# ST. PETERSBURG COLLEGE COLLEGE OF NURSING



## **SELF-STUDY REPORT**

Submitted to:

Accreditation Commission of Education in Nursing February 4-6, 2020

#### TABLE OF CONTENTS

Contents section I: executive summary
General Information
9
HISTORY OF THE NURSING PROGRAM:
The Associate Degree Nursing Program10
Licensed Practical Nurse (LPN) – Registered Nurse (RN) transition program
Analysis of Strengths and Areas Needing Improvement
Program Strengths
Areas Needing Improvement
SECTION II: STANDARDS 1-5
STANDARD 1: MISSION AND ADMINISTRATIVE CAPACITY
1.1 The mission and philosophy of the nursing education unit are congruent with the core values, mission, and goals of the governing organization15
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
1.3 The assessment of end-of-program student learning outcomes and program outcomes are shared with communities of interest, and the communities of interest have input into program processes and decision-making
1.4 Partnerships that exist promote excellence in nursing education, enhance the profession, and benefit the community
1.5: The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing and is doctorally prepared
1.6: The nurse administrator is experientially qualified, meets governing organization and state requirements, and is oriented and mentored to the role
1.7: When present, nursing program coordinators and/or faculty who assist with program administration are academically and experientially qualified
1.8: The nurse administrator has authority and responsibility for the development and administration of the program and has sufficient time and resources to fulfill the role responsibilities
1.9: The nurse administrator has the authority to prepare and administer the program budget with faculty input27

1.10: Policies for nursing faculty and staff are compreheners faculty and staff, and are consistent with those of the governin justified by the purpose and outcomes of the nursing program	ng organization; differences are
1.11: Distance education, when utilized, is congruent with organization and the mission/philosophy of the nursing education	• •
STANDARD 2: FACULTY AND STAFF	
2.1: Full-time nursing faculty hold educational qualifications the governing organization, the state, and the governing organization and are qualified to teach the assigned nursing courses	anization's accrediting agency,
2.2: Part-time nursing faculty hold educational qualification the governing organization, the state, and the governing organ and are qualified to teach the assigned nursing courses	nization's accrediting agency,
2.3: Non-nurse faculty teaching nursing courses hold educ experience as required by the governing organization, the sta organization's accrediting agency, and are qualified to teach	ate, and the governing
2.4: Preceptors, when utilized, are academically and expermentored, and monitored, and have clearly documented role	
2.5: The number of full-time faculty is sufficient to ensure the learning outcomes and program outcomes are achieved	
2.6: Faculty (full- and part-time) maintain expertise in theirs performance reflects scholarship and evidence-based teaching	• •
2.7: The number and qualifications of staff within the nursin support the nursing program.	•
2.8: Faculty (full- and part-time) are oriented and mentored	I in their areas of responsibility.36
2.9: Faculty (full- and part-time) performance is regularly the governing organization's policy/procedures, and demonst assigned area(s) of responsibility.	trates effectiveness in the
2.10: Faculty (full- and part-time) engage in ongoing deve instructional and distance technologies	
STANDARD 3: STUDENTS	
3.1: Policies for nursing students are congruent with those well as the state, when applicable, and are publicly accessibl consistently applied; differences are justified by the end-of-productomes and program outcomes.	e, non-discriminatory, and ogram student learning
3.2: Public information is accurate, clear, consistent, and a program's accreditation status and the ACEN contact information	
3.3: Changes in policies, procedures, and program information communicated to students in a timely manner.	•
3.4: Student services are commensurate with the needs of those receiving instruction using alternative methods of deliver	

	3.5: Student educational records are in compliance with the policies of the governing organization and state and federal guidelines
	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
	B.7:Records reflect that program complaints and grievances receive due process and nclude evidence of resolution47
	3.8: Orientation to technology is provided, and technological support is available to students49
	3.9: Information related to technology requirements and policies specific to distance education are accurate, clear, consistent, and accessible
S	ANDARD 4: CURRICULUM
	4.1: Consistent with contemporary practice, the curriculum incorporates established professional nursing standards, guidelines, and competencies and has clearly articulated end- of-program student learning outcomes
	4.2: The end-of-program student learning outcomes are used to organize the curriculum, guide the delivery of instruction, and direct learning activities
	4.3:The curriculum is developed by the faculty and regularly reviewed to ensure integrity,igor, and currency.54
	4.4: The curriculum includes general education courses that enhance professional nursing knowledge and practice
	4.5: The curriculum includes cultural, ethnic, and socially diverse concepts and may also nclude experiences from regional, national, or global perspectives
	4.6: The curriculum and instructional processes reflect educational theory, interprofessional collaboration, research, and current standards of practice
	4.7: Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of the end-of-program student learning putcomes
	4.8: The total number of credit/quarter hours required to complete the defined nursing brogram of study is congruent with the attainment of the identified end-of-program student earning outcomes and program outcomes, and is consistent with the policies of the governing brganization, the state, and the governing organization's accrediting agency
	4.9: Student clinical experiences and practice learning environments are evidence-based; reflect contemporary practice and nationally established patient health and safety goals; and support the achievement of the end-of-program student learning outcomes
	4.10: Written agreements for clinical practice agencies are current, specify expectations for all parties, and ensure the protection of students
	4.11: Learning activities, instructional materials, and evaluation methods are appropriate for all delivery formats and consistent with the end-of-program student learning outcomes80
S	ANDARD 5: RESOURCES83

5.1: Fiscal resources are sustainable, sufficient to ensure the achievement of the end-of program student learning outcomes and program outcomes, and commensurate with the resources of the governing organization
5.2: Physical resources are sufficient to ensure the achievement of the end-of-program student learning outcomes and program outcomes, and meet the needs of the faculty, staff, and students
5.3: Learning resources and technology are selected with faculty input and are comprehensive, current, and accessible to faculty and students91
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
SECTION III: STANDARD 6
STANDARD 6: OUTCOMES
6.1: The program demonstrates evidence of students' achievement of each end-of-program student learning outcome
6.2: The program demonstrates evidence of graduates' achievement on the licensure examination100
6.3: The program demonstrates evidence of students' achievement in completing the nursing program
6.4: The program demonstrates evidence of graduates' achievement in job placement. The expected level of achievement for job placement is determined by the faculty and reflects program demographics
SECTION IV: APPENDICES

SECTION I: EXECUTIVE SUMMARY

#### ACCCREDITATION COMMISSION FOR EDUCATION IN NURSING

#### SELF-STUDY REPORT

#### **General Information**

The College of Nursing at St. Petersburg College (SPC) offers an Associate of Science in Nursing (ADN) degree program since 1956. The purpose of the scheduled visit is for continuing accreditation of the nursing program. The dates of this visit are February 4, 5 and 6 2020.

#### Name and address of the governing organization:

St. Petersburg College P. O. Box 13489 St. Petersburg, FL 33733

#### Name and title of the chief administrative officer:

Tonjua Williams, PhD President

#### Regional/Institutional accrediting body and status of last review:

The Southern Association of Colleges and Schools Commission on Colleges (SACS-COC) - Reviewed and reaffirmed in 2018

#### Name and address of the nursing education unit/program:

Mailing address:	St. Petersburg College College of Nursing P. O. Box 13489 St. Petersburg, FL 33733
Physical location:	Health Education Center 7200 66th Street North Pinellas Park, FL 33781
Off-campus site:	BayCare Health System 2985 Drew Street Clearwater, FL 33759

#### Name and title of the administrator of the unit in nursing:

Louisana Louis, DNP, RN Dean Phone: 727-341-3472 Fax: 727-324-2049 E-mail: louis.louisana@spcollege.edu

Clare Owens, PhD, RN Assistant Dean Phone: 727-497-5023 Fax: 727-444-6292 E-mail: owens.clare@spcollege.edu

#### Board of Nursing approval status:

Florida Board of Nursing (FBON) does not regulate programs that are accredited through the Accreditation Commission for Education in Nursing (ACEN).

#### ACEN accreditation history:

St. Petersburg College ADN program (then St. Petersburg Junior College) received initial NLN accreditation in December 1970. SPC has maintained continuous accreditation since that time and was last accredited in 2012 by the National League for Nurses Accrediting Commission.

#### Nursing program type offered:

Associate of Science in Nursing (ADN)

#### Length of program in credit hours:

The Academic Pathway for the general ADN degree is 72 credits.

### Number of general education credits and/or nursing credits that may be transferred into the program:

All general education requirements may be transfer credit. If the student requests advanced standing in the Nursing Program, they are referred to the Dean and admission is on a case-by-case basis.

## Total student enrollment in educational unit in nursing as of Fall Semester 2019:

ADN Students: 651 (533 Traditional and 118 LPN-RN Transitional students)

#### Total number of ADN Faculty for Fall Semester 2019:

Full-time: 38 (includes 4 hospital partnership contributed faculty) Part-time: 27 The 2017 ACEN Accreditation Standards and Criteria was used to prepare the Self-Study Report.

The SPC CON does not offer distance education.

#### INTRODUCTION

St. Petersburg College (SPC), a large multi-campus college, was founded in 1927 as a private, nonprofit, two-year college. From 1927 until June 2001, the college was known as St. Petersburg Junior College (SPJC). In 1948, the college became a public, tax- supported institution. SPJC name changed to SPC in June 2001 and became a four-year institution.

#### HISTORY OF THE NURSING PROGRAM:

The SPC nursing program evolved from Mound Park Hospital (now Bayfront Medical Center) School of Nursing in 1956, becoming Florida's first community college nursing program. Initially approved by the FBON as a three-year program, planning for a two-year associate degree program was initiated in the early 1960s with funding from a W.K. Kellogg Foundation Grant. Dr. Mildred Montag provided consultation for that project and her correspondence with St. Petersburg Junior College remains in the archives of Columbia University. SPJC admitted its first two-year class in 1962. The first class graduated in 1964, along with the last three-year class. Initial NLN accreditation was obtained in December 1970. The college has been continuously accredited since that time.

#### The Associate Degree Nursing Program

The nursing program has two degree options to completion: traditional ADN and an LPN to RN transition program. The college has Academic Pathways designed to ensure students are given clear and concise guidance on course sequencing. Seventytwo credits are required with a minimum of 30 credits in general education and support courses. The remaining 42 credits are nursing courses which are delivered over 4 semesters. The day students take nursing courses in the spring and fall semesters. An evening schedule is also available, designed to fast track students to graduate in 18 months; these students take courses in the summer. All nursing courses are taken at the Health Education Center (HEC) or the BayCare Health System (BSO) facility. The general education support courses are taken on the student's home campus or online. There are numerous home campuses: St. Pete/Gibbs; Clearwater; Tarpon Springs; Seminole; Downtown and Midtown. The nursing program utilizes web-enhanced and hybrid courses and several of its courses are delivered asynchronously. The traditional AS. degree offers six (6) evening seats to licensed paramedics to facilitate the transition of the paramedic to registered nurse. The student must be a state certified paramedic and have an AS in Emergency Medical Services or have taken equivalent general education/support courses. Paramedics who work for a county/municipal fire department are eligible for a flex scheduling option and reduced clinical time. Flex scheduling allows the paramedic to work on a 24/48-hour schedule while taking classes. The required clinical time may be reduced by one third but if academic performance becomes unsatisfactory, the paramedic will lose the flex scheduling option.

# Licensed Practical Nurse (LPN) – Registered Nurse (RN) transition program.

The ADN program includes an LPN-RN transitional option that facilitates the transition of an LPN to the RN role. A valid State of Florida LPN license is a required pre-requisite for admission to the LPN-RN transition program. The LPN–RN transitional program is three semesters in length. Upon successful completion of the first semester, the student is awarded experiential credit for Level 1, moves forward to level 3, and is incorporated into the generic cohort.

#### Analysis of Strengths and Areas Needing Improvement

#### **Program Strengths**

- A carefully designed, increasingly complex curriculum, consistent with the CON mission, philosophy, and organizing framework.
- Well-qualified, competent, and dedicated administrators and faculty who are both academically and experientially prepared.
- Faculty and students who are actively involved within the college and the community.
- Progressive faculty who are adaptable to meet changing trends in nursing education.
- Community support through partnerships.
- Excellent reputation in the community for the quality of the program and its graduates.

- The CON's commitment to excellence evidenced by program outcomes that consistently exceed the College's expected levels of achievement.
- Incorporation of Quality and Safety Education for Nursing Competencies (QSEN) into the curriculum.
- Continuous improvement of test construction and leveling of test complexity across the curriculum.
- Integrative and creative use of technology and resources.
- Fair and equitable policies and support services for students.
- Multiple and varied clinical learning environments and facilities.
- Extensive resources to promote student learning.
- Equitable fiscal resources.

#### Areas Needing Improvement

- Discuss, make recommendations, and revise curriculum to a concept-based model.
- Develop a plan to improve simulation experiences throughout the nursing program.
- Aligned new NCLEX Test Plan within the curriculum
- Incorporate IHI Open School Modules into the curriculum.
- Continue to develop and incorporate all of the KSAs of the 6 QSEN competencies into the curriculum with special attention to the following:
  - Incorporating QI and EBP;

- Providing faculty with continuing education and support in the area of informatics;
- Emphasis on students working with different cultures and backgrounds and on understanding diverse patients.

**SECTION II: STANDARDS 1-5** 

#### STANDARD 1: MISSION AND ADMINISTRATIVE CAPACITY

The College of Nursing's (CON) mission and philosophy are congruent with the core values, mission, and goals of the governing organization. Both address student-centered education and emphasize academic excellence through innovative teaching and learning technologies.

# **1.1** The mission and philosophy of the nursing education unit are congruent with the core values, mission, and goals of the governing organization.

The CON mission and philosophy adds nurturing of practitioners who support optimal health to its diverse communities and contribute to our students' commitment to life-long learning. *See Appendix 1: Table 1.1:* Comparison between the governing organization (SPC) and the CON's Mission, Vision, Philosophy and Values.

# **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.

The nursing unit has a long history of collaborative decision making to include determining the philosophy, organizing framework, and curriculum of the program, admission and progression of students, and other operational aspects of the program. Faculty, administrators, and students participate in governance activities and communicate with administration through various mechanisms, such as regular meetings, minutes, web pages, emails, and special task forces.

Annually, all full-time faculty members are appointed, based on their area of

interest and program needs, to committees. Part-time faculty are encouraged to participate in their respective course level committees and faculty committees. *See Virtual Evidence Room:* SPC: CON: Associate's Degree in Nursing Program Committee Structure and Bylaws/Operating Procedures for a list of committees, as well as the committee purpose, and functions.

The administrative team includes the dean, assistant dean, and the academic chairs. The dean and assistant dean function as ex-officio, non-voting members of all committees. As a matter of practice, the dean and assistant dean attend all meetings.

A record of committee member attendance is maintained in committee meeting minutes. *See Virtual Evidence Room*: Committee Meeting Minutes. In addition, *See* Appendix 1.2; Table 1.2: ADN Faculty Committee Assignments: Academic Year 2019-2020.

Additionally, faculty are involved in college-wide governance activities and serve on college-wide committees. *See* Table 1.2.1: Faculty Representation on SPC College-Wide Committees.

Table 1.2.1: Faculty Representation on SPC College-wide Committees	
Name	Committee
Heather Chastain	C&I Committee
Charles Rewald	HEC Safety Committee
Anne Morris	HEC Safety Committee, SSI Committee
Jennifer Mistretta	Student Grievance Committee
Ruth Velasquez	C&I Committee, SSI Committee, FGO,
	Scholarship

Marguarite Pels	Scholarship
Felicia Pryby	Scholarship
Jacob Schwalb	Scholarship
Carolyn Kerns	Scholarship

The Faculty Governance Organization (FGO) provides a vehicle through which faculty members have input into administrative decisions of the college. Elected faculty from each campus serve as senate members who relay issues and concerns of their colleagues to the FGO and relate FGO matters back to their colleagues. FGO representatives are elected from each department; the number of representatives is determined by an apportionment process and is based on the number of faculty members in each discipline. The CON has two (2) appointed representatives, one (1) of which is from the ADN program. The FGO is a valuable forum for faculty to ensure input related to academic decision-making and selfgovernance.

The FGO has a multi-site, hierarchal structure, which allows opportunities for ample input, critical discussion, and formulation of recommendations. Recognition by the college administration and FGO that cooperation and collaboration are key elements in facilitating quality development and progress within the college continually supports this mutual commitment. The President of FGO sits on the President's Cabinet, provides input into policy and budgetary discussions, and has a seat on the platform at all graduation ceremonies. Some of the most recent notable accomplishments include continuing to build and strengthen relationships with the academic deans, revising the Academic Integrity Policy, and creating the Academic Integrity Council, and raising \$3000 for student's scholarships.

The dean is a member of the Deans' Council, the Executive Leadership Council, and the Dean's and Provost Council. The dean and assistant dean communicate initiatives of higher administration to faculty.

Students are invited to participate as non-voting members of all ADN program committees with the exception of Scholarship and Faculty Life. The level of participation varies from year to year. Most students that participate do so at the level meetings. The level of participation varies from year to year. In 2016-2017, four students participated, in 2017-2018, 28 participated and in 2018-2019, eight participated. *See Virtual Evidence Room*: Level and committee minutes showing student participation

Nursing students are also active in the Student Nurses Association (SNA), Student Government Affairs (SGA). Some are also active members of the Florida Student Nurses Association (FSNA) and attend the annual FSNA Convention with a faculty member. *See Virtual Evidence Room: SPC SNA Bylaws* Current SNA officers visit classrooms to increase participation. *See Table 1.2.2: Student Membership in SNA.* 

Table 1.2.2: Stud	dent Representation
Student Nurses Association (SNA)	2018-2019 - 95 members 2017-2018 - 98 members 2017-2016 - 82 members
SNA Activities 2018-19	<ul> <li>SNA executive board visits each classroom to speak about the SNA organization and the benefits of joining.</li> <li>Making Strides-Breast walk at the Vinoy-students "walk" and volunteer to sign in participants.</li> <li>Feed the Hungry- sponsor a food drive &amp; donate the food to CASA and other local food pantries.</li> <li>Women's Heart Health Monthsponsor "wear a red tee-shirt" on campus to promote awareness. Our SNA info board displays information for breast cancer screening.</li> <li>Be The Match Campaign-we have guest speakers to promote the importance and to "sign" up.</li> <li>Make A Badge Holder-this was a college wide event for students to make ID badge holders, promoting campus congeniality.</li> <li>Sponsors the CON Pinning Ceremony.</li> <li>Attend the NSNA Annual Convention.</li> <li>HEC SGA representative. Fall 2018-our SNA Pres was also the Pres of SGA and our current SNA Pres will be the Pres of SGA for Fall 2019.</li> </ul>
Student Government Association (SGA) Activities 2018-19	<ul> <li>2018-2019: 4 ADN student</li> <li>representatives – All were on the Board.</li> <li>Activities include: <ul> <li>Two SGA budget presentations in the fall and in the spring</li> <li>Pizza with the President</li> <li>Hispanic Heritage Month</li> </ul> </li> </ul>

#### Table 1.2.2: Student Representation

- Mental Health Break the Stigma Events
- SPC Spirit Week events (4 in total at HEC)
- Health Sciences Community
   Week events
- Constitution Day
- Black History Month event
- Welcome events

Nursing administrators actively represent the nursing unit at meetings with the Health Education Center. Nursing administrators attend the Health Education Center leadership meetings and college level meetings as scheduled.

# 1.3 The assessment of end-of-program student learning outcomes and program outcomes are shared with communities of interest, and the communities of interest have input into program processes and decision-making.

The assessment of End of Program Student Learning Outcome's (EOPSLP's) is shared with our communities of interest. Those communities of interest have input through membership on the CON Advisory Committee. This committee consists of representatives of the program's clinical partners, CON alumni, other area nursing programs or organizations, and representatives from SPC and the CON. In 2015, as faculty began their journey towards incorporating the QSEN standards into the curriculum, the CON sent out a survey to clinical partners to study how they felt our graduates were performing in the QSEN standards. *See: ADN Student Competency Needs Assessment for QSEN,* https://web.spcollege.edu/survey/18137. In addition, in 2017, faculty felt our curriculum was lacking in preparing our students in all of the

communication skills required of professional nurses so we surveyed faculty and community partners to see how they felt. *See:* Communication Competency of SPC ADN (aka ADN) Graduates Faculty, <u>https://web.spcollege.edu/survey/25083</u> and SPC Student Communication Competency for Clinical Partners,

<u>https://web.spcollege.edu/survey/25087</u>. These surveys helped us determine what our clinical partners expect from our graduates in order to incorporate the appropriate competencies into our program.

The SPC CON Advisory Committee is a group of employers, students, and employees. They advise committee officers on the design, development, implementation, evaluation, maintenance, and revision of the nursing program within the career pathway. For more information on SPC career clusters and career pathways, go to <u>https://www.spcollege.edu/future-students/degrees-training</u>. Committee membership includes representatives of the program's clinical partners, hospital nursing educators and leaders, college of nursing alumni, representatives from area nursing programs, and representatives from SPC and the SPC CON. This committee meets at minimum twice per year. Their focus is helping develop and maintain the program to ensure student success in the workplace. *See Virtual Evidence Room*: SPC CON Advisory Committee Member List and visit the following link for minutes: <u>https://www.spcollege.edu/friendspartners/work-with-spc/advisory-committees/list-of-committees/college-of-nursingadvisory-committee</u>.

In addition to fulfilling many of the state requirements, the advisory committee helps:

1. promote communication among education, students, business, and industry;

- 2. identify new and emerging fields and modify existing programs;
- strengthen programs by providing student competency lists and reviewing curriculum;
- 4. ensure that each career pathway academic ladder matches the corresponding industry career ladder;
- review student outcomes (completion rates, placement rates, and state licensing examination outcomes);
- 6. ensure that programs are relevant and up-to-date;
- assess the equipment and facilities available and make recommendations as needed;
- 8. provide work-based learning experiences for learners;
- 9. provide training opportunities for educators;
- 10. advocate programs to communities and legislators;
- 11. assist with placement of program completers;
- 12. promote career pathways and inform communities about them;
- 13. seek legislative support for career pathways; and
- 14. leverage community resources (equipment, facilities, materials, and broker community partnerships).

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

The ADN program has numerous partnerships that promote excellence in nursing education and provide resources that lead to increased enrollment. These

include Baycare Health Systems partnership such as the Dr. George Morris *Earn as You Learn* program and the Baycare Grant program, Gulf Coast North Area Health Education Center, and Career Source Pinellas.

The Dr. George Morris *Earn as You Learn* program (sponsored by Morton Plant Mease Health Care), admits 12 employees or employee family members per semester who meet the requirements of the nursing program. The Baycare Grant Program meets at the Baycare System Office (BSO) and admits 24 employees or employee family members per semester who meet the requirements of the nursing program. These students receive a weekly stipend, tuition, and books, are required to work two shifts per pay period, and are hired by BayCare following graduation. The partnership also provides four full-time hospital contributed faculty and one full-time skills lab facilitator. In addition, the BayCare grant partnership provides classroom space for their students at BayCare Health System Office, located at 2985 Drew Street, Clearwater, FL 33759.

Gulf Coast North Area Health Education Center supports the CON tobacco program. This helps level three nursing students gain new skills and resources to aid in their ability to help patients with tobacco cessation.

Career Source Pinellas enrolls eligible graduates with \$400.00 in prepaid credit cards to help pay for their Florida licensure and NCLEX testing fees.

## 1.5: The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing and is doctorally prepared.

Dr. Louisana Louis began working at St. Petersburg College in 2006 as an Associate Degree Nursing instructor. In 2012 she began teaching in the Bachelor of Science in Nursing program. She became the BSN Academic Chair in 2015. Following Dr. Susan Baker's resignation in the summer of 2018, Dr. Louis became the Acting Dean. She was confirmed as the permanent dean of the CON in 2018.

Dr. Louis graduated from the University of South Florida with a Bachelors' degree in Nursing and earned her Master's degree at the University of Phoenix. She received her Doctor of Nursing Practice from Chatham University in 2011.

The organizational structure of SPC indicates the CON dean reports to the Vice President of Academic Affairs, who reports to the President of the college. The assistant dean and academic chairs report to the dean of the CON. *See Virtual Evidence Room:* Organizational Structure of SPC. The dean has overall authority for administration of the CON.

The dean and assistant dean are together responsible for the administration of the ADN program, and share evaluation of the faculty.

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

Dr. Louisana Louis has authority and administrative responsibility, to include program development, for both programs (ADN and BSN) within the CON. *See Virtual Evidence Room:* CV and list of responsibilities of dean. Dr. Louis has three years of academic administrative experience. Dr. Louis was oriented to her role by Dr. Baker and the Vice President (VP) of Academic Affairs, Dr. Anne Cooper before their departure from SPC. Additionally, she continues to be mentored by the VP and the AACN deans mentoring program under the tutelage of Dr. Carole Kenner. Dr. Louis meets with Dr. Kenner weekly and/or monthly to address issues and concerns.

Dr. Louis attends level and faculty meetings where she provides program updates and keeps faculty informed. Dr. Louis also meets individually with faculty and other program administrators. She serves as a liaison between the higher administration, the CON, and the community. Dr. Louis has an open-door policy. As the new dean, she encouraged meetings with each ADN faculty member, not only to get to know them better, but to discuss their input on the ADN program. Dr. Louis also demonstrates her authority as dean when faced with various student appeals. She investigates each situation in-depth prior to making final decisions.

An academically and experientially qualified assistant dean who is dedicated to full-time management of the ADN program supports Dr. Louis. Dr. Clare Owen assists with the budget, purchasing, scheduling, curriculum oversight, conferencing with faculty and students, planning of hospital rotations, managing the countywide master rotation planning process, and overseeing the systematic plan. *See Virtual Evidence Room:* CV and list of responsibilities of Assistant Dean.

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

Four academic chairs provide administrative support to the nursing program. Academic chairs are full-time faculty who supervise and evaluate adjunct faculty at the

campus level. The academic chairs are academically and experientially qualified. See

*Virtual Evidence Room:* CV and list of responsibilities of Academic Chairs.

See Table 1.7: Nursing Program Administrators below for name, job description, phone and e-mail.

Table 1.7: Nursing Program Administrators			
Name	Job Description	Phone	E-Mail
Louisana Louis, DNP, RN	Dean	(727) 341-3472	louis.louisana@spcollege.edu
Clare Owen, PhD, RN	Assistant Dean	(727) 497-5023	<u>owen.clare@spcollege.edu</u>
Virginia Schneider, DNP,	Academic Chair: Level IV,	(727) 341-3636	schneider.virginia@spcollege.edu
ARNP	Nursing Care		
	Management		
Amanda Daniels, DNP,	Academic Chair: Level III,	(727) 341-3716	daniels.amanda@spcollege.edu
RN	Pharmacology & Psych	<b>、</b>	
Jacqueline Hawkins-	Academic Chair: Level II,	(727) 341-365	hawkinsjohnson.jacki@spcollege.edu
Johnson MSN, MHA, RN	LPN Transitional		
Anna Neuzil, MS, ARNP	Academic Chair: Level I,	(727) 341-3635	neuzil.anna@spcollege.edu
	Nursing Process		

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

The nurse administrator oversees the faculty and staff in the development,

implementation and evaluation of the ADN program. The nurse administrator is

ultimately responsible for the program. The administrator regularly attends Florida

Association of Colleges of Nursing, Florida Council of Nursing Education Administrators,

and Florida Deans and Directors of Schools of Nursing meetings. These

associations/councils are composed of members from community colleges and universities, both public and private. The dean has no teaching responsibilities; therefore, she has sufficient time and resources to fulfill her roles and responsibilities.

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

The Dean and the Assistant Dean prepare and administer the general Operating Budget and Laboratory Fees Budget. Faculty have budgetary input regarding resources and requests for items to be added to the CON's "wish list". Faculty can make resource requests at faculty meetings, email requests to the administration office and during course level meetings. The dean also holds a budget meeting with the administrative team to discuss the items for inclusion in the next year's budget. After the budget is prepared the dean submits the budget electronically to the finance department. The president and the finance department approve the budget and it is then sent to the Board of Trustees for final approval.

# 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 purpose and outcomes of the nursing program.

All policies of governing institution are located in the SPC Faculty Manual <a href="https://spcollegeedu.sharepoint.com/sites/ocs/admin/ABS/HRDept/HREmployment/Site">https://spcollegeedu.sharepoint.com/sites/ocs/admin/ABS/HRDept/HREmployment/Site</a><br/>
Pages/Faculty.aspx and in the SPC Board of Trustees (BOT) Rules relating to Human<br/>
Resources found at <a href="https://web.spcollege.edu/botrules/#">https://web.spcollege.edu/botrules/#</a>. See Table 1.10.1: Summary<br/>
of Similarities in Policies between Nursing program and governing organization.

Table 1.10.1: Summary of Similarities in Policies between		
Nursing Program and Governing Organization		
Governing Organization	Nursing Program	
Hiring	Hiring	
Salary: ECH 1.0 for didactic/theory	Salary: ECH 1.0 for didactic/theory	
courses	courses	
Benefits	Benefits	
Annual and continuing contracts	Annual and continuing contracts	
Evaluation	Evaluation	
Termination	Termination	

Policy differences affecting faculty are related to contractual agreements with affiliation agencies or Florida State Board of Nursing requirements. See Table 1.10.2: Summary of Differences in Policies between Nursing Program and Governing Organization.

Table 1.10.2: Summary of Differences in Policies between	
Nursing program and governing organization	
Governing Organization	Nursing Program
No requirement for licensure.	All faculty are required to be licensed as
	an RN in state of Florida
No requirement for CPR	All faculty are required to be American
	Heart Association BLS Healthcare
	Provider certified.

ECH for science courses with lab	ECH for Health Sciences clinical lab
component: 0.625	component: 0.75
No requirement for health status or	All faculty must have a physical every two
immunization requirements.	years and be "fit for duty." They must be
	up to date on all immunizations and
	screenings as required by the healthcare
	facilities in which they are assigned.

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

The ADN program does not offer distance education.

#### STANDARD 2: FACULTY AND STAFF

The College of Nursing employs qualified and credentialed full and part-time

faculty who are sufficient to meet the End of Program Student Learning Outcomes

(EOPSLOs) and Program Outcomes (POs).

# 2.1: Full-time nursing faculty hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency, and are qualified to teach the assigned nursing courses.

All full-time nursing faculty hold master's degrees in nursing which complies with the SACS-COC, and the FBON requirements for full-time nursing faculty. The CON has 38 full-time faculty (including four-hospital partnership contributed faculty). Thirteen faculty have earned doctorates. Twenty-five have master's degrees in nursing. The majority of faculty members are prepared at the advanced level in adult health (medical-surgical) nursing. Other clinical areas of graduate specialization include maternal-child, pediatric, psychiatric, administration and gerontological nursing. Many of our full- and part-time faculty are Advanced Registered Nurse Practitioners (ARNPs). See Virtual Evidence Room for Faculty Data Forms and See Appendix Table 2.1.1: Full-Time Faculty Profile.

All full-time nursing faculty maintain their clinical practice competence and increase their teaching and clinical expertise in various ways. Faculty members engage in clinical practice, regularly attend continuing education offerings, workshops and seminars, and read professional journals. The college contributes to faculty development through an annual Professional Development Day and through various offerings by the Center of Excellence for Teaching and Learning (CETL). Faculty funding has been available for attendance at continuing education activities or for professional dues. The CON also provides a continuing education workshop through the annual Nancy Hartley/Almeida Martin Endowed Chairs. All nursing faculty comply with the Florida Board of Nursing mandatory continuing education requirements for license renewal. Based on evidence of faculty clinical competence, the CON administrators certify to clinical agencies that faculty are competent in skills they are responsible for teaching within those agencies. A summary of each faculty member's current credentials and continuing education is available on-site (See Virtual Evidence Room).

2.2: Part-time nursing faculty hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency, and are qualified to teach the assigned nursing courses.

All part-time faculty hold master's degrees in nursing which complies with the

SACS-COC and the FBON requirements. The CON has 27 part-time faculty. One has

a Doctorate of Nursing Practice and 26 hold master's degrees in nursing. Appendix

Table 2.2: Part-Time Faculty Profile.

2.3: Non-nurse faculty teaching nursing courses hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency, and are qualified to teach the assigned nursing courses.

The College of Nursing does not utilize non-nurse faculty.

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

One hundred percent of preceptors are licensed RNs. Preceptors are selected

based on facility leadership recommendations. Preceptors are oriented, mentored, and

monitored by Nursing Care Management (NCM) faculty. All preceptor roles and

responsibilities are documented in the Nursing Care Management syllabus (See Virtual

Evidence Room). Certificates of appreciation are presented to preceptors by nursing

faculty. The nursing program is currently investigating other forms of preceptor

recognition. See Table 2.4 for preceptor evaluations

# Table 2.4: Nursing Care Management (NCM) PreceptorEvaluation 2018-2019

	Fall 2018 & Spring 2019
1. Number of years as a RN?	
A. 0-4 years	16
B. 5-9 years	3
C. 10+ years	5
2. Number of years employed by this Agency?	
A. 0-4 years	16
B. 5-9 years	4
C. 10+ years	4
3. Have you been a Preceptor for SPC before?	
A. Yes	16
B. No	8
4. Are you willing to be a Preceptor for SPC	
_again?	
A. Yes	23
B. No	1
5. Have your ever taken a course on how to be a Preceptor?	
A. Yes	16
B. No	8
6. Was the Clinical Instructor available to meet your communication needs?	
A. In person	24
B. Via Beeper	
C. Via Phone	24
D. No	
7. If a problem arose, was it handled in a professional manner?	
A. Yes	14
B. No	1
C. Not Applicable	9
F17 N=11 Sp18 N=13	-

F17 N=11 Sp18 N=13

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

Full-time faculty are sufficient in number to ensure the achievement of the End of

Program Student Learning and Program Outcomes. All full-time faculty members teach

nursing theory at all levels within the program in order to maintain curriculum integrity

and seamlessly implement changes recommended by the Curriculum Committee.

Faculty assignments are based upon faculty expertise, needs of the students, and meeting the minimum equated credit hours (ECH) for full-time faculty to meet their contract. This strategy enhances and supports course and clinical objectives across diverse populations of clients; it also ensures faculty experience, certifications, and specialties best support and achieve course outcomes. Assignments are made to allow for the utilization of full- and part-time faculty to be consistent with the mission/philosophy of the CON and to allow for excellence within the nursing unit. In clinical settings, the ratio of 1:12 instructor to student is maintained. Theory lecture sections have a ratio of 1:24 or 2:36. Often, theory lecture sections are team-taught allowing for the ratio of 2:36 instructor to student. Occasionally, a theory lecture section will be team taught resulting in a 2 or 3:48 ratio. This results from faculty preference and number of full-time faculty available to teach theory. Review of semester course schedules indicates that the number and type of faculty are adequate to carry out the purposes and objectives of the program (See Fall schedule in virtual evidence room).

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

Faculty (both full- and part-time) all hold a current RN licensure. Faculty maintain expertise in their area of responsibility; their performance reflects scholarship, evidencebased teaching, and clinical practice. Faculty maintain their clinical expertise through required Florida Board of Nursing continuing education credits. If faculty are Advanced Practice Nurses, they maintain required continuing education credits and clinical practice experience to maintain their licensure. Faculty who are nationally certified nurses within their specialty; obtain required continuing credits by attending conferences, attending continuing education classes and by working with a specific specialty to maintain recertification.

In 2014, SPC implemented Faculty 180 (SPC's digital portfolio tool) as the submission platform for full-time faculty annual evaluations. In 2015, the digital portfolio tool was also utilized for adjunct faculty. The digital portfolio platform incorporates SPC instructional evaluation criteria and course data reflection, providing an electronic archive of activities and supporting documentation to be utilized from year to year.

Faculty performance is evaluated annually through Faculty 180 by the following categories: instructional strategies, such as currency and scope of academic knowledge, student engagement, course management and student support. The faculty also review their contributions to scholarly work, the CON/SPC mission and values, and professional development and growth plan. Students evaluate faculty performance every semester through the Student Survey of Instruction that also compares individual faculty performance to HEC faculty and all SPC faculty. Their preferences are taken into consideration when assigning faculty to courses. See *Table 2.9* for composite scores of faculty engagement, preparation and organization and course instruction.

SPC's CETL provides a supportive environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes. CETL organize and sponsored a faculty development

webinar series, student engagement webinar, adjunct faculty learning events, and Turnit-in Feedback Webinar. CETL also provides an opportunity for faculty development through the Magna Online Seminars. Monday Morning Mentor series to discuss various activities and evidence-based practice that faculty are using in their classrooms and clinical practice. Additionally, CETL also has a mentoring program for new faculty (See Virtual Evidence Room).

Faculty provide out-of-class support to students for student success using Q&A sessions, one-on-one tutoring, case study sessions, educational games, and nursing care planning activities.

## 2.7: The number and qualifications of staff within the nursing education unit are sufficient to support the nursing program.

One Senior Administrative Services Specialist provides advanced administrative services and support to the Dean. She also supports the ADN program in keeping the Nursing Advisory Committee roster and minutes. The Assistant Dean is supported by one full-time Administrative Services Specialist who works extensively with Pinellas County Master Rotation and lower division student registration. A third Administrative Services Specialist is responsible for the purchasing, budgets, and payroll and oversees the operation of the office. The entire nursing office team, administrators, and staff work closely together to meet the needs of the CON.

All practice laboratory personnel (5 Resource Lab Facilitators and 1 Coordinator) have a minimum of a BSN. The Lab Operations Coordinator holds a master's degree in nursing as does one lab facilitator. The job descriptions of the lab facilitators include supporting the faculty by arranging supplies at bedside, computer testing, support for simulation, and student support. All practice laboratory personnel periodically assist faculty in the clinical setting. They work with weak students reinforcing clinical skills or serving as substitute clinical instructors. Lab facilitators may observe students completing skills check-offs after a skill has been presented and taught by faculty. Feedback is provided to faculty as to whether or not the student completed the elements of the skill check-off; thus allowing the faculty to issue the student a grade for the check-off.

The Simulation Coordinator holds a master's degree in nursing and nurse education. The Simulation Center for Excellence in Nursing Education (SCENE) is a unique simulation lab that provides a supportive environment in a realistic clinical setting for students to learn and master nursing skills. The SCENE provides students with a safe, non-threatening teaching/learning environment that fosters the development of clinical reasoning necessary for the professional nurse *(See Appendix Table 2.7: Lab Personnel Profile).* 

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

SPC conducts an extensive orientation program for all newly hired full-time faculty. The newly hired faculty member participates in an all-day orientation in June along with their assigned mentor. There are also additional days in August dedicated to

the orientation process for the new hire. Part-time hires receive a full-day college orientation as well. The CETL orientation program includes such topics as:

- Basic faculty procedures
- History of the college
- Content of the college website
- College resources
- Pedagogy
- Disabilities
- Assessment of student learning

They also participate in an online CON orientation, Excellence in Adjunct Instruction online program, LMS training - *Pathways to e-Learning*, and an online sexual harassment and biohazard training (available on-site). Additional information covered in the orientation includes:

- Orientation to physical facilities
- Role of Lead Instructor
- Organization of syllabus
- Course delivery and course evaluation
- FERPA
- Clinical
- Documentation of student problems

Mentors assist new faculty members with building a sense of community and new relationships within their discipline and across campuses. The mentors help new faculty

members acclimate to the culture and environments of the College by exposing them to key College personnel, resources, processes, policies, and procedures.

Mentors help new faculty members find appropriate professional development opportunities and assist with transferring this knowledge and best practices into their courses. These opportunities are frequent and may range from learning new software and online programs, to learning instructional theory and strategies that can be used with students in a learning-centered college. All full-time faculty receive \$500.00 to be used for professional development annually.

## 2.9: Faculty (full- and part-time) performance is regularly evaluated in accordance with the governing organization's policy/procedures, and demonstrates effectiveness in the assigned area(s) of responsibility.

Faculty (full- and part-time) performance is regularly evaluated in accordance with the governing organization's policy/procedures and demonstrates effectiveness in assigned area(s) of responsibility. Annual evaluation of all College employees in budgeted positions is required. Evaluation of personnel provides recognition of strengths, areas for improvement, and suggested strategies for improvement. Annual evaluations are maintained as part of each employee's personnel file. Every spring semester, each faculty member compiles an annual self-evaluation using the SPC Faculty 180 Evaluation and Professional Development Plan (available online). An evaluation conference is scheduled by the academic chairs for the part-time faculty and by the dean for the full-time faculty. The supervisor uses these data during the evaluation process to develop mutual goals and a professional development plan for each faculty member. Only part-time faculty who demonstrate sufficient expertise are re-hired into available positions. Full-time faculty complete annual or continuing contracts for the next calendar year based on their annual evaluation. One hundred percent of the contributory faculty are evaluated annually by their employer for performance and effectiveness with input from the academic chair and dean. As a measure of effectiveness, faculty must score a mean of six or above on the following composite items on the Student Surveys of Instruction for fall, spring, and summer semesters: See table 2.9 for Faculty Engagement, Preparation and Organization, and Course Instruction means.

Table 2.9:	Nursin	ig Com	posite S	Scores	for Stu	dent Sur	vey of	Instru	ction
	Fall 2016	Spring 2017	Summer 2017	Fall 2017	Spring 2018	Summer 2018	Fall 2018	Spring 2019	Summer 2019
Faculty Engagement									
SPC Mean	6.39	6.41	6.50	6.42	6.45	6.51	6.44	6.47	6.54
Nursing Mean	6.30	6.28	629	6.47	6.50	6.18	6.48	6.35	6.24

Preparation &									
Organization									
SPC Mean	6.48	6.49	6.57	6.51	6.53	6.58	6.52	6.55	6.60
Nursing Mean	6.36	6.40	6.44	6.51	6.55	6.26	6.52	6.40	6.32
Course Instruction									
SPC Mean	6.40	6.42	6.50	6.44	6.48	6.52	6.46	6.49	6.54

Nursing Mean	6.30	6.35	6.36	6.47	6.53	6.23	6.51	6.39	6.34
--------------	------	------	------	------	------	------	------	------	------

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

Online Learning and Services acts as a facilitator for technology in the instructional process. Instructional technologists serve all campuses and sites and offer frequent classes in MyCourses and other instructional support software. An extensive reference system has been developed to assist faculty with information on MyCourses; it can be accessed from the Online Learning and Services website. Requests for individual consultations with a member of the instructional technology team can also be made from the website.

The College of Nursing does not engage in distance education.

### **STANDARD 3: STUDENTS**

The CON's student policies and services support is congruent with the institution and supports the achievements of EOPSLOs and POs

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

Student policies are located both online in the college Catalog

(https://go.spcollege.edu/catalog/) and in the Nursing Student Handbook located on

Student Commons in the Learning Management System (LMS). Policies for nursing

students are reviewed and updated annually. Additionally, students are provided with copies of the *Student Planner and Handbook* upon entry into the program. The Planner/Handbook is intended to enhance the student's college experience and provide the student with a wealth of information and helpful links. Annually, students are required to sign and upload a statement to *Castlebranch* (the program and clinical requirements portfolio manager) a statement indicating they have received, reviewed, and will abide by the policies outlined in the *ADN Degree Nursing Student Handbook*. In addition, instructors review policies with students during orientation to the program and to each course.

Many policies for nursing students are consistent with the governing organization. The policies are freedom to learn, classroom responsibilities, religious observance, student and student organization regulations, student governance, student conduct prohibiting hazing, threats, violence, stalking. Use or possession of explosives, destructive devices, firearms and/or weapons is also prohibited as well as sexual harassment or sexual misconduct, misuse of college computers, class attendance, student academic appeals, discrimination, student concerns, student involvement in decision-making, and student records. SPC is dedicated to the concept of equal opportunity. Additionally, students follow general guidelines, located on the College website, which ensure compliance with State and Federal FERPA, Title IX, and Equal Opportunity/Equal Access for all students. Links are available to students for access to reporting events that do not meet the guidelines.

Policies that are not consistent with the governing organization and are distinct for nursing to ensure that students are meeting the EOPSLOs and the POs are justified. *See Table 3.1: Examples of College and ADN. Policy Differences.* 

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

The SPC website (<u>www.spcollege.edu</u>) provides general information about all educational activities including, but not limited to: college admission, tuition and fees, an academic calendar, financial aid policies, and student services. Information specific to the CON is contained in the online college catalog (*See* <u>https://go.spcollege.edu/catalog/</u>) and the *Student Handbook* available online in the ADN student commons. Health programs information is located online at

https://go.spcollege.edu/Healthdegrees/.

All materials clearly state current and accurate information about the ADN program. Additionally, the materials clearly state current accreditation status and ACEN contact information.

To ensure that information about the nursing program is accurate, clear, relevant, and consistent, publications and documents disseminated to the public are reviewed annually. The *Student Handbook* is reviewed each semester with input from faculty. The current SPC College Catalog is available online at

<u>https://go.spcollege.edu/catalogarchives/</u> and contains the most current up-to-date information. Any revisions to the catalog are made at the time they are approved.

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

Policies and program information are located in the *Student Handbook* and in course syllabi, if applicable. All changes requiring student notification are emailed to the student. Students are required to sign an addendum ensuring they have been informed of the policy at the beginning of each semester. Changes in policies or procedures may occur in between annual updates to the student handbook; however, any change is communicated through the Student Commons within the LMS platform, by hard copy correspondence, the college website, and/or student e-mail. Changes are communicated in a consistent and timely manner. For example, when faculty approved a dress code change, letters were mailed to all students (August 2013), and announcements were made on the Student Commons. At times, there may be changes to a clinical site after the student registration period. When this occurs, students involved are personally contacted via telephone. SPC has instituted an e-mail address for all students known as live.spcollege.edu. It is used, along with the student's LMS email, for official communication.

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

SPC student services follows FERPA guidelines. All students in the nursing program have access to support services offered. The college directory is available on the SPC website. The directory contains the names, positions, academic credentials, and contact information for all faculty members; this same information is also available for the administrative and professional staff. The credentials and contact information of staff members who provide support services for students is also listed. All student services personnel meet the criteria for employment as established by the Southern Association of Colleges and Schools. Their hours are Monday through Thursday 8:30 a.m. to 7 p.m. and Friday 8:30 a.m. - 12 noon *See Appendix: Table 3.4:* CON Student Services. Institutional Research monitors student usage and satisfaction of student services and effectiveness with results relayed through the Enrolled Student Survey Report. *See Virtual Evidence Room: Enrolled Student Survey Report.* Analysis of the data from the Office of Institutional Research reveals student satisfaction ( $\geq$  3.5) on a 0-4 scale with student support services. Analysis of the data from the Office of Institutional Research reveals strong usage of student support services college-wide (*See Virtual Evidence Room: HEC Annual Survey & Comments 2018-2019*).

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

The educational records of St. Petersburg College are under the general direction and control of the Florida Department of State, Division of Library and Information Services, Bureau of Archives and Records Management. St. Petersburg College is also governed by the Family Educational Rights and Privacy Act of 1974 (FERPA), as amended, which sets forth the requirements regarding the privacy of student records and access to records.

St. Petersburg College's Educational records are located in Central Records located at the District Office under the direction of the College Registrar. The College

Board of Trustees addresses the issue of maintenance of student records in P6Hx23-

5.919 Rule 6Hx23-4.

Within the CON, records for current students are kept in a locked room for a minimum of five years following graduation. These records contain student clinical course evaluations, counseling notes, and correspondence. Some of these documents are kept electronically in the course to which they pertain, so not all student folders will contain each document.

## 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.

Financial Aid records are maintained in the Financial Aid Office under the direction of the Director of Financial Aid. The Director is responsible for complying with all policies governing the maintenance of these records. A review of the SPC Compliance Certification indicates 100% compliance with all federal guidelines for record keeping by SPC, the Financial Aid Office, and Student Records. *See* <u>www.spcollege.edu/sacs/compliance/index.htm</u>. Student loan default is monitored, and the latest data available indicated SPC's FY 2016 default rate is 3% and is well within the threshold of below 15%.

St. Petersburg College is in full compliance with the federal requirement regarding its program responsibilities under the Title IV of 1998 Higher Education Amendments. The College received the Program Participation Agreement from the US Department of Education which enables the College to receive and award Title IV Financial Aid program funds. Title IV Financial Aid Programs consists of the Federal Pell Grant, Federal Supplemental Educational Opportunity Grant (FSEOG), Federal Work-Study Program (FWS), Federal Parent Loan for Undergraduate Students (PLUS), Federal Subsidized Stafford Loan, and the Federal Unsubsidized Stafford Loan. The Eligibility and Certification Approval Report confirms SPC's ability to award Title IV financial aid to students enrolled in all associate degree programs, selected bachelor degree programs and college credit certificate programs. The College's Program Participation Agreement and Eligibility and Certification Approval are maintained and information can be found at: http://www.spcollege.edu/sacs/compliance/4\_7\_Title\_IV.htm and

http://www.spcollege.edu/sacs/compliance/3\_10\_3\_Financial\_Aid.htm.

SPC remains committed to upholding high standards in the administration of student financial aid services. SPC's Office of Scholarships and Student Financial Assistance offers a broad range of services. *See Table 3.6.1: Federal Financial Assistance Participation in Title IV Programs 2017-2018.* 

	2017-2018	Number of Recipients
Type of Financial Assistance	Award Amount	Awarded
Federal Pell Grant	\$ 45,559,013	13,703
Federal Family Education Loan:		
Stafford (Sub/Unsubsidized) & PLUS	\$ 52,243,920	9,721
Stationa (Sub/Offsubsidized) & FEOS	φ 52,245,920	9,721
Federal SEOG	\$ 1,092,230	3,411
Endoral Work Study (EWS)	\$ 743,772	235
Federal Work Study (FWS)	φ 143,11Z	200

#### Table 3.6.1: Federal Financial Assistance Awarded 2017-2018

St. Petersburg College saw a decrease in the student loan default rates with default rates decreasing to 3% in 2016 from 16.4% in 2013. See Table 3.6.2: Annual Default Rates for SPC Student Loans.

Table 3.6.2: Annual Default Rates for SPC Student Loans				
Year	Default Rate			
2014	16.0%			
2015	11.8%			
2016	3.0%			

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

Students have a number of avenues to address concerns and suggestions, including representation on Committees or the CON advisory board. Students also have a right to follow an informal appeal process that begins with the instructor and follows the "chain of command" through the academic chairs to the dean of nursing. Once the student receives a decision by the dean, the student has a right to file a formal appeal as outlined in the "Student Grievances and Academic Appeals" board Rule R4/4 36.doc. Faculty also have a personnel grievance procedure.

All SPC students have the right to file a formal complaint or grievance and to appeal academic decisions according to established college policy and as delineated in the College Catalog online entitled "Student Grievances and Academic Appeals" and supported by BOT Rule 6Hx23-4.36. Information pertinent to this process is also located in the Nursing Student Commons (online Extenuating Circumstances form used for absences as an example) and in BOT Procedure P6Hx23-4.53 Health Related Programs-Academic/Clinical Probation, Suspension and Dismissal. The informal process begins with the student's instructor and if the student is unable to resolve the issue, then the student is directed to the Academic Chair. They are then directed to the Assistant Dean or Dean, who must resolve the decision in writing within seven days. Should the student desire to file a formal appeal, the Student Appeals Form must be filed pursuant to Section IV within seven working days of the informal decision of the Assistant Dean or Dean. The HEC Review Committee is the first step of the Formal Appeal Process. Documents related to formal complaints, grievances, or appeals are kept in the HEC Associate Provost's Office. Since 2011, four formal complaints have been received by the Equity Office related to the Nursing Program. They are as follows:

- August 2014: Employee. Formally reviewed by the Equity Office. Matter went to the EEOC.
- September 2016: Student. Formally reviewed by the Equity Office. No appeal filed.
- October 2016: Student. Formally reviewed by the Equity Office. Matter went to OCR.
- December 2017: Student. Formally reviewed by the Equity Office. Matter went to OCR.

Please keep in mind that the above only reflects complaints in the Equity Office. This list does not represent any complaints received through the College's student complaint system, through HR, or through the Academic Grievance and Appeals process. No names of students/employees are included.

Likewise, faculty has a number of avenues to address concerns and suggestions. Faculty avenues include weekly level committee meetings, monthly Faculty Life Committee meetings, and Faculty meetings. In addition, the FGO shares faculty concerns and suggestions with the college as a whole. The college has a Personnel Grievance Procedure for employment complaints to be heard and remedial action taken when determined necessary, without prejudice and/or reprisal.

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

All students must complete the SPC computer information competency prior to entry into the nursing program. Orientation to the LMS is included in the module which is found on *MY SPC* on the SPC homepage. All nursing courses utilize the LMS extensively to disseminate course information and documents such as syllabi, course forms, modules, lecture presentations, and handouts. The LMS is also used to communicate to students through course announcements, e-mail, text, and discussion forums. Many courses utilize a secure lockdown browser for computerized achievement tests. The LMS has a link to the help desk which is available 24 hours every day of the week. Additional help resources can be found in the library.

The Simulation Center for Excellence in Nursing Education (SCENE) simulation lab provides students with a realistic clinical setting to learn and master skills. Their faculty, simulation coordinator, and the Resource Lab Facilitators are specially trained in the operation of the simulators orient students. Through the use of simulated scenarios, students gain self-confidence in their ability to critically think and deliver care. One simulation coordinator is budgeted and dedicated to the

SCENE. However, all Resource Lab Facilitators support faculty and students in providing simulation.

In the clinical setting and through the CON's simulated electronic medical record (EMR) product, nursing students have an opportunity to achieve the competencies outlined in the clinical evaluation tool in the area of informatics. *See Virtual Evidence Room: Clinical Evaluation Tool.* Those competencies include applying technology and information management tools to support safe processes of care by:

- > Demonstrating use of medication reference tools.
- Using technology to collect, measure, record, retrieve, trend, and analyze data and information to enhance nursing practice and improve patient outcomes.

Faculty take responsibility for ensuring orientation is provided for students in the clinical facilities. Each facility has its own technical support help line for computer help. In addition, students are required to submit assignments using the simulated product with the goal of ensuring clinical reasoning competencies through care planning and informatics competencies.

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

The ADN Program does not offer distance education.

### **STANDARD 4: CURRICULUM**

The curriculum prepares students to achieve the POs and the EOPSLOs of the ADN program, including safe practice in contemporary healthcare environments.

## 4.1: Consistent with contemporary practice, the curriculum incorporates established professional nursing standards, guidelines, and competencies and has clearly articulated end-of-program student learning outcomes.

Our faculty, in order to ensure safe practice in contemporary practice environments, strive to provide students with the skills to lead inter-professional teams, utilize knowledge gained to support clinical decision making, and outline research evidence to support interventions. The nursing curriculum is based on the following professional standards, guidelines, and competencies: (1) the American Nurses Association (ANA) Scope and Standards of Practice and Standards of Professional Performance; (2) the Code of Ethics with Interpretive Statements; (3) the 2010 National League for Nursing (NLN) Outcomes and Competencies for Graduates of ADN Programs; and (4) the Quality and Safety Education for Nurses (QSEN).

The CON has developed end-of-program student learning outcomes to incorporate the QSEN competencies of Safety, Patient-Centered Care, Teamwork and Collaboration, Evidence-Based Practice, Quality Improvement, and Informatics and continues to develop appropriate teaching and evaluative strategies to ensure graduates are gaining the knowledge, skills, and attitudes (KSAs) of the novice professional nurse.

The Florida Board of Nursing does not regulate nursing education programs in Florida that are accredited by the Accreditation Commission for Education in Nursing (ACEN). However, the program is regulated by the Florida Department of Education (FDOE) and has a set curriculum framework for health sciences specific to Nursing RN (AS – 1351380100). That framework can be found here:

http://www.fldoe.org/academics/career-adult-edu/career-tech-edu/curriculum-

frameworks/2018-19-frameworks/health-science.stml. Some additional standards of contemporary practice are used to drive the curriculum to include the NCSBN practice analysis, research articles, textbooks dealing with the professional communication required of nurses, the 2010 NLN Educational Competencies Model's core values of the profession, and the Registered Nurses' Association of Ontario's best practice guidelines). The CON has four program outcomes that correlate with the 2010 NLN Educational Competencies Model's nursing judgment, professional identity, and spirit of inquiry. See Table 4.1: Standard/Guideline/Competency of Contemporary Practice, Legal Guideline and EOPSLO located in the Appendix.

## 4.2: The end-of-program student learning outcomes are used to organize the curriculum, guide the delivery of instruction, and direct learning activities.

The CON has four EOPSLOs that are used to organize the curriculum, guide the delivery of instruction, and direct learning activities. Each nursing course has Course Student Learning Outcomes (CSLOs) and identifies learning activities to demonstrate progress toward meeting the expected level of achievement for each EOPSLO. The CSLOs are organized in the following manner: (1) the knowledge, skills, and attitudes of holistic nursing related to the patient population of the course; (2) clinical reasoning through the nursing process; (3) the roles and responsibilities of the registered nurse related to patient population; (4) the QSEN competencies; (5) the communication

competencies required of professional nurses; (6) legal, ethical and cultural considerations; (7) skills required of professional nurses; and (8) electronic health record competencies. The CSLO show gradual increases in complexity through use of Bloom's Taxonomy. *See Table 4.2: EOPSLOS/CSLOS and Examples of Instructional Delivery and Learning Activities found in Appendix 4.2.* Student progress toward meeting the EOPSLOs is evaluated through exams, scholarly papers, skills, and clinical performance outcomes. Students who progress satisfactorily develop the requisite knowledge, skills, and attitudes to meet the CSLOs and the EOPSLOs.

Didactic content is taught mainly by use of the body systems model to include the following systems: integumentary ("Threats to Skin and Tissue Integrity"); respiratory and cardiovascular, ("Threats to Oxygenation"); nervous ("Threats to Neurosensory"); musculoskeletal ("Threats to Mobility"); gastrointestinal and genitourinary ("Threats to Elimination"); and reproductive ("Threats to Sexuality"). In addition, faculty added several of Gordon's 11 functional dimensions to include health perception and management ("Threats to Wellness and Self-Expression"); nutritional ("Threats to Nutrition"); metabolic ("Threats to Fluid Balance"); and sleep ("Threats to pain, rest, and sleep").

For example, in the third semester (level 3), students are taught motivational interviewing in level 3 nursing (course # NUR2462C). Here students have the opportunity to practice by using the learning strategy think-pair-share during the Area Health Education Session presentation about tobacco use and cessation. Students are taught the hazards of all types of tobacco use (oral, hookah, e-cigarettes, and traditional cigarettes). Students are taught by a variety of medical professionals from respiratory

therapy, pharmacy, and a clinical psychologist who is an expert in motivational interviewing. Prior to the presentation, students complete two learning modules: E-cigarettes/hookah and adolescent tobacco use (See www.aheceducation.com for the link to the 2 modules). Here the students learn about the content independently and at their own pace, they have real life situational presentations and practice newly learned motivational strategies in small groups. The students then apply this newly acquired knowledge and skills in the clinical practice/ setting. The shift in their misconceptions/attitude about tobacco use and motivational interviewing is noted in their responses to related test questions.

Throughout the program, nursing courses are labeled "C" courses as they include both theory and clinical components in one course. The CSLO/COs (stated in performance terms), and Criteria Performance Standards are derived from the Approved Course Outlines available for each "C" Course. Each "C" course's CSLO/CO are designed to focus on the assimilation of knowledge and concepts essential for the practice of nursing and facilitate application of theory to practice in the clinical setting. Each course syllabus includes the CSLO/CO (stated in performance terms), and Criteria Performance Standards. Instructional units within the syllabus delineate Key Terms, Unit Objectives, classroom and clinical Learning Activities, and a correlated Content Outline. These materials help guide students towards achievement of the CSLO/CO.

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

The curriculum is developed by the faculty and regularly reviewed to ensure integrity, rigor, and currency. Curriculum development, evaluation, and revision is a

continuous process engaged in by all nursing faculty. Documentation of curriculum discussions and decisions can be found in the minutes of course level meetings, curriculum committee meetings, and faculty meetings. Examples of decisions made by faculty include curriculum mapping, evaluative strategy mapping, test writing across the curriculum, NCLEX mapping, QSEN mapping, informatics mapping, care planning, PO's, EOPSLO's, CSLO's, ANA standards mapping, textbook adoptions, and a major revision of the Clinical Evaluation Tool (*See Virtual Evidence Room*).

The nursing program was developed with the mission/philosophy of the CON as a basis of direction. It is standardized and leveled in an organized manner across the sequence of program courses. The mission/philosophy and selected professional standards, guidelines, and competencies result in the faculty identifying end-of-program student learning outcomes that are specific and measurable, with a goal of producing safe, effective novice general nurses, capable of taking their place in the nursing community.

The progression of knowledge, skills, and attitudes throughout the curriculum is examined through kinetic demonstration of student skills in classroom labs and through simulation. The didactic aspect of student learning is fostered by a curriculum that supports the achievement of program learning outcomes and is consistent with safe and current practice in contemporary healthcare environments.

Each year, faculty attend a discipline-specific day of continuing education at which cutting-edge topics and techniques designed to refresh and refocus teaching methods are presented. This ensures faculty are utilizing best practices in instruction. It also assures that faculty have an accurate vision of the state of current education.

The curriculum is reviewed by the faculty as a living document throughout the semester. There is ongoing evaluation of student achievement and understanding of the content presented, which is taken into consideration as part of the review process. Faculty revises and realigns curriculum content to sharpen the aim toward end-of-program goals. Curriculum content is leveled and structured to move in a stepwise fashion, guiding the students in a natural progression and growth pattern to strengthen their acquisition and mastery of critical thinking skills. The Curriculum Committee meets biweekly to monthly and is a source of generating ideas to maintain the currency and rigor of the nursing program curriculum.

Faculty from each level of instruction meet each week to examine and reevaluate the curriculum and its effect upon fostering student progress. All faculty participate and are ultimately responsible for maintaining a progressive curriculum. Objectives that were presented and or tested within that week of instruction are carefully critiqued and honed for greater effectiveness, as demonstrated by completed assignments and testing that measure student understanding of presented principles of practice. Faculty closely review course content, looking at what is taught where, and student performance. The efficacy of scheduled clinical activities, simulations, and community experiences, written assignments, and oral presentations is evaluated. A portion of each meeting is dedicated to examining the most current evidence-based practice changes and reflecting upon if and how those changes should impact current instruction. Textbooks are evaluated for currency and applicability to curriculum and courses. Meeting minutes carefully track and record changes and goals for future revision as needed. Strategies

utilized to evaluate curriculum include standardized testing, course reviews, and evaluation and test item analysis.

Standardized testing currently in use is provided by Assessment Technologies Institute (ATI). Students take ATI content exams as exit examinations at each level of the curriculum. The aggregate data gathered from the ATI results is used to revise course content for currency and rigor. Individual results are used to gauge student grasp of the curriculum. Students who do not achieve at or above the ATI standard mean are required to generate custom reviews to guide focus and emphasis of study. Remediation is required to ensure curriculum mastery in those areas where scores fall below the mean. Remediation also provides another element of content rigor.

Students are encouraged to attend faculty meetings to provide their observation and input, thus assuring that self-examination is well rounded and accurately represents the developmental level and thought process of the student population. Data from student end of course evaluation that speaks to curriculum content and presentation is addressed at faculty level meetings and at the faculty of the whole meetings.

During the 2018-2019 academic instructional year, there has been and continues to be an emphasis on revising curriculum to further and more closely address the differences in student learning styles and knowledge acquisition. Active learning is key; the role of simulation as a mode of student instruction is utilized within the curriculum to evaluate mastery of how students integrate all concepts presented and translate them to performance that can be quantified and improved. The use of simulation has provided an opportunity to quickly develop standardized experiences for students that incorporate

areas of new or increased emphasis of the NCLEX blueprint, and it is yet another vehicle to ensure a proper level of rigor and currency of content.

NCLEX results indicate that St. Petersburg College graduates are well above the national mean for ADN graduates in pass rates, and are among the highest in the nation, which speaks strongly for the existence of integrity, consistency, and sufficient rigor within the curriculum of this program.

There are strong relationships and ongoing collaboration with community health agencies to assure that SPC student nurses are receiving contemporary experiences that promote clinical learning. Upon graduation, agencies are consulted regarding their experience with new nurses that are graduates of SPC. The goal is to assure that the end- result of our program is realized and SPC graduates are performing at a level consistent with agency expectations for new hires.

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

The curriculum includes 30 credits of general education courses that enhance professional nursing knowledge. Cultural, ethnic, and socially diverse concepts are included in every nursing course, and students are involved in getting experiences regionally that enhance these concepts. Nursing faculty attend campus-wide collaborative meetings to discuss student success. During these meetings, faculty from general education courses and College of Nursing discuss ways in which we can better prepare our students prior to their nursing courses. One topic of concern is the desire for faculty who teach ENC 1101, to use APA formatting rather than MLA format for writing assignments. Students in the CON must submit all of their written documents in

APA format. Also of concern is the poor math skills our students often display. Discussion with the math department regarding review of algebraic math during their statistics course has been suggested as a potential revision. Students are taught drug calculations using "dimensional analysis." An introduction to this problem-solving method in their general math course would provide exposure of this technique prior to their nursing courses. Providing a basic understanding would enable students to better navigate complex drug calculation questions, which are a constant source of anxiety and frustration among our students. These meetings allow for consistent review and communication among the general education and nursing faculty. Through these meetings, we strive to continually assess the relevance and applicability of the general education courses for our nursing students. *See: Table 4.4: General Education Courses/Course Descriptions/Relevance to Nursing.* 

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

In Nursing I, emphasis is on cultural, ethnic, and socially diverse concepts within the adult client. In Nursing I curriculum, providing cultural diversity in health care includes examining the role of federal agencies in providing new initiatives and laws. Throughout this course, discussion occurs on the components and core practices of culturally competent nursing care, along with contributions of various health traditions and cultural customs. Cultural nursing care concepts, including race and bicultural diversity, subcultures, acculturation, assimilation, ethnocentrism, stereotyping, prejudice, and discrimination are discussed. At this level there are also discussions and examination of how ethnicity, social diversity, and culture can affect loss and grief responses, sensory function, and sexuality. Understanding the different health views of the culturally diverse client can help students better communicate with culturally diverse patients and colleagues and differentiate "folk healing" from evidence-based medical care. To plan competent and appropriate nursing interventions, Nursing I students learn methods of heritage assessment to improve socialization and emphasize the importance of various cultures, ethnicities and religions.

In the LPN Transition to Professional nursing course, discussions occur on trends and transition factors in nursing and how these may impact culture on health and health-seeking behaviors and factors of the teaching-learning process. These factors also influence family health, contraception, reproduction, childbearing, labor and birth, postpartum adjustment, infant feeding methods, dietary problems, breast cancer, sleep/rest/pain, oxygenation, the muscular-skeletal system, endocrine system, neuralsensory system, and the GI system. Through this process, the LPN Transition student learns about cultural competence in regards to their own nursing practice and also through the development of care plans.

In LPN Nursing Process/Physical Assessment course, the core practices and components of culturally competent nursing care are taught, along with understanding of health traditions and heritage continuum. Cultural nursing care concepts include: race and bicultural diversity, subcultures, acculturation, assimilation, ethnocentrism, cultural shock, stereotyping, prejudice, and discrimination. Providing cultural diversity in health care includes examining the role of federal agencies in providing new initiatives and laws. To plan competent and appropriate nursing interventions, students learn methods of heritage assessment to improve socialization and emphasize the importance of

various cultures, ethnicities, and religions. There is also examination of how ethnicity, cultural differences, and social diversity can affect loss and grief responses, sensory function, and sexuality. Understanding the different health views of culturally diverse people helps students better differentiate "folk healing" from evidence-based medical care and trans-culturally communicate with diverse patients and colleagues.

In Nursing II, there is discussion of the role of race in the functioning of the body systems (cardiovascular, gastrointestinal, neurosensory, reproductive, sexual functioning, body image, and nutrition). There is also discussion of the role of culture in the perioperative patient's perception of the surgical experience. The course includes discussion of cultural and ethnic variations in pregnancy, the family's response to pregnancy, labor and birth, and cultural expectations on labor, delivery, and postpartum care. Additionally, cultural variations in maternal attachment, infant bonding, and newborn care are explored.

In Nursing III, there is discussion of ethnic and sociocultural differences among families, especially in the child-rearing family. There is focus on different family systems, and ethnic and sociocultural aspects of dealing with death and dying are explored. In addition, discussions include how ethnic and socio-cultural differences influence nursing interventions, especially regarding hospice, home health care nursing, and pain management. Teaching plans explore the role of ethnicity in the functioning of body systems (fluid and electrolyte balance, oxygenation, nutrition, GI, GU, musculoskeletal, endocrine, neural-sensory, and pain response). Students develop a culturally appropriate anticipatory guidance handout for the pediatric population based on ethnic and socially diverse concepts.

The Psychosocial Nursing Course emphasized sociocultural and ethnic elements that influence attitudes toward mental health, mental illness, and coping with loss.

The Nursing IV course emphasizes ethnic and cultural influences throughout this course. Discussions include factors impacting transcultural communication, issues arising from workforce diversity and delegation when working with a diverse work team. Cultural Assessment is applied to clinical practice and the Cultural Awareness Assessment Tool is incorporated and completed for each care plan. Students are exposed to multi-ethnic and multi-racial communities in various geographic locations of clinical sites and can access both urban and suburban environments as a benefit. As part of their holistic approach students are expected to consider ethnic and sociocultural aspects while providing nursing care to clients with multisystem failure in acute settings and while visiting clients in home or hospice care. Also in the course students learn about advance planning and advance directives and how cultural diversity often times affect their client's decisions. Socio-cultural and ethnic practices may also impact patient's wishes while planning and implementing pain management. When available, diverse patient assignments are made in clinical settings. Elements of cultural competency can be identified in many SCENE scenarios for the Human Patient Simulators. Questions on ethnic and socio-cultural differences and practices are included on course exams.

Students in the Nursing Care Management course are expected to deliver care that reflects cultural, spiritual, psychological, social, and developmental preferences to a group of clients. Discussions include factors impacting transcultural communication with emphasis placed on communication of issues arising from workforce diversity and

delegation when working with a diverse work team. Students are exposed to multiethnic and multi-racial communities in various geographic locations of clinical sites and can access both urban and suburban environments as a benefit.

In the Role Transition in Nursing course, cultural assessment is applied to clinical practice and the Cultural Awareness Assessment Tool is completed.

### 4.6: The curriculum and instructional processes reflect educational theory, interprofessional collaboration, research, and current standards of practice.

The curriculum and instructional processes reflect educational theory and best practices for content delivery. Faculty provide instruction for each type of learner and use time in the classroom for active learning to include Doceri lectures, round-abouts, gallery walks, case studies, simulation, and group projects. Students receive instruction on communicating with the interdisciplinary team, and the competency is evidenced in successful completion of clinical courses through the Clinical Evaluation Tool. Principles from brain-based learning are applied through such activities as concept mapping, flipping the classroom, simulation, and web-based learning. Faculty believe strongly in the importance of experiential learning and the need to involve the learner in the active learning process through carefully selected patient assignments, goal-oriented simulation scenarios, and reinforcement of theoretical concepts taught in didactic courses. Interdisciplinary collaboration is fostered on campus through the use of simulation scenarios involving multiple disciplines (nursing, respiratory therapy, physical therapy, and dental). In addition, faculty use students and/or faculty of other disciplines in their courses to train students in other disciplinary endeavors. In the clinical setting, students have exposure to the other interdisciplinary roles.

#### **Educational Theory**

Faculty makes decisions about instruction based on the ADN Program's mission, philosophy, and curriculum structure with learning experiences that consider a variety of learning styles. Learning activities are selected using Gordon's Functional Health Patterns and Bloom's Taxonomy of Learning Domain assisting students to move from the simple to the complex and from remembering through analyzing. Critical reasoning is fostered through the use of the nursing process, analysis of case studies, and application of content learned in the classroom to real world clinical situations. Principles from brain-based learning are applied through such activities as concept mapping, simulation, online learning, and creation of a learning environment that fosters development of patterns of learning. Faculty believe strongly in the importance of experiential learning and the need to involve the learner in the active learning process through carefully selected patient assignments and goal-oriented simulation scenarios that reinforce theoretical concepts being taught. Learning activities are designed to enhance the learning of the auditory, visual, and tactile learner. The goal of the faculty is the the integration of theory with clinical practice to produce a graduate who is able to function as a novice nurse.

In Nursing I, students are taught physical assessment and learn the norms for well young, middle, and older adults. This is a part of mastering the first step of the nursing process, which is assessment. In Nursing II, students learn the norms for well pregnant woman, fetus, and newborn. In addition, the students begin to learn pathophysiology as it relates to clients with commonly recurring health problems. The

focus is on single system diseases where the students can compare the abnormal findings to normal findings, analyze the data, and plan nursing care. Nursing III focuses on learning the norms for the infant, toddler, preschooler, school-aged child, and adolescent. The complexity of patient care increases with the study of the sick child and the family as client. It is at Nursing III that the focus of the nursing process becomes application. The student begins to independently select nursing interventions. Nursing IV focuses on multisystem failure across the lifespan in theory. Students are expected to be able to analyze client care and revise the plan of care appropriately. In the Nursing Care Management course students are expected to transition into the graduate nurse role under the guidance of a preceptor.

#### Research

Clinical updates and Evidence Based Practice is discussed at all level meetings and a process was established Spring 2011 to allow a direct channel of information to flow from the research gathered by faculty for consideration to incorporate change into the curriculum so that students are learning the most current content and techniques available. The information and articles discussed are placed in a folder on the faculty and student commons in the current LMS, Desire to Learn for easy dissemination. Methods for research in best practices include internet searches for new evidencebased research, library resources, conferences, formal education, multiple list serves and journal subscriptions. Faculty keep current on national and local trends in nursing and education by attending conferences and by integrating the knowledge into effective innovative strategies for student learning. The on-campus simulation center is used by faculty at all levels and in most courses to provide an option for enriching student

learning in an innovative way. Faculty are encouraged to develop innovative participatory learning strategies at all levels in all courses to further student knowledge in the concepts necessary to accomplish safe, ethical, and effective patient centered care in the community. Nursing courses reflect the best practices as defined by the American Nurses Association Standards of Practice and Professional Performance as described in *Nursing Scope and Standards of Practice* (3<sup>rd</sup> ed.) and incorporate the knowledge, skills and attitudes for professional practice.

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

Students are provided a variety of means to demonstrate achievement of learning objectives in all levels. Evaluation methodologies utilized by the faculty to measure student achievement include but are not limited to the following: instructor generated exams, standardized tests, written scholarly papers, student presentations (individual &/or group), clinical preps, nursing care plans, discussion boards, projects, case studies, simulation activities, and formative and summative clinical evaluations.

Evaluation methods utilized for each course are published in the LMS and course syllabus. Evaluation methods are reviewed with the students in each course on the first day of class as part of the orientation process. Successful completion of all nursing classes are as follows:

 Achievement of a grade "C" (minimum score of 79.5%) or better in each of the designated courses in the Nursing Program. The nursing faculty has adopted the following grading scale:

92 - 100 = A 85 - 91 = B 80 - 84 = C 73 - 79 = D72 - below = F

- 2. For those courses containing a clinical component, the student must achieve a satisfactory evaluation on the Summative Clinical Performance Evaluation at the end of the semester. The evaluation includes a physical assessment, medication administration, clinical prep, and holistic care plan.
- 3. Successfully demonstrate competency for all psychomotor nursing skills and attitudes specific for each nursing course as required.
- 4. Students are required to achieve a satisfactory score in theory and demonstrate clinical competence in each of the designated nursing courses (a combined course) in order to progress to the next level (See Virtual Evidence Room: Clinical Performance Evaluation tool).

To graduate, students must satisfactorily complete an end-of-program, standardized examination in theory and acquire a satisfactory end-of-program clinical evaluation.

The St. Petersburg College ADN Program faculty have carefully formulated evaluation methodologies and tools to reflect established professional and practice competencies. In the Nursing Management course, 2811C, the faculty have developed a delegation project incorporating the knowledge, skills, and attitude components of the QSEN Teamwork and Collaboration competency. Students are assigned a journaling assignment to reflect upon the meaning and performance of one of the ANA standards, to include an observation of the chosen standard in the clinical area. Evidence-based practices are incorporated into the curriculum in the didactic and clinical setting, including simulation. Students are given opportunities to utilize clinical practice guidelines in the clinical setting and in the simulation laboratory. National Patient Safety goals are provided each semester and incorporated into the clinical component of each nursing course.

Within the Roles Transition Course (NUR2813), in addition to assigned discussion boards and quizzes, students present on topics reflecting the established professional and practice competencies, including Agency for Healthcare Research and Quality, Institute of Medicine, and National Guideline Clearinghouse.

In Levels I, III, and IV, in addition to the incorporation of safety competencies, collaborative practice competencies are provided with physical therapy, occupational therapy, speech therapy, respiratory therapy, and Emergency Medical Technologists (EMT) in the clinical or simulation setting. For example, during the academic year, all levels participate in Intraprofessional Simulation Education in the HEC Auditorium. Level 1 collaborates with Dental Hygiene, Level 3 collaborates with Respiratory Therapy and Orthotics and Prosthetics, and Level 4 collaborates with Respiratory Therapy on ventilator training.

Didactic and clinical courses teach best practices (defined by the ANA Standards of Practice and Professional Performance, ANA (2017) and the knowledge, skills and attitudes (QSEN.org) required of professional nurses. Faculty contribute to current standards of practice by sharing scholarly research and evidenced-based articles in level and faculty meetings. These studies are used to incorporate change in curriculum and/or to ensure the best practice is being disseminated to students.

Student progress is evaluated through achievement testing, standardized testing, scholarly papers and established clinical performance criteria.

The St. Petersburg CON faculty have designed evaluation methodologies and tools to measure the achievement of the student learning outcomes and the end-ofprogram outcomes. Students are evaluated through achievement testing and established clinical performance criteria.

### Theory:

In the didactic portion of the combined courses, a final grade of 79.5% is required. This percentage equates to a total number of points designated within each course as outlined within the syllabus. Examinations comprise most of the theory grade in each course, with an opportunity to acquire points via quizzes in the lower levels. Student achievement of the course major learning outcomes and course objectives are measured primarily by examinations consisting of multiple-choice questions, alternative format questions, and medication calculation questions. A comprehensive final examination is administered at the end of the semester utilizing the same methodology to provide consistency in examinations and to prepare the students for the NCLEX-RN upon completion of the program.

Each examination is written and evaluated by the faculty using Blooms Taxonomy. To ensure measurement at the appropriate cognitive level of each course, faculty use two approaches. The first approach is the presentation of the material with a focus on components of the nursing process, and the second approach uses the ordering of a recurring health concept from the "simple" to the "complex" allowing for the appropriate leveling of the nursing content. Leveling of exams within each course is a

vital component for progression through the program. Within each course of the program, exams increase in complexity throughout the semester as demonstrated by the ADN Test Writing Rubric (*See Virtual Evidence Room*).

Examinations are administered at various times throughout the semester. To assist the students in successful completion of each course, a course calendar is provided. The course calendar outlines all dates for examinations, quizzes, projects, and any other assignments to be included in determining the student's grade. This allows the students to adequately prepare and seek assistance as needed to complete each assignment or examination successfully. "Question and Answer" sessions are offered in each course to the students prior to each examination and the final examination. During these optional learning sessions, all students can ask questions and review critical objectives with the faculty.

All examinations are carefully reviewed by the faculty using statistical item analysis to ensure quality and validity of each question. Students receive feedback on their performance in a timely manner. Examination scores are posted on the D2L for students to review privately. Each student can individually review his/her examinations with an instructor or with a tutor in the New Initiative Program (NIP). Students who do not achieve a passing score or whose score places them in jeopardy of falling below the 79.5% threshold receive an "Action Plan for Success" and are provided strategies for performance improvement.

At the end of selected courses within the CON ADN Program, students must complete ATI testing, with an expectation of achieving a Level II proficiency level or above. The student is awarded 1 bonus point added to the final grade for a score of

Level 2, or 2 bonus points for a score of Level 3. If the student scores a Level 1 or below, the student is counseled and required to complete remediation strategies via a Focused Review within the ATI tools to help improve performance. Regardless of the Level of achievement on the ATI examinations, all students are encouraged to use the Focused Review to remediate on any specific topics missed.

Level 1:	Assigned practice tests
Level 2:	Fundamentals and Maternal/Infant
Level 3:	Psychiatric and Pediatrics
Level 4:	Pharmacology, Medical/Surgical, and Leadership

To graduate from the program, the student must successfully complete the End of Program comprehensive examination (ATI RN Comprehensive Predictor). Students must achieve an 89% Predicted Probability of Passing the NCLEX-RN on this examination. If the student is unsuccessful, remediation is required, and the examination is repeated with a passing score of 89% on the second attempt. If the student is unsuccessful on the second attempt, a third attempt on the examination can be completed after extensive supervised remediation. The passing score on the third attempt is 89%. If the student is unsuccessful on the third attempt, he/she must meet with the Dean of the College to determine the next steps.

### CLINICAL

The second component of the student's designated nursing course is clinical competency. Clinical competency is determined and scored as, "Satisfactory" or "Unsatisfactory". The grade is based upon the criteria established within the "Clinical Evaluation Performance tool" provided in the LMS of each nursing course. The instructor's observations of the student's knowledge, skills and attitudes, medication

administration/calculations, clinical judgment, and ability to plan and implement care are provided in a written summary of the student's performance. Clinical performance is leveled across the designated nursing courses and areas to be achieved are highlighted in bold print on the Clinical Evaluation Performance Tool.

The clinical evaluation process occurs in two phases: formative and summative. The formative evaluation is ongoing and concurrent with the learning process. The dates of the formative evaluation are established at the beginning of the semester and occur during the first half of the semester. During the formative evaluation period, the instructor and the student evaluate progress according to the performance criteria cited in the Clinical Evaluation Performance tool. Students are expected and encouraged to ask questions, seek guidance, and consult with their instructor as they progress toward meeting the outlined criteria.

A summative evaluation is given at the end of the semester. The purpose of the Summative Clinical Performance Evaluation Summary is to validate each student's level of clinical competency and proficiency that must be achieved by the end of each nursing course. Critical criteria (bolded) are identified by the faculty as those competencies that are needed for safe nursing practice. Students must achieve a "Satisfactory" on the summative portion of the "Clinical Performance Evaluation Summary" in addition to a minimal score of 79.5% in the theory component of the designated nursing course to progress to the next level. During the formative and summative portions, students are evaluated on the following components: a head-to-toe physical assessment, any psychomotor skills required in the care of their clients, medication calculations and administration, charting in the simulated electronic medical record (SimChart), and a

Care Plan incorporating and prioritizing each of the 11 Functional Dimensions. The summative portion of the clinical evaluation is given at a specified time at the end of the semester. The student is allotted two opportunities to pass. Successful completion of this Clinical Performance Examination is necessary to pass the clinical course with a final grade of "Satisfactory (S)". Failure to demonstrate clinical competency will necessitate repetition of entire nursing course, theory and clinical components.

Evaluation data provide the A.D.N Program faculty with the information necessary to determine the extent to which the program meets the needs of the students, based upon success in meeting the major learning outcomes in all courses. Faculty utilize the data to evaluate teaching effectiveness and identify opportunities for improvement in a proactive manner.

# 4.8: The total number of credit/quarter hours required to complete the defined nursing program of study is congruent with the attainment of the identified end-of-program student learning outcomes and program outcomes, and is consistent with the policies of the governing organization, the state, and the governing organization's accrediting agency.

The total number of credit/semester hours required to complete the defined nursing program of study is congruent with the attainment of the identified EOPSLOs and POs and is consistent with the policies of the governing organization, the state, and the governing organization's accrediting agencies. The established program length allows achievement of EOPSLOs and POs in accordance with both state and national standards.

The nursing program consists of 72 credits (*See Table 4.8.1*). Eleven credits are required prior to admission to the first nursing course. This includes 30 general education hours and 42 core nursing hours. The remaining 42 credits are nursing

courses which are delivered over four semesters. Thirty general education credits are required to include ENC 1101: Composition I; PSY 1012: General Psychology; MAT 1033: Intermediate Algebra; PHI 1600: Studies in Applied Ethics; CGS 1070: Basic Computer and Information Literacy; BSC 2085: Human Anatomy & Physiology I (with lab component); SPC 1017: Introduction to Speech Communication; REL 2300: World Religions; BSC 2086: Human Anatomy & Physiology II (with lab component); STA 2023: Elementary Statistics; and MCB 2010: Microbiology (with lab component).

The core nursing curriculum follows a logical sequential order that proceeds from simple to complex. The curriculum is composed of four combined courses (Nursing I, II, III, IV) that include clinical and theory, pharmacology, Mental Health, Roles and Nursing Care Management course. The curriculum plan has two programs: A traditional program with a morning and evening schedule, and an LPN-RN transitional program. The traditional program is organized into a two-year (four semesters) time frame. The LPN-RN transitional program is a twelve-month (three semester) time frame. The program awards each graduate an ADN degree in Nursing. Graduates meet the requirements of the Florida Board of Nursing (FBON) and are eligible to sit for the NCLEX-RN® and apply for licensure.

Seq				
#	Course	Course Title	Credit	Туре
1	ENC 1101	Composition I	3	Gen Ed
2	PSY 1012	General Psychology	3	Support
3	MAT 1033	Intermediate Algebra	3	Pre-Rec
4	PHI 1600	Studies in Applied Ethics	3	Support
5	CGS 1070	Basic Computer and Information Literacy	1	Support
6	BSC 2085	Human Anatomy & Physiology I	3	Support
7	BSC 2085L	Human Anatomy & Physiology Lab I	1	Support
8	SPC 1017	Introduction to Speech Communication	3	Gen Ed
9	REL 2300	World Religions	3	Gen Ed
10	BSC 2086	Human Anatomy & Physiology II	3	Support
11	BSC 2086L	Human Anatomy & Physiology Lab II	1	Support
12	STA 2023	Elementary Statistics	3	Support
13	MCB 2010	Microbiology	3	Support
14	MCB 2010L	Microbiology Laboratory	1	Support
15	NUR 1021C	Nursing I	9	Core
16	NUR 1211C	Nursing II	10	Core
17	NUR 1142C	Application of Pharmacology Concepts in Nursing Therapy	1	Core
18	NUR 2462C	Nursing III	9	Core
19	NUR 2511C	Psychosocial Nursing	1	Core
20	NUR 2731C	Nursing IV	8	Core
21	NUR 2813	Role Transition in Nursing	1	Core
22	NUR 2811C	Nursing Care Management Practicum	3	Core
	т.	otal Program Credits	72	

# Recommended Academic Pathway - Effective Fall 2019

#### Recommended Academic Pathway - Effective Fall 2019 Nursing (R.N.) AS (NURSE-AS) Subplan for LPN track

Seq #	Course	Course Title	Credit	Туре
1	ENC 1101	Composition I	3	Gen Ed
2	PSY 1012	General Psychology	3	Support
3	MAT 1033	Intermediate Algebra	3	PreReq
4	PHI 1600	Studies in Applied Ethics	3	Support
5	CGS 1070	Basic Computer and Information Literacy	1	Support
6	BSC 2085	Huma Anatomy & Physiology I	3	Support
7	BSC 2085 L	Human Anatomy & Physiology Lab I	1	Support
8	SPC 1017	Introduction to Speech Communication	3	Gen Ed
9	REL 2300	World Religions	3	Gen Ed
10	BSC 2086	Human Anatomy & Physiology II	3	Support
11	BSC 2086L	Human Anatomy & Physiology Lab II	1	Support
12	STA 2023	Elementary Statistics	3	Support
13	MCB 2010	Microbiology	3	Support
14	MCB 2010L	Microbiology Laboratory	1	Support
15	NUR 1001C	Transition to Professional Nursing	7	Core
16	NUR 1060C	Nursing Process/Physical Assessment	2	Core
17	NUR 2462C	Nursing III	9	Core
18	NUR 2511C	Psychosocial Nursing	1	Core
19	NUR 2731C	Nursing IV	8	Core
20	NUR 2813	Role Transition in Nursing	1	Core
21	NUR 2811C	Nursing Care Management Practicum	3	Core
22	Advanced Placement Credit	tal Program Credits	11 <b>72</b>	Transfer
	10	72		

4.9: Student clinical experiences and practice learning environments are evidence-based; reflect contemporary practice and nationally established patient health and safety goals; and support the achievement of the end-of-program student learning outcomes.

Students complete a minimum of 500 hours of supervised clinical experience in compliance with Florida state requirements. The CON looks to several governmental regulatory authorities on which to base their program: The Florida Department of Education Curricular Framework for Nursing R.N. and the FBON. The Department of Education clearly states that the Nursing R.N. program is regulated by the FBON; however, the FBON clearly states that it does not regulate any nursing program in the State of Florida that is accredited by a national accrediting body. Therefore, our regulations are solely based on the Standards and Criteria of the ACEN. However, we use the FBON statutes as a guide for what is expected of nursing schools in relation to clinical hours and simulation hours. In that regard, the CON allows 50% of our clinical hours to be simulation hours. Students receive training in the CON simulation lab, and laboratory personnel are accessible to facilitate the mastery of clinical nursing skills necessary to meet the EOPSLOs. Students gain access to simulation through facultybased experiences. Faculty schedule simulation by using an Outlook calendar which shows all days/times the simulation lab is open.

Evaluation of students' clinical experiences and practice learning environments takes place at varying points throughout the students' education. Simulation experiences are evaluated at the termination of the learning experience by the students and by the faculty. *See Virtual Evidence Room: Simulation Evaluation Forms.* Faculty have been trained in simulation best practices, including debriefing. SPC CON also has a simulation committee that meets to analyze best practice standards in simulation.

This committee is charged with disseminating information to faculty. The CON recognizes the need to enhance simulation across the curriculum.

In-hospital clinical experiences are evaluated by both students and faculty formatively (half way through) and summatively (at the end of the nursing course). This evaluation ensures that the clinical experiences and practice learning environments are supportive of the EOPSLOs. *See Virtual Evidence Room: Samples of Student Clinical Evaluation*.

In-hospital clinical experiences use daily post conference opportunities to integrate evidence best practice guidelines into student learning experiences. Students write "reflection style" notations describing clinical experiences and their learning impact upon the individual student.

Student clinical experiences take place at facilities which are accredited by The Joint Commission and adhere to the National Patient Safety Goals for 2019. Practice learning environments promote the Joint Commission's National Patient Safety Goals for 2019 by promoting proper medication administration, proper patient identification, prevention of infection, improved staff communication, and as other identified patient safety goals.

Student clinical experiences and practice learning environments support the achievement of the EOPSLOs by ensuring that all students are afforded the opportunity to master the necessary basic, entry level nursing skill sets. Students are regularly evaluated to ensure they provide safe, professional nursing care as they progress through their clinical experiences.

Student clinical experiences and practice learning environments support the achievement of the EOPSLOs by ensuring that all students are afforded the opportunity to master the necessary basic, entry level nursing skillsets. Students are regularly evaluated to ensure they provide safe, professional Nursing care as they progress through their clinical experiences

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

Affiliation agreements originate from the administrative office and are reviewed by the General Council office for approval. The general council office communicates with the VP of Academic Affairs, Dean, Agency/Hospital contact to obtain signatures for approval. Once the affiliation agreement if finalized by both parties, the written document is kept, updated and maintained through the administration office. Agencies used for learning experiences hold accreditation from appropriate certifying bodies. The design of the mutually developed affiliation agreements allows for optimal learning opportunities. The faculty (full- and part-time) attend mandatory orientation and are aware of the policies of each clinical site. Students are oriented to the clinical agencies.

Clinical affiliation agreements for clinical experiences of students are current, written agreements that specify expectations for all parties and ensure the protection of students. The nursing program and affiliates periodically review agreements for renewal or termination. The faculty and students evaluate clinical experiences and clinical facilities at the end of the course. (*See Appendix, Table 4.10*).

The nursing program has affiliation agreements with approximately 50 agencies to provide students with clinical experiences that cumulatively offer practice learning

environments for diverse populations with a variety of healthcare needs. The practice learning environments include community hospitals, Pinellas County Schools, home health agencies, inpatient and outpatient clinics, mental health facilities, and long-term care centers. Within these environments, students engage in prescribed learning activities designed to facilitate development sufficient to satisfy CSLOs, EOPSLOs and POs. These experiences allow students to practice independently (supervised) and collaboratively in a variety of healthcare settings, thus facilitating role and basic competency development.

# 4.11: Learning activities, instructional materials, and evaluation methods are appropriate for all delivery formats and consistent with the end-of-program student learning outcomes.

The St. Petersburg CON faculty have designed learning activities, instructional materials and evaluation methodologies and tools to measure the achievement of the student learning outcomes and the end of program outcomes.

#### Learning activities and instructional materials

Instructional materials and learning activities are appropriate for the development of competencies and student learning outcomes, required for graduation. The course syllabus delineate learning activities and instructional materials used to develop the identified competencies. A syllabi template was developed and approved for use in all courses and continues to be refined through the Revitalization Project. Each course syllabus includes the CSLO/CO (stated in performance terms), and Criteria Performance Standards. Instructional units within the syllabus delineate Key Terms, Unit Objectives, classroom and clinical Learning Activities, and a correlated Content Outline. These materials help guide students towards achievement of the CSLO/CO.

Faculty provide instruction for each type of learner and use time in the classroom for active learning to include Doceri lectures, round-abouts, gallery walks, case studies, simulation, and group projects. Students have access to materials that support lectures through our LMS system. For example, some faculty employ technology-rich pedagogical strategies that include the use of video web links and Doceri lectures. Clicker technology that allows in-class polling has been a popular and effective learning strategy. Examples of Learning Activities can be found in *Appendix 4.2*.

Faculty believe strongly in the importance of experiential learning and the need to involve the learner in the active learning process through carefully selected patient assignments, goal-oriented simulation scenarios, and reinforcement of theoretical concepts taught in didactic courses. The SCENE provides supplemental opportunities for students to develop technical, clinical reasoning, and communication skills through both low and high-fidelity technology. Clinical experiences vary depending on the level and course. The faculty recognize that clinical experiences are not all equal across clinical groups in a course. They rely on simulation to ensure that all students are provided with the essential learning activities to meet all course objectives. For example, in Nursing II, students learn the norms for well pregnant woman, fetus and newborn. These students will participate in an assigned 'OB Boot Camp' and various patient simulation experiences.

#### **Evaluation Methods**

Evaluation of individual student performance is varied and aligned with the published CSLOs, ESLOs and POs. Student performance is evaluated regularly by faculty with clear expectations explicitly defined for each course. Evaluation methodologies utilized by the faculty to measure student achievement include but are not limited to the following: instructor generated exams, standardized tests, written scholarly papers, student presentations (individual and/or group), clinical preps, nursing care plans, discussion boards, projects, case studies, simulation activities, and formative and summative clinical evaluations. All assessments (examinations) are computer-based through the LMS. Many faculty have adopted standard rubrics for grading scholarly papers, reflections and various learning activities (such as posting on discussion boards). An example of the grading tools can be found in course syllabi and available in the *virtual evidence room*. Evaluation of performance is enhanced through electronic platforms such as the electronic gradebook in our LMS where feedback can be almost immediate. Students who progress satisfactorily develop the requisite knowledge, skills, and attitudes to meet the CSLOs and the EOPSLOs.

Clinical competency is determined and scored as "Satisfactory" or "Unsatisfactory." The grade is based upon the criteria established within the "Clinical Evaluation Performance tool" provided in each nursing course. The instructor's observations of the student's knowledge, skills and attitudes, medication administration/calculations, clinical judgement, and ability to plan and implement care are provided in a written summary of the student's performance. Clinical performance is leveled across the designated nursing courses, and areas to be achieved are highlighted in bold print on the Clinical Evaluation Performance Tool. The clinical

evaluation process occurs in two phases: formative and summative. The formative evaluation is ongoing and concurrent with the learning process. The dates of the formative evaluation are established at the beginning of the semester and occur during the first half of the semester. During the formative evaluation period, the instructor and the student evaluate progress according to the performance criteria cited in the Clinical Evaluation Performance tool (*See Virtual Evidence Room*). A summative evaluation is given at the end of the semester. The purpose of the Summative Clinical Performance Evaluation Summary is to validate each student's level of clinical competency and proficiency that must be achieved by the end of each nursing course. Critical criteria (bolded) are identified by the faculty as those competencies that are needed for safe nursing practice. Students must achieve a "Satisfactory" on the summative portion of the "Clinical Performance Evaluation Summary". Successful completion of this Clinical Performance Examination is necessary to pass the clinical course with a final grade of "Satisfactory".

#### **STANDARD 5: RESOURCES**

Leaning resources are adequate to support faculty development and instruction. College administration provides the financial support needed by the CON to achieve its goals and objectives. Physical facilities are sufficient and appropriate to accomplish the EOPSLOs.

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

St. Petersburg College is a publicly funded, state college offering both associate and baccalaureate degrees as well as technical certificates, applied technology diplomas and continuing education programs.

The college administration and Board of Trustees are committed to providing resources necessary to maintain a nationally recognized institution while providing equity across institutional programs. Recognizing nursing as an integral part of the college, the administration consistently provides financial support necessary for the College of Nursing to achieve its stated goals and objectives. The process for allocating financial support is accomplished through the institution's budget planning process. Normally this process begins in early spring as the state legislature begins its budgetary deliberations

SPC operates on a fiscal year that runs from July 1 through June 30 annually. The Dean and the Assistant Dean have authority and responsibility for preparation and administration of the budget. The Dean and the Assistant Dean participate in the college budget process through the development and evaluation of the proposed budget.

Faculty has input into the budget, discussion at faculty meetings, e-mailing requests to the Dean, course level meetings, the Resources Subcommittee, Curriculum Committee, and the Faculty Committee. The Dean also holds a budget meeting prior to the development of the budget to discuss the items to be included in the budget for the next year. The Dean will submit the budget electronically in SharePoint where it is reviewed and approved by the AVP of finance, then reviewed by the college Budget

Committee and President. The college budget then goes to the Board of Trustees for final approval.

Sufficient funds have been available to meet the immediate needs of the nursing program. Program growth and technology advancement have encouraged continued investment in laboratory, classroom, and human resources. This includes requests to increase the number of full-time faculty within the program. Full-time faculty requests are the most difficult to get approved and often have to be included in the budget proposal for several years or necessitated by program changes before approval.

*Table 5.1.1*: Nursing Department Fund 10 Unrestricted General Operating Budget by Line Item shows a comparison of the total budget for the nursing department for fiscal years 2018-2020. *See* <u>www.spcollege.edu/central/budget</u>.

Table 5.1.1: (	College of Nursing Unrestricted Lab Budget by Line Item
	10-11230103-08000

Line Item	2018 Fiscal Year	2019 Fiscal Year	2020 Fiscal Year (Budgeted)
Salary: FT Faculty	2,304,419	2,288,220	2,305,701
Salary: FT Faculty Overload	89,833	122,952	107,008
Instruct Para-Prof/Assoc/Asst	-	25,366	
Leads & Committee Chairs	8,688	6,619	
OPS Percent of Load Faculty	512,122	685,507	667,870
OPS Instructional Adjunct	-	39,622	34,955
Tech Clerical Trade/Svc	103,635	68,000	67,900
Fed Work Study & St Assist	-		1,196
Payroll Taxes	189,142	193,783	183,140
Retirement	200,405	208,189	199,782
Accrued Leave	-	7,985	
Insurance	364,982	348,573	352,149

**Travel InDistrict Faculty	-	247	
Postage/Freight	-		50
Printing & Duplicating	152	153	226
Photocopying	-	2	
Service Contracts/Agreements	-		28,281
Other Leased Equip	3,080	3,080	3,100
Other Services	4,955	3,009	7,501
Institutional Membership	300	225	150
Consultant Fees	-		6,000
Accreditation Fees	2,875	3,875	12,775
Office/Dept Materials/Supplies	1,231	222	1,950
	3,785,818	4,005,630	3,979,735

Other cost centers within the General Fund that contribute resources to the Nursing Department include the college library. The library offers print and electronic resources outlined in Criterion 5.3. The library has sufficient resources to support the CON in achievement of outcomes.

Other funds that contribute to Nursing Program resources include the Laboratory Fees. Purchase and maintenance of program equipment, human patient simulators, audiovisual materials, computer hardware and software is accomplished through the budget planning process. Laboratory fees paid by students, which are attached to clinical courses, support the purchase of equipment and lab facilitators' salaries. The College of Nursing is fortunate to be well equipped with the latest technology.

# Table 5.1.2: College of Nursing Restricted Lab Budget by Line Item10-11230103-01111

2020 Fiscal 2018 Fiscal Year 2019 Fiscal Year Year (Budgeted)

Line Item

Lab Fees	459,988	505,264	414,271
Salary: FT Faculty	66,149	73,853	66,149
Salary: FT Faculty Overload	843		
Instruct Para-Prof/Assoc/Asst	64,006	120,487	138,679
Salary: Other Professional	85,441	53,930	97,075
Tech Clerical Trade/Svc	18,722	18,722	18,722
Payroll Taxes	17,298	19,339	24,528
Retirement	18,553	22,025	27,157
Accrued Leave		-18,915	
Insurance	39,116	54,350	63,286
**Travel InDistrict Faculty		408	1,425
Printing & Duplicating	120	134	100
Service Contracts/Agreements	875	875	875
Biohazard Waste Removal	55	30	90
Other Services	341	240	540
Education Materials & Supplies	239,475	284,265	300,000
Office/Dept Materials/Supplies	628	359	750
Educ & Department			
Subscriptions	350	350	
Materials & Supplies-Other	15		
	551,986	630,452	739,376

The State of Florida also provides funding for instructional materials for approved educational units. As an approved Perkins funded program, the nursing program at SPC has been able to afford purchases that otherwise would not have been possible. These purchases are provided by Perkins Grant fund dollars as shown in Table 5.1.3.

#### Table 5.1.3: Perkins Grant Fund Acquisitions for College of Nursing

Fiscal Year	Equipment Purchased	Cost	PO#
2019-2020	CAE Juno Medium Sim and Monitor	12,664.80	108659
2018-2019	Apple iPad Pro	949.00	108052
2018-2019	Simulaids Simleggings-Adult Large	873.54	107684

	CAE Juno Complete Medium with Basic Wound Kit		
2018-2019	(Medium Skin Tone) and Tablet	11,190.00	106854
2018-2019	CAE Touch-Pro Wireless Patient Monitor	2,074.80	106854
	Johns Hopkins All childrens Hospital - Simulation		
2018-2019	Training for Educators - 10 attendees	8,000.00	
2018-2019	ASPE Conference - 2 attendees	4,080.17	
2018-2019	Medline laptop carts	1,312.62	107545
2017-2018	Apple iPad Pro - 10 iPads	9,290.00	105112

#### 5.2: Physical resources are sufficient to ensure the achievement of the end-ofprogram student learning outcomes and program outcomes, and meet the needs of the faculty, staff, and students.

The Nursing Department is located on the second floor in the HEC building and includes facilities for both the A.S.N program and the RN-BSN program. The administrative suite contains fully equipped offices for the Dean, Assistant Dean, the Academic Chairs and the Staff Assistants. Across the hall from the CON administrative suite is a faculty lounge and a separate conference room that seats approximately 18 persons. The first floor houses HEC Administration, Student Services (admissions, advising, and Connections), bookstore, Library, New Initiative Program, Testing Center, as well as other programs.

There are 15 general classrooms, one computer lab and the Simulation Center for Excellence in Nursing Education which contains four rooms under the scheduling control of the College of Nursing. Classrooms accommodate a maximum of 36-48 students with tables, chairs, and computer internet access. The classrooms also contain curtained areas with beds, bedside equipment, and mannequins. Wireless internet access is available throughout the Center. All classrooms are equipped with white boards, computers, projectors, visual presenters, DVD and players. Nine classrooms are wired for power and eight of those classrooms have hard wired computer data ports at every student desk station. There are 72 laptop computers on desks in classrooms 270-271, 72 laptop computers in classroom 272-273, 44 laptop computers in a cart in classroom 209, 30 laptop computers in a cart in classroom 208, and 24 laptop computers in a laptop cart in classroom 286. In addition, there is a computer lab with 37 desktop computers with four additional desktop computers in the adjoining lab. This makes a total of 283 computers for student use. The CON has access to other classrooms within the Center including an auditorium with a seating capacity of 134. The HEC Auditorium is often used as a testing facility for final exams and End of Program testing. There are 84 laptop computers to be used for testing in the HEC Auditorium. Room 269 houses the five resource lab facilitators and one Lab Operating Coordinator.

The Baycare partnership provides classrooms for the Baycare partner students at The BSO located on Drew Street in Clearwater. Each classroom has whiteboards, an overhead projector with laptop connectivity and DVD capability. Wi-Fi internet is available throughout the building. There are various classrooms available for use which accommodate 24-48 students. There is one classroom with 28 desktop computers for student use.

#### Faculty Offices and Space

Each SPC full-time faculty enjoys a private office with computer access, telephone, desk, chairs, and at least one bookcase and one file cabinet. There is

adequate space and privacy to conduct personal counseling for students. Part-time and hospital partnership contributed faculty often share office spaces. Each office has at least two desks, computer stations, and telephones, however, three part-time faculty members may occasionally be assigned to the spaces. It is rare that all three-faculty members would be on campus on the same day and time. BayCare partner faculty and SPC faculty teaching at BayCare have offices at the Baycare Business Systems Office (BSO) facility in addition to assigned offices at HEC.

The faculty lounge also houses the faculty mailroom, copy machine (with e-fax, e-mail, scanning, and printing capability), and work countertop. All faculty computers are programmed to print to this multi-function copy machine. A Faculty Development Center is also available on the second floor containing specialized computer equipment for training and for faculty use. The development center contains laptops with audiovisual hardware and software that can be used to integrate technology into their course content.

#### **Student Spaces**

The HEC cafeteria is located on the second floor and includes tables and chairs for students to congregate and is available to students even when the cafeteria is closed. Students can also congregate at booths at the top of the stairway, benches in the hallway, tables and chairs in the lobby and in the HEC Library. There are 8 desktop computer stations in the hallways throughout the building that students may access on a first come, first serve basis.

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

There are extensive learning resources and technology available to nursing students. The library, the nursing skills laboratory, and the SCENE provide comprehensive resources to faculty and students.

#### M. M. Bennett Library

The M. M. Bennett Library serves the four campuses and eight centers of the St. Petersburg College with site specific library collections and college-wide resources which include electronic, digital, and print resources. Facilities offer quiet and collaborative study spaces, Wi-Fi, open computer access, and print/scan/copy services. The M.M. Bennett Libraries of St. Petersburg College support college programs with resources and materials specifically selected to meet the educational needs of students and faculty.

The collections of the college libraries presently consist of:

- \* Approximately 149,636 print volumes
- \* Approximately 88,263 electronic books
- \* Approximately 5,329 audiovisual plus 56,957 streamed titles

\* Approximately 1,794 periodical subscriptions (print and electronic serials)

\* 132 electronic research databases with over 55,701 individual titles

Critical to owning resources, librarians market and provide instruction in the use of library resources and services. Strong communication and opportunities to partner with faculty helps ensure these sessions lead to the desired course outcomes and increased information literacy competencies of students. The Library website, http://www.spcollege.edu/learningresources/, provides 24/7 access to resources of the M.M. Bennett Libraries and serves as a gateway to library services. The library's online services and collections continually developed and modified to properly support program needs and online/off campus learners. The HEC Library's hours of operation are Monday through Thursday 7:30 a.m. to 9:00 p.m., Fridays 7:30 a.m. to 4:00 p.m.

The Library provides seating for 160 students, which includes 33 computer work stations, 12 laptops, ten rooms for small group study, one large quiet study room. Additionally study carrels, tables and informal seating areas are available. The library has three laser copier/printers and equipment with low-vision and hearing-impaired capabilities. An instructional computer lab with 42 computers is adjacent to the Library.

There are two full-time librarians, and three OPS librarians serving faculty and students at the Health Education Center Library. All librarians have master's degrees in library and/or information science. College wide, there are 12 librarians serving in faculty and administrative positions. Strengths include a wealth of experience in instruction, virtual reference, web development as well as collection management. Each librarian is encouraged to engage in professional development to remain current with new trends in the field.

Material purchases are developed through formal collection development policies and procedures. Library staff selects and purchases resources that best represent and support program curriculums using tools such as recommended selection lists, other similar institutions, and review services. Librarians assemble lists for purchase. The extensive library collection of electronic books, full text nursing and allied health

journals, and databases offers students and faculty easy access from remote locations. For those resources that are not available at the college, the library supports Interlibrary Loan Services including Docline, UCLC and UBorrow.

As the curriculum is one of the most important influences on the development of the M. M. Bennett Library collection, librarians obtain suggestions and input on materials from the faculty as well as the administration. Selection and budget management responsibility is retained by each campus library. Faculty members are surveyed and consulted to measure how well the library serves the needs of the programs and courses of study. Library Material Request forms are available on the library homepage for faculty, staff, students, administrators and others to make suggestions for library materials for consideration.

The nursing faculty has frequent and direct communication with the library staff. Library staff serve on the Nursing Resource Subcommittee and CON Curriculum committee as a liaison and as a method for the library solicits input into the collections process by students and faculty. Outdated materials are routinely removed from the collection when they become obsolete. There is a faculty "Wish List" which is mobilized when funds are available for purchase of new materials. Faculty are encouraged to email the Dean or Assistant Dean with specific requests as well.

#### Nursing Resource Laboratory

The CON provides extensive learning resources and technology through the Nursing Resource Lab supported by five nursing resource lab facilitators beginning 7 a.m. for faculty and 8 a.m. for students to 7:30 p.m. Monday through Thursday and until 3:30 p.m. on Fridays. The Resource Lab provides IV simulators, injection-site models,

edema models, blood pressure equipment, NG tube models, and central line models for example. The Resource Lab Facilitators are available to assist students with their learning needs on campus and in the clinical setting.

The Nursing Resource Lab contains equipment and supplies to assist students in attaining a successful nursing education at SPC. Mannequins, skills equipment and specialized body parts are available for students to practice technical aspects of nursing care from bed making to IV insertion to medication administration to physical assessment. These "hands-on" practice items help student nurses feel comfortable and knowledgeable in learning new skills within a safe and non-threatening environment before going to clinical units. The CON is very fortunate to have full-time lab facilitators who are highly skilled and educated RN's. They are available to assist students with learning clinical skills and facilitating computerized instruction. The resource lab facilitators have a significant impact on student success through their role modeling and working one-on-one with students to assist them with overcoming deficiencies.

The CON students purchase learning materials available through Assessment Technologies Institute®, LLC (ATI®). ATI® has the comprehensive and adaptive learning systems to assist in preparing students with what they need to know to pass high stakes tests, such as NCLEX, and to become compassionate skilled nurses. During the program, beginning in Nursing I, the students complete a Proctored Fundamentals assessment customized for this level. In Nursing II, students complete testing to include Fundamentals and Maternal Newborn.

Nursing III completes the Nursing Care of Children and Mental Health assessments. The Pharmacology, Medical-Surgical, Leadership, and RN Comprehensive Predictor

assessments are completed in Nursing IV. The RN Comprehensive Predictor serves as the End of Program Exit exam and must be passed in order for the student to graduate.

Supplemental ATI® materials include test taking strategies (Nurse Logic), sample test questions, sample quizzes, skills videos and readings, RN Learning System and practice tests for a majority of tests including the and RN Comprehensive Predictor. After completing each practice test, students have the ability to generate focused reviews for each proctored exam. These focused reviews are customized study guides that direct students to specific web and text pages for further study. There is a mandatory remediation policy for students who are not successful in reaching the Proficiency Level 2 on all assessments except the RN Comprehensive Predictor which has a benchmark of 89% Probability of Passing NCLEX on First Attempt. Students have access to ATI® materials for two years after graduation.

#### The Simulation Center for Excellence in Nursing Education (SCENE)

The Simulation Center for Excellence in Nursing Education (SCENE) is a fully equipped and functional hospital environment that houses 10 Human Patient Simulators (HPS) that include perinatal, neonate, pediatric and adult simulators. The area is comprised of four rooms, two of which are set up as hospital ICU/ER simulation units. These rooms contain medium and high fidelity simulators which offer a wide range from infants to adults capable of simulating various clinical scenarios. There are medium fidelity simulators in the SCENE, capable of programmable heart sounds, lung sounds, bowel sounds and heart rhythms. In addition, there are high fidelity simulators with realistic physiological responses to treatment interventions, including airway and oxygenation management, fluid administration, defibrillation and the administration of

drugs. One SCENE room has four Laerdal VitalSim medium fidelity simulators (two adult and one infant) one medium fidelity CAE (Healthcare) Juno and one high fidelity CAE Apollo. In the other SCENE room there are five high fidelity CAE simulators including one iSTAN, one Adult ECS, one PediaSim ECS, one BabySim, one Lucina Birthing simulator. Simulation is extended outside of the SCENE area to all nursing classrooms which are equipped with task trainers, static manikins, Laerdal VitalSims, and one additional CAE iStan. Two rooms contain Safe Patient Handling equipment.

The Florida Board of Nursing has approved the use of Simulation as a component of up to 50% of the required clinical hours. The hours available for faculty and students are the same as the Nursing Resource Lab operation hours. The faculty reserve the SCENE and indicate the scenarios to be used. The Clinical Simulation Coordinator assists the faculty with the running of the equipment.

# 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.

The ADN Program does not offer distance education.

### SECTION III: STANDARD 6

### **STANDARD 6: OUTCOMES**

Evaluation of the EOPSLOs and POs demonstrate achievement. The CON's evaluation of end-of-program student learning outcomes and program outcomes demonstrates that graduates have achieved identified competencies consistent with the standards. The ADN program uses a Systematic Plan for Evaluation (SPE) as an essential tool in the ongoing assessment and evaluation of the PO's, the EOPSLO's and of the ACEN Standards.

6.1: The program demonstrates evidence of students' achievement of each endof-program student learning outcome.

There is ongoing assessment of the extent to which students attain each end-ofprogram student learning outcome.

There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of students' attainment of each end-of-program student learning outcome.

The ADN Program uses the Systemic Plan for Evaluation (SPE), in accordance with ACEN standards, as an essential tool in the ongoing assessment and evaluation of End of Program Student Learning Outcomes. The faculty developed, analyzed, and revised the EOPSLOs to obtain sufficient data to drive the program toward meeting the POs. SPC CON uses multiple assessment methods to evaluate achievement of EOPSLOs. Until September 2018, there were seven (7) End of Program Student Learning Outcomes. In October 2018, faculty streamlined the End of Program Student Learning Outcomes to four (4). These outcomes are tracked with a variety of measures and students are meeting the benchmarks set by faculty. For example, students must

successfully pass the End of Program Exit Exam and satisfactorily demonstrate clinical competence on the NUR 2811C clinical performance evaluation.

The 2017-2018 SPE was approved April 1, 2019 to reflect the 2017 ACEN Accreditation standards. In accordance with the evaluation plan, data is collected on an ongoing basis and reviewed at regular intervals. Data is aggregated and trended and distributed to faculty through multiple reporting mechanisms for decision making throughout the year. Using this data, changes are made accordingly. For example, EOP pass rates dropped to 87% in Spring 2017, remediation templates were implemented Fall 2017. EOP Rates improved to 90% in Spring 2018 and to 92% in Fall of 2018 (See Table). Another example that supports the use of remediation templates can be supported by the spring 2019 graduates. This is the first class that were required to complete remediation throughout the program. The results were out of 150 students, 144 passed the EOP the first time (96% pass rate). What was most significant was that the LPN-RN students had a 100% pass rates. This demonstrated the effectiveness and importance of continuing the remediation templates in our program.

#### ATI Summary of End of Program Assessment Test Comparison Chart

1st retake

2nd retake

EOP Pass Rate	ļ
Data for	
Comparison	

•	1st	2nd	3rd	
Fall 2016	98%	98%	100%	
Spring 2017	87%	97%		
Fall 2017	75.5%	95%	98.5%	
Spring 2018	90%	95%		
Fall 2018	92%	94%		
Spring 2019	96%	99%		

#### Aggregate 89% 96% 99%

The faculty and administration are committed to procuring data from all pertinent sources for program decision-making. Data is collected from various resources to include but not limited to written assignments, standardized testing, clinical performance evaluations, course and program completion rates, surveys from students, graduates, employers, and job placement rates. For example, quantitative and qualitative results from student surveys are reviewed by the evaluation committee, distributed at level meetings for discussion and strategies for improvement are developed as needed. In fall 2018, Dean Louis collaborated with the education department and their curriculum specialist to lead a workshop about using evidence for decision making. This workshop included faculty reviewing qualitative comments from all their perspective courses. Each level and lead faculty were separated into groups to review their student survey comments.

Faculty as a whole meet on a monthly basis and level weekly meetings to analyze and discuss strengths and weaknesses, as outlined in the systematic plan. The faculty then present the recommendations to our faculty as a whole meeting in order to make informed decisions regarding program improvements. The faculty collaborate to refine the ELAs, which drive the program toward the attainment of POs and EOPSLOs.

## 6.2: The program demonstrates evidence of graduates' achievement on the licensure examination.

The program's most recent annual licensure examination pass rate for the program overall (aggregated for the program as a whole as reported by the

NCSBN) must be at least 80% for all first-time test-takers during the same 12month period.

The program faculty analyzes the licensure examination pass rate data to make decisions for the maintenance and improvement of graduates' success on the licensure examination for the whole program as well as each program option and location.

SPC CON nursing faculty firmly support the concept that any successful nursing program must graduate a high percentage of students who will pass the NCLEX-RN® licensure examination on the first attempt. The foundations of SPC CON are to provide high quality, efficient, and effective instruction to empower our students to achieve success through pursuit of inquiry, advocacy, and a commitment to lifelong learning as they provide care to diverse communities. This commitment supports SPC visionary commitment of economic mobility "We will provide opportunities for our students to be prepared for high-wage, high-need careers and professional growth, which will contribute to their economic success and improve the quality of life within our community as well as assist in ending generational cycles of poverty'

(https://www.spcollege.edu/friends-partners/about/mission-visionary-commitments-andvalues). The Accreditation Commission for Education in Nursing (ACEN) states that "the annual NCLEX-RN® pass rates for all test takers (first write and repeat) are at 80% or above over a three (3) year period" (ACEN, 2017, p. 6-7). SPC CON most recent annual licensure examination exceeded the minimum pass rate for all first-time testtakers during the same 12-month period.

The program demonstrates evidence of consistent year-to-year achievement in meeting successful performance on licensure exam. In 2016, SPC CON achieved a 93.68% pass rate. However, the aggregated pass rates demonstrated an improvement

in the July to September quarter as there was a slight decline. In 2017, SPC CON achieved a 93.13% with was a slight decline from 2016. Based on this data, the faculty wanted to take a proactive approach and implemented ATI remediation to be instituted throughout the program in Fall of 2017.

The usage of the ATI remediation templates for level IV was implemented in the Spring 2015 semester for Adult Medical Surgical/Pharmacology. If students were unsuccessful on their End of Program (EOP) test, they were required to meet with the Level IV Academic Chair and were assigned remediation on all their proctored examinations. The students were required to complete practice assessments A & B in all content areas, Nurse Logic 2.0 lesson, drills, and tests before they can retest a second time. Implementing the ATI templates reduced the number of students having to retake the EOP exam more than 2 times. In addition, implementation of the templates has also impacted our program pass rates on the NCLEX exam. This marked improvement led to the implementation of ATI remediation to be instituted throughout the program in Fall of 2017. From 2015-2017, the first time pass rate increased from 90.94% to 92.98%.

In 2018, SPC CON achieved 91.58% NCLEX pass rate. Even though the goal was met, a decline was noted. The College of Nursing (CON) continues to implement various success strategies. For example, each level has expanded their out of classroom support which includes test taking strategies, creating focused reviews in ATI, content workshops through NIPS, mindfulness meditations before each exams and 1:1 tutoring and support as requested. The level 4 chair worked on standardizing the ATI remediation templates and education was offered to students on how to create a

personal NCLEX study guide utilizing their ATI remediation. Spring 2019, EOP exit exam results were 96% for the first in the college history, this was also the first entry class that had required ATI remediation throughout the program. In addition, the CON continues to provide the optional Hurst Review for the nursing students and encourages the students to take the NCLEX exam as soon as possible after graduation.

Licensure: NCLEX Aggregate Pass Rates						
		Quarter Results	NCSBN Annual Calendar Year	FLORIDA Pass Rate	NATIONAL Rate	
2016						
	Jan to Mar	93.04		71.31	83.59	
	Apr to Jun	94.32		76.43	87.44	
	Jul to Sep	93.62		74.4	84.38	
	Oct to Dec	100		65.93	77.3	
	Aggregate Pass Rate		93.68	72.68	84.56	
2017						
	Jan to Mar	95.58		71.31	85.34	
	Apr to Jun	89.33		76.43	86.27	
	Jul to Sep	95.45		74.42	84.36	
	Oct to Dec	91.54		69.55	84.25	
	Aggregate Pass Rate		92.98			
2018						
	Jan to Mar	91.6		76.6	89.2	
	Apr to Jun	90.48		74.85	89.78	
	Jul to Sep	95.06		70.35	86.48	
	Oct to Dec	70		78.43	89.87	
	Aggregate Pass Rate		91.58			
2019						
	Jan to Mar	92.86		75.65	89.95	
	Apr to Jun	96.49		67.88	86.48	

6.3: The program demonstrates evidence of students' achievement in completing the nursing program.

The expected level of achievement for program completion is determined by the faculty and reflects student demographics.

There is ongoing assessment of the extent to which students complete the nursing program.

There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of students' completion of the nursing program.

There is a minimum of the three (3) most recent years of annual program completion data, and data are aggregated for the nursing program as a whole as well as disaggregated by program option, location, and date of program completion or entering cohort.

The College of Nursing expected level of achievements (ELA) states that Nursing I students are expected to complete the program in a five semester timeframe. The expected level of achievements (ELA) are sixty-five percent (65%) of four-semester Nursing I and 80% of five-semester Nursing I students will complete the program. Seventy percent (70%) of three-semester LPN-RN and 75% of four-semester LPN-RN students will complete the program. ACEN recommends that the ELA for program completion be determined by the faculty and, reflect program demographics.

At the beginning of each semester Level 1 and LPN to RN Bridge students are entered into an ongoing spreadsheet. They are coded by program option. At the end of each semester the graduation date is added to the spreadsheet. By sorting this data set, it can be determined the length of time required for each incoming group to complete the program. The data is then compiled to determine the number of students that met the course completion ELA. Data is compiled separately for each program option as well as aggregated and trended over time and is presented to the Evaluation Committee for analysis and development of action. The results are reported to the faculty as a whole and other communities of interest. This data base is housed and maintained in the Dean's Office.

Analysis for the overall program over the three-year period using our current ELA for traditional students shows an average of 72% of graduates have completed ADN program within 125% (5 semesters) of their program length. Our LPN-RN program shows an average of 76% of graduates completed within 125% (4 semesters). The data reflects the ELA for the program completion was not met for the traditional students but was met for our LPN-RN students. Please refer to the SPE that shows data trended over the past three years by program options and cohorts (Appendix 6.3). Over the three-year period, the following trends have been identified. From the 2014-15 reporting period, the completion rate average was 67% for the traditional student and 68% for the LPN-RN students within the 80% ELA. The ELA was not met for 2014-2015. From the 2015-16 reporting period, the completion rate average was 74% for the traditional student and 73% for the LPN-RN students. The ELA was not met for 2015-2016. From the 2016-17 reporting period, the completion rate average 75% for the traditional student and 86% for the LPN students. The completion rates continue to be a concern for the CON.

TABLE 6.1.1: Traditional Program Completion Rates									
Traditional Program Completion Rates	# of Students	Grad in 4 Semesters	Benchmark 65%	Grad in 5 Semesters	Benchmark 80%	Graduation Rate to Date			

Fall 2014	117	70	60%	80	68%	77%
Spring 2015	131	81	62%	87	66%	72%
Aggregate	248	151	61%	167	67%	75%
Fall 2015	125	78	62%	96	77%	83%
Spring	130	85	65%	91	70%	80%
2016						
Aggregate	255	163	64%	187	74%	82%
Fall 2016	124	88	71%	93	75%	78%
Spring	118	74	63%	87	74%	75%
2017						
Aggregate						
	242	162	67%	180	75%	77%

### TABLE 6.1.2: LPN-RN Program Completion Rates

LPN-RN Program Completion Rates	# of Students	Grad in 3 Semesters	Benchmar k 70%	Grad in 4 Semesters	Benchmar k 75%	Graduatio n Rate to Date
Fall 2014	32	15	47%	22	69%	78%
Spring 2015	33	22	67%	22	67%	73%
Summer 2015	31	13	42%	21	68%	75.5%
Aggregate	96	50	52%	65	68%	76%
Fall 2015	32	9	28%	18	64%	72%
Spring 2016	23	11	48%	17	74%	87%
Spring 2016	20	12	60%	16	80%	90%
Aggregate	75	32	45%	51	73%	83%
Fall 2016	21	15	71%	18	86%	86%
Spring 2017	18	10	56%	13	72%	78%

Summer 2017	12	10	83%	12	100%	100%
Aggregate	51	35	70%	43	86%	88%

We also felt that it was important to review our completion rates based on ACEN new criteria of 150%. From the 2015-16 reporting period, the completion rate average was 81% for the traditional student and 83% for the LPN-RN students. From the 2016-17 reporting period, the completion rate average 78% for the traditional student and 86% for the LPN students. The ELA for both programs were met for 2015-2016. Although it was met for the LPN-RN but not the traditional students for 2016-2017. As a program, we recognize that our ELA need to be revisited and revised to address our student's demographic, academic progression, program history, and to align with ACEN new standards.

		Frogram Completion Rai	165 ACEN 150 /0
2015-2016			
Traditional Graduation Rates			
	Students Admitted	Grad within 150% of program time	Graduation Rate
Fall 2015 Traditional Entering Class			Graduation Rate
Traditional			Graduation Rate 82%

#### TABLE 6.1.3: Traditional Program Completion Rates ACEN 150%

BayCare	24	23	96%
Generic Evening	33	26	79%
	125	103	81%
Spring 2016 Traditional Entering Class			
Earn as You Learn	19	18	95%
Generic Day	52	35	67%
BayCare	23	20	87%
Generic Evening	36	30	83%
	130	103	83%
2015-16 Aggregate	255	206	81%
2016-2017 Traditional Graduation Rates	Students	Grad within 150%	Graduation Rate
Traditional	Students Admitted	Grad within 150% of program time	Graduation Rate
Traditional			Graduation Rate
Traditional Graduation Rates Fall 2016 Traditional			Graduation Rate
Traditional Graduation Rates Fall 2016 Traditional Entering Class	Admitted	of program time	
Traditional Graduation Rates Fall 2016 Traditional Entering Class Earn as You Learn	Admitted 12	of program time	83%
Traditional Graduation Rates Fall 2016 Traditional Entering Class Earn as You Learn Generic Day	Admitted 12 54	of program time 10 40	83% 74%
Traditional Graduation Rates Fall 2016 Traditional Entering Class Earn as You Learn Generic Day BayCare	Admitted 12 54 24	of program time 10 40 21	83% 74% 87.50%
Traditional Graduation Rates Fall 2016 Traditional Entering Class Earn as You Learn Generic Day BayCare	Admitted 12 54 24 34	of program time 10 40 21 27	83% 74% 87.50% 79%

Generic Day	50	34	68%
BayCare	22	19	86%
Generic Evening	35	31	89%
	118	90	76%
2016-17 Aggregate	242	188	78%
TABLE 6.1	.4: LPN-RN Prog	ram Completion Rates /	ACEN 150%
2015-2016 LPN to RN Graduation Rates	Students Admitted	Grad within 150% of program time	Graduation Rate
Fall 2015 LPN to RN Entering Class			
LPN to RN	32	24	75%
Spring 2016 LPN to RN Entering Class			
LPN to RN	23	20	87%
Summer 2016 LPN to RN Day Class			
LPN to RN	21	18	86%
Aggregate	75	62	83%
2016-2017 LPN to RN Graduation Rates			
	Students Admitted	Grad within 150% of program time	Graduation Rate

#### Fall 2016 LPN to RN Entering Class

LPN to RN	21	18	86%
Spring 2017 LPN to RN Entering Class			
LPN to RN	18	14	78%
Summer 2017 LPN to RN Day Class			
LPN to RN	12	12	100%
Aggregate	51	44	86%

The completion rates continue to be a concern for the CON. Faculty are dedicated to promoting student success and have implemented strategies over the three-year period to meet the ELA and improve program completion rates. Faculty offer individual tutoring to individual students to assist in their success. In May 2012, faculty voted to implement the TEAS test and student interviews to increase the quality of incoming students. Unfortunately, this was not implemented due to costs associated with it. Under the new administration, we are revisiting the holistic admission process. In 2014, adaptive guizzing to level 1 and LPN traditional was added to increase student preparedness that would lead to increase success as they matriculate through the program. In May 2016, faculty accepted the new Functional Dimension care plan to include NIC/NOC at all levels and Scientific Rationales Levels 1, 2 and LPN Transitional. In the academic year of 2018-2019, a variety of strategies continue to be implemented due to their success in improving program outcomes. A revised Clinical Evaluation Tool was finalized and approved and will be piloted in level 1 Fall 2019. Approved and implement increased test complexity and writing rubric across the

Curriculum and this was integrated across all levels. A Functional Dimension Care Plan course, detailed instructions and rubric was built to help students navigate this assignment. We are implementing ATI Nurse Logic activity as part of course requirement in the first course within the program to increase clinical reasoning skills. We will continue to strengthen the required components of ATI within the nursing curriculum. We are planning on reviewing our curriculum to determine if it meets the needs of our current student population and make necessary revisions.

6.4: The program demonstrates evidence of graduates' achievement in job placement. The expected level of achievement for job placement is determined by the faculty and reflects program demographics.

There is ongoing assessment of the extent to which graduates are employed.

There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of graduates being employed.

There is a minimum of the three (3) most recent years of available job placement data, and data are aggregated for the nursing program as a whole.

The Expected Level of Achievement is 90% of graduates will be employed in the field of nursing, furthering their education in the field of nursing, or serving in the military within six to nine months of graduation. Data over the three-year period shows an average of 96-98% of graduates are employed in a healthcare facility within 6 to 12 months of graduation. Job placement rates are compiled by SPC Institutional Research and Effectiveness and are published in the 2018-2019 SPC Fact Book as part of the Placement and Follow-Up Report (go.spcollege.edu/central/lr/Index.htm). CON faculty set the ELA for job placement rate at 90%, after reviewing program historical data for graduates who find jobs in health care or choose to continue nursing education.

The ELA was met in 2014, 2015, 2016. Students seeking employment find positions in local healthcare agencies after successfully completing NCLEX-RN®. Career fairs are held semi-annually on the campus on an effort to recruit the graduating classes. Community events that features local employers, interviewing skills (roles course), resume writing assistance. The student support services such as resume development, and interview skills. The CON also encourages students to continue education in the nursing profession, this is part of our CON values. The program welcomes higher education partners' communication in fostering the students in lifelong learning.

The data in *Table 6:4* refers to the Graduate Survey that is emailed to all graduates within six to nine months of graduation indicates that the level of achievement is being met at the aggregate level. From December 2015 through May 2018 97% were employed in the field of nursing, furthering their education in the field of nursing, or serving in the military within six to nine months of graduation. Data Collected by Institutional Research and Published in the 2018-2019 Fact Book also shows a 97% employment rate.

TABLE 6.4: GRADUATE PROGRAM SATISFACTION								
Responses Received	31	23	21	17	29	17	24	
	Dec 15	May 16	Dec 16	May 17	Dec 17	May 18	Dec 18	
<ol> <li>The nursing program at SPC proved to be satisfactory prep for entry level to practice professional nursing.</li> </ol>	93%	100%	95%	84%	93%	82%	83%	
2. I am proficient in the use of the Nursing Process in providing care for clients.	93%	95%	95%	93%	96%	90%	96%	

<ol> <li>I am able to perform skills in a therapeutic manner to meet needs of clients.</li> </ol>	93%	100%	100%	84%	93%	100%	87%
<ol> <li>I utilize therapeutic communication skills to help meet the holistic needs of the client.</li> </ol>	90%	100%	95%	87%	86%	100%	87%
5. I am able to individualize health teaching and information regarding acute patient needs.	93%	95%	95%	93%	82%	94%	92%
<ol> <li>I collaborate with members of the multidisciplinary team to provide optimum care for clients.</li> </ol>	90%	95%	100%	94%	93%	94%	87%
<ol> <li>I am accountable for my own actions and commitment to my own personal and educational growth.</li> </ol>	93%	100%	100%	100%	97%	100%	96%
8. I utilize resources in a cost- effective manner.	83%	91%	95%	94%	85%	88%	91%
9. I am employed in the practice of nursing, enrolled in further education or serving in the military.	100%	100%	100%	100%	96%	94%	87%
10. I would recommend the nursing program at SPC to someone who desires professional nursing education.	90%	100%	90%	87%	86%	87%	91%

### SECTION IV: APPENDICES