

Date:	4/11/2022
Program and Department:	LVN Program; Health Science
CTE Program?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Additional programs included in this review:	
Date of last comprehensive review:	2019
Submitted By:	Eileen Donnelly
Attachments (* as needed):	<input type="checkbox"/> 6-year assessment plan – All programs, when applicable <input type="checkbox"/> 2-year scheduling plan <input type="checkbox"/> Justification for Resource Requests (if needed)

I. Alignment of the Program with the AHC Mission

AHC Mission: Allan Hancock College fosters an educational culture that values equity and diversity and engages students in an inclusive learning environment. We offer pathways that encourage our student population to achieve personal, academic, and career goals through coursework leading to associate degrees, certificates, transfer, and skills building.

a. Have there been any changes that would require a change to your Program Mission?

No. The Program Mission remains.

b. Explain how your program mission aligns with the college mission.

The college mission and values can be found here: <https://www.hancockcollege.edu/about/mission.php>

The LVN Program's philosophy is aligned with the mission, vision, and shared values of the college.

The program remains committed to providing quality instruction as evidenced by the following:

High licensure exam pass rate: Allan Hancock LVN Program is rank #2 as having the highest pass rate among first-time test takers which is 97.6%. Average number of LVN students graduating annually: 29. Data analyzed: Calendar years 2011 through 2020 (BVNPT; nursingschoolalmanac.com 2022).

Retention, 2018-2020 The program's retention was between 90-98%. COVID had little impact on the retention rate.

Diversity, 2019-2020: Our student population is diverse as headcount for Hispanics was 767 vs. 645 for Whites. While the majority of students are female, the head count for male students have slightly declined as headcount went from 996 in 2018-2019 to 587. Outreach activities to encourage male students have included the following: partnering male students with male nurses in the clinical, including pictures of male students on billboards and website, and male nursing students participating in Career Exploration Days. In regards to age, our student population remain relatively young, ages 24 and under, with a headcount of 1196 vs.409 for ages above.

Note: Continued Program Approval, 2022 (Board of Vocational Nursing and Psychiatric Technician (BVNPT) program evaluation period was October 2021 through March 2022; preparation for visit, on-site visit, and post visit correction). The on-site visit occurred on February 14th which approximately 8 hours. The summary of findings required the director to make several policy changes regarding attendance, remediation, student involvement in advisory meetings, and simulation. Once corrections were submitted, the final outcome was favorable as there were not reported violations. The board consultant added that when she met with the RN (2021 VN students) and current VN students as well as with the VN faculty, the overall feedback of the program was positive. The board consultant did note however that the RN students questioned the necessity of the RN admission criteria. This information was later discussed with the RN director who then said it was developed as part of their student success intervention.

II. Student Success, Program Accessibility and Program Capacity

*NO data analysis required this year.

- a. Describe how the program works to promote student success (completions job placement, transfer). Include teaching innovations and use of academic and student support.

Student Success: Over 95% -98% of the LVN students continue to the RN program to obtain an associate degree in registered nursing. Despite the RN program's admission criteria which factors in the student's LVN ATI predictor test score (probability of passing the NCLEX VN), 97% of LVN successfully obtain their needed score to be accepted into the program.

- b. List any notable accomplishments of the program (student awards, honors, or scholarships can be listed here also)

The LVN program reports to the Nursing Advisory Committee which is held annually. The director reports the strengths of the program as well as some the challenges it faces. The director also takes note of the feedback it receives from the committee members who often represent the facilities the program utilizes for clinical training. Students representing the program are included in the meeting and the director also takes note of their feedback.

The director also provides program updates and of current needs at weekly meetings with the program directors and Health Science dean and at department meetings with health science faculty.

Due to its recent BVNPT program evaluation in February 2022, policy changes to the 2021 Student Nursing handbook were reported during the March 2021 department and health science meeting. While there were no reported violations, members of the meetings were informed that the VN faculty are not certified thereby will need to register for a simulation training course this summer. Funding to support this training will be requested.

Quality and Innovation in the Program and Curriculum Review

- c. Are you on track in your assessment plan for course and program SLOs? If not, please explain why.

The college is currently updating their reporting system from CurriQunet to Spool. Once the new program is in place, the reporting of assessment will re-continue. In regards to program evaluation, we completed a Board of Vocational/Psychiatric Technician (BVNPT) program evaluation which ran from October 2021 to March 2022 (preparation for visit required frequent submission of evidence that programs were meeting the student learning outcomes/course and terminal objectives, addressing student concerns as evidenced by student evaluations of program, etc.). The program evaluation was successful as it received a continued approval. In regards to SLOs, obtaining data that are measurable and relevant to student learning outcomes has been challenging dur to COVID.

- d. Have you shared your assessments or improvement plans with your department, program or advisory committee? If so, what actions resulted? If not, how do you plan to do so in the future?
- e. Did any of section, course or program improvement plans indicate that your program would benefit from specific resources in order to support student learning and/or faculty development? If so, please explain.

The needs that were identified last year remain. These needs were/are:

- 1) Add. faculty to assist with morning clinical med pass. A request for a stipend was recently (March 2021) approved for summer. The VN faculty will monitor the outcome and report it in the 2021 annual update.
*****Having two instructors in summer 2021 to assist with critical procedures such as medication administration was extremely beneficial for students as instructor facilitated med pass increased from approximately 7 in 2020 to 12 in 2021. Students also reported having more instructors who were available to help lessened their anxiety in clinical. while instructors reported feeling less hurried when they were with students.***
On 4/8/2022, during a meeting with the LVN board consultant who oversees the LVN program, she announced that nursing students should only administer medication with an instructor. While there is no regulation for her recommendation, she stated that it is NOT best practice for students to administer medications with staff nurses. I quickly shared this information with the VN faculty and they responded by voicing their concern about the current student to instructor ratio of 15 to 1 which is above the local average of 7 to 1. Inadequate instructor support impacts student learning as instructors need adequate time to spend with students so as to cultivate their clinical judgement and clinical decision-making skills that will enable them to management their patient's care safely and quickly adapt to their role in a health care environment that is fast changing.
- 2) Additional staff in the nursing office to assist with the tremendous workload. Since COVID, instructors/directors have helped with tracking and collecting mandated items as the office technician was working remote.
******The nursing office technician is now back in her office. Having her tend to student needs, track mandated items, and answer instructors' questions has improved the morale in the dept. There is a need for additional office support which is currently being reviewed.***
- 3) Instructional aide in the skills lab to help students remediate, set up and take down, etc.
This need remains. Currently, instructors are having to tutor students as the Learning Assistance Program do not have tutors with nursing education background and clinical experience to teach nursing students. Faculty have noted that their time tutoring students appear to be increasing as growing number of ESL students are in the program. The faculty are very concerned for these students as they experience greater amount of stress understanding concepts that are not just in English but presented using medical terminology.
- 4) Instructional resources such as Shadow Health, Osmosis, ATI, Keith RN, and Kahoot to aide/enhance student learning. Grant money has funded the last two purchases of Shadow Health's virtual simulation thus allowed the program to continue during the suspension/restrictions of student clinical at local clinical sites (Plan of Action/Post Validation).
******Grant money enabled students to utilize Shadow Health simulation products when taken ill by COVID. The college purchased Kahoot which faculty are using to test and enhance student learning in the classroom. The RN program obtained money that enabled both LVN and RN faculty to access to Keith RN's instructional resources.***
- 5) Additional skills lab room/space for lab activities.
******This is a serious need as the program continue to struggle finding lab space for their skills activities. This is quite problematic in spring as the first three weeks of the LVN program is orientation and require numerous student competency checks that are not repeated in their RN year.***

Additional needs identified:

- 6) Full time faculty will need to take a simulation training course to enable them to conduct simulation.
- 7) The director currently does not have an assistant director. The two full-time faculty currently employed in program have not taken a course in curriculum development which is a requirement to be approved by BVNPT.
- 8) Simulation module has to be revised and a policy to be developed for high fidelity simulation. As a result, a high-fidelity manikin with capabilities that will allow VN students to perform simulated skills to manage a patient in various forms of distress will be required. A pediatric manikin will need to be purchased as the current high-fidelity simulation manikin in the nursing lab is an adult.
- 9) The consultant stated her concern about the 2-4-year waitlist. She advised the VN program to consider adding a merit-based admission criterion as it will reduce the waitlist and ensure that students who are admitted have a better chance of successfully passing the RN program and RN NCLEX.

In reviewing outcomes and assessments have you identified any and all that indicate a modification should be made to the course outline, the student learning outcomes or the program outcomes? Please state what modifications you will be making.

No changes as the curriculum was just revised in 2019. However, in October 2021, program evaluation began in preparation for the on-site program visit. The process involved frequent submission of documents of current program processes which some serving as evidence that student learning outcomes/course objectives/terminal objectives were being met. Some of documents include current student policies, student evaluation of program and facilities, syllabi of all VN courses, etc.

- f. Have all course outlines been reviewed within the last 5 years? If not, please explain the plan to bring course outlines up to date and include timelines for the review and submission to AP&P.

Yes. The curriculum was revised in 2019 and implemented in 2020. Studying the effect of the new curriculum has proven to be challenging as COVID is still an issue. Also, please see notes regarding BVNPT program evaluation.

- g. For **CTE courses/programs only**, as per §55003, have prerequisites, corequisites and advisories (PCAs) for courses and/or programs been reviewed within the last 2 years?

Yes, when curriculum revision was in progress.

III. Focus and Engagement of the Program

- a. Summarize major trends and opportunities as well as challenges that have emerged in the program

Please note: During the BVNPT site visit for program renewal, which occurred on February 2022, the consultant had identified that the simulation module of the clinical courses needed revamping due to the following: instructors were not certified and simulation practices were outdated and need to move from low fidelity to high fidelity simulation. She also added that a policy is required for re-approval of the simulation activities which currently the program did not have. While she instructed the program to temporarily halt the program until corrections are made, it did not affect the program renewal process.

- b. List any (internal or external) conditions that have influenced the program in the past year.

See above regarding simulation.

Data for Program with Vocational TOP Codes (CTE):

https://misweb.cccco.edu/perkinsv/Core_Indicator_Reports/Default.aspx

Please review the data and comment on any trends.

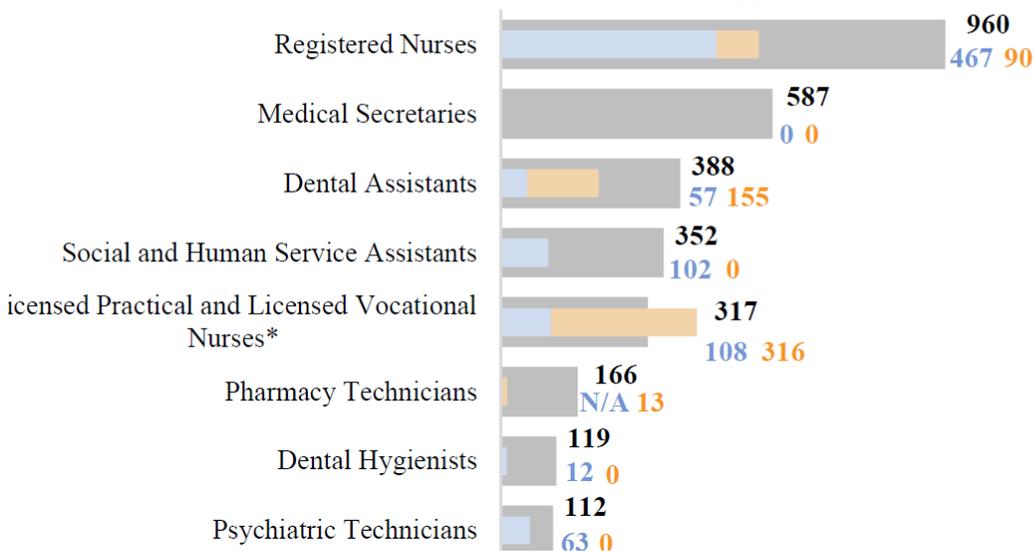
- c. Current industry employment and wage data (please cite sources) Suggested sources: [ONet Online](#) and [EDD LMI site](#)

d. Industry employment and wage trends

See above.

Job placement: Job opportunities for nurses, LVN and RN, abound. According to the US Bureau of Labor Statistics, the job outlook for LVNs and RNs are expected to grow 9% from 2020 to 2030 however, "194,500 openings for registered nurses are projected each year, on average, over the decade. Many of those openings are expected to result from the need to replace workers who transfer to different occupations or exit the labor force, such as to retire." While the wages for LVN in the Central Coast exceeds the national average median wage of \$48,745 vs. \$62,351 here in the Central Coast, the demand for LVNs continue as it remains one of the top five middle-skills jobs (South Central Coast Sector Analysis Project, EMSI 2021 Quarter Data Set).

**Health Top Middle-Skill Jobs in South Central Coast:
Labor Market Demand vs. Program Supply**



e. TOP code employment CORE indicator report

Ref to <https://misweb.cccco.edu/perkins/main.aspx>

f. Advisory committee recommendations

2021 November Advisory Committee meeting. The faculty discussed how COVID continue to present the program operational challenges, e.g. long-term care limiting number of students, clinics restricting student placement, frequent COVID testing resulting positives tests, reinforcing vaccination guidelines, etc. No specific recommendation was made.

IV. Continuous Improvement of the Program

a. Status of Final Plan of Action – Post Validation

Summarize the progress made on the recommendations from your last comprehensive program review plan of action

PLAN OF ACTION	ACTION TAKEN/RESULT AND STATUS 2021
	Please note that while there are changes regarding the program that have occurred in 2022, I thought it was best to include them as the BNVPT program evaluation began in 2021.
<p>Review, report, and monitor the effect of the revised curriculum (implemented in 2020) on student learning outcomes:</p> <ul style="list-style-type: none"> • Attrition rate. • Student evaluations regarding program and courses. <p>NCLEX Pass Rate</p>	<ul style="list-style-type: none"> • No changes to attrition rate (>97%). • Assessment outcome from revised curriculum – data currently not appropriate due to COVID related challenges. • Pass rate remains high at 97% and above.
<p>Seek funds to improve performance and support student needs:</p> <ul style="list-style-type: none"> • Additional part-time faculty to improve staffing ratio during critical skills performance. With a faculty-student ratio of 1:12 (exceeding Cuesta and other programs with a 1:7 or less), it limits the time spent on each student. ▪ Nurse lab assistant to help with setting up/taking down/organizing supplies for skills checks. ▪ Nurse counselor/tutor who is able to tutor students on matters related to nursing. 	<p>1) Add faculty in clinical: Summer 2021. Two instructors were scheduled from 8-12 to assist with medication administration and skill opportunities. The results were: total instructor facilitated medication administration per student by the end of the program increased from average of 7 to 11-12. Students reported having greater satisfaction in clinical when more instructors are available to help them with their needs. Clinical instructors also reported feeling less guilty as the second instructor was able to help students when they are busy with others.</p> <p><u>On 4/8/2022, during a meeting with the LVN board consultant who oversees the LVN program, she announced that nursing students should only administer medication with an instructor. While there is no regulation for her recommendation, she stated that it is NOT best practice for students to administer medications with staff nurses. I quickly shared this information with the VN faculty and they responded by voicing their concern about the current student to instructor ratio of 15 to 1 which is above the local average of 7 to 1. Inadequate instructor support impact student learning as instructors need adequate time to spend with students to cultivate their clinical judgement and clinical decision-making skills that will enable them to management their patient's care safely and quickly adapt to their role in a health care environment that is fast changing.</u></p> <p>2) Nurse tutor and lab assistant. This need remains.</p>
<p>Enrollment Changes No changes to enrollment are required. There is a three-year wait list for the LVN program and enrollment is highly reliant on faculty to student ratio, availability of clinical sites, and college resources.</p>	<p>No changes to enrollment. Waitlist is 2-4 years. The BVNT consultant advised the program to consider an admission criterion to reduce waitlist and to improve student's success in the RN year.</p>
<p>Demographic Changes The student demographics remain ethnically and racially diverse while male students remain under-represented. This a national occurrence as gender stigma about men working as nurses continue, and according to www.statisticstats.com approximately 11.4% of BSN students are men. To attain male nursing students, the program will:</p> <ul style="list-style-type: none"> • Monitor the enrollment and attrition rate of male students in the program. 	<p>Nurses are predominantly female with male nurses accounting for only 11-14% of the nurses. This rate is similar to the percentage of male students in the program which was approximately 11% in 202-(Institutional Research 2020-21) While the program promotes gender diversity and encourage men to explore nurses as a career possibility by partnering male students with male nurses in the clinical setting, and involving male nursing students in outreach programs, the number remains low. In regards to male student retention, this has not changed despite COVID.</p>

<ul style="list-style-type: none"> • Pair male students with male nurses who are willing to mentor the students. Outcome to be monitored. • Seek funds to acquire a nurse counselor/tutor who is able to tutor students on matters related to nursing. 	<p>In addition to these strategies, the director is continually reviewing male nurse applicants to hire and who may serve as mentor for male nursing students. Currently, there are two male instructors who teach in summer and</p>
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b. List any new resources that the program received in the past year and the results

Source	Specific Resource	Est. Amount \$	Impact on program or course outcomes
Shadow Health Products; Health Assessment and Pharmacology		5000k	Allowed students to obtain their clinical hours when ill with COVID. Maintained high retention rate and high NCLEX pass rate despite COVID crisis.
Two 8-12 Instructor in summer 2021		2000.0k	Increased student opportunities for instructor facilitated skills. Improved students experience in clinical. Maintained high retention and high NCLEX pass rate.

c. List any **new or modified** recommendations below, including rationale for these in the table.

Program Improvement Plan (Program, Priority Number, year)	Anticipated Outcome (Goal)	Program Goal Status (Indicate if this goal is ongoing from a previous Annual Or Comprehensive Program Review or new this year).	Alignment to Strategic Directions and planning goals (see "Alignment to Strategic Directions" Attached (Ref: Ed. Mater Plan)	Activities	Justification (Evidence of need)	Resource Request (From table Below)	Anticipated Completion Date or On-going

<p>Priority 1, 2023: Fund to pay for course on admin. & curriculum certificate which will enable one of a VN full time faculty to be approved as the Assistant Director Position.</p>	<p>LVN board will approve faculty as Assistant DON</p>	<p>PG: 3</p>	<p>Goal IR2</p>	<p>ADON to provide backup support for staff and DON. ADON to take on role of DON should situation arise.</p>	<p>The Director of the Program does not have an Assistant Director. The full time faculty who is interested has not taken a course on admin. & curriculum development. This is a requirement for BVNPT approval. This course is required for BNVPT ADON approval.</p>	<p>Online course.</p>	<p>Spring 2022</p>
<p>Priority 2, 2023: Pediatric simulation manikin</p>	<p>LVN Board will approve high fidelity simulation activities</p>	<p>PG:6 *New need as a result of recent LVN board visit</p>	<p>Goal IR3</p>	<p>Students to perform simulated care on manikin as part of their clinical course.</p>	<p>Cost Laerdal ped. manikin (\$40,000 w/2 years warranty)</p>	<p>One-time though maintenance is ongoing</p>	<p>Fall 2022</p>

<p>Priority 2, 2023: Augmented Virtual Reality Simulation as option to the pediatric simulation manikin</p>	<p>Will approve revised high fidelity simulation activities</p>	<p>PG: 6 Goal SL3, IR3</p> <p>*New need as a result of recent LVN board visit on February 2022. This is an option to the ped. sim manikin.</p>	<p>Goal: IR3</p>	<p>Students to utilize AV for simulation activities.</p> <p>*During a recent meeting with the LVN board NEC on April 8, she stated AR is an option to a manikin.</p>	<p>\$10,000</p>	<p>One-time though maintenance is ongoing</p>	<p>Fall 2022</p>
<p>Priority 3, 2022: Staff Michelle Lehne, to program 10 patient case profiles in the KbPort Rx carts revise her course to incorporate the new system, and train faculty results in using the carts.</p>	<p>Staff will receive proper instruction of use of carts to enable students to utilize system to its fullest</p>	<p>PG: 3 Goal SLS2</p>	<p>Goal: IR2</p>	<p>One-time cost to program 10 patient profiles, course revised to incorporate new system, and train faculty</p>	<p>The KbPort SimCartRx - Simulated Electronic Medication Administration System carts were received on March 2022. System has general information that needs personalizing.</p>	<p>June 13-August 12, 2022. Faculty training to be offered on August 11. Cost: total of 40 hours.</p>	<p>8/12/2022</p>

Priority 5: Additional make up day	Schedule another make-up day.	PG 6	Goal 1R2	On- going	Clinical make up must be done in the clinical setting. Currently, there is only 1 make up day scheduled. If a student is absent the second time, the student will not be able to complete his/her required hours. Cost: 1000.00 Two faculty needed d/t ratio.	Staff	On- going
Priority: 6 Case study textbooks	Case studies are permitted by the LVN board theory make up.	PG 6	Goal 1R2	On- going to keep textboo ks current	Faculty will need to purchase multiple textbooks with case studies. Cost \$3000-5000.	Instructio nal supplies	On- going

d. Summary of request for resources. Please list the type of request (facility, technology, staffing, equipment, other) and rank their priority.

Resource Requests (Program, RRX year)	Item (Priority Rank & number of items needed	Program Goal	Type	One- time cost	On-going cost (per fiscal year)	Anticipated Completion Date or On-going
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Locks on all classroom doors that will enable the instructor/student to lock the door from the inside for safety LVN/2021	#1 10 items	PG: 2 Goal G1	Other	-Cost depends on type of locks and number of classrooms in HS dept.	N/A	2021 Completed as the college installed security alarms to entrance doors
***Shadow Health Products should COVID restrictions remain in 2022	#1 IF COVID condition persists	PG: 4, 6 Technology Goal SLS3	N/A	\$2000.00 per year	On-going	N/A - Purchase will depend on COVID clinical restrictions/guideline status
Additional part-time clinical instructor (20hrs per week) to assist with critical skill procedures esp. morning medication administration. And, a part-time faculty to tutor students. LVN/2022	#1 2 PTs	PG: 1, 2, 3 Goal SLS2 * During a recent meeting with the LVN board NEC on April 8, she stated that students should only admin. meds with instructor as it is best practice. This has not been the case as students during mid semester admin. meds with staff nurses.	Staff	N/A	\$30,000.00 (\$10,000 per semester)	On-going
Part time instructor to tutor students with theory courses d/t growing number of at risk students including ESL students.	#2 2 PTs	PG: 1, 2, 3 Goal SLS2	Staff	N/A	\$30,000.00 (\$10,000 per semester)	On-going
Fund for faculty simulation training LVN/2022	#3 3 to train	PG: 6 Goal IR3	Other/Training	\$6000.00 (for 3 faculty)	N/A	2022

Fund to fund instructor to take a curriculum course for BNVPT Assistant DON approval	#4 1 to train	PG: 6 Goal IR3	Training		\$2,000.00	On-going
Pediatric Simulation Manikin	#5 1 mannikin	PG: 6 Goal IR3			\$40,000 w/2 years warranty	One -time though maintenance is on-going
Repairing and maintaining the medical devises in the skills lab e.g. WOW, med dispensing machine, mannequins, etc. LVN/2022	#12 1 person	PG:4 Goal IR3	Other	N/A	Cost depends as it will be a PRN basis	On-going
Instructional space for nursing skills activity (multiple programs share the two skills lab rooms) LVN/2022	#6 1-2 rooms	PG: 1 Goal SLS6	Other	N/A	Cost will vary- will depend if space is purchased or a rental	On-going
Administrative Assistance (to lessen workload for admin. secretary and improve student service) LVN/2022	#7 1 staff	PG: 1 Goal IR1	Staff	N/A	\$900.0 per week (5 days/week and 6 hours/day at 30\$/hour)	On-going
Fund to pay course that will enable new instructor to obtain a teaching certificate (needed for BVNPT approval)	#8 ---n/a	PG: 2 Goal IRI1	Other/Course	N/A	\$400 per instructor	On-going

ATI PN Predictor (prepares students for NCLEX Exam; Required for RN Admission) LVN/2021	#9 35 students/year	PG: 1, 3 Goal SLS2	Other	N/A	\$2,100.00 (60/student)	On-going
Skills Lab Technician (preferably a nurse -assist with skills remediation and set-up/take down) LVN/2022	#10 1 staff	PG: 1 & 2 Goal SLS6	Staff	N/A	(\$1.080 per week): 3 days/week and 6 hours/day at 60\$/hour	On-going
Nursing Counselor (an academic counselor for nursing students is essential for student success. Student surveys from previous years have indicated that students were dissatisfied that program did not have this resource. Nursing program in nearby areas employ a counselor for nursing students: Channel Islands (contact: nursing@CSUCL.edu); Cuesta College (contact: North County Counselor for Allied Health); and Santa Barbara City College (contact: Nursing Academic Counselor)	#11 1 staff	PG: 1 & 2 Goal SLS6	Staff	N/A	\$1.080 per week (3 days/week and 6 hours/day at 60\$/hour)	On-going

LVN/2022						
Venipuncture Mannequin (current mannequins wearing down) LVN/ 2022	#12 10 items	PG: 1 Goal SLS6	Equipment	N/A	\$1000.00 (250\$/per 1 item	On-going for replacement as needed
Osmosis for Pharmacology 310 (helpful learning aide for students) LVN/2021	#11 40 students	PG: 2 Goal SLS3	Technology	N/A	\$2000.00 per year	On-going No longer needed.

<p>Kahoot (helpful learning aide for students)</p> <p>LVN/2021</p>	<p>#12 — 3 faculty</p>	<p>PG: 2 Goal SLS3</p>	<p>Technology</p>	<p>N/A</p>	<p>#250 per year for each instructor</p>	<p>On-going 2020, College purchased Kahoot Ed</p>
<p>KbPort SimCartRx - Simulated Electronic Medication Administration System to aide students learn safe medication administration</p> <p>LVN/2022</p>	<p>#13 3 carts *See repair/maintenance under "Priority 12"</p>	<p>PG: 1 & 5 Goal SLS3</p>	<p>Technology</p>	<p>N/A</p>	<p>\$90,000.00 for 3 carts</p>	<p>On-going for replacement as needed (March 2022, recently purchased)</p>
<p>Vein finder (VeinLite EMS pro)</p> <p>LVN/2021</p>	<p>#14 3 items</p>	<p>PG: 1 & 2 Goal SLS3</p>	<p>Technology</p>	<p>N/A</p>	<p>\$299 per item = \$897 plus tax</p>	<p>To be replaced as needed (March 2022, to be ordered)</p>

2022 BVNPT NEC (Nursing Education Consultant) RECOMMENDATIONS AFTER PROGRAM VIST AND April 2022 MEETING RESULTED IN NEW OR MODIFIED NEEDS

1. Simulation module/activities cancelled and must be revised for re-approval. The revision process to include: faculty involved in simulation teaching must be certified, simulation must use high fidelity system, and policy to include adequate staffing,
2. Program does not have an assistant director who is qualified. To do so, faculty (Michelle Lehne has agreed to be the ADON) has to take a course on curriculum and administration for BNVPT approval.
3. Med administration procedures in the clinical setting must be conducted by instructors only (which is not the case as students start giving meds with their nurse around mid-summer once deemed safe). Consequently, this new recommendation will reduce the med administration opportunities for students as student to instructor ratio of 15 to 1 exceeds the local average of 7 to 1.
4. Clinical make up must be done in the clinical setting. Currently, there is only 1 make up day scheduled. If a student is absent the second time, the student will not be able to complete his/her required hours.
5. Advised the program to consider an admission criterion to reduce waitlist and to improve student's success in the RN year.