 	

Frequency of Assessment	Assessment Method
Systematic Plan for Evaluation (SPE)	Review and discussion of each component of the SPE and the ACEN
Annually – May	Standards and Criteria by the NFO
ACEN Standards and Criteria	
• Annually – May	
Total Program Evaluation-Faculty Survey:	Review and analysis of Total Program Evaluation-Faculty Survey by NEC

٠	May – data collected by NEC	and NFO
•	September – reviewed by NEC	
٠	October – reviewed by NFO	

CRITERION 6.1 RESULTS

	Results of Data C	ollection & Analysi	Actions for Program Development,	
(including actual level of achievement)				Maintenance, or Revision
<u>AY 2014</u>	·		AY2014	
ELA:			August 2013 Actions	
August 2013 Recom	mendations/Actions			Faculty, including part-time are to submit their CVs and CEUs to T.
Faculty were asked f			f-study.	Walker by September 3. All exemplary student work to D. Myers as
September 2013 Re	commendations/Acti	ons		soon as possible.
ACEN Self-Student				September 2013 Actions
October 2013 Recon				Committee chairs are to pick up notebook for their minutes and to
			ves to be voted on in	make sure all are on the "O" drive. Further comments related to the
Curriculum Committe		elf Study team has m	net. T. Walker	Executive Summary need to be sent in to D. Myers.
discussed the SLOs.				October 2013 Actions
Total Program Eval	uation-Faculty Surv			Deadline for SLO activities is 10/21/2013. Faculty to become
Item	Traditional	BADNAP	CLP	familiar with our curricular directives and ACEN terminology.
54.1				
54.2				
54.3				
54.4				
<u>AY 2015</u>				<u>AY 2015</u>
ELA:				
Total Program Evaluation-Faculty Survey: Item 54.1-54.4				
ltem	Traditional BADNAP CLP			
54.1				
54.2				
54.3				
54.4				

<u>AY 2016</u>				<u>AY 2016</u>
ELA:				
	aluation-Faculty Surv			
ltem	Traditional	BADNAP	CLP	
54.1				
54.2				
54.3				
54.4				

Criterion	Expected Level of Achievement
Evaluation findings are aggregated and trended by program option, location, and date of completion and are sufficient to inform program decision- making for the maintenance and improvement of the student learning outcomes and the program outcomes.	 Mean score of 3.5 on a scale of 5 on the Total Program Evaluation – Faculty Survey: Item 55.1-55.2 Mean score of 3.5 on a scale of 5 on the Faculty Evaluation of Nursing Course Survey: Item 27 Regular review of ELA's will occur through NEC, NCC, and NFO

Frequency of Assessment	Assessment Method
Total Program Evaluation-Faculty Survey:	Review and analysis of Total Program Evaluation-Faculty Survey by
May – data collected by NEC	NEC, NCC and NFO
September – reviewed by NEC	Review and analysis of Faculty Evaluation of Nursing Course
October – reviewed by NCC	Survey by NEC, NCC and NFO

November – reviewed by NFO	Minutes of Evaluation Committee, NFO Committee, Curriculum Committee, and the Nursing Process Teams are reviewed
Faculty Evaluation of Nursing Course Survey:	
May – data collected by NEC	
September – reviewed by NEC	
October – reviewed by NCC	
November – reviewed by NFO	
NEC meets September, October, December, January, March, and May;	
NFO meets monthly during academic year	

CRITERION 6.2 RESULTS

		of Data Collection actual level of		Actions for Program Development Maintenance, or Revision
AY 2014		<u></u>		AY2014
ELA:				
Total Progran	n Evaluation – Fa	aculty Survey:	Item 55.1-55.2	
Item #	Traditional	BADNAP	CLP	
55.1				
55.2				
Faculty Evalu	ation of Nursing			
	ation of Nursing	Course Surve	y: Item 27 CLP	
Faculty Evalu				
Faculty Evalu Item # 27				AY 2015
Faculty Evalu Item # 27 AY 2015				<u>AY 2015</u>
Faculty Evalu Item # 27 AY 2015 ELA:	Traditional	BADNAP	CLP	<u>AY 2015</u>
Faculty Evalu Item # 27 AY 2015 ELA:		BADNAP	CLP	<u>AY 2015</u>
Faculty Evalu Item # 27 AY 2015 ELA: Total Progran	Traditional	BADNAP	CLP	<u>AY 2015</u>

Faculty Evalu	uation of Nursing	Course Survey	y: Item 27
Item #	Traditional	BADNAP	CLP
27			
<u> </u>			
<u>AY 2016</u>			
ELA:			
Total Program	n Evaluation – Fa	aculty Survey:	Item 55.1-55.2
Item #	Traditional	BADNAP	CLP
55.1			
55.2			
	<u> </u>	•	
Faculty Evalu	uation of Nursing	Course Surve	y: Item 27
	Traditional	BADNAP	CLP
Item #	Traditional	DADNAF	

Criterion	Expected Level of Achievement
Evaluation findings are shared with communities of interest.	 NESA Student and Faculty Evaluations of Clinical Experiences are shared with clinical agencies two weeks after the completion of each semester The OBN annual report will include evaluation findings The ACEN annual report will include evaluation findings The OBN annual report will be submitted to Academic Affairs and shared with OCCC Board of Regents The Advisory Committee minutes will include evaluation findings Mean score of 3.5 on a scale of 5 on the OCCC Nursing Advisory Committee Survey: Item 6

Frequency of Assessment	Assessment Method
NESA Student and Faculty Evaluation of Clinical Experience	Results of surveys are distributed to clinical agencies by chair of

 Two weeks post completion of each semester OBN Annual Report Annually – July ACEN Annual Report Annually – November Academic Affairs Submission of Report Annually – July Advisory Committee Minutes Annually OCCC Nursing Advisory Committee Survey: Item 6 October/March – data collected by NEC July – reviewed by NPD and NPAD 	 NEC Review of OBN and ACEN annual reports Feedback from submission of OBN annual report to Academic Affairs Review of Advisory Committee minutes by NFO Review and analysis of OCCC Nursing Advisory Committee Survey by NPD and NPAD
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CRITERION 6.3 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2014	<u>AY2014</u>
ELA:	
OCCC Nursing Advisory Committee Survey: Item 6	
Item 6	
AY 2015	AY 2015
ELA:	
OCCC Nursing Advisory Committee Survey: Item 6	
Item 6	
AY 2016	AY 2016
ELA	
OCCC Nursing Advisory Committee Survey: Item 6	
Item 6	

Criterion	Expected Level of Achievement
The program	Program Educational (Role-Specific Graduate Competencies/Student Learning) Outcomes
demonstrates evidence	 Mean score of 3.5 on a scale of 5 on the Total Program Evaluation – Faculty Survey: Items 56.1-56.3
of achievement in meeting the program	 Mean score of at least 3.5 on a scale of 5.0 on the Nursing Program Post Graduate Survey: For Fall 13 graduating class: Items 4, 6; beginning Spring 14: Items 4, 7a-7c, 8, 9, 10, 11
outcomes.	 Mean score of at least 3.5 on a scale of 5.0 on the Graduate Evaluation by Employer Survey: For Fall 13 graduating class: Items 7-13; 14-16 & Nursing Questions; beginning Spring 14: Items 17.1-17.8
	Course Outcomes
	 Mean score of 3.5 on a scale of 5 on the Student Exit Survey: Items 25.1-25.4
	 Graduating students will score a 93% or greater predictability of NCLEX-RN success on the ATI Comprehensive Predictor Final Exam
	 Students will score Level 2 or above on the ATI Course Final Exam in NUR 1519, NUR 1529, and NUR 2539 85% of students will progress to next course or graduate each semester.
	Mean score of at least 3.5 on a scale of 5.0 on the Nursing Program Post Graduate Survey: For Fall 13 graduating class: Items 4, 6; beginning Spring 14: Items 4, 7a-7c, 8, 9, 10, 11
	 Mean score of at least 3.5 on a scale of 5.0 on the Graduate Evaluation by Employer Survey: For Fall 13 graduating class: Items 7-13; 14-16 & Nursing Questions; beginning Spring 14: Items 7-17.8
	Program (Achievement) Outcomes
	 Seventy percent (70%) or greater of students will complete the program within a period of six semesters (traditional program and baccalaureate to associate degree nurse accelerated pathways) and four semesters (career ladder pathway). Evaluated in Criterion 6.4.2
	 Graduates will perform at or above the national average pass rate on the NCLEX-RN licensure exam. Evaluated in Criterion 6.4.1
	 Eighty percent (80%) or greater of graduates seeking employment will obtain an entry-level position within six (6) months after graduation. Evaluated in Criterion 6.4.5
	Job placement rates are addressed through quantified measures that reflect program demographics and history.
	Mean score of 3.5 on a scale of 5 on the Nursing Program Post Graduate Survey: Item 1, 2
	• Ninety percent (90%) or greater of graduates responding to graduate surveys will report overall satisfaction with the program. Evaluated in Criterion 6.4.3

Mean score of at least 3.5 on a scale of 5.0 on the Nursing Program Post Graduate Survey: For Fall 13 graduating class: Item 13; beginning Spring 14: Item 11
• Ninety percent (90%) or greater of employers responding to employer surveys will report that graduates are adequately
prepared for entry level practice. Evaluated in Criterion 6.4.4 Mean score of at least 3.5 on a scale of 5.0 on the Graduate Evaluation by Employer Survey: For Fall 13
graduating class: Item 1; beginning Spring 14: Item 18
•

Frequency of Assessment	Assessment Method
 ATI administered each semester with data aggregated annually. Data reviewed: January – by NEC March – by NCC April – by NFO OCCC Nursing Advisory Committee Survey: October/March – data collected by NEC March – reviewed by NEC and recommendations forwarded to NCC April – reviewed by NCC and recommendations forwarded to NFO May – reviewed by NFO Nursing Program Post Graduation Survey: January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of NEC March – reviewed by NEC and recommendations forwarded to NFO Nursing Program Post Graduation Survey: January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of NEC March – reviewed by NEC and recommendations forwarded to NCC March – reviewed by NEC and recommendations forwarded to NCC May – reviewed by NEC and recommendations forwarded to NCC May – reviewed by NFO Graduate Evaluation by Employer: January/July – data collected by Department of Institutional 	 ATI: In-depth curriculum analysis by the teaching teams/NEC/NCC to ensure knowledge and skills sets have been attained. Analysis includes review of aggregate data from surveys and the test scores for the ATI Comprehensive Predictor. Analysis of OCCC Nursing Advisory Committee Survey by NEC, NCC and NFO Nursing Program Post Graduate Survey is conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Analysis of NPPGS by the teaching teams, NEC, NCC and NFO Graduate Evaluation by Employer Survey is conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Analysis of GEES by the teaching teams, NEC, NCC and NFO

	Effectiveness and results forwarded to chair of NEC
•	March – reviewed by NEC and recommendations forwarded to
	NCC
•	April – reviewed by NCC and recommendations forwarded to
	NFO
•	May – reviewed by NFO

CRITERION 6.4 RESULTS

		f Data Collectior actual level of a		Actions for Program Developm Maintenance, or Revision
A <u>Y 2014</u> ELA:				<u>AY2014</u>
Total Program	n Evaluation – Fa	culty Survey: Ite	ems 56.1-56.3	
ltem #	Traditional	BADNAP	CLP	
56.1				
56.2				
56.3				
Item 7 Item 7	-			
Nureine Dree	ram Post Gradua	te Survey: Items	s 4, 6, 12	
Nursing Prog.			• •, •, •=	
Item 4			., ., .	
Item 4 Item 6	4 5		., ., .,	
Item 4	4 5		.,,,,	
Item 4 Item 6 Item 1	4 5 12			
Item 4 Item 6 Item 1	4 5 12 Iluation by Emplo			

Item 1			
Item 1			
Item 1	5		
Item 1	6		
Student Exit S	Survey: Items 25	.1-25.4	
Item 25	5.1		
Item 25			
Item 25			
Item 25			
AY 2015			
ELA:			
	n Evaluation – Fa	aculty Survey. I	tems 56 1-56 3
Item #	Traditional	BADNAP	CLP
56.1			
56.2			
56.3			
	g Advisory Com	mittee Survey:	Item (.1-(.4
Item 7			
Item 7			
Item 7			
Item 7	' .4		
Nursing Prog	ram Post Gradua	ate Survey: Iten	ıs 4, 6, 12
Item 4		-	
Item 6			
Item 1			
	_		
Graduate Eva	luation by Emplo	over Survev. Ite	ms 8-16
Item 8			
Item 9			
itelli s	1		

Item 10	
Item 11	
Item 12	
Item 13	
Item 14	
Item 15	
Item 16	
Student Exit Survey: Items 25.1-25.4	
Item 25.1	
Item 25.2	
Item 25.3	
Item 25.4	
AY 2016	AY 2016
ELA:	<u>/// 2010</u>
Total Program Evaluation – Faculty Survey: Items 56.1-56.3	
Item # Traditional BADNAP CLP	
56.1	
56.2	
56.3	
OCCC Nursing Advisory Committee Survey: Item 7.1-7.4	
Item 7.1	
Item 7.2	
Item 7.3	
Item 7.4	
Nursing Program Post Graduate Survey: Items 4, 6, 12	
Item 4	
Item 6	
Item 12	
Graduate Evaluation by Employer Survey: Items 8-16	
Item 8	
Item 9	

Item 10	
Item 11	
Item 12	
Item 13	
Item 14	
Item 15	
Item 16	
Student Exit Survey: Items 25.1-25.4	
Item 25.1	
Item 25.2	
Item 25.3	
Item 25.4	

Assessment	t and Evaluation of Program Ec	lucational (Role-Sp	ecific Graduate Competencies/Student Learning) Outcomes
Component	Assessment Method	ELA	Evaluation Process	Actions for Program Development, Maintenance, or Improvement
Program Educational Outcome #1	For all outcomes:			
Graduates of this program will be skilled practitioners who: Apply the nursing process in practice using clinical reasoning and decision- making competencies, communication competencies, and nursing skills which	NCLEX: The RN nursing licensure exam is taken by all graduates after graduation. *Standard 6.4		Detailed reports are received each quarter and annually about the achievement of our graduates including pass rates and areas of strengths and weaknesses in numerous categories. This data is reviewed by the NPD, NPAD, and members of Program committees and is used to inform decisions about curriculum change, allocation of resources for students, and faculty teaching assignments.	
include technology and	Total Program Evaluation-		Review and analysis of Total Program	
informatics necessary for safe, quality, and	Faculty Survey: *Standard 1:		Evaluation-Faculty Survey by NEC, NCC, and NFO. This survey is administered to Program	

evidence-based	Criterion 1.1: Items 2.1-2.3	faculty annually in the Spring.	
	*Standard 3:	faculty annually in the Spring.	
practice in			
contemporary	Criterion 3.1: Items 19.1-19.4,		
healthcare systems.	20		
	*Standard 4:		
Program Educational	Criterion 4.1: Items 29.1-29.2		
Outcome #2	Criterion 4.2 30.1-30.4		
Graduates of this	Criterion 4.7: Items 36.1-36.3		
program will be skilled	Criterion 4.9: Items 37.1-37.2		
practitioners who:	Criterion 4.12: Items 39.1-		
Collaborate effectively	39.2, 40.1-40.2, 41.1-41.2		
with others in	*Standard 5:		
assessing, analyzing,	Criterion 5.1: Items 43.1-43.3		
planning, providing, and	*Standard 6:		
evaluating client-	Criterion 6.2: Items 55.1-55.2		
centered care within	Criterion 6.4: 30.1-30.4, 54.1-		
complex healthcare	54.4		
systems.	01.1		
oyotomo.	Nursing Program Post	Nursing Program Post Graduate Survey is	
Program Educational	Graduation Survey:	conducted by the Department of Institutional	
Outcome #3	*Standard 6:	Effectiveness through a series of mailings and	
Graduates of this	Criterion 6.4: Items 4, 6	telephone follow-up. Survey data is then	
program will be skilled	(F13); Items 4, 7a-7c, 8-11	forwarded to the chair of the NEC. Analysis of	
practitioners who:	(S14 on)		
•	Criterion 6.4.3: Items 13	NPPGS by the teaching teams, NEC, NCC and	
Practice safe, quality		NFO	
nursing care within	(F13); 11 (S14 on)		
healthcare teams in a	Criterion 6.4.5: Items 1-2		
caring manner to meet			
the multi-dimensional	Graduate Evaluation by	Graduate Evaluation by Employer Survey is	
needs of clients,	Employer:	conducted by the Department of Institutional	
whether individual,	*Standard 6:	Effectiveness through a series of mailings and	
family, groups, or	Criterion 6.4: Items 7-16	telephone follow-up. Survey data is then	
community.	(F13), 7-17.8 (S14 on)	forwarded to the chair of the NEC. Analysis of	
	Criterion 6.4.4: Items 1, 17-18	GEES by the teaching teams, NEC, NCC and	
Program Educational	(F13). 18-19 (S14 on)	NFO	

Outcome #4	ATL Comprohensive Predictor	ATI: In depth ourrigulum analysis by the	
	ATI Comprehensive Predictor	ATI: In-depth curriculum analysis by the	
Graduates of this	Final Exam (and other final	teaching teams/NEC/NCC to ensure knowledge	
program will be skilled	exams as per course).	and skills sets have been attained. Analysis	
practitioners who: Act in	*Standard 6.4	includes review of aggregate data from surveys	
accordance with an		and the test scores for the ATI Comprehensive	
understanding of and		Predictor.	
commitment to			
professional role	Review and analysis of		
expectations, which	course progression and		
include the values,	graduation rates by NEC,		
ethics, legalities, and	NCC, and NFO		
standards for entry-level			
nursing practice.	Faculty Evaluation of Nursing	Review and analysis of Faculty Evaluation of	
	Course	Nursing Course Survey by NEC, NCC, and	
	*Standard 4:	NFO. This survey is administered to Program	
	Criterion 4.1: Items 13	faculty annually in the Spring (and to BADNAP	
	Criterion 4.2: Items 14.1-14.4	and CLP per semester).	
	Criterion 4.7: Items 20.1-20.3,	, ,	
	21		
	Criterion 4.9: Items23.1-23.2		
	Criterion 4.12: Items 25		
	*Standard 6:		
	Criterion 6.2: Items 27		
	Student Evaluation of Nursing	Review and analysis of Student Evaluation of	
	Course	Nursing Course Survey by Nursing Teams,	
	Standard 4:	NEC, NCC, and NFO. This survey is	
	Criterion 4.1: Items 5.1-5.2	administered to Program students at the end of	
		each course.	
	Criterion 4.2: Items 6.1-6.3, 7-	each course.	
	9 Criterion 4.7: Itoma 15.1.15.2		
	Criterion 4.7: Items 15.1-15.3,		
	16-18		
	Criterion 4.9: Items 20.1-20.2,		
	21-23		
	*Standard 6:		

Criterion 6.4: Items 6-9 (Criterion 4.2)		
Student Exit Survey Standard 1: Criterion 1.1: Items 3.1- *Standard 3: Criterion 3.1: Items 9.1- *Standard 4: Criterion 4.1: Items 22-2 Criterion 4.2: Items 24.1 25.1-25.4 Criterion 4.7: Items 31.1 Criterion 4.9: Items 33.1 Criterion 4.12: Items 38. 38.2, 39.1-39.2, 40.1-40 *Standard 6: Criterion 6.4: Items 24.1 (Criterion 4.2)	4 the last course.	
Adjunct Faculty Survey Standard 1: Criterion 1.1: Item 2.1-2 *Standard 4: Criterion 4.2: Items 10.1 Criterion 4.7: Items 13.1 Criterion 4.9: Items 14.1	annually in the Spring. 10.4 13.3	
Nursing Advisory Comm Survey *Standard 1: Criterion 1.1-1.3 *Standard 4: Criterion 4.1: Items 4 Criterion 4.9: Items 5	tee Review and analysis of the Nursing Advisory Committee Survey by the NDP, NPAD, NEC, NCC, and NFO. This survey is administered to advisory committee membership semi-annually in March and October.	

Clinical Evaluation Tool	
NESA Faculty Evaluation of Clinical Experience *Standard 6 Items 5-6 NESA Student Evaluation of Clinical Experience Standard 6 Items 6	Review and analysis of the NESA Faculty and NESA Student Evaluation of Clinical Experience by the Team Leaders, NEC, NCC, and NFO. These surveys are administered to clinical faculty and students at the end of each clinical experience.
Course Examinations/Quizzes and skills check-offs	

Criterion	Expected Level of Achievement
Performance on licensure exam: The program's 3-year mean for the licensure exam pass rate will be at or above the national mean for the same 3-year period.	 Graduates will perform at or above the national average pass rate on the NCLEX-RN licensure exam. Licensure exam pass rates will be at or above the national mean for 3 year period.

Frequency of Assessment	Assessment Method
Aggregate data reviewed annually: • September – data collected for May graduates and reported to NFO	Review and analysis of data for graduating classes and comparison with national pass rate.

raduates and reported to

CRITERION 6.4.1 RESULTS

	Results of Data Col (including actual lev			Actions for Program Development, Maintenance, or Revision
<u>AY 2014</u>				<u>AY2014</u>
ELA:				
Licensure Pas	s Rates			
Year	OCCC Pass Rate	Oklahoma	Nat. Pass Rate %	
	%	Pass Rate		
2011	94.97%	86.34%	87.90%	
2012	96.85%	91.45%	90.34%	
2013				
Mean 11-13				
2014				
Mean 12-14				
AY 2015				AY2015
ELA:				
Licensure Pas	s Rates			
Year	OCCC Pass Rate %	Oklahoma Pass Rate	Nat. Pass Rate %	
2012	96.85%	91.45%	90.34%	
2013				
2014				
Mean 12-14				
2015				
Mean 13-15				

Y 2016			
LA:			
Licensure	e Pass Rates		
Year	OCCC Pass Rate	Oklahoma	Nat. Pass Rate %
	%	Pass Rate	
2013			
2014			
2015			
Mean 13-	15		
2016			
Mean 14-	16		

Criterion	Expected Level of Achievement
Program completion:	Seventy percent (70%) or greater of students will complete the program within a period of six semesters (traditional program
Expected levels of	and baccalaureate to associate degree nurse pathways) and four semesters (career ladder pathway).
achievement for program	
completion are	
determined by the	
faculty and reflect	
student demographics	
and program options.	

Frequency of Assessment	Assessment Method
Graduate data and information reviewed annually	Review and analysis of data for graduating classes

CRITERION 6.4.2 RESULTS

			Collection & A	Actions for Program Development, Maintenance, or Revision		
<u>AY 2014</u>	-					AY 2014
ELA:						
Semester	Pathway	Number	Semester	Number	Program	
Admitted		Admitted	Graduated	Graduated	Completion	
SPR 1	Traditional		FALL 1			
Fall 1	Traditional		SPR 1			
Sum 1	BADNAP		SPR 1			
Fall 1	CLP		SPR 1			
Totals						
<u>AY 2015</u>						<u>AY 2015</u>
ELA:	Dethurse	Nerreleau	C	Neurolean	Dura murana	
Semester Admitted	Pathway	Number Admitted	Semester Graduated	Number Graduated	Program Completion	
SPR 1	Traditional		FALL 1			
Fall 1	Traditional		SPR 1			
Sum 1	BADNAP		SPR 1			
Fall 1	CLP		SPR 1			
Totals						
<u>AY 2016</u> ELA:						<u>AY 2016</u>
Semester	Pathway	Number	Semester	Number	Program	
Admitted		Admitted	Graduated	Graduated	Completion	
SPR 1	Traditional		FALL 1		•	
Fall 1	Traditional		SPR 1			
Sum 1	BADNAP		SPR 1			
Fall 1	CLP		SPR 1			
Totals	-		_			

Criterion	Expected Level of Achievement
Graduate Program Satisfaction: Qualitative and quantitative measures address graduates six to twelve months post-graduation.	 Ninety percent (90%) or greater of graduates responding to graduate surveys will report overall satisfaction with the program Mean score of at least 3.5 on a scale of 5.0 on the Nursing Program Post Graduate Survey: For Fall 13 graduating class: Item 13; beginning Spring 14: Item 11

Frequency of Assessment	Assessment Method
 Aggregate data reviewed annually: Nursing Program Post Graduation Survey: January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of the NEC August – data reviewed by NPD/NPAD September – NPD/NPAD report to NFO 	 Nursing Program Post Graduate Survey is conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Review and analysis of NPPGS by NEC Surveys are reviewed and initial data compiled by NPD/NPAD. NPD/NPAD reports and recommends action to NFO.

CRITERION 6.4.3 RESULTS

Results of Data Collection & Analysis (including actual level of achievement)	Actions for Program Development, Maintenance, or Revision
AY 2014 ELA: Nursing Program Post Graduate Survey: Item 12 Item 12	<u>AY2014</u>
AY 2015 ELA: Nursing Program Post Graduate Survey: Item 12 Item 12	<u>AY 2015</u>
<u>AY 2016</u>	<u>AY 2016</u>

ELA: Nursing Program Post Graduate Survey: Item 12 Item 12

Criterion	Expected Level of Achievement
Employer Program Satisfaction: Qualitative and quantitative measures address employer satisfaction with graduate preparation for entry- level positions six to twelve months post- graduation.	 Ninety percent (90%) or greater of employers responding to employer surveys will report that graduates are adequately prepared for entry level practice. Mean score of at least 3.5 on a scale of 5.0 on the Graduate Evaluation by Employer Survey: For Fall 13 graduating class: Item 17-18; beginning Spring 14: Item 18-19 Mean score of at least 3.5 on a scale of 5.0 on the OCCC Nursing Advisory Committee Survey: Item 8-10

Frequency of Assessment	Assessment Method		
 Aggregate data reviewed annually: Graduate Evaluation by Employer Survey: January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of the NEC August – data reviewed by NPD/NPAD September – NPD/NPAD report to NFO 	 Graduate Evaluation by Employer Survey is conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Review and analysis of GEES by NEC Data is reviewed and initial data compiled by NPD/NPAD. NPD/NPAD reports and recommends action to NFO. Data from OCCC Nursing Advisory Committee Survey collected by NEC with report to NPD/NPAD Data is reviewed and initial data compiled by NPD/NPAD. NPD/NPAD reports and recommends action to NFO. 		
 OCCC Nursing Advisory Committee Survey: March/October – data collected by NEC August – data reviewed by NPD/NPAD September – NPD/NPAD report to NFO 			

CRITERION 6.4.4 RESULTS

Results of Data Collection & Analysis	Actions for Program Development,
(including actual level of achievement)	Maintenance, or Revision
<u>AY 2014</u>	<u>AY2014</u>
ELA:	
Graduate Evaluation by Employer Survey: Item 17	
Item 17	
OCCC Nursing Advisory Committee Survey: Items 8-10	
Item 8	
Item 9	
Item 10	
AY 2015	AY 2015
ELA:	
Graduate Evaluation by Employer Survey: Item 17	
Item 17	
OCCC Nursing Advisory Committee Survey: Items 8-10	
Item 8	
Item 9	
Item 10	
AY 2016	AY 2016
ELA:	
Graduate Evaluation by Employer Survey: Item 17	
Item 17	
OCCC Nursing Advisory Committee Survey: Items 8-10	
Item 8	
Item 9	
Item 10	

Criterion	Expected Level of Achievement
Job placement rates: Expected levels of achievement are determined by the faculty and are addressed through quantified measures six to twelve months post- graduation.	 Eighty percent (80%) or greater of graduates seeking employment will obtain an entry-level position within six (6) months after graduation. Job placement rates are addressed through quantified measures that reflect program demographics and history. Mean score of 3.5 on a scale of 5 on the Nursing Program Post Graduate Survey: Item 1, 2

Frequency of Assessment	Assessment Method
 Aggregate data reviewed annually: Nursing Program Post Graduation Survey: January/July – data collected by Department of Institutional Effectiveness and results forwarded to chair of the NEC August – data reviewed by NPD/NPAD September – NPD/NPAD report to NFO 	 Nursing Program Post Graduate Survey is conducted by the Department of Institutional Effectiveness through a series of mailings and telephone follow-up. Survey data is then forwarded to the chair of the NEC. Surveys are reviewed and analyzed and initial data compiled by NPD/NPAD NPD/NPAD reports and recommends action to NFO Graduates will be contacted at six months post graduation for employment status.

CRITERION 6.4.5 RESULTS

				on & Ana f achieve	Actions for Program Development, Maintenance, or Revision				
AY 2014 ELA: Job placement rate demographics and Nursing Post Gra	d history.		•	antified m	n AY2014				
	tem 2	Job Pla	acement	Rates					
	Respondents			ndents	Its				
	Year	aduates	aduate	aduate			sponden ed		
	Academic Year	Number of Graduates	Number Responding	Number Employed	Percent of Respondents Employed				
	AY2011	160	156	149	96%				
	AY2012	218	192	176	92%				
	AY2013	194							
	AY2014								

AY 2015 ELA: Nursing Post Gra Item 1 Item 2	duate Surv	ey: Item	is 1-2		
r		Job Pla	acement	Rates	
			Respondents		
	Year	Number of Graduates			bonden
	Academic Year		Number Responding	Number Employed	Percent of Respondents Employed
-	AY2012	218	2 2 192	- ш 176	е 92%
-	AY2013	194			
-	AY2014				
	AY2015				

