**Sinclair Community College**

**Continuous Improvement Annual Update 2019-20**

**Please submit to your Division Assessment Coordinator / Learning Liaison for feedback no later than March 1, 2020**

**Please submit to your Division Dean for feedback no later than April 1, 2020**

**After receiving feedback from your Division Assessment Coordinator and Dean, please revise accordingly and make the final submission to the Provost’s Office no later than May 1, 2020**

**Department:** **HS - 0672 - Nursing**

Year of Last Program Review: FY 2016-2017

Year of Next Program Review: FY 2021-2022

**Section I: Progress since the Most Recent Review**

Below are the goals from Section IV part E of your last Program Review Self-Study. Describe progress or changes made toward meeting each goal over the last year. Responses from the previous year’s Annual Update are included, if there have been no changes to report then no changes to the response are necessary.

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| **GOALS** | **Status** | **Previous Years’ Progress or Rationale for No Longer Applicable** | **FY 2019-20 Update** |
| Successful integration into the Health Sciences Center FA 2017   * Inter-professional instruction * Increased use of technology resources * Enhanced alignment with articulation partners (WSU, Miami, UD) | In progress 🞏    Completed ×  No longer applicable 🞏 | **2018-2019**  Although this goal has been completed, the departments continues to work in this area.   * Interprofessional instruction (IPE):   The faculty continue to expand interprofessional education opportunities. This academic year, NSG 1400 completed IPE with dental hygiene students, dietetic students, and PTA students; NSG 1600 shared a guest lecturer with PTA and OTA as he discussed and demonstrated the effects of Deep Brain Stimulation in the treatment of Parkinson’s disease, and collaborated with UD PA program to complete an interprofessional education experience for students; NSG 2400 completed the IPE with RT, OTA, dietetics, behavioral health, and respiratory therapy; NSG 2600 students participated in a community disaster drill both fall and spring semesters.   * Technology   The department has transitioned to a document system called WuFoo for all psychomotor skills assessments. This has provided the faculty with a more objective way to document student skills assessments, while meeting the requirements of the Ohio Board of Nursing (OBN) to store all skills assessments in individual student files. This has also reduced manpower for scanning and filing paper documents and reduces printing costs for the department. Fall 2018 NSG 1600 implemented the process and SP 19 NSG 1400, 1500, and 2400 implemented the process. This system merges with Colleague and allows the department to run reports for assessment purposes and provides student access for all individual skills completed.  All nursing faculty participated in SIM 101 and SIM 102 training fall 2018 to provide an overview of the technology available in the simulation center to better prepare faculty and increase comfort level of using technology in the simulation center.  Video capture has been utilized this academic year for skills practice, formal assessment of students’ lab skills, and for debriefing after simulation and interprofessional activities. Faculty also used video capture to demonstrate and record psychomotor skills students are responsible for throughout the term.   * The UD 1+2+1 program continues to progress. The Higher Learning Commission visited campus Dec. 3, 2018 and Jan Mains visited UD campus Dec. 4, 2018 for continued Higher Learning Commission visit. Target date to enroll the pathway students at UD is fall 2019 with starting the SCC nursing program fall 2020.   **2017-2018**  The program is now fully integrated into the Health Sciences Center. All labs are being accessed by students, including the Simulation Center, and the practice lab is staffed, and a badge reader has been placed for students to sign in and sign out to monitor lab usage.   * Inter-professional instruction   The department continues to identify and implement new opportunities for inter-professional instruction. AY 2017-2018, the nursing program has implemented learning opportunities for students in NSG 1400 with dietary students and PTA, NSG 1600 with radiology tech, and a UD collaboration with PA students. NSG 2400 collaborated with respiratory therapy students for neonatal resuscitation and NSG 2600 with WSU medical students for the mock disaster drill. New pilot of care management conference with OTA, dietetics, behavioral health, respiratory therapy, and nursing spring 2018.   * Increased use of technology resources   The program purchased new electronic BP arms for fundamental students learning BP skills. The division, including nursing, is piloting an electronic health record: Neehr Perfect for all health science students to use. In the process of scheduling webinars and possible onsite visit from an Elsevier nurse educator, for faculty training on learning technology tools to incorporate into the classroom, including adaptive quizzing and SimChart. Purchased Hal, a 2-year old infant simulator. SimMom is now being utilized fully for students to experience normal birth, post-partum assessment, and hemorrhage. Simulation baby Tory is now being utilized for instruction including neonatal abstinence syndrome assessment. Video capture is now being used for debriefing and faculty have been identified as ‘super-users’ to facilitate use of Video Capture. A new pediatric torso was purchased and is now in use for pediatric assessment.   * Nursing has a total of nine (9) articulation agreements with other four-year institutions. Enhanced alignment with articulation partners (WSU, Miami, UD)   The alignment with UD 1+2+1 program is progressing. UD has hired a consultant to ready the product. They are currently in the process of hiring a Department Chair. The plan is to begin delivery of the BSN completion program starting Fall 2018 with enrollment of students into the 1+2+1 program Fall 2019. These students will enter to the SCC nursing program Fall 2020. New articulation agreement with Miami University executed SU 2017; New agreement with Kettering College executed SU 2017. | **2019-2020**   * **Interprofessional Instruction** (IPE):   The 2018-2019 IPE learning activities continued fall 2019 with the addition of an electroneurodiagnostic technology/respiratory/nursing IPE experience.  18 unique simulations were provided in HS instruction in SP and fall 2019; nursing participated in 13 of these.   * **Technology**   The department transitioned to a secure document storage space called Perceptive. This allows the department to maintain all student records electronically and has reduced manpower for scanning and filing paper documents as well as and reducing printing costs for students and the department.  Utilization of electronic assessments of psychomotor skills was fully implemented; faculty are exploring how these assessments may contribute to curriculum changes.  The nursing department has also transitioned to a simulated electronic health record product currently used by other departments in the HS division, allowing multidisciplinary documentation and sharing of simulated patient charts across disciplines, supporting communication during interprofessional education activities.   * **UD 1+2+1**   The first cohort of 13 students was enrolled fall 2019 and will begin the nursing program fall 2020. Background work continues with Student Support Services to assist with the management and transition of these students into the program.   * **Simulation**   Learner hours in the simulation center continue to expand since the transition to the new HS building. Nursing is the primary department in the division utilizing the simulation center.   * Fall 2017: 1,294 hours * Spring 2018: 1,884 hours * Fall 2018: 2,469 hours * Spring 2019: 2,533 hours   Nursing students experience 27 different simulation-based activities in the 4 semesters of their program. The department also acquired 5 mid-fidelity simulators for the nursing labs. |
| Refinement of Concept Based Curriculum   * Hybrid courses (PN courses) * Valid and Reliable Assessments, Test Banks, Test Security | In progress ×    Completed 🞏  No longer applicable 🞏 | **2018-2019**  NSG 1200: Introduction to Nursing is being revised to hybrid during spring 2019 with planned implementation fall 2019.  NSG 1450 was successfully implemented as hybrid fall 2018. Early data shows student success to be comparable to face to face success in prior courses. Will monitor student scores in standardized testing in the last semester on content covered in the Professional Nursing (PN) courses being offered hybrid.  NSG 1650 was revised for hybrid fall 2018 and implemented as hybrid spring 2019.  NSG 2450 is being revised for hybrid spring 2019 with planned implementation fall 2019.  Faculty teaching hybrid courses meet college requirements to teach online. Currently 14 nursing faculty have completed the Quality Matters Rubric workshop hosted by Sinclair.  Minimal progress has been made in capturing statistical analysis data to meet the department’s current testing policy. RAR has been working with the Nursing department to support the needs of the program; however, due to test construction in D2L, only certain questions are able to be analyzed due to use of the randomization feature.  The nursing department has an ad-hoc committee reviewing the current testing policy, researching evidence-based practice in nursing education, and benchmarking with similar programs to identify if the policy needs to be revised. Testing software was investigated by the department Curriculum Committee; however, this brings the concern of additional fees to students.  **2017-2018**  NSG 1450/1650/2450 have been placed in the Web Design queue. Faculty are working to transition these courses to online. NSG 1450 is being designed for both on-line and hybrid. Implementation of online 1450 courses Fall 2018.  Assessment statistical analysis is still in progress. Vandana Rola from Web Design is working with the department and with D2L to find solutions to meet the needs of the department. Rena, Jan, Michelle, Vandana, and Jared met with Chad Atkins from RAR to identify if RAR could support needs until D2L is able to produce results. At this time, D2L is unable to provide aggregated data over all sections of a course, if a course uses a test pool of randomized questions, and if any type of alternate style questions is used. Test integrity has improved with the new testing policy, and faculty remain sensitive to any situations that may arise. Curriculum committee researching testing software outside of D2L to identify if any could meet the nursing department needs at a low cost. | **2019-2020**   * NSG 1200 was successfully implemented as a blended course fall 2019. Course faculty met after the term and made revisions being mindful of students meeting course outcomes and the time spent outside of the classroom on class work. * NSG 2450 was implemented as a blended course fall 2019.   Course completion data indicates students are able to manage a blended course and success data is comparable to success in face-to-face delivery in prior terms.   * The ad-hoc testing committee continued work on the challenges faced on exam statistical analysis availability in eLearn. The subcommittee reviewed best-practices and revised the testing policy to align with best-practices. The ad-hoc committee also worked with Vandana Rola and Nancy Radar to revise exams, removing test item folders to support item analysis through eLearn. The department is hosting a continuing education opportunity for faculty spring 2020 on test item writing and exam analysis to continue to strengthen the department’s assessment process. |
| Maintain accreditation and approval status/ successful site visits   * Improvement of first time NCLEX-RN pass rates; Goal >95% of the national average | In progress ×    Completed 🞏  No longer applicable 🞏 | **2018-2019**  Sinclair NCLEX-RN first time pass rate (FTPR) percentage for 2018 was 88% which is equivalent to the national average FTPR of 88% and exceeds 95% of the national average. The December 2018 graduate cohort has a current first- time pass rate of 93.4%.  ACEN site visit to occur October 2020. Ohio Board of Nursing full approval through March 2022.  **2017-2018**  The program received full approval from the Ohio Board of Nursing (OBN), March 2017 through March 2022. ACEN site visit will occur during the Fall 2020 accreditation cycle.  Sinclair NCLEX-RN first time pass rates for 2017 were 86.30% which exceeds the 95% of the 84.24% national average. This is an increase of 11.5% from AY 2016 to AY 2017. The December graduate cohort currently has a 94% NCLEX first time pass rate. | **2019-2020**   * Sinclair’s NCLEX-RN first-time pass rate (FTPR) percentage for 2019 is 85.71%. This exceeds the requirements of both the Ohio Board of Nursing and the ACEN accrediting body for the program. (Ohio FTPRs for all test takers is 86.25% for 2019 and National average is 88.18% for 2019). * The ACEN accreditation site visit is planned for fall 2020, and the program is in the preparation stages for this site visit. * The program has full approval through the Ohio Board of Nursing through March 2022. * The Simulation Center received provisional accreditation approval from the Society for Simulation in Healthcare, November 2019. |
| Electronic management of student compliance with medical and CPR records | In progress ×    Completed 🞏  No longer applicable 🞏 | **2018-2019**  The department has made updates to the report to meet the current medical requirements. The department has transitioned from SSP to Perceptive for student file management. Academic Advising has transitioned to this system as well to support the department. In addition, Document Imaging was added to help manage required student documents to maintain compliance with department approval and accreditation. Compliance reports continue to be a work in progress as the department is still unable to independently run reports and reports being run are inaccurate. Currently reports must be requested through RAR and delivered via email to the nursing department administrative assistants.  **2017-2018**  Student medical reports through the DAWN portal are still unavailable for the nursing administrative assistant to access. Currently an email is sent to Paul Ciarlariello requesting reports. Reports are then delivered via email. This continues to be an inefficient process. | **2019-2020**   * The department has furthered this process by creating a “New Student” shell in eLearn where incoming students access and upload all signature documents which are then electronically scanned to the Perceptive system. * The medical report system is time and labor intensive for the administrative assistants. Tracking student compliance requires the administrative assistants to create and manage spreadsheets for each incoming cohort at the beginning of the term with TB, CPR and flu (annual renewals). Spreadsheets are reviewed weekly to identify students out of compliance with medicals. Email reminders and alerts are sent to students and faculty informing them that they may not participate in clinical until they are in compliance. * For current students, the original spreadsheet created upon admission is updated at the beginning of each term to include reinstated students and removal of unsuccessful students. Again, dates are noted for CPR, flu, and TB screening and are color-coded for expiration. A weekly review of the spreadsheet is completed and once the student falls out of compliance, the student and the faculty are alerted to the student not attending clinical until compliant.   Currently no reports are accessible to the administrative assistants to track compliance. There are vendor products available that will manage this process; however, the department has not been willing to place this additional cost on the students. |

Below are the Recommendations for Action made by the review team. Describe the progress or changes made toward meeting each recommendation over the last year. Responses from the previous year’s Annual Update are included, if there have been no changes to report then no changes to the response are necessary.

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| **RECOMMENDATIONS** | **Status** | **Previous Years’ Progress or Rationale for No Longer Applicable** | **FY 2019-20 Update** |
| As mentioned in the Commendations, the department does a superb job of monitoring the health care environment in the region, tracking job market trends, determining employer needs, and monitoring availability of clinical sites. The department is strongly encouraged to continue to keep its finger on the pulse of health care in the region. | In progress ×    Completed 🞏  No longer applicable 🞏 | **2018-2019**  The department connected with Public Health Dayton Montgomery County summer 2018 to begin offering second term students a community health clinical opportunity. This was implemented fall 2018 and will continue spring 2019. Greene County Public Health is interested in a similar opportunity which will be explored.  The department has worked closely with the Premier Clinical Liaisons to continue a strong partnership and securing of clinical placement for our nursing students. Faculty are providing time during clinical for students to attend ‘Meet and Greets’ offered by Premier Health where students converse with unit managers and learn about employment opportunities available.  MVH is holding an employee career fair on March 14, 2019. Nursing faculty will tend a table at this event to provide information regarding the nursing program at Sinclair.  Dayton Children’s Hospital is holding an employee career fair on April 9, 2019. Nursing faculty and administration will tend a table at this event to provide current DCH employees information regarding the nursing program at Sinclair.  The department facilitated onsite interviewing with KHN FA 18 and SP 19 to fill available nursing positions within the network with Sinclair nursing graduates.  J Mains is a member of the PHP Education Advisory Committee.  The department Student Policies and Activities Committee (SPA) is reviewing immunization policies for consideration of requiring Hepatitis A vaccination in alignment with Dayton Montgomery County Public Health where students currently attend clinical in semester 2 where this vaccination is a requirement with the uptick of cases in Montgomery County.  **2017-2018**  The department was approached by Fidelity homecare to assist in introducing nursing students to the homecare environment to help build their pipeline. Starting fall 2017 all 3rd semester students experience a 2-day clinical rotation with Fidelity Homecare nurses. The department is working to design a certificate course designed to acclimate the new graduate nurse or an experienced nurse looking to transition to the homecare setting to prepare them for this work environment.  The department is sensitive to the announcement of Good Samaritan closure by end of year 2018. Jan and Rena are working closely with the CNO, Peggy Marcks, of Premier Health Network, to retain clinical sites within the Premier Health Network.  Jan and Michelle met with HR representation from Grandview Hospital and Sp18 they will be attending the Health Science Career fair and has been invited to offer “speed interviewing” to offer our graduating students employment. | **2019-2020**  The program maintains communication with our clinical partners and monitors vacancy rates with Dayton Children’s and the Premier and Kettering Health Networks. Onsite interviews were facilitated, and program representatives attended employee fairs at Dayton Children’s and Miami Valley Hospital.  The program continues to engage new clinical sites, optimizing opportunities for community sites such as Reach Out of Dayton Clinic, Fidelity Health Care, and participating in service learning with local school districts and community outreach sites.  The department took the opportunity in spring 2018 to survey our Advisory Committee which consists of community healthcare representatives regarding “*new graduate expectations*”. This information was provided to general faculty at the beginning of fall 2018 and based on the committee’s feedback, the following were **implemented across the curriculum in spring and fall 2019** to align with community partners expectations:   * NSG 2600 (semester 4)   + Medication simulation to perfusion lab   + Addition of 2 skills labs reinforcing skills throughout the program   + Rounding with physicians   + Hospital IPE with respiratory therapy, education on roles   + Hourly rounding and bedside report * NSG 2400 (semester 3)   + Hourly rounding and bedside report   + Last 5 weeks of term advancing to care for 2 patients in the clinical setting   + Medication administration with each simulation * NSG 2450 (semester 3)   + Completion of a quality improvement project   + Video created of local nurse leaders regarding leadership for the bedside nurse and the new graduate. This includes CEOs, Chief Nursing Officers, nurse managers, and bedside nurses from local healthcare networks. Students view the video in this course. * NSG 1600 (semester 3)   + Hourly rounding and bedside report   + Simulation focusing on admission and discharge of a patient. * NSG 1650 (semester 3)   + Guest speaker: quality improvement specialist from Premier health talks with students regarding the quality improvement process in the hospital. * NSG 1500 (LPN to RN transition)   + IPE activity with NSG 2400 focusing on assessment and communication among different professions.   + Hourly rounding, bedside report. * NSG 1400 (semester 1)   + Changed the process on teaching head-to-toe assessment.   + Simulation for medication barcoding.   + Addition of using SBAR communication tool in lab and clinical.   + Addition of a situational awareness simulation. * Assessment data from employers which would reflect if these interventions have had any impact continues to be a challenge. The Advisory Committee Meeting scheduled for May 2020 will include this as an agenda item. * Nursing provided the math department with 2 simulation videos demonstrating how nurses use ‘quick math’ at the bedside which included medication administration and anticipated urine output. This process is to assist the math faculty in working with pre-nursing students in real-life application of dosage calculation in medication administration and how to avoid errors in the calculation step. * Utilization of Emergency Medical Services (EMS) faculty to give report from the emergency department perspective. |
| Once there has been the opportunity to collect data on outcomes, the department is strongly encouraged to share best practices from its Nursing Success program for struggling students. Other departments at Sinclair could benefit from offerings via the Center for Teaching and Learning, Fall Faculty Professional Development Day, and other internal forums. Additionally, the department should seek opportunities to share their success with this program with broader, external audiences, perhaps at the Innovations Conference, the Higher Learning Commission Annual Meeting, and other national conferences. | In progress 🞏    Completed 🞏  No longer applicable × | **2018-2019**  Nursing Success has been offered intermittently between 2016 and fall 2018. There continues to be challenges in communication as to when and where these are occurring. This was addressed with the facilitating faculty and a plan was set to communicate these offerings in the student community shell and via email through eLearn. Current data reflects: 26 students have participated in at least one Student Success session. 13 of these students have repeated at least one course in the program. Of the 13 students, 6 students went on to graduate and pass the NCLEX exam, 2 students are currently active in the program, and 4 students were dismissed from the program due to a second academic nonsuccess, and 1 student changed majors. Twenty students who participated had not repeated a course and did go on to graduate and pass the NCLEX exam. Two students have not repeated a course and are active in the program. 15 of the 36 students were either ESL, African American, or male.  **2017-2018**  Nursing Success was placed on hold for FA 17 due to faculty commitments and the opening of the new Health Science building. In SP 18, there was a perception among several faculty that this initiative had transformed into a Test Review forum. Efforts to communicate the purpose of the initiative are being evaluated. The goal is to fully re-institute the Nursing Success program for the 2018-2019 AY.  Tutorial services is unable to provide tutors for nursing students and the lead faculty for the Student Nurse Association is working to create a mentoring program for nursing students where second year nursing students can mentor first year nursing students. | **2019-2020**  Unfortunately, the Nursing Success opportunity has not been offered over the past academic year due to difficulty providing times to meet all faculty, student, and stakeholder needs. The Student Nurse Association now offers course material review during Saturday morning meetings scheduled throughout the term. These meetings are advertised via fliers posted in the nursing labs, and in the nursing student community shell. The department will work continue to strategize a more sustainable way to support at risk students in the program as an ongoing project. There are faculty scheduled in the nursing skills laboratory during weekly open lab hours who assist students with psychomotor skills, dosage calculation, and can clarify basic nursing information. |
| That retired faculty have come back to mentor Nursing students is highly laudable but may not be sustainable. What permanent structure for supporting students along these lines could be made available? The department should continue to encourage retired faculty to work with students but should also explore the development of institutional resources that could provide this support on a permanent basis. For example, the department could explore recruiting upper level Nursing students to serve as tutors for struggling students. | In progress 🞏    Completed 🞏  No longer applicable × | 2018-2019  Due to tight scheduling of nursing students, it has been difficult to create a nursing student tutor community. One faculty is currently working on this project as a CIT to build a tutoring community within the nursing program. Goal for the Sinclair Student Nurse Association 2019 includes mentoring opportunities for student success.  2017-2018  There are no retired faculty tutoring at this time.  Several faculty facilitated the creation of a National Student Nurses Association (NSNA) chapter at Sinclair (Student Nurse Association (SNA). One of the initiatives of the Nursing Success program included, upper level students from SNA tutoring the lower level students with faculty oversight. | **2019-2020**  As mentioned previously, the Student Nurse Association has established meeting agendas that now include mentoring and review of course material from students across the curriculum. This is the current most sustainable way to offering tutoring options to students at this time. All nursing faculty follow the college guidelines regarding office hours and are readily available by appointments as well to support student success. A few faculty members hold their Office Hours in the practice labs. Students also have the opportunity to schedule appointments with the Simulation Coordinator, the Lab Supervisor, and the Associate Program Administrator for academic support if needed. |
| In the conversation with the Review Team, the department noted that their student demographics do not reflect that of the local community. The department needs to attract more diverse students. The department is strongly encouraged to develop a formal diversity plan with specific strategies designed to increase diversity in the program. Targeted outreach to specific high schools in the area may be one strategy worth exploring. The Review Team recommends that more faculty from the department participate in the CTL Diversity and Inclusion track. In addition, can we leverage existing faculty to help potential minority students see Nursing as a viable option for them? Could we use community and business partnerships with entities like Premier to somehow help in this regard? | In progress ×    Completed 🞏  No longer applicable 🞏 | **2018-2019**  Data indicates that there is a minority gap in healthcare overall, including nursing. Nursing remains an open enrollment program which provides the opportunity for a variety of diverse students to enter the program. Nursing continues to be present at all college initiated College Fairs and Tech Prep events. The department also participated in hosting a variety of high school student tours of the Health Sciences Center and the Health Sciences Tech Prep Career Day. The department participated in the Dayton Children’s Hospital HealthCare Boot Camp for students age 12 – 17 during the summer, as well as Upward Bound Program with Dayton Public Schools. J Mains is working with Lynn Beavers from MVCTC LPN program to initiate a visit to answer questions and promote the Advanced Placement track for LPNs, and she is working with Ron Adler, Dayton STEM Workforce Program who is interested in bringing representatives from PHP to meet with SP 2019 graduates.  Student dialogue sessions were facilitated by Sinclair faculty, including one nursing faculty. These sessions were piloted in the Health Sciences (HS) Division with the deliverable being a report of student feedback at the February HS Faculty Division meeting. Incorporated into this report of student perceptions of equity in HS programs and the impact of experiences is the recommendation that all faculty complete the Diversity & Inclusion Track through the CTL.  Continuing education offering by two nursing faculty at a General Faculty meeting “Bonfires: Battling Implicit Bias in Healthcare” January 2018.  In alignment with the college’s Equity Initiative, the department is beginning to collate data to review the current equity gaps (minority) in completion in nursing courses and examine which courses pose significant obstacles to program completion. This data will be utilized to identify high risk students, trends in course success, and provide outreach and Sinclair resource referrals as appropriate.  **2017-2018**  Nursing is consistently present for all college-initiated College Fairs,  Faculty participated in the Miami Valley CTC (Adult Education) Fair, highlighting the LPN to RN track (Fall, 2017).  One faculty is participating in the Civic Engagement Workshop, through Community Partners, focusing on an extension of the Diversity and Inclusion track through the CTL to bring cultural competency to the classroom.  One faculty represented the program with the Green Dot Initiative.  Several nursing faculty attended the 2/23/18 Reach Across Dayton Conference hosted by the CTL | **2019-2020**  Make-up of the current nursing student population is as follows:   * White 71% * African American 9% * Asian 4% * Hispanic/Latino 4% * Multi-racial 4% * Not reported 8%   29% of the nursing population of students is represented by ethnicities other than White.   * Age 17-19: 2% * Age 20-24: 29% * Age 25-29: 25% * Age 30-39: 31% * Age 40-49: 11% * Age 50-59 2%   There is a large variation of diverse age groups representing the nursing student population.  The program has experienced a decrease in enrollment/retention of the LPN to RN track students. There are currently 35 students in the LPN Wait list; many defer admission due to work and life responsibilities. Preferred enrollment is 16/semester due to clinical site specifications, but due to attrition, we have increased the capacity to 20/semester to off-set withdrawals.. The chair has met with the Chair of the EMS department to discuss including Paramedics into this transition track, and interviewed an RN graduate who had been a paramedic. Wright State began offering an LPN to BSN track within the past year, and faculty of the SCC LPN to RN tract advocate for a shorter program. Ongoing discussions are planned  Michelle Cox, along with faculty across campus worked in 2018-2019 to offer student dialogue opportunities to provide students a voice and opportunity to discuss how personal identity has impacted student success or challenges at Sinclair, in the HS division and in their elected program. This information was presented to HS faculty at the spring 2019 division meeting. From this, a ‘meet and greet’ for first year HS students was implemented fall 2019, led by Michelle Cox, supported by HS faculty, and Amaha Sellassie. One-hundred and eleven students participated in the meet and greet where Amaha led the students through the Diversity Wheel experience, followed by nursing faculty leading students through the ‘who are you?’ activity. Students positively evaluated this e experience and encouraged the continuation of this opportunity each fall. The opportunity created an environment for students to connect with one another and find others ‘like them’ within the division. The division and the nursing program will continue to identify ways to reach more students and encourage belonging in the HS Division. Michelle Cox is working with the Dean of HS to coordinate a workshop opportunity presented by representatives from Premier Health, for HS faculty (including nursing), to assist faculty in better preparing students for the diverse healthcare environment they are entering:   * Diverse population hospital networks are serving * Increased demand for cultural awareness in the workplace, including understanding white privilege * Diversity efforts in hiring practices * Ways to better prepare HS students to enter the diverse healthcare environment * Tips on how to manage encounters at the bedside that are being taught to current employees   The nursing program is now offering NSG 1200: Introduction to Nursing at Miami Valley CTC 3 times per academic year. During this course Michelle Cox facilitates one class and discusses the program in detail, and answers questions to continue to improve recruiting efforts of diverse students.  Historically the nursing program has had a valued relationship with Dayton Public Schools where nursing students had the opportunity to work with the nurses and the students in the school system. In 2017-18, Dayton Public retracted all contracts allowing health care students into the district. The nursing department has worked tirelessly over the past 2 years to have this contract reinstated. The department consulted with Michael Carter as a contact with DPS, as well as the Superintendent of Greene County ESC. These initiatives have not generated any further movement. This is a lost opportunity for representation of the nursing program in the DPS system and a valuable recruitment opportunity. The department has also worked to establish a partnership with Five Rivers Health Centers, who will be developing Montgomery County’s first school-based Health Center, providing medical, dental, behavioral health and vision services.  Nursing faculty continue to have a presence at Tech Prep day here at SCC and have representation at a variety of local high school ‘college days’ to continue to recruit a diverse population of students.  Vivian Jackson identified a community opportunity for NSG 1500: LPN to RN transition students at Cross Over Community Developments, a nonprofit organization supporting immigrants, asylum seekers and refugees in the Dayton area. The students provided education on handwashing, and how to reduce the spread of infection. Through this process, Sinclair is engaging in conversations to address the needs of non-English speaking students and local residents. |
| In the meeting with the Review Team, the department noted that it feels that its complement of full-time faculty has grown too thin. In light of resource constraints for the College overall, the department is encouraged to make a case for the need for additional faculty. The department should carefully consider what evidence would best make this case, and perhaps benchmark comparative data with Nursing programs at other institutions. Any recommendations that the department develops in this regard should be reasonable, taking into account the budget constraints and needs of the College overall. | In progress 🞏    Completed ×  No longer applicable 🞏 | **2018-2019**  All full time nursing faculty teach in class, lab and clinical. Adjunct faculty are used primarily in the clinical settings to facilitate student to faculty ratio compliance with the OBN. The availability of adjunct nursing faculty to support needs is limited, as most adjunct faculty have full-time positions in the discipline. The increased use of simulation has demonstrated a need to limit the number of students in the lab as well. Adjunct faculty are being utilized to support student learning in the practice lab, and some adjunct faculty are being utilized in the classroom and labs to support the number of students in a cohort. The department works to stay aligned with a 1/3 offering of each cohort on evenings and 2/3 days, as well as, transition of faculty from days to evenings and transitioning to other courses to meet the student ratio needs of each cohort. Three FT-TT faculty share 3 hours of reassigned time to support evening course sections in the Simulation Center and in lab to accommodate the number of students in the cohort.  Spring 2019 the department surveyed students via SurveyMonkey regarding scheduling preferences for Fall 2019 schedule planning purposes. The results supported the current practice of 1/3 evenings, 2/3 days seat availability.  **2017-2018**  The department was able to hire a one-term ACF for fall 2017 spring 2018 semesters. This was more cost-effective to the college versus a full-time tenure track position. The department was able to fill two full-time faculty positions fall 2017 (summer retirements), and one SP 18 (resignation). The department is utilizing adjunct faculty in more capacities than what had been done historically, including lab settings. Based on size of cohort and section needs, faculty are asked each term to consider moving from days to evenings, or vice versa, as well as, moving from one course to another to maintain faculty to student ratios without having to hire more adjunct faculty or request more full-time faculty and to be sensitive to the budget constraints. | **2019-2020**  Hiring of adjunct faculty continues to create challenges at times. To support faculty and students in meeting course and end-of-program student learning outcomes, the department chair has utilized full-time faculty in voluntary overload roles, and has extended adjunct faculty to lab and clinical, not just clinical. Faculty are supported in simulation through the Simulation Coordinator, the Lab Supervisor, and the Associate Program Administrator. In the past academic year, adjunct faculty in NSG 1400, NSG 1600, and NSG 2400 have support FT faculty in lab and teach clinical as well. One adjunct faculty and two FT tenured faculty share 3 hours of reassigned time to supervise the open skills laboratory hours so that faculty are present to support students during skills practice. Two FT faculty hold one office hour per week in the skills laboratory to be available to students during that time.  Staffing of faculty will continue to be a challenge over the next several years as many of the nursing faculty are heading into retirement. The department continually navigates staffing challenges each term related to FMLA. Ohio Board of Nursing continues to require nursing faculty in the classroom or in a role of assessing and evaluating students hold at minimum a master’s degree, and the clinical affiliations mandating a 1 faculty to every 8 students. Compounded by, limited number of clinical sites there will continue to be staffing challenges for the nursing department. The dean and the provost are aware of the Ohio Board of Nursing and clinical agency guidelines, and work with the department chair to remain in compliance and assure faculty and students are supported in delivery of instruction to meet end-of-program student learning outcomes, and achieve success on first time pass rates on the state licensing exam. |
| The department expressed a knowledge gap regarding outcomes for its graduates in terms of transfer – the Review Team recommends that the department work with Research, Analytics, and Reporting (RAR) to get National Student Clearinghouse data on its graduates, and report transfer outcomes in Annual Updates in the coming years, and in the next Program Review. | In progress 🞏    Completed ×  No longer applicable 🞏 | **2018-2019**  With the changes to Visual Analytics (VA), the collaboration with RAR, and the college student graduate survey data this process has improved, and data is more accessible.  VA reports the 2017-2018 AY graduate number was 128 students. 30 of these students are enrolled in a 4-year program (23%) and 82 of these students are employed 64%).  VA reports the 2016-2017 AY graduate number was 148 students with 34 enrolled in a 4-year program (23%) and 125 students employed (84%).  VA reports 2015-2016 AY graduate number was 148 with 60 students enrolled in a 4-year program (40.5%) and 134 students employed 90.5%).  **2017-2018**  Michelle has collaborated with RAR to update/improve the college graduate surveys. Plans are in place to gather data from the National Student Clearinghouse to be reported on the systematic program evaluation as well as the college program review and annual updates, starting with the current academic year. | **2019-2020**  The department continues to obtain transfer data from the college via Visual Analytics, and RAR, and the college graduate survey. In light of poor response rates with the college graduate survey from nursing students, the department implemented an informal survey process using Facebook instant messaging. 6 months post-graduation. Students are sent a message asking about employment data and the addition of transfer information will be added to the May 2019 graduate survey distributed January 2020. |
| The Review Team notes that the decrease in NCLEX scores is a serious concern. While the self-study indicated that the department has established an action plan to improve First-Time Pass Rates, and the Review Team recognizes that efforts are currently underway and appear to be moving scores in the right direction, the Review Team strongly encourages the department to closely monitor these efforts and analyze their impact. If NCLEX scores do not improve as a result of these efforts, the department should immediately develop additional strategies and monitor their impact. The faculty are aware of the importance of these scores and their potential impact on program accreditation, but the Review Team feels this should be reinforced in these recommendations. | In progress ×    Completed 🞏  No longer applicable 🞏 | **2018-2019**  The 2018 NCLEX first time pass rate (FTPR) was 88% (N=125 testers with 110 successful on the first attempt). This continues to meet the threshold of ‘at or above 95% of the national average for all NCLEX test takers’ for accreditation and Board approval and exceeds the national average for Associate Degree FTPRs of 85.11%.  December 2018 graduates are currently demonstrating a 93.4% first time pass rate. Students complete a standardized exam (HESI) in the last course of the program which is an indicator for NCLEX success on the first attempt. Faculty have identified 5 areas on the HESI to focus on. Faculty were asked to provide feedback to the department Curriculum Committee in their own courses how the 5 areas are being addressed or how they could be addressed to continually improve student knowledge, HESI scores, and NCLEX pass rates.  A review of students who are unsuccessful on the first attempt of the NCLEX-RN proved most of these students had a mix of scoring below the benchmark of 850 on the HESI exam, repeating of pre-requisite science courses, and/or repeating pharmacology. The Curriculum Committee explored and trialed an alternate version of the standardized exam fall 2018 along with an updated remediation product to accompany the exam. Changing of any products would occur fall 2019. Any changes in standardized testing products will come with the recommendation that the standardized exam be included at 10% of the student’s grade.  It has been identified that many students do not take advantage of the remediation tools provided to them currently.  The Student Policies and Activities committee is reviewing attempts for prerequisites, waiver of the TEAS test, and attempts of the TEAS test for accelerated admission students.  **2017-2018**  The 2017 NCLEX first time pass rate was 86.3%, which demonstrated an 11.5% improvement from 2016. This follows the threshold of 95% of the national average. The December 2017 graduates who have tested in 2018 are currently demonstrating a 94% first-time pass rate.  As this information is part of the nursing department’s approval and accreditation process, this data is monitored closely.  Michelle is gathering data on students who are unsuccessful on the NCLEX-RN for the first time, analyzing standardized testing scores, as well as the number of attempts in pre-requisite science courses. | **2019-2020**  A subcommittee has begun working to map the curriculum to the NCLEX (state licensing exam) to the current curriculum to identify any curriculum gaps.  Faculty voted to reduce ALH 2202 beginning fall 2020 3 attempts to 2 attempts to be successful to remain eligible for the nursing program. This decision was based on the correlation of students who were unsuccessful in 2 nursing courses were also more likely to have repeated ALH 2202.  Faculty voted to reduce the number of attempts to take the TEAS test (program eligibility requirement) to 3 times in a calendar year, require all students to take the TEAS test regardless of prior degrees, and the added requirement for AAAA eligibility to one TEAS attempt. This decision was based on the correlation of data that the TEAS is an indicator for success in the first year of the program and students who were unsuccessful in the first year were more likely to have had the TEAS waived, had taken the TEAS multiple times in a calendar year, and although were met AAAA eligibility requirements, had taken the TEAS multiple times.  There is also correlation of data indicating students who were not successful on the first attempt on the state licensing examination were more likely to have repeated ALH 2202 and/or taken the TEAS multiple times and students requesting reinstatement into the program after 2 attempts (withdraw or unsuccessful) were more likely to have taken ALH 2202 more than one time and/or taken the TEAS multiple times to meet the proficiency requirements for eligibility of the program.  The standardized HESI exam remains the same at this time. The Curriculum Committee is in the process of developing policies around standardized testing and remediation to reflect this as a program versus attached to a course. Curriculum Committee is also developing strategies to better implement Adaptive Quizzing (an outside vendor product that provides students with NCLEX style questions that adapts the difficulty of the questions being delivered based on student responses) across the curriculum to better prepare students for the state licensing examination.  **NCLEX pass rates**:  2019: to date 85.71%  2018: 88%  2017: 86.3%  2016: 74.8%  FTPRs continue to remain in the mid-80 percentile which exceeds both the OBN requirement of being at or above 95% of the national average and the ACEN accreditation requirement of 80% of all first-time test takers will pass on the first attempt in the same 12-month period. These results are monitored closely. With the above mentioned changes and work by the faculty to ensure alignment of the curriculum with the NCLEX blueprint, it is anticipated that this number will improve as current students transition toward graduation. |

**Section II: Assessment of General Education & Degree Program Outcomes**

As many of you know, in FY 2017-18 the Computer Literacy General Education Outcome was discontinued. However, it is still expected that computer skills instruction will occur for the specific needs of a program. For the FY 2018-19 year, as part of the Annual Update each department is asked to describe how the computer skills education required for your graduates to be successful in their chosen field is addressed and assessed at the program level.

What computer skills will your students need to possess in order to be successful after graduation? Please provide answers to the questions in the 3 sections located below.

1. Do your program students need to be competent or proficient in word processing, spreadsheets, and/or presentation software (e.g. Office Suite-style programs such as Word, Excel, PowerPoint)?

Yes  (Word and PowerPoint) No  (**If no, please proceed to question # 2**).

If Yes:

Program(s) contain BIS 1120 or MET 1131 where these skills will be acquired and assessed.  
 Program(s) do not contain BIS 1120 or MET 1131. These skills will be assessed in the following manner:

**Course(s)**: NSG 1200; NSG 1450; NSG 1650; NSG 2450

**Assessment Method / Assignment(s)** (Please be specific): **NSG 1200**: Caring in Nursing Article Summary and Sinclair Resource Slide Show Presentation; **NSG 1450**: Library Post Class Assignment; **NSG 1650**: Annotated Bibliography Dropbox; Assignment 2 Annotated Bibliography Dropbox; Momentum Article Summary Dropbox; **NSG 2450**: Global Issues Dropbox, Quality Improvement Project Presentations

\*these are examples across the curriculum where students are required to utilize Word and/or digital presentation skills

1. Upon graduation, all Sinclair students must be competent or proficient in Information Literacy (gathering, analyzing, and synthesizing information, which can often be digital in nature, and using that information effectively and ethically).

Program(s) contain ENG 1201 or PSY 1100 or ALH 1101 where these skills will be acquired and assessed.

Program(s) do not contain ENG 1201 or PSY 1100 or ALH 1101. These skills will be acquired and assessed in the following manner:

Course(s): Click here to enter text.

Assessment Method / Assignment(s) (Please be specific): Click here to enter text.

1. In order to be successful after graduation, our program students will need to be competent or proficient in computer skills beyond those listed above.

Yes  No  (If no, section is complete).

Please list additional computer skills program students will need to be successful after graduation: Click here to enter text.

In which course(s) will these additional computer skills be assessed?

Click here to enter text.

Assessment Methods / Assignment(s) (Please be specific):

Click here to enter text.

The Program Outcomes for the degrees are listed below. **All program outcomes must be assessed at least once during the 5 year Program Review cycle, and assessment of program outcomes must occur each year**. Assessment results from previous years are in red font – if you assess those outcomes again this year, please add the additional assessment data in black font.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Program Outcomes** | To which course(s) is this program outcome related? | Year assessed or to be assessed. | Assessment Methods  Used | What were the assessment results?  (Please provide brief summary data) |
| Transition to the role of professional nurse within a legal and ethical scope that is guided by accepted standards of practice. (NUR.S.AAS). | ALH 1101, NSG 1200, NSG 1400, NSG 1450, NSG 1500, NSG 1600, NSG 1650, NSG 2400, NSG 2450, NSG 2600 | 2018 | EXIT HESI:  Cohort will score 850 or greater on the **HESI Exit Exam** for the identified categories:  Legal/Ethical Concepts (Nursing Concepts: advocacy/ethical/legal-issues-ethics)  Ethical-Legal (QSEN)  Management of care (client needs)  Designer/manager/coordinator of care (AACN curriculum categories)  Collaboration/managing care (nursing concepts) | **AY 2018-19**  SP 19: N=70  **811**: Management of Care  **784**: Designer/manager/coordinator of care  **851**: Ethical Legal  **796**: Collaboration/Managing Care  FA 18: N=50  **859**: Management of Care  **927**: Designer/manager/coordinator of care  **924**: Ethical Legal  **836**: Collaboration/Managing Care  EXIT HESI scores reviewed at general faculty. Gallery walk completed and ideas circulated on ways to address curriculum gaps.  **AY 2018-19**  FA 18: N=50  859: Management of Care  927: Designer/manager/coordinator of care  924: Ethical Legal  836: Collaboration/Managing Care  Continuing to meet benchmarks of 850 or higher for overall score. Collaboration/Managing care up from SP term to 836; however, remains below benchmark. Trial of new version of HESI exam FA 18. Will monitor for trend.  **AY 2017-18**  SP 18: N =68  **879:** Management of care  **857**: Designer/manager/coordinator of care (AACN curriculum categories)  **856**: Ethical-Legal (QSEN)  817: Legal/Ethical Concepts (Nursing Concepts: advocacy/ethical/legal-issues-ethics)  821: Collaboration/managing care (nursing concepts)  FA 17: N= 61  Legal/ethical: 814  Ethical/Legal: 844  Management of Care: 827  Designer/manager/coordinator of care: 817  Collaboration/managing care: 827  SP 17: N=60  Legal/ethical: 983  Ethical/Legal: 819  Management of Care: 811  Designer/manager/coordinator of care: 835  Collaboration/managing care: 845  2016-2017: Below benchmark of 850 for SP & FA 17. Will monitor for trend.  SU18 employer surveys to be sent electronically once student survey data retrieved from RAR to identify specific networks/units who are employing SCC graduates. |
|  |  |  | Clinical Evaluation Tool:  100% of students will achieve a rating of MET for this CO by the final **clinical evaluation**. | SP 19: 100% achieved  FA 18: 100% achieved  No identified changes.  SP 18: 100% achieved.  FA 17: 100% achieved.  SP 17: 100% achieved.  2018: Benchmark achieved. Continue to monitor.  Students are evaluated using a clinical evaluation tool which addresses all course outcomes at the end of each term. Current benchmark achieved. Continue to monitor student clinical success. |
|  |  |  | Legal Quiz:  80% of students will achieve 80% or higher | SP 19: 90% ELA met.  FA 18: 95% ELA met.  Students continue to meet the ELA with the increase in ELA to 80% in AY 2017-2018. Will continue to monitor.  SP 18: 80%  FA 17: 97%  SP 17: 96%  2018: Benchmark achieved. Continue to monitor.  Benchmark changed from 75% SP 17 to 80% FA 17. Benchmark achieved. Consider changing to mastery questions at 100% achievement. |
| Demonstrate caring behaviors when providing nursing care with respect for the diversity of each individual. (NUR.S.AAS). | PSY 1100; NSG 1400; NSG 1500, NSG 1600, NSG 2400, NSG 2600 | 2018 | EXIT HESI:  Cohort will score 850 or greater on the **HESI Exit Exam** for the identified categories:  Cultural/Spiritual/Diversity (sub-specialty-professional issues)  Family Dynamics (nursing concepts)  Communication (nursing concepts)  Psychosocial integrity (client needs) | **AY 2018-19:**  SP 19: N=70  863: Psychosocial integrity (client needs)  818: Cultural/Spiritual (Sub-specialty-Professional Issues)  **930**: Documentation (sub-specialty: professional issues)  **806**: Family Dynamics (nursing concepts)  **897**: Communication (nursing concepts)  FA 18: N=50  807: Psychosocial integrity (client needs)  790: Cultural/Spiritual (Sub-specialty-Professional Issues)  **890**: Documentation (sub-specialty: professional issues)  **861**: Family Dynamics (nursing concepts)  **857**: Communication (nursing concepts)  Continue to monitor trends. Improvement noted fall to spring in psychosocial integrity, cultural spiritual, documentation, and family dynamics.  **AY 2018-19:**  FA 18: N=50  807: Psychosocial integrity (client needs)  790: Cultural/Spiritual (Sub-specialty-Professional Issues)  **890**: Documentation (sub-specialty: professional issues)  **861**: Family Dynamics (nursing concepts)  **857**: Communication (nursing concepts)  **AY: 2017-18**  SP 18: N=68  **867**: Psychosocial integrity (client needs)  **921**: Cultural/Spiritual (Sub-specialty-Professional Issues)  **854**: Documentation (sub-specialty: professional issues)  **934**: Family Dynamics (nursing concepts)  **863**: Communication (nursing concepts)  FA 17: N=61  Culture=821  Family dynamics=779  Communication=835  Psychosocial=806  AY 2017-18: NSG 1400 implemented sociology speaker who spoke on diversity, health disparities, and nutrition  FA:17  NSG 2600 implemented communication lab.  NSG 2400 implemented opioid simulation and post-partum hemorrhage which incorporates family dynamics requiring students to interact/intervene with family members.  NSG 2400 implemented hemophilia simulation requiring students to interact with a pediatric patient and family members.  SP 17: N=60  Culture=933  Family dynamics=858  Communication=835  Psychosocial=878  2017: Benchmark partially achieved. New curriculum still being reviewed. Course assessment data reported to curriculum committee to identify curriculum gaps and to make suggestions to course faculty. |
|  |  |  | Clinical Evaluation Tool | **AY 2018-19:**  SP 19: 100% Met  FA 18: 100% Met  No changes identified.  FA 18: 100% Met  SP 18: 100% Met  FA 17: 100% achieved MET rating  SP 17: 100% achieved MET rating  2018: Benchmark achieved. Continue to monitor.  2017: The clinical evaluation tool measures knowledge, skills, and attitudes of each nursing student related to course and program outcomes. Students in the NSG 2600, last semester course, clinical evaluation tool reflects the end of program outcomes. |
| Apply knowledge, skills, and attitudes to make nursing judgments and provide patient-centered nursing care of individuals and groups. (NUR.S.AAS). | ALH 1101, ALH 2202, BIO 1141, BIO 1242, elective science, MAT 1130, ENG 1111, NSG 1400, NSG 1450, NSG 1500, NSG 1600, NSG 1650, NSG 2400, NSG 2450, NSG 2600 | 2017 | Clinical evaluation tool: 100 % of students achieve a MET rating for final clinical evaluation. | SP 19: 100% Met  FA 18: 100% Met  No changes. Continue to monitor.  FA 18: 100% MET  SP 18: 100% MET  FA 17: 100% achieved MET rating  SP 17: 100% achieved MET rating  2018: Benchmark achieved. Continue to monitor.  2017: The clinical evaluation tool measures knowledge, skills, and attitudes of each nursing student related to course and program outcomes. Students in the NSG 2600, last semester course, clinical evaluation tool reflects the end of program outcomes. |
|  |  |  | EXIT HESI:  Cohort will score 850 or greater on the **HESI Exit Exam** for the identified categories:  Dimensions of patient care (QSEN: patient-centered care)  Safety & Quality (QSEN)  Nursing Judgment (NLN education competency)  Medication administration (sub-specialty-fundamentals)  Basic nursing skills (sub-specialty-fundamentals) | SP 19: N=70  860: Medication administration (sub-specialty: fundamentals)  812: Basic nursing skills (Sub-specialty: fundamentals)  816: Nursing judgment (NLN Educational Competencies)  819: Dimensions of patient care (QSEN)  813: Safety & Quality (QSEN)  FA 18: N=50  848: Medication administration (sub-specialty: fundamentals)  818: Basic nursing skills (Sub-specialty: fundamentals)  822: Nursing judgment (NLN Educational Competencies)  **923**: Dimensions of patient care (QSEN)  826: Safety & Quality (QSEN)  Continue to fall below the 850 benchmark in these identified areas of the EXIT HESI. As noted above, general faculty are reviewing gallery walk suggestions to work on curriculum gaps and low scoring areas.  Based on Advisory Committee Gallery Walk, the following have been implemented:  **Simulation**   * NSG 2600 medication simulation to perfusion lab * NSG 2600 added 2 skills labs reinforcing skills throughout the program * NSG 2600 students give and receive report at the bedside. Also, complete hourly rounding. Give and take report when new patients are coming in. * NSG 2600 rounds with physicians and reports on each patient. * NSG 2600 upon graduation are typically managing 3 to 4 patients. * NSG 2600 in hospital IPE with respiratory therapy, education on roles * NSG 2400: hourly rounding and bedside report. * NSG 2400 last 5 weeks advancing up to 2 patients to prepare for full load in 2600. * NSG 2400 medication administration in each simulation. * NSG 2450 IPE care conference summaries working with other disciplines working on communication and planning of care. Leadership skills are pulled out in this opportunity. * NSG 2450: Utilizes a video of local nurse leaders that questions were asked regarding leadership and leadership for the bedside nurse and the new graduate. This included CEOs, CNO, nurse manager, bedside nurses. * NSG 2450-students complete a QI project toward the end of the term and present it to the Sinclair community. * NSG 1650 QI specialist from PH that talked about the QI process in the hospital. * NSG 1500-IPE with 2400 and RT students that focuses on assessment and communication among different professions. Required observation of leadership skills, management skills, and economics. Reported out in post-conference. * NSG 1500 hourly rounding, report on and off. * NSG 1600- IPE with PA students from UD. Focus is on SBAR. * NSG 1600: hourly rounding and bedside shift report. * NSG 1600 simulation focusing on admission and discharging of patients. * NSG 1400-changed assessment process teaching focused to full assessment. * NSG 1400 IPE with rehab (2nd year students), turning, lifting, transferring. * NSG 1400 medication barcoding simulation at end of term and they start SBAR in lab and clinical. * NSG 1400 situational awareness. * Med errors: NSG provided the math department, who teaches the dosage calculation class, 2 simulation videos demonstrating how nurses use ‘quick math’ at the bedside which included medication administration and anticipated urine output. This process is to assist the math faculty in working with pre-nursing students in real-life application of dosage calculation in medication administration and how to avoid errors in the calculation step. * Utilization of EMS faculty to give report from the ED perspective. * Nurse brain sheet that is within EPIC that nurses use that students do not have access to-would help with time management. Students are witnessing nurses taking short cuts with bedside handoff and reporting, barcoding. Medication administration short cuts, they do not time IVP meds, just pushing them. Reporting by exception is happening which is role modeling incorrect bedside communication. Students are becoming helpers. * NSG 2600-Premier: disaster preparedness, working with organizations-EMS, ED Nurses, Docs, surgery nurses (communication). Cluster of care and moving patients through the system. Second experience CDC at MC Fairgrounds-overflow patients. No hospital equipment there, everything was paper or remote Wi-Fi. Observed nurses narratively documenting and having to function without technology. So many errors occurred that they completed the scenario a second time for learning.     **AY 2018-19:**  FA 18: N=50  848: Medication administration (sub-specialty: fundamentals)  818: Basic nursing skills (Sub-specialty: fundamentals)  822: Nursing judgment (NLN Educational Competencies)  **923**: Dimensions of patient care (QSEN)  826: Safety & Quality (QSEN)  **AY: 2017-18**  SP 18: N=68  **819**: Medication administration (sub-specialty: fundamentals)  **807**: Basic nursing skills (Sub-specialty: fundamentals)  **826**: Nursing judgment (NLN Educational Competencies)  **833**: Dimensions of patient care (QSEN)  **835**: Safety & Quality (QSEN)  FA 17: N=61  Manager of care: 827  Safety: 815  Quality: 834  Nursing judgment: 811  Medication administration: 715  Basic nursing skills: 797  NSG faculty have identified 5 areas of focus on the HESI to assess the curriculum for gaps and to identify strategies to improve scoring in these areas.  **2017-2018** Analysis:  SP 18:  Improvement in basic nursing skills; however, continued scoring below 850 in *basic nursing skills*. Will identify strategies AY 2018-19 to implement throughout the curriculum.  Improvement in *nursing judgment*; however, continued scoring below 850. Will continue to monitor.  Improvement in *safety & quality; however, continued scoring below 850.* Will continue to monitor.  *Beginning safety concept will be introduced in NSG 1200: Intro to NSG beginning Fa18*  FA 17:  NSG 1400 implemented formal skills checks for  Handwashing  Vital Signs  Blood Glucose  G-tube  NSG 1600 implemented medications in every lab (simulation, pulling medications from med cart, dosage calculation)  NSG 2400 implemented apartment simulation to address safety in the home setting. Incorporated medication review in lab including gaming. Began incorporating basic skills with formal skills checks.  NSG 2600 implemented skills check sheets. Addition of IVP medication. Addition of drug dosage calculation.  SP 17: N=60  Manager of care: 845  Safety: 837  Quality: 844  Nursing judgment: 832  Medication administration: 801  Basic nursing skills: 806  2017: Below benchmark of 850 in all areas. Decline in scores from SP 17 to FA 17 in manger of care, safety, quality, medication administration, and basic nursing care. Plan to add medication calculation to last semester labs. Curriculum committee to review for trends and curriculum gaps SP 18.  Premier Health Network shared data from their Versant Residency program demonstrating that 2017 Sinclair Graduates required 92% less remediation of foundational competencies and 77% less remediation of the generalist multi-specialty competencies compared with the 2015 and 2016 SCC participants. |
|  |  |  | Skills Check List: 100% of students will demonstrate skills by end of term.  **AY 2016-17**  **SP 17**: 100% of students completed skills review lab. 2 students absent and completed in make-up lab. | SP 18: 100% demonstrated skills  FA 17: 100% demonstrated skills  FA 17: Implemented formal skills check list in NSG 2600.  **AY 2018-19:**  **SP 19:** 100% of students demonstrated skills by end of term.  **FA 18:** 100% of students demonstrated skills by end of term.  **AY 2017-18**  **SP 18:** 100% of students demonstrated skills by end of term.  **FA 17:** 100% of students demonstrated skills by end of term.  **AY 2016-17**  **SP 17**: 100% of students completed skills review lab. 2 students absent and completed in make-up lab. |
| Incorporate current technology and nursing informatics to support evidence-based nursing judgment in the management of safe patient care. (NUR.S.AAS). | NSG 1400, NSG 1450, NSG 1500, NSG 1600, NSG 1650, NSG 2400, NSG 2450, NSG 2600 | 2017 | Clinical evaluation tool:  100 % of students achieve a MET rating for final clinical evaluation. | **AY 2018-19:**  100% of students achieved MET on the clinical evaluation tool  No changes. Continue to monitor.  **AY 2017-18:**  **FA17 & SP18**  Students continue to meet benchmark of Met for end of term clinical evaluation tool supporting PLO. Continue to monitor.  No changes. Continue to monitor.  FA 18: 100% Met  SP 18: 100% Met  FA 17: 100% achieved MET.  SP 17: 100% achieved MET.  2018: Benchmark achieved. Continue to monitor.  2017: Benchmark achieved. Students are introduced to a variety of technology and nursing informatics in each nursing course and are assessed using lab and clinical evaluation tools. NSG 2600 reflects end of program outcomes; achievement above reflects the 2600 clinical evaluation tool. |
|  |  |  | EXIT HESI:  Cohort will score 850 or greater on the **HESI Exit Exam** for the identified categories:  Informatics/technology (QSEN)  Information management & patient care technology (AACN)  Research & evidence-based practice (QSEN & EBP) | **AY 2018-19:**  SP 19**: N=70**  **831**: Information management & patient care technology (AACN curriculum)  **852**: Informatics (QSEN)  **817**: Research and EBP (QSEN: EBP)  FA 18**: N=50**  **856**: Information management & patient care technology (AACN curriculum)  **889**: Informatics (QSEN)  **819**: Research and EBP (QSEN: EBP)  Results continued or maintained, drop in management and patient care technology. Per above, review of gallery walk may indicate changes.  **AY 2018-19:**  FA 18: N=50  **856**: Information management & patient care technology (AACN curriculum)  **889**: Informatics (QSEN)  **819**: Research and EBP (QSEN: EBP)  **AY 2017-18**:  SP 18: N=68  **859**: Information management & patient care technology (AACN curriculum)  **836**: Informatics (QSEN) I  **816**: Research and EBP (QSEN: EBP)  FA 17**:**  Information/technology: 826  Information management/patient care technology: 730  Research/evidence-based practice: 807  **FA 17-SP 18 Analysis**:  Improvement noted in all 3 measured areas. Noted informatics and research and EBP below ELA. Continue to monitor with new changes implemented FA17.  NSG 1650 implemented teach-back method as part of EBP.  NSG 2400 implemented post-conference clinical questions which discussed evidence-based practice. Has incorporated more SimChart use in simulation scenarios.  NSG 2450 enhanced QI project by implementing a poster-board presentation using EBP. This course also implemented the process of using PICOT in relation to EBP.  NSG 2600 implemented EBP into theory tying in EBP to care bundles. Report out in post-conference QI projects on the directed practice units.  SP 17:  Information technology: 794  Information management/patient care technology: 758  Research/evidence-based practice: 827  2017: Benchmark of 850 not met for academic year. Improvement in information/technology; decline in information management/patient care technology and research/EBP. Faculty will continue to monitor for trends and curriculum committee to assess for curriculum gaps. |
| Establish therapeutic relationships to assist patients/families to meet outcomes related to health promotion, recovery from acute illness, management of chronic illness, and end of life care. (NUR.S.AAS). | PSY 1100, COM 2206, NSG 1400, NSG 1450, NSG 1500, NSG 1600, NSG 1650, NSG 2400, NSG 2450, NSG 2600 | 2017 | EXIT HESI:  Cohort will score 850 or greater on the **HESI Exit Exam** for the identified categories:   * Geriatrics (specialty area) * Pediatrics (specialty area) * Maternity (specialty area) * Psychiatric/Mental Health (specialty area) * Nursing process (sub-specialty: professional issues) * Cultural/Spiritual (sub-specialty-professional issues) * Communication (nursing concepts) * Family dynamics (nursing concepts) * Nursing process (sub-specialty professional issues) * Cultural/spiritual (sub-specialty: professional issues) | **AY 2018-19:**  SP 19: **N=70**  946: Geriatrics (specialty area):  **798** Pediatrics (specialty area)  **763** Maternity (specialty area)  **827** Psychiatric/Mental Health (specialty area)  **821** Nursing process (sub-specialty: professional issues)  **818** Cultural/Spiritual (sub-specialty-professional issues)  **897** Communication (Nursing concepts)  **806** Family dynamics (nursing concepts)  **737** Cognition (nursing concepts)  **732** Developmental (nursing concepts)  FA 18: **N=50**  **890**: Geriatrics (specialty area):  **795** Pediatrics (specialty area)  **705** Maternity (specialty area)  **803** Psychiatric/Mental Health (specialty area)  **856** Nursing process (sub-specialty: professional issues)  **790** Cultural/Spiritual (sub-specialty-professional issues)  **857** Communication (Nursing concepts)  **861** Family dynamics (nursing concepts)  **799** Cognition (nursing concepts)  **818** Developmental (nursing concepts)  Continued areas scoring under the 850 benchmark. Will address with gallery walk results to identify ways to improve curriculum or address curriculum gaps, and monitor results based on implemented strategies.  **AY 2018-19:**  FA 18: N=50  **890**: Geriatrics (specialty area):  **795** Pediatrics (specialty area)  **705** Maternity (specialty area)  **803** Psychiatric/Mental Health (specialty area)  **856** Nursing process (sub-specialty: professional issues)  **790** Cultural/Spiritual (sub-specialty-professional issues)  **857** Communication (Nursing concepts)  **861** Family dynamics (nursing concepts)  **799** Cognition (nursing concepts)  **818** Developmental (nursing concepts)  **AY: 2017-18**  SP 18: N=68  **869**: Geriatrics (specialty area):  **818** Pediatrics (specialty area)  **678** Maternity (specialty area)  **892** Psychiatric/Mental Health (specialty area)  **855** Nursing process (sub-specialty: professional issues)  **921** Cultural/Spiritual (sub-specialty-professional issues)  **863** Communication (Nursing concepts)  **934** Family dynamics (nursing concepts)  **996** Cognition (nursing concepts)  **870** Developmental (nursing concepts)  FA 17: N=61  Communication: 835  Family dynamics=779  Nursing process: 805  Cultural spiritual=821  SP 17: N=60  Communication: 835  Family dynamics: 858  Nursing Process: 838  Cultural spiritual: 933  **AY 2017-18 Analysis:**  Improvement noted in:  Geriatrics  Psych & Mental Health  Nursing Process  Cultural/Spiritual  Communication  Family Dynamics  Cognition  Developmental  Will continue to monitor trends. Maternity continues to be a low scoring area; however, number of questions asked: are 8 (16/17) & 10 (17/18). Discuss with curriculum if this needs to be addressed. Continue to monitor scores.  NSG 1400 implemented clinical site of school setting for screenings and ODH formal training for hearing/vision & increased community clinical exposure to enhance exposure to growth and development.  NSG 1600: incorporating the aging process with each concept. In-class exercise to complete a care MAP for an altered concept for a child and for an older adult.  Incorporation of Chaplain visit during clinical rotation.  2017: Benchmark partially achieved. Continue to monitor for trends. No change in communication, decrease in scores for family dynamics, nursing process, and cultural spiritual from the SP 17 to FA 17 cohort. Curriculum committee will assess for curriculum gap. |
|  |  |  | Clinical evaluation tool  100 % of students achieve a MET rating for final clinical evaluation. | FA 18-SP 19 100% of students achieved met rating.  No changes identified or implemented.  FA 18: 100% achieved Met.  SP 18: 100% achieved Met  FA 17: 100% achieved MET.  SP 17: 100% achieved MET.  2018: Benchmark achieved. Continue to monitor.  2017: Benchmark achieved. Continue to monitor. |
| Synthesize interrelated concepts for quality patient care across the lifespan in collaboration with the interdisciplinary team in a variety of health care settings. (NUR.S.AAS). | ALH 1101; MAT 1130, PSY 1100, BIO 1141, BIO 1242, elective science, COM 2206, NSG 1400, NSG 1450, NSG 1600, NSG 1650, NSG 2400, NSG 2450, NSG 2600 | 2017 | Clinical evaluation tool:  100 % of students achieve a MET rating for final clinical evaluation. | **AY 2018-19**  SP 19: 100% of students achieved Met rating.  FA 18: 100% of students Met  No changes identified or implemented.  FA 18: 100% MET  SP 18: 100% MET  FA 17: 100% achieved MET.  SP 17: 100% achieved MET.  2018: Benchmark achieved. Continue to monitor.  2017: Benchmark achieved. NSG 2600 course outcomes reflect program outcomes. Students able to successfully synthesize content from program, including pre-requisites in the clinical setting. |
|  |  |  | Average (Mean) score cohort will achieve on EXIT HESI-850 or greater (change in benchmark) | **AY 2018-19**  SP 19: 814 (N=70)  FA 18: 823 (N=50)  Data assessed and presented to faculty end of term. Gallery walk completed to stimulate ideas to address areas for improvement or curriculum gaps. As noted above, strategies from gallery walk implemented SP 19 and FA20. Will monitor for progress and improvement based on strategies implemented.  **AY 2018-19:**  FA 18: 823 (N=50)  **AY: 2017-18**  SP 18: 833 (N=68)  FA 17: 811 (N=61)  **AY 2017-18:**  Below 850 ELA for 3 terms. Note strategies throughout SPE implemented or to be implemented throughout the curriculum. Will monitor for improvement, stasis, or decline in overall EXIT HESI average score trend. |
|  |  |  | EXIT HESI:  Cohort will score 850 or greater on the **HESI Exit Exam** for the identified categories:   * Health promotion and maintenance (client needs) * Teaching and learning (nursing concepts) * Growth and development (sub-specialty: clinical concepts) * Geriatrics (sub-specialty) * Pediatrics (sub-specialty) * Communication (QSEN: teamwork & collaboration) | \*Now assessed above by overall EXIT HESI average score by cohort  SP 17: N=61   * Health promotion: 766 * Teaching-learning: 768 * Growth & development: 796 * Geriatrics: 815 * Pediatrics: 846 * Communication: 818   FA 17: N=60   * Health promotion: 776 * Teaching-learning: 848 * Growth & development: 905 * Geriatrics: 886 * Pediatrics: 918 * Communication: 882   2017: Benchmark of 850 not achieved for the FA 17 cohort compared to the benchmark of 850 partially achieved for the SP 17 cohort. Continue to monitor for trends. Curriculum committee to review and identify any curriculum gaps. |
|  |  |  | NSG 2450 Quality Improvement Rubric:  90% of students will achieve 80% or higher. | **AY 2018-19**  100% of students achieved 80% or higher on QI rubric.  Trend indicates this is an obtainable goal. NSG 2450 agreed to increase to 90% of students will achieve **90%** or higher on QSEN QI rubric for AY 2019-2020.  FA 18: 100% of students achieved 80% or higher on assignment.  SP 18: 100% of students achieved 80% or higher on assignment.  FA 17: 100% of students achieved 80% or higher on assignment.  SP 17: 100% of students achieved 80% or higher on assignment. |
|  |  |  | NCLEX First Time Pass Rates:  Program pass rate on licensure examination that is 95% of the national average for first-time candidates in a calendar year (OBN) | **2019**: 85.71% for the 2019 year.  National Average: 88%  Although there was a slight drop from 2018 to 2019, the program continues to meet the OBN expectation of 95% of the National Average and ACEN accreditation standard of 80% off all first time test takers in a 12-month period will pass on the first attempt.  2018: 88% first time candidates (110/125 FTPR)  The first-time pass rates continue to improve with a 1.7% increase from 2017 to 2018. The program remains at the expected level achievement of at or greater than 95% of the national average for all test takers.  AY 2017: 86.3% first time candidates  With the implementation of the new curriculum the program has shown an increase of 11.5% in NCLEX FTPR from the AY 2016 to AY 2017 and averages above 95% of the national average. A variety of strategies were implemented to increase first time pass rates including a rigorous testing policy, adaptive quizzing, concept-based curriculum, and increased lab time, and increased utilization of electronic testing. |
|  |  |  | Completion Reports RAR:  Program completion ELA of 69% entering NSG 1400/1500 (LPN) will complete the program within six (6) semesters. | **AY 2018-19**  FA 18 enrolled 82; graduated 58; 70%  SP 19 enrolled 87 graduated 59; 69%  The cohort entering SP 17, graduating FA 18 lost a third of the cohort in NSG 1600, fall 2017. A root cause analysis was completed by the department to better understand the lack of success of this cohort which resulted in identification of a faculty area of improvement that was addressed with an action plan requiring mandatory continuing education by the faculty. An additional faculty was assigned to that course spring 2018 to assist course faculty with alignment of content and exams. It was also identified a large number of the unsuccessful students were more likely to have taken the TEAS, science courses and ALH 2202 multiple times prior to entering the program. The large majority of the students did meet the completion expected level of achievement by completing the program within 6 semesters (150% of the allotted time).  AY 2017-18:  FA 17 graduate completion 55/77 (71.43%)  SP 18 graduate completion 59/84 (70.24%). Overall AY graduate completion 114/161 (70.8%).  Versant data provided by Premier Health indicated Sinclair new graduates need less remediation during orientation than all other new hires.  AY 2016-17: Completion for the AY was 92/137 students (67%). The cohort starting FA 16 had 34/62 on-time completion; SP 17 had 58/75 on-time completion. Faculty continue to make referrals to appropriate SCC student services to support students in academic success.  Completion rates continue to increase from AY 2012-13. Department ELA determined by faculty: based on historical data of average of 68-70% completion, large percentage of non-traditional students/high risk students (working FT, second career, minority, ESL, first member of family to go to college, demographics and college completion rates). AY 2012-13: 51%; AY 2013-14: 49.4%; AY 2014-15: 36.3%.  AY 2016-17: N=4 (19%). Due to low response rate, discussed with RAR and will include FA 16 graduates in the SP 17 college graduate survey and disaggregate the data.  Continue to survey students via college process email survey 6-months post-graduation for employment and transfer data.  Noted above, Premier Health Network shared data from their Versant Residency program demonstrating that 2017 Sinclair Graduates required 92% less remediation of foundational competencies and 77% less remediation of the generalist multi-specialty competencies compared with the 2015 and 2016 SCC participants. |
|  |  |  | College/Department Surveys:  Employment/Transfer rate: 80% of graduates will be employed full-time or part-time as a registered nurse within 12 months post-graduation. | 2018-2019  AY 2018-19: 103/120 (85.8%) employed; 13/120 enrolled in a 4-year program  Prior year update to students enrolled in a 4-year program:  AY 2017-18: 41/128  AY 2016-17: 39/148  There is a national nursing shortage that is impacting the local area as well. Many Sinclair students have pending job offerings from their current employer or from their last semester clinical rotation pending successful completion of the state licensing examination. All networks are continuously hiring RNs at this time. The program continues to work with employers to send students to hospital meet & greets, hiring fairs, and onsite interviewing.  **2018-19**:  With the updates to VA, employment rates are reported out as follows by the college:  2017-18: 82/128 (64%)  2016-17: 125/148 (85.4%)  2015-16: 135/149 (91%)  The hiring trend in the Dayton area has been a push for BSN nurses which may explain the 64% hiring of 2017-18, as well as the closure of Good Samaritan and the hiring freeze from Premier. Currently, the Dayton area is in a nursing shortage; therefore, this number will be monitored closely to identify trends.  2017-18  GVH will be completing speed interviewing on campus for last semester students. Increased attendance and participation of NSG students in the HS career fair. Continuing to work with KCMA to support seamless BSN completion transfer and with UD for the 1+2+1 and BSN completion opportunities. |
|  |  |  | 80% of graduates via Facebook IM informal survey will indicate they are employed or have transferred within 12-months of graduation.  **\*some students do not have FB accounts or are not linked to the Sinclair Nursing FB page**  ODJFS report on employment & transfer rates:  80% of graduates identified by ODJFS report will indicate they are employed or have transferred within 12-months of graduation. | To improve student responses to surveys and collect accurate data on employment as a RN, the department implemented a Facebook IM informal survey to students asking if they are employed as a RN and where. Starting with SP 19 graduates, an additional question was added asking if they are enrolled in a BSN program and if so where. This data collection now delineates RN employment where ODJFS does not.  SP 19 Grads: 49 students messaged through FB  26/49 responded and are working as a RN (53%)  10/49 are currently enrolled in a BSN program (20%)  Graduates: 70  FA 18 Grads:  Graduates: 50  Number of students surveyed via FB: 35  Responses= 28/35 (80%)  27/28 responded working as a RN  SP 18 Grads:  Graduates: 68  Number of students surveyed via FB: 54  Responses= 40/54 (74%)  39/40 responded working as a RN  FA 17 Grads:  Graduates=60  Number of students surveyed via FB: 48  Responses=39/48 (81%)  38/39 are employed as a RN  ODJFS current available placement and transfer data is from AY 2013-14 with an employment rate of 69.67% and a transfer rate of 27%. This data does not differentiate employed as a nurse versus any employment.  ODJFS able to provide data limited data with the following restrictions (data includes grads of 16/SU and 16/FA; employed is defined as a wage record and may not be in desired field)- FY 206-17: 55% employed within one year; FY 2015-16: 89% employed within one year; FY 2014-15: 94% employed within one year.  2016-17: Department working to maintain writing/job interviewing in NSG 2600 course.  2015-16: Employment/transfer rates through ODJFS continue to increase from 96% to 98% in the 2013-14 year. Lag time continues; will continue to work with RAR annually to update employment/transfer data. |

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| **Are changes planned as a result of the assessment of program outcomes? If so, what are those changes?** | No changes are planned as a result of the assessment of program outcomes.  Future plans for the nursing department include:  Strategize how to manage the growth of the Intro course and the impacts of a waitlisted program.  Strategize how to best meet the needs of the LPN to RN students.  Monitor the assimilation of the UD pathway nursing students. |

**OPTIONAL:**

Please use the space below to keep track of any annual data that your department wishes to maintain. This section is completely optional and will not be reviewed by the Division Assessment Coordinators.

The program has a systematic plan of evaluation (SPE) that is used to track program outcome data which includes the following:

1. NCLEX First Time Pass Rates (aggregated and disaggregated by traditional, LPN, transfer, and military students) by term and year.
2. Program completion rates aggregated by year.
3. Program completion rates disaggregated by program and term.
4. Employment/Transfer rates by year.