

Self-Study for Accreditation Commission for Education in Nursing (ACEN)

Riverland Community College
Practical Nursing Program
Austin, Minnesota
Site Visit October 23-25th 2017



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General Information

Introduction

- Type of Program Practical Nursing Diploma Program
- Purpose Initial Accreditation
- Dates of Visit October 23-25th, 2017
- Name and Address of College Riverland Community College
1900 8th Avenue NW
Austin, MN 55912

- Name College CEO Adenuga Atewologun, Ph.D.
President, Riverland Community College
Phone: (507) 433-0607
Adenuga.atewologun@riverland.edu
- Name of the institutional accrediting body Higher Learning Commission: A Commission of the North Central Association of Colleges and Schools
30 North LaSalle Street
Suite 2400
Chicago, IL 60602-2502
Phone: (312) 263-0456
www.ncahlc.org

Date of most recent accreditation: August 2016
Date of last reaffirmation of accreditation was August 2009; next reaffirmation is scheduled for 2024.
[Supporting Evidence Appendix 1: Higher Learning Commission documents](#)
- Name of state agency authorizing governing organization to provide postsecondary education program in the state – with supporting evidence Minnesota State Colleges and Universities
30 E 7th St #350
St Paul, MN 55101
Phone: (651) 201-1800
<http://www.Minnesota State.edu>
[Supporting Evidence Appendix 2: Minnesota State authorization to provide postsecondary education](#)
- Name of state agency authorizing governing organization to grant the Minnesota State Colleges and Universities
30 E 7th St #350
St Paul, MN 55101

credential (degree, diploma and certificate) to the Nursing program seeking accreditation – with supporting evidence)

Phone: (651) 201-1800
<http://www.Minnesota State.edu>

[Supporting Evidence Figure 3: Minnesota State credential granting](#)

- Name and address of the Nursing education unit

Riverland Practical Nursing Program
1900 8th Ave. NW
Austin, MN 55912

- Name of the nurse administrator

Laura L. Beasley, MS, RN
Director of Nursing Programs
Phone: (507) 433-0676
Laura.beasley@riverland.edu

- Name of the state regulator agency for Nursing

Minnesota Board of Nursing
2829 University Avenue SE # 200
Minneapolis, MN 55414-3253
Phone: (612) 317-3000
mn.gov/health-licensing-boards/nursing/

[Supporting Evidence Figure 4: Minnesota Board of Nursing](#)

- The ACEN standards and criteria used to prepare the self-study: 2017

Introduction to the Practical Nursing Program

There are two Nursing programs at Riverland College, the Associate Degree (AD) program for Registered Nursing (RN) and the Diploma program for Practical Nursing (PN). Until 2014, the PN program was the 1st year of a pathway program to the AD program. The pathway program had a step-out point for PNs to take the NCLEX-PN exam to become licensed, but this was not a requirement for PNs to progress to the next level of the pathway program. As of Fall of 2014, the AD program moved to a BSN-shared curriculum with six colleges and one university with a step-out point at 5th semester for the Associate Degree. In the Fall of 2014, the PN Program became a stand-alone program with the first cohort of students admitted.

Currently, Riverland has one PN Program and one AD Program located on one campus in Austin, MN. Each program offers a separate curriculum and functions independently to the other. Riverland's AD program is currently accredited by Accreditation Commission for Education in Nursing (ACEN) and is up for reaccreditation in 2021. The Associate Dean of Allied Health/Director of Nursing (DON) oversees both programs. Faculty are sometimes shared between both the PN and the AD programs.

The PN program currently anticipates an enrollment of 40 students in Fall 2017. There is an admission cycle each Fall to the PN program with a capacity to fill 40 seats.

Section One: Executive Summary

History of the Practical Nursing Program

Riverland Community College is part of the Minnesota State Colleges and University System (Minnesota State), a legislatively mandated statewide system made up of 24 two-year colleges and seven state universities. Riverland Community College is a public, nonprofit, nonresidential institution that grants Associate degrees, diplomas, and certificates in the liberal arts and career programs. Situated rurally in Southeastern Minnesota, the college has three campuses located in Austin, Albert Lea, and Owatonna. The Nursing program is only offered on the Austin campus in the West Building.

In 1995, the Minnesota State Colleges and University System was formed. As a result, the Austin Area Vocational Technical Institute was merged with Austin Community College to become Riverland Community College. The former Austin Area Vocational Technical Institute had a PN Program. The

former Austin Community College had an AD Nursing Program. When the campuses merged, both Nursing programs moved to the same building.

The population of the surrounding area is approximately 107,000 people. Austin's population is approximately 25,000. Austin has a small-town feel, but it is the home of a very large industry called Hormel Foods and is home to the famous Spam Museum. Albert Lea, a city of approximately 18,000 people, has an agricultural history plus a diverse industrial base. Owatonna has an agricultural past, but now has more than 40 industrial firms and over 500 retail, wholesale, and professional firms. The city of Owatonna has a population of approximately 25,500 people.

The area's population is diverse including many people of color. Riverland's student body is diverse and is increasing in diversity; this includes people of color. In addition, the diversity of faculty and staff here at Riverland is growing to mirror the student body.

Summary of Standards and Criteria

Standard 1: Mission and Administrative Capacity

The mission statements of Minnesota State, Riverland Community College, and the PN Program are congruent, demonstrating learning for living through a supportive, personalized environment for individual learners.

Faculty, administration, and students in the Nursing program participate in the governance of Riverland Community College. Nursing faculty participate on various committees, both program and college-wide. Students are active in the Nursing Student Forum, the Nursing program Advisory Committee, Faculty Meetings, and Faculty Curriculum/Team Teaching Meetings. All faculty, administration, students, and communities of interest are invited twice yearly to the Nursing program Advisory Committee meetings; this allows participation in decisions regarding curriculum and program changes.

The Associate Dean of Allied Health/Director of Nursing (DON), Laura Beasley, holds a Master's degree in Nursing. Riverland's administration is supportive of the Nursing programs and allows, with faculty input, the dedication of resources and budget to fulfill responsibilities, implement policies, and respond to student's needs.

Standard 2: Faculty and Staff

There is one full-time faculty member and two part-time faculty members who have teaching assignments in the PN Program. The one full-time faculty has a Master's degree in Nursing. Both part-time faculty have Bachelor's degrees in Nursing. One of the part-time faculty also works as the Lab Specialist when she is not teaching as faculty under a different union contract. Her duties as a lab

specialist includes providing technical support for the interdisciplinary simulation center, assisting with proper usage of simulators and smart media, ensuring that sufficient quantities of supplies and working equipment are available in the lab, functioning in a liaison capacity, and establishing safety and security procedures. The credentials required for this position include an Associate degree in Nursing with current RN licensure; this is not a faculty position. The person in this position has a Bachelor's Degree in Nursing and sometimes she teaches in the lab for the PN students.

The PN Program maintains faculty-to-student ratios that optimize achievement of program outcomes. Class size is determined through a shared governance process between the college and Minnesota State College Faculty (MSCF) association. Numbers of students admitted to the program are limited based on set student/faculty ratios. Faculty and student ratios are also set for the classroom, laboratory, and clinical practice areas to ensure adequate opportunities for teaching, supervision, and student evaluation.

The PN Program is committed to the enhancement of faculty performance in the areas of teaching, clinical practice, service, and scholarship. The faculty has adopted the scholarship definition as defined by the National League for Nursing (NLN) Core Competencies for Nurse Educators.

Orientation to Minnesota State, Riverland Community College, and the Nursing program is provided for all new full-time and part-time faculty. A mentoring system is in place for all new faculty when they start in the program. The Minnesota Board of Nursing stipulates that new faculty have classes on student evaluation and Minnesota State College and University System stipulates that new hires are educated on student evaluation, course development, and educational theory. The PN Program is in compliance with these rules.

The Associate Dean/DON conducts systematic assessment of full-time faculty in alignment with the MSCF agreement and Riverland Community College's policy. Each full-time faculty member is assessed at least once every three years. All part-time faculty are assessed every semester. Methods of assessment include administrative classroom/clinical visits, student evaluations of the faculty member, and student course evaluations. The Associate Dean/DON evaluates staff performance according to Minnesota State policy, contract language, and Riverland Community College's policy.

The Office of Instructional technology (OIT) staff provides faculty assistance and training on new forms of technology. The staff in OIT are available to consult with faculty as needed. Additional faculty support is available 24 hours a day, seven days a week from the Minnesota College and University System D2L Brightspace Help Desk at <https://D2L.Brightspace.custhelp.com/app/home>.

Standard 3: Students

Nursing student policies are congruent with those of Riverland Community College, with minor changes evident because of the nature of the course of study for Nursing. They are publicly accessible on the website, nondiscriminatory, and consistently applied. Differences in policies for students, such as background checks, immunizations, medical insurance, and CPR certification are mandated by contract agreements with our clinical agencies in order to protect the clients for whom the students care.

The support services available for Nursing students are consistent with those of all students enrolled at Riverland Community College. Student services are available online and on each site of the three campuses.

Financial aid records at Riverland Community College are kept in compliance with the Higher Education Reauthorization Act Title IV. The Financial Aid Department submits documentation to the governing organization and Minnesota State, as needed, to remain compliant. The Riverland Community College Financial Aid Manual was developed to reflect the college's current practices in the delivery of financial aid and is intended to ensure compliance with regulatory and audit requirements by clearly, comprehensively documenting the policies and procedures by which the office operates. This manual can be found at the Financial Aid Office in the Austin East Building.

Students are required to do Entrance and Exit Counseling for financial aid, according to the Department of Education Guidelines. Students are given the website to find all required information. The student cannot complete a Promissory Note unless he or she has gone through Entrance Counseling, which outlines students' rights and responsibilities on the loan itself and the repayment options. Information regarding student's ethical responsibilities regarding financial aid can be found in the Riverland Student Handbook and on the Financial Aid website of Riverland Community College. Riverland Nursing program information is communicated to the public via the college website, the Nursing program web page, and local newspapers and TV stations.

Changes to PN Program policies, procedures, and program information are provided to students via the D2L Brightspace learning management system's home page, email, or at the beginning of the semester course orientations and on the Riverland website. The Nursing Student Handbook and web page, along with policies and procedures, are reviewed and updated annually and as needed, by the Associate Dean/DON and faculty.

All students, taking on-campus or online/distance-learning classes, have access to the D2L Brightspace learning management platform. The D2L Brightspace platform is introduced to students in the mandatory orientation before registering for classes. The online orientation can be found at

<https://connect.shot.smsu.edu/orientationD2L/Brightspace>. There are several two-hour face-to-face D2L Brightspace orientations offered to new students. They can sign up online to take this orientation class. New students are required to attend a New Student Registration session after they complete the online orientation.

Standard 4: Curriculum

The PN program is three semesters, starting in the Summer of each year. The ACEN national statistics indicate PN programs range in length from 30 to 90 credits. The PN program at Riverland is 35 credits. The length of the program is congruent with Minnesota State, MBON, and the Higher Learning Commission.

The PN curricular framework is based on current national standards, is evidence based, and is congruent with the Minnesota Scope of Practice for the PN as passed by the Minnesota legislature in May of 2013. The curriculum is based on the Minnesota Practical Nursing Scope of Practice (2013), the National Association of Practical Nurses Education and Service (NAPNES), and the National League of Nursing (NLN) Outcomes and Competencies Educational Framework (2010). There are eight professional concepts that guide the student learner outcomes and those include:

- Informatics technology
- Managing care of the individual patient
- Nursing judgement/Evidence-based care
- Patient relationship centered care
- Professional identity and behaviors
- Quality improvement
- Safety
- Teamwork and collaboration

In addition, there are 14 health and illness concepts that fall under nursing judgement/evidence-based care.

The PN curriculum was developed by a statewide PN curriculum collaboration project with faculty input. There were two former Riverland Nursing faculty who served on this project. The curriculum is reviewed for integrity, rigor, and currency annually by the faculty and changed as needed.

Practice learning environments for students include labs, simulations, and clinical experiences. The PN Program utilizes several area health facilities that have all levels of patient care across the lifespan.

Standard 5: Resources

The PN Program strives to acquire and maintain resources that are current, comprehensive, and sufficient to meet the needs of students and achieve learning outcomes congruent with the changing healthcare environment.

As a member of the Minnesota State College and University System, the college receives an annual fiscal allocation based on legislative appropriations. Riverland has an annual operating budget of approximately \$21,000,000. Although there have been overall decreases in funding for higher education in Minnesota, the PN Program receives annual resources sufficient to support the program's goals and objectives.

The PN Program has its own budget that is separate from the AD Nursing budget. The PN program's non-salary budget is approximately \$15,000 per year. Both the PN and AD Nursing budgets support the Allied Health Simulation Center (simulation lab). In addition, the simulation lab has its own budget of approximately \$11,000. The amount is allocated from the college budget each fiscal year (determined in early Spring, preceding the next fiscal year), and Nursing market rate tuition. The Associate Dean/DON, has full authority over the budget and manages the budget with the input of the Nursing faculty and the Simulation Lab Specialist.

Physical resources are sufficient to ensure the achievement of the Nursing education program outcomes and meet the needs of faculty, staff, and students. The PN Program is committed to providing comprehensive, current, and accessible learning resources for its students and faculty.

Course materials are delivered face-to-face. Classrooms are well equipped with current technology, including PowerPoint, Web-based applications, smart boards, document cameras, web cams, web-based videos, DVDs, and CDs.

The Riverland Allied Health Simulation Lab is an inter-professional center that encompasses Radiography, Health Unit Coordinator, Human Services, Nursing, Medical Assisting, EMT, and Law Enforcement. It is well equipped with low, medium, and high fidelity simulators. There are six beds in the simulation lab, and three are equipped with video cameras that have the capability to record or live-stream simulations. There are functioning head walls with simulated oxygen and suction in each bay. One bay has the capability to be converted into an operating room with lights. The operator stations are equipped with iPads that can run the video monitors and encoders that connect to the server and provide video streaming. The practice lab, which is in a different room adjacent to the

simulation lab, is a more traditional lab with nine beds. It is equipped with functioning head walls that include simulated oxygen, suction, and blood pressure cuffs.

Students and faculty have easy access to technology and tech support. The Office of Instructional Technology (OIT) is readily available to assist both students and faculty with the use of computer-based instructional aids and teaching methods. For students, the computer labs, on all campuses, provide OIT staff for assistance during all open hours. During the Summer and on Faculty Conference Days, faculty have classes available to them to increase their technical ability.

The Student Success Center (SSC) provides professional and peer tutoring, study groups, software, study skills, coaching, assessment, and testing services. The SSC is located in the East Building on the Austin Campus and on the campuses in Albert Lea and Owatonna.

Standard 6: Outcomes

A Systematic Evaluation Plan (SEP) for the Riverland PN Program has been developed by the faculty to evaluate student learning and program outcomes. Through the self-study process, faculty have recognized the value and importance of ongoing evaluation. The PN Program's SEP is organized according to the 2017 ACEN standards and criteria as well as program components. The SEP serves as a working template which faculty use to measure and evaluate the achievement of student learning outcomes, program outcomes, and ACEN standards and criteria. Faculty continuously measure and evaluate student learning outcomes, program outcomes, and ACEN standards and criteria in both a formal (designated pre-determined intervals) and informal (as needed) basis. Program decisions are made after consideration and discussion of findings yielded through the process of systematic evaluation of the program. Changes may be made in response to curricular revisions and/or as evaluation methodologies prove to be ineffective measures.

Evaluation findings and program outcomes are shared with communities of interest.

Table 1: Analysis of Strengths and Areas Needing Development			
Standard	Strengths	Areas Needing Development	Future Plans
1. Administration	Commitment and support of the Riverland Community College President, advisory board, cabinet, Foundation, and administration for a successful Nursing program. A “whatever it takes” philosophy.	Increased participation at advisory board by community partners.	Meet face to face with the advisory board members that do not consistently attend to let them know how important their participation and feedback is to our Nursing programs.
2. Faculty	Experience and dedication to quality shown by the faculty. They are passionate about, well prepared for Nursing education, and are committed to students achieving the Nursing program student learning outcomes. Each day, faculty go above and beyond their everyday tasks to support one another and to meet student needs.	Full-time PN Faculty member with 40+ years of experience near retirement.	If possible, identify retirement date and have current faculty member orient new hire to that role.
3. Students	Students have when surveyed consistently agree or strongly agree that student services meet their needs. We have a nurse tutor for the PN students.	No development needed at this time.	Continue to provide quality student services.
4. Curriculum	Successful implementation of the new statewide PN curriculum. Curriculum is strong and well developed with continuous quality improvement.	Need to consider when new faculty hired, the development of test blueprints.	Continue to develop with quality improvement based on student, faculty feedback, and communities of interest.
5. Resources	Received \$90,000 from the Deans Initiative fund to update the audio visual in the simulation lab in Spring 2017. Resources adequate according to student surveys.	To update several mannequins in the Sim Lab	Plan to find future funding from our partners and foundation.
6. Outcomes	All program outcomes are all met. NCLEX, Job Placement, and Completion all meet expected levels of achievement. SLOs all met.	ATI for measurements for SLO attainment	Develop plan for SLO measurement using ATI

Section Two: Standards 1-5

Standard 1 Mission and Administrative Capacity

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

Criteria 1.1

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

Please refer to the following table below to see the comparison of the mission statements between Minnesota State, Riverland Community College, and the PN Program. Students' learning needs are addressed and met congruently through the mission statements of all three units.

Table 2: Mission, Vision, Philosophy, Nursing Education Statement			
Focus	Minnesota State	Riverland	Riverland Practical Nursing
Mission	The Minnesota State Colleges and Universities system of distinct and collaborative institutions offers higher education that meets the personal and career goals of a wide range of individual learners, enhances the quality of life for all Minnesotans and sustains vibrant economies throughout the state.	Riverland Community College inspires personal success through education. Revised 2014	Graduates of the Nursing program will effectively integrate general education and the science coursework with the discipline of practical Nursing course work as the basis for Nursing practice and ongoing life-long learning.
Vision	The Minnesota State Colleges and Universities system will enable the people of Minnesota to succeed by providing the most accessible, highest value education in the nation.	Achieve “Best in Class” status in programs through excellence in teaching, scholarship and service. Revised 2014	The Practical Nursing Program works toward excellence in learning through innovation, responsiveness, resourcefulness, and collaboration. This is accomplished through simulation, modeling, dialogue, experiential exercises, discussion, case studies, practice, affirmation, and provision for an environment for growth.

Table 2: Mission, Vision, Philosophy, Nursing Education Statement			
Focus	Minnesota State	Riverland	Riverland Practical Nursing
Philosophy		<p>The Heart of Riverland Statement Riverland Community College is dedicated to our students, our mission and our communities.</p> <p>Revised 2014</p>	<p>The Practical Nursing (PN) Program believes that the PN is grounded in the biological, psychological, sociological, and spiritual sciences practiced under the supervision of a Registered Nurse or other qualified health care professional. Nursing is devoted to promoting, maintaining, and restoring the health of individuals as well as promoting a peaceful, dignified death. Licensed Practical Nurses (LPNs) care for diverse individuals across the lifespan in a variety of inpatient and community-based settings by providing safe, culturally sensitive, individualized patient/relationship centered care and by participating as a member of the health care team.</p> <p>Licensed Practical Nurses recognize that teamwork and interprofessional collaboration among health care professionals are critical to delivering safe, quality patient care. Ongoing quality improvement activities are performed in concert with other members of the health care team. Implementing established evidence based care, skills in informatics, and patient care technology is essential to the delivery of quality, safe, patient-centered care.</p> <p>Professional values guide interactions with individuals, families, and the health care team. Licensed Practical Nurses demonstrate professional behaviors by exhibiting accountability for their actions, meeting the health care needs of patients, and assuming legal responsibility for the care they provide. Licensed Practical Nurses demonstrate professional identity by upholding their commitment to the public and by adhering to an established code of ethics.</p> <p>The major roles of the LPN includes providing nursing care and participating as a member of the nursing profession. As providers of care, LPNs contribute to the promotion of wellness, use nursing judgment in the identification of current and emerging patient problems and function as advocates for individual patients. In addition, LPNs manage care of the individual patient using established protocols and evidence-based care incorporating the nursing process and caring as essential tools. LPNs work within an established plan of care to assign other LPNs and assign and</p>

Table 2: Mission, Vision, Philosophy, Nursing Education Statement			
Focus	Minnesota State	Riverland	Riverland Practical Nursing
			<p>monitor unlicensed assistive personnel tasks/activities to provide safe, quality patient care. Licensed Practical Nurses provide health care information and reinforce education provided by other members of the health care team to achieve positive clinical outcomes.</p> <p>The Nursing program believes that students that graduate from this program must be ready to practice in a complex and changing clinical environment. To assure that students are ready for their role as an LPN, the program measures eight student learning outcomes with identified competencies and apprenticeships by which the student must successfully complete by completing the NLN apprenticeships which include the “knowledge apprenticeship” which incorporates the knowledge behind nursing practice; the “practice- know-how apprenticeship” to provide safe, quality care; and the “ethical comportment apprenticeship”. The student is given the opportunity to reflect on the importance of patient/relationship centered care, teamwork and collaboration, managing care of the individual patient, quality improvement, safety, informatics/technology, professional identify/behaviors, and nursing judgment/evidence based care within their individual practice as a future LPN.</p> <p>The philosophy is in congruence with the mission, vision, and values of Minnesota State and Riverland Community College.</p>
Nursing Education Statement			<p>Nursing education is the pursuit of knowledge shared by both the teacher and the learner. It is the process in which the integration of learning in a specialized area (Nursing), all with supportive courses and general education, serves to develop nursing judgment, skill acquisition, and encourage individual growth and development. Furthermore, nursing education serves to initiate individuals to the culture of nursing and healthcare.</p> <p>Within the context of nursing education, the Humanities promote an understanding of self and others and lay the foundation for values such as</p>

Table 2: Mission, Vision, Philosophy, Nursing Education Statement			
Focus	Minnesota State	Riverland	Riverland Practical Nursing
			<p>caring. The natural and social sciences support the database that is necessary for nursing judgments. The integration of the humanities, the sciences and nursing's specialized body of knowledge provides students with a basis for assisting clients in a caring manner and with tools students can use for their individual professional growth and role development. A spirit of inquiry is a necessary component of nursing and must be fostered in students. The development of a professional identity is incremental. The process of education enables the student to develop integrity, responsibility, ethical practices, and an evolving identity as a nurse committed to evidence based practice, caring, advocacy, and safe quality care for diverse patients (NLN, 2010).</p> <p>Implementation of the Nursing program of study begins with the student. Students are asked to explore and evaluate their own views, experiences, knowledge, skills and learning styles, as well as the theoretical constructs and philosophies that support the nursing curriculum. This exploration and evaluation takes place within the context of the students' lives, the classroom setting, and clinical experiences. Instructors work to facilitate the students' understanding of themselves, the content presented, and the possible ways theory can be applied in real world clinical settings (Nodding, 1986).</p>

Criteria 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 faculty and the administrator are represented in Nursing and college governance as displayed in the following table.

Table 3: Faculty and Administrative Committees		
Administrator Name	College Committees 2015/2016, 2016/2017, 2017/2018	Nursing Committees 2015/2016, 2016/2017, 2017/2018
Laura Beasley	Graduation Committee Deans Committee Hiring Committee	Faculty Committee Advisory Board Committee Team teaching and curriculum committee as needed
Faculty Names	College Committees	Nursing Committees
Pat Parsons	Faculty Shared Governance Secretary Treasure for MSCF 2017-2018	Faculty Committee Curriculum Committee Team Teaching Committee Advisory Board Committee Admission and Progression Committee
Patty Kisley	None	Faculty Committee Curriculum Committee Team Teaching Committee Advisory Board Committee Student Nursing Forum Committee Admission and Progression Committee
Jane McKinley	Hiring Committee	Faculty Committee Curriculum Committee Team Teaching Committee Advisory Board Committee

Nursing Students Involved in Governance

Students are involved in governance through activity in the Nursing Student Forum, the Nursing Program Advisory Committee, Faculty Meetings, and Faculty Curriculum/Team Teaching Meetings. The following table displays the activities, the dates, and number of students who attended in the past two years. Students are also involved in governance by providing feedback for the program via student surveys.

Table 4: Student Involvement in Governance			
Activity	2015/2016 Date and # of students	2016/2017 Date and # of students	2017/2018 Date and # of students
Advisory Committee Meetings Fall	10-21-15 Postponed (partners unavailable to attend).	10-26-16 (3 students attended) 1 PN student unable to attend	10-9-17 (4 students will be invited)
Advisory Committee Meetings Spring	4-4-16 (4 students attended)	4-10-17 (3 students attended) 1 RN student unable to attend	
Nursing Student Forum Meetings Fall	nothing	9-12-16 (6 students) 9-26-16 (8 students) 10-3-16 (8 students) 10-17-16 (10 students) 10-31-16 (5 students) 11-14-16 (6 students)	9-11-17
Nursing Student Forum Meetings Spring	nothing	2-6-17 (# of students not documented) 3-27-17 (# of students not documented) 4-10-17 (# of students not documented)	
Faculty Meetings Fall	10-5-15 11-18-15 12-17-15 (student reps invited but unable to attend) 12-21-15 (PN Accreditation Discussion with Directors)	8-29-16 9-19-16 10-24-16 (3 student reps attended) 11-7-16 (1 student rep attended) 12-15-16	8-28-17 9-22-17 10-13-17 (4 students will be invited)
Faculty Meetings Spring	1-17-16 1-25-16 2-8-16 3-21-16 (5 student reps attended) 3-22-16 (ATI Workshop) 4-4-16 5-12-16	1-30-17 2-13-17 3-27-17 (4 student reps attended) 4-17-17 5-10-17 5-11-17 6-20-17 (Self-Study Workshop)	
Faculty Curriculum and Team Teaching Meetings Fall	8-24-15 9-15-15 10-5-15 11-2-15 (3 student reps attended) 12-14-15	10-21-16 11-4-16 11-28-16 (student reps invited but unable to attend)	TBD
Faculty Curriculum and Team	4-25-16 (3 student reps attended)	1-9-17 1-23-17 (2 student reps attended)	

Teaching Meetings Spring		2-6-17 3-13-17 4-13-17 5-1-17	
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In the Spring of 2017, the PN graduates completed a graduate exit survey and 89.47% agreed or strongly agreed that students had input into the program.

Criteria 1.3

The assessment of end of program student learning outcomes (PSLOs) and program outcomes (POs) is shared with communities of interest, and the communities of interest have input into program processes and decision-making.

There are a number of communities of interest for the PN Program; these include the PN program’s clinical partners, area health care professionals, state and regional LPN and RN Nursing faculty, program directors, Nursing students, Riverland’s Nursing faculty, and area community members. Input occurs as needed or requested. In addition, the PSLOs and the results of the Program Outcomes (POs) are shared at the Riverland Nursing Advisory Committee meeting that occurs semi-annually. The advisory board ranks the students’ ability to perform the PSLOs with a survey at six to 12 months post-graduation. The committee members represent healthcare facilities and colleges in the Southeastern Minnesota region. The meeting minutes are available on the **USB** under Advisory Meeting minutes for review. Riverland’s Associate Dean/DON, Laura Beasley, communicates with clinical partners via mail, phone calls, and regularly scheduled meetings. Clinical faculty meet with their clinical agencies prior to the beginning of each clinical course to review student objectives and expected outcomes, to orient to facility site, and to initiate and coordinate schedules. Communication is ongoing between faculty members and the clinical agencies throughout the academic year.

The Nursing website is regularly updated on a quarterly basis with the Program Outcome Results (Graduate Outcomes); this was shared with our communities of interest.

Criteria 1.4

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

The PN Program cultivates mutually beneficial partnerships in and outside of the college to achieve the PSLOs.

The Student Nursing Forum is a student-led organization that is actively engaged in the college and community services. Some of their undertakings have included March of Dimes fundraiser walks, blood

drives, fundraising for the Nursing pinning ceremony, graduation, invitations to speakers for the classroom, and lunch and learns to name a few.

The PN Program has also been working closely with multiple state and local partners. The following Table displays how the partnerships promotes the profession, promotes excellence in Nursing and/or serve the community and the years of involvement for the Nursing program.

Table 5: Partnerships Table		
Partnership	Explain how this partnership promotes the profession, promotes excellence in Nursing and/or serves the community.	Years of Involvement
AD/PN Program Directors	<p>The AD/PN Leadership group general purpose statement is as follows:</p> <p>The purpose of the Association shall be to serve the public by furthering the growth, development, and enhancement of Associate degree professional and Practical Nursing in the state of Minnesota.</p> <p>The group strives to promote Nursing education through multiple channels. Meeting quarterly, the group is updated by the MN Board of Nursing (MBON) on any recent changes or trends affecting Nursing and Nursing education. The group provides feedback to the MBON and supports important legislative initiatives.</p> <p>Leadership education, development, and support is another key function of the group. Educational opportunities are available at the meetings, and the group is currently working on a long-range education plan for leaders.</p>	Greater than 10 years
HealthForce MN	Is a Center of Excellence in MN State that provides consultations, curriculum resources and help with accreditation for Nursing programs.	7 years
The Clinical Coordination Partnership (TCCP)	The Riverland Nursing Program is a member of TCCP, a group seeking to optimize usage of acute care clinic opportunities and streamline the process for both clinical and educational partners. TCCP membership is a way in which Riverland Nursing seeks to be a strong clinical partner. In addition to streamlining the process of requesting and confirming clinical sites, the effort has, per our clinical partners, increased capacity as it decreased clinical partner workload.	5 years
Minnesota Simulation and Healthcare Education Partnership (MNSHEP)	Statewide simulation network initially sponsored by HealthForce Minnesota provides webinars, conferences, newsletters, and support for simulation throughout the state.	9 years
PN Curriculum Collaboration Project	In 2013, two faculty members were on a statewide PN Collaboration Project to develop curriculum resources for the PN programs within the state to meet accreditation standards. The committee no longer meets, but the resources are still available and used by the program.	4 years

Service Learning Projects	March of Dimes fundraiser walks, blood drives, fundraising for the Nursing pinning ceremony, graduation, invitations to speakers for the classroom (hospice and palliative care for example), two PN students attended the Ann Jones Conference Spring of 2017. All of these opportunities strengthen our Nursing students and give them insights in to service learning.	Multiple years
Articulation Agreements	Statewide PN to AD articulation agreements. http://www.riverland.edu/academics/programs/practical-nursing-dip/description/ Copy on USB under Articulation Agreements	Multiple years
Mayo Clinic Joint Appointments	We use some Mayo Clinic employees as clinical/lab instructors. These employees remain Mayo Clinic employees but provide vital resources for the program. Mayo Clinic is actually hires employees specific to this role.	Spring of 2017

Criteria 1.5

The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing.

Laura Beasley, MS, RN is the Associate Dean of Allied Health/Director of Nursing (DON) for Riverland Community College. Laura’s curriculum vitae is available on the USB under Standard 1 (Beasley CV).

Criteria 1.6

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

The nurse administrator is experientially qualified and meets organizational and state requirements, which is a Master’s Degree in Nursing Education. She was oriented to her role by the following means:

- Mentored by former Director of Nursing for two weeks face-to-face along with being available for two months afterward.
- Attended the Minnesota Board of Nursing orientation for new directors in September of 2016
- Attended an ACEN three-day forum in Spring of 2016 in Atlanta Georgia
- The AD/PN Directors Committee for the State of Minnesota assigned a mentor to Laura for the first year from Ridgewater Community College in Minnesota
- Consulted with HealthForce MN who provided consulting services for accreditation
- Mentored by the Steering Committee from the AD Minnesota Alliance for Nursing Education (MANE)
- Mentored at Deans meeting at Riverland Community College
- Mentored with the Chief Human Resource Officer from Riverland Community College on faculty/staff contracts.

The following table identifies the specific means of fulfilling the Minnesota Board of Nursing Administrator Credentialing.

Table 6: Minnesota Board of Nursing Administrator Credentialing	
Minnesota Board of Nursing Nurse Administrator Credentialing Requirements	Meets Requirement by:
<p>Nursing education programs must ensure the director:</p> <ol style="list-style-type: none"> 1) is academically and experientially qualified to accomplish the mission, goals, and expected student and faculty outcomes; 2) has a graduate degree in Nursing from a regionally or nationally accredited college or university recognized by the United States Department of Education or by a comparable organization if the graduate degree is from an educational institution from a foreign country; 3) has a current unencumbered Minnesota registered nurse license and current registration 	<ol style="list-style-type: none"> 1) Laura Beasley has five years of experience in Nursing leadership and five years of experience in Nursing education (see USB Standard 1 (Beasley CV) 2) Laura Beasley has a graduate degree from Keuka College in Penn Yan, New York (nationally accredited by CCNE). 3) Laura Beasley has a current Minnesota Nursing license

Criteria 1.7

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

The PN program Course Coordinator position was implemented Fall of 2016. The position consists of two Reasonable Credit Equivalencies (RCEs). The person who fills this position is academically and experientially qualified. She has a Master’s degree in Nursing and has over 40 years of experience teaching in the Nursing program.

Responsibilities include working with program faculty to synthesize course evaluation data, developing, implement and evaluate continuous improvement strategies, facilitate faculty curriculum and level meetings, work on program self-study, facilitating the SEP, implementing Master Course Outline (MCO) changes, and working closely with Associate Dean/DON and faculty members with all course and program issues. The duties are listed on the Reasonable Credit Equivalency document, which is signed

by the faculty member assigned to the credits. In this role, greater than 51% is teaching, so this position is considered a faculty position.

Criteria 1.8

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

The job description for the Associate Dean of Allied Health Program/Director of Nursing includes these principle responsibilities (see Associate Dean/DON job description on **USB** under Standard 1):

- Program management and coordination
- Curriculum and faculty/staff management
- Administrative leadership and supervision
- Leadership for the Allied Health Programs and Nursing

The job description includes a statement concerning Freedom to Act which states: “Empowered to make decisions within policy and budget constraints; the employee is free to initiate, plan, design and implement services and responsibilities in the Allied Health Programs. The input, approval and feedback of administration and advisory committees are expected. In addition, input from faculty, staff and students should be sought.”

In addition, the Nursing program has a full-time Administrative Assistant who assists the Associate Dean/DON to meet the needs of the Nursing program. Please refer to Standard 2.6 for more information regarding the Administrative Assistant’s role.

In addition to her other duties, the Associate Dean/DON advises current and potential Nursing students as needed, has office hours posted, and is available most days of the week from 8 am to 4 pm by either appointment, phone, or email. The Associate Dean/DON counsels students who are having difficulties with lab, clinical, and/or classroom, and she provides students with remediation as deemed necessary by the clinical or lab instructors. In addition, the Associate Dean/DON is involved with all of the Nursing committees and oversees new faculty orientation for the PN and AD programs.

A faculty survey is completed every Spring by the AD and PN faculty combined (N=6), and 100% of faculty agree or strongly agree that the Associate Dean/DON had sufficient time and resources to fulfill the role in Spring semester 2017. See Faculty Surveys on the **USB**.

Criteria 1.9

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

The Nurse Administrator position reports directly to the Vice President of Academic and Student Affairs, is in charge of a non-personnel Nursing budget of approximately \$100,000, and has oversight of budgets and spending for other allied health and health-related initiatives totaling more than \$1,000,000.

The Nursing budget is discussed at faculty meetings, and updates are provided to faculty throughout the year. For example, in Spring of 2017 the equipment budgets were developed by the college for the following academic year. Faculty requested med carts, educational posters for the classroom, an electronic health record for the program, and were all approved by the Associate Dean/DON for FY 2018. Faculty meeting minutes will be available in the resource room during the site visit. Faculty meeting minutes can also be found under meeting minutes on the **USB**.

On the Spring 2017 Faculty Survey, 100% of faculty agreed or strongly agreed that they had input into the budget. See Faculty Surveys on the **USB**.

Criteria 1.10

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

The Riverland Community College policies and procedures are located at <http://www.riverland.edu/policies/index.cfm>. The policies for Nursing faculty are the same for all faculty at Riverland. The policies for the Nursing faculty and staff are comprehensive, provide for the welfare of faculty and staff, and are consistent with the college. Riverland's Nursing faculty are members of the Minnesota State College Faculty union (MSCF) and are protected in the same ways as all faculty in the bargaining unit. Variations such as background checks, two step tuberculin testing, and CPR certification are required by the clinical agency contracts in order to protect clients in the clinical (See faculty handbook in resource room). The faculty handbook can also be found on the **USB**.

Criteria 1.11

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

All classes are on campus face-to-face; however, there are elements of distance education that are used to supplement what happens in the classroom. The D2L Brightspace platform is used to provide course

materials, recorded lectures for those who like to listen more than once, short videos that explain concepts, and other supplemental materials.

Standard 2 Faculty and Staff

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

Criteria 2.1 and 2.2

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.

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.

Number of Faculty Academic Credentials

Faculty members in the Practical Nursing Program are in compliance with faculty credentialing requirements of Riverland Community College (RCC), Minnesota State, Minnesota Board of Nursing (MBON), and the Higher Learning Commission (HLC). The one full-time faculty member is a licensed registered nurse in the state of Minnesota and holds a graduate degree with a major in Nursing. Two part-time faculty are licensed registered nurses in the state of Minnesota; two faculty members hold a baccalaureate degree with a major in Nursing; see the following table below. See also [Appendix C](#).

Table 7: Faculty Credentials					
Faculty Member	Full-time (FT) or Part-time (PT)	Highest Degree Obtained	Education Plan	Official Transcripts in HR	RN Licensure number and expiration date
Patricia Parsons	FT theory/clinical	MSN MS Counseling	NA	yes	#069628 Exp-7/31/18
Patty Kisley	PT lab/tutor/clinical	BSN	NA	yes	#131366 Exp-3/31/19
Jane McKinley (Lab Personnel)	PT Teaches skills and simulation in the PN program	BSN	NA	Yes	#092532 Exp-4/30/2018

Faculty/Laboratory Personnel Profiles

Faculty/Laboratory Personnel profile tables can be found in [Appendix C](#). The Faculty/Laboratory Profile Tables include the academic and experiential qualifications, including all degrees and experience in education and clinical areas, areas of teaching, and non-teaching responsibilities.

Higher Learning Commission Requirements

All faculty meet the Higher Learning Commission Requirements as identified in the faculty profile [Appendix C](#) with at least one-degree higher than the student.

Minnesota State Requirements

All faculty meet the Minnesota State credentialing requirements and are unable to be hired without determining verified work experience as a RN, credentialing at a minimum of a Bachelor's degree in Nursing, and current Minnesota RN license. The college system requires a series of courses for each hire prior to receiving a permanent position at the college. The program is in compliance with this requirement for our full-time faculty.

Minnesota Board of Nursing Requirements

The Minnesota Board of Nursing requirements are a minimum of a Bachelor's degree in Nursing. The one full-time faculty holds a graduate degree with a major in Nursing. The two part-time faculty have a Bachelor's degree in Nursing.

Hyperlink to Faculty/Laboratory Personnel Profile Tables [Appendix C](#)

Faculty Scholarship

Scholarship is defined by the ACEN glossary (p. 14) as activities that facilitate the enhancement of a Nursing faculty member's expertise and support the achievement of the end of program student learning outcomes and program outcomes. These include, but are not limited to, application of knowledge, teaching, service, practice, and research. The PN program primarily uses the scholarship of practice, teaching, and knowledge. Faculty work part-time, learn from Nurse Tim webinars, reading, attending workshops, and implementing teaching strategies that are evidence based. See Faculty Scholarship Tables [Appendix D](#).

Criteria 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.

This standard does not apply to our program. All faculty teaching Nursing courses are Registered Nurses.

Criteria 2.4

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

This standard does not apply to our program. No preceptors used in the PN program starting Fall of 2014.

Criteria 2.5

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

The PN program's current faculty to student ratio is 40 students to one full-time faculty in classroom, 1:15 in lab, 1:10 in clinical I (1140), and 1:8 in clinical II (1190). All faculty to student ratios demonstrate adequacy of full-time and part-time faculty for PN program.

Full Time Faculty

The one full-time PN faculty member delivers the entire theory portion of the courses and teaches in clinicals. The two part-time faculty teach the laboratory portion of the courses as well as clinicals.

While the maximum enrollment for each PNUR theory course is set at 40, the actual 2014/2015 enrollment was 31, 2015/2016 enrollment was 33, the 2016/2017 enrollment was 23, and the 2017/2018 enrollment will be 35 students. See the following table for course faculty to student ratios.

Table 8: Faculty to Student Ratios				
Course Number and Name	Credit Load Theory/lab/clinical Clinical 1credit/2 hrs.	Faculty to students Theory	Faculty to students Lab	Faculty to students Clinical/Simulation
PNUR 1110 Foundations of Practical Nursing	4/2/0	1:40	1:15	
PNUR 1120 Nursing Care of the Older Adult	3/0/0	1:40		
PNUR 1130 Pharmacology	3/0/0	1:40		
PNUR 1140 Clinical I	0/0/3			1:10
PNUR 1150 Nursing Care of the Adult	4/0/0	1:40		
PNUR 1160 Nursing Care of Women/Children/Newborn	2/1/0	1:40	1:15	
PNUR 1170 Transition to Practice	1/0/0	1:40		
PNUR 1180 Psychosocial Nursing Care	1/0/0	1:40		
PNUR 1190 Clinical II	0/0/5			1:8

Faculty meet several times during the semester to discuss student progress, curriculum development, and various other things that promote program enhancement. Nursing faculty in laboratory and simulation positions are part of this as well.

All faculty fall under the jurisdiction of the Minnesota State College Faculty (MSCF) union contract. The MSCF contract states that faculty may be assigned 30 credits either per year or 40 contact hours (20 contact hours per week over two semesters) whichever meets the requirements first. In addition, faculty, per contract, are required to have one office hour per week for every three credits taught. Additional office hours or student availability may be scheduled at the instructor’s discretion ([See Appendix I for MSCF credit/hour contract](#)). [Hyper-link to MSCF Contract](#). Office hours and times of availability of faculty are clearly placed on faculty doors, on D2L Brightspace, and are shared with students.

Faculty Overload

Over the past two years, no faculty has had overload. The Nursing program did have a faculty in overload for year 2014/2015 because of a sabbatical leave of a full-time instructor. See the following table for faculty overload for the last three years.

Table 9: Faculty in Overload Past Three Years with Rationale			
Faculty in Overload (List only those in overload)	Overload School Year: 2014/2015	Overload School Year: 2015/2016	Overload School Year: 2016/2017
Judy Hanscom	2 credits RCE		
	6.5		
Rationale for overload	Faculty sabbatical		

Faculty Committee Work, Office Hours, and Service

There are sufficient faculty and staff to ensure that program outcomes and student learning outcomes are achieved. The Nursing program’s workload policy establishes a teaching load that supports faculty teaching responsibilities, scholarship activities, and services to the college and community. Faculty members have provided evidence of professional development and are actively engaged in the development of the curriculum that enhances the PN program.

All faculty in the PN program serve on a Nursing program committee. The committees include the PN team teaching committee, admission and progression committee, and the PN curriculum committee. In addition, faculty do attend the advisory board meetings when possible, and they attend monthly faculty meetings. The schedule of meeting dates is provided to all faculty before

the start of each semester. Other areas that individual faculty are assigned in include monthly Nursing forum meetings, weekly tutoring sessions for PN students, hiring committees for the college, accreditation meetings as needed, faculty retreat days at the end of each semester for work on course surveys and the SEP, and student advising as needed.

Criteria 2.6

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

Riverland Nursing faculty believes that scholarship is an integral component of the faculty role and that teaching itself is a scholarly activity. As noted by the National League of Nursing (2005), to engage in scholarship, the nurse educator:

- Draws on extant literature to design evidence-based teaching and evaluation practices.
- Exhibits a spirit of inquiry about teaching and learning, student development, evaluation methods, and other aspects of the role.
- Designs and implements scholarly activities in an established area of expertise.
- Disseminates Nursing and teaching knowledge to a variety of audiences through various means.
- Demonstrates skill in proposal writing for initiatives that include, but are not limited to, research, resource acquisition, program development, and policy development.
- Demonstrates qualities of a scholar: integrity, courage, perseverance, vitality, and creativity (Competency 7 Engage in Scholarship).

Faculty can participate in a variety of development activities; some are voluntary and some mandatory. The college has six different days throughout the academic year designated as Duty Days. These days are mandatory for all faculty and are a means of offering a variety of developmental activities to all faculty members. These duty days are defined in the MSCF Master Agreement, which can be referenced at http://www.hr.mnscu.edu/contract_plans/documents/mscf0911.pdf. All full-time faculty have access to faculty development monies each year, per the MSCF Master Agreement. By MSCF contract, faculty members holding FT or PT appointments are entitled to enroll in courses (on a space available basis) at any Minnesota State institution, up to 24 credits per year without cost.

Nursing faculty members are invited to attend an annual two and a half day Health Educator's Conference in Minnesota. This conference covers a variety of current topics related to Nursing education. The Nursing department budget or continuing education monies fund attendance fees for this conference. The Nursing programs subscribes to NurseTim for continuing education and maintenance of expertise. Often, it can be difficult to schedule activities for learning because the faculty

schedules are so busy throughout the semester, so NurseTim allows faculty to learn on their own time. Faculty are encouraged to attend conferences in the state to enhance their learning and teaching abilities. Faculty have attended several conferences in 2017 that include Best Practices in Simulation, ACEN workshop on Standards 4 and 6, and self-study workshops with HealthForce Minnesota in preparation of our site visit from ACEN.

All copies of continuing education certificates are kept in the supervisor's files in the supervisor's office. Please refer to [Appendix D](#) for the Faculty Scholarship Table and [Appendix C](#) for the Faculty/Laboratory Personnel Profile Tables.

Criteria 2.7

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

One full-time administrative assistant is available for the needs of the Nursing program. Her time is approximately 40% administrative support for the Associate Dean/DON, 40% allied health support, and 20% for coordinating a variety of other issues. Coordination duties include the process of program admission for all Allied Health programs that includes Radiography, Practical Nursing, AD Nursing, and Medical Assisting. She monitors additional items for the Allied Health Programs that include submitting background studies, fingerprints, and maintenance of all Allied Health student files containing health forms, CPR certification, and various other forms needed for compliance with clinical site and program policies. She also schedules meetings, maintains the files with faculty data concerning compliance with vaccinations, CPR training and professional license renewal, and is available to capture minutes during Nursing faculty and Nursing advisory meetings. She maintains the clinical contract database and works with the faculty and clinical site directors to initiate and revise contracts as needed. The Administrative Assistant's job description can be found on the [USB](#) under Standard 2.

Criteria 2.8

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

Orientation to Minnesota State, Riverland Community College, and the Nursing program is provided for all new full-time and part-time faculty. Minnesota State orientation includes a welcome video, introduction to the employee self-services, benefits enrollment, resources for professional development, and mandatory online training (Right-to-Know, Code of Conduct, Security Awareness, and Sexual Harassment Prevention Training). The New Employee website is found at http://www.minnstate.edu/system/hr/new_employee/index.html

Orientation to Riverland includes establishing a college email account, general faculty responsibilities, salary/benefits, contract information, college policies/procedures, academic calendars, a physical tour of campus, and introductions to other staff/faculty members. Riverland used to have a faculty handbook, but now everything is shared on SharePoint. This is a website that is maintained by Riverland that includes forms, policies and procedures, links to other sites, and different committees within the college to name a few.

Orientation to the Riverland Nursing Programs has historically been a challenge. In the past, teaching assignments were given, and then the new faculty member was assigned to a veteran faculty member who acted as a mentor and assisted the new faculty member as much as possible. This process was revised Fall of 2016. Currently, orientation starts with a meeting with the Associate Dean/DON that provides general information about the program and day-to-day happenings. New faculty are assigned a mentor, and the Associate Dean/DON meets with new faculty regularly. In addition, faculty are also given a lighter credit load if possible so they can have time to orient to the program and curriculum. A faculty handbook was developed specific to orientation that contains information for new Nursing faculty members. See new faculty orientation checklist on the **USB** under Standard 2.

In addition to orientation, there are other requirements needed according to Minnesota State policy. In order to work for Minnesota State, faculty must meet minimum qualifications which include the educational requirement and the teaching and learning competency requirement; they may also include related occupational experience, stand and/or national industry licensure/certification, and other requirements as appropriate for each assigned field, license field, or credential field.

In addition, the Minnesota State policy states that prior to being granted unlimited status, a faculty member shall successfully complete courses in the following content areas focused on the post-secondary student learning environment:

- 1) Course construction (credit course).
- 2) Teaching/instructional methods (credit course).
- 3) Student outcomes assessment (credit course).
- 4) Philosophy of community and technical college education (credit or non-credit course).

A copy of this Minnesota State policy will be in the resource room at the time of the visit.

All professional development activities are tracked on each faculty member, and a copy of the receipt for participation is collected and put in the supervisor's files in the supervisor's office.

Criteria 2.9

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

The Associate Dean/DON conducts the systematic assessment of full-time faculty in alignment with the MSCF union contract agreement and Riverland Community College's policy. Each full-time faculty member is evaluated once every three years. All part-time faculty are evaluated each semester.

Methods of assessment include administrative classroom and/or clinical site visits and student evaluations of the faculty member. A written summary of these results is provided directly to the faculty member during a meeting with the Associate Dean/DON. The intent of this meeting is to identify areas of strengths and continued growth. See Faculty Evaluation sheet under Standard 2 on the **USB**. Faculty members complete individual Professional Development Plans, identifying personal goals to promote professional growth. These plans are kept in the individual faculty files and are updated as needed.

Examples of faculty professional development plans will be available in the resource room during the site visit. The Riverland Community College's policy and the MSCF's policy on evaluation of faculty will also be available in the resource room during the site visit.

Criteria 2.10

Faculty full and part-time, engage in ongoing development and receive support for instructional and distance technologies.

This standard does not apply to our program. All courses, labs, and clinicals have been face to face since Fall 2014.

Standard 3 Students

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

Criteria 3.1

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

The PN program student policies are congruent with those of Riverland's policies with minor exceptions required by the nature of the program, Minnesota Law, and contracts with our clinical agencies. These policies are publicly accessible on the website, are nondiscriminatory, and are consistently applied.

Riverland Community College maintains a student handbook that contains policies and information for all students admitted. The handbook can be found on the Riverland Community College website at <http://www.riverland.edu/riverland/assets/File/pos/Nursing/pn-nursing-handbook-8316.pdf>. This handbook is a live document that can be updated as needed or on an annual basis. The PN program's handbook is specific to the PN Program. This handbook is reviewed with students on the first day of class, and students are required to sign a statement indicating that they understand the policies within the handbook. Although these handbooks are found online, students may print both the Riverland Community College Handbook and the PN Program's Handbook at any time.

All policies in the PN Program are verified by the Attorney General's office in the state of Minnesota to make sure they are non discriminatory.

The Riverland Community College student handbook and the PN Program handbook both contain policies that are the same, such as the Student Code of Conduct, College Tobacco Policy, and Campus Security. Some of the policies are different from those of the college, including criteria for admission into the Nursing program, health history, adherence with HIPAA, immunizations, CPR, criminal background check, fingerprints, proof of health insurance, and freedom from communicable diseases.

The contract used with all clinical agencies, known as the Memorandum of Agreement (MOA), is common to all Minnesota State College and University Systems and stipulates that Nursing students may need to "submit the results of a health examination to the college and if requested, to the facility, to verify that no health problems exist which would jeopardize student or patient welfare." Student health records are kept in their personal files and are maintained for five years.

Criteria 3.2

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

The Riverland PN Program information is communicated to the public via the college website, the Nursing program web page, local newspapers, and TV stations. At this time, the AD Nursing Program is currently accredited by ACEN and the PN Program is in candidacy status with ACEN. That information is available to the public on the Nursing website. The ACEN contact information along with the Minnesota Board of Nursing is also available on the Nursing website and in the Student Handbook. Candidacy status updates are shared with college faculty and staff, the Nursing Program Advisory Committee, and area health care agencies.

Criteria 3.3

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

Changes to Riverland Community College's PN Program policies, procedures, and program information are communicated to students via the D2L Brightspace home page, email, or at the beginning of the semester course orientations. Students are informed of any policy changes made during the academic year through in-class announcements, via D2L Brightspace home page announcements, or by email. The PN Program's handbook and web page, along with policies and procedures, are reviewed and updated annually, or as needed, by the Associate Dean/DON and faculty.

Students review the PN Student Handbook at two separate times prior to beginning courses. Students are introduced to the Student Handbook at orientation, which takes place at the beginning of August. The handbook is reviewed with special emphasis placed on the student requirements that need to be completed prior to beginning courses in late August, including health and immunization requirements, two-step mantoux requirements, background checks, fingerprints, CPR certification requirements, and clinical requirements. The handbook is also reviewed on the first day of class. Students are then required to sign and date a form stating they have read and understand the policies of the Nursing department. This form is kept in their student files. The student handbook is posted on the course site so students may access it online or print it out whenever they choose.

Students are reminded to frequently check the D2L Brightspace course home page and their Riverland email because these are important routes of communication from faculty. In the Spring of 2017, the PN graduates completed a graduate exit survey and 89.47% agreed or strongly agreed that policies were readily available, clear, and consistently applied.

Criteria 3.4

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

The support services available for Nursing students are consistent with those of all students enrolled at Riverland Community College, whether classes are in the traditional classroom, hybrid, or online.

Student services are available online and at each of the three campuses.

Admissions information can be found on the Riverland website at

<http://www.riverland.edu/admissions/index.cfm>. On this website, there are links for student to find information about how to apply, how to connect with staff members, and about the financial aid programs. There are links to contact an Enrollment Advisor directly or set up a campus visit. There are currently nine Enrollment Advisors at Riverland, including an International Student Advisor, two Multicultural Advisors, and a TRIO advisor. Advisors are available to meet with students, answer questions, and assist students through the enrollment process.

Counseling services are available free of charge to all students and provide the following services: academic planning, transfer planning, career development, career interest assessments, personal counseling, resource referrals, and crisis intervention. Formal academic advising is available through the college counselors to all students. Faculty members in all disciplines of the college, including Nursing, provide informal academic advising. Students may contact Nursing faculty by phone, e-mail, or by office appointment to discuss program progression, academic and personal concerns, course requirements, employment opportunities, or any other factors affecting their education.

All students, including Nursing students, have access to Computer Services at Riverland Community College. Currently enrolled students receive a network account that allows them access to e-mail, the internet, and the campus computer facilities. A student's username and password information may be obtained by stopping at a Help Desk or online through the Riverland website. Help Desks can be found in Austin Campus East Building (Open Computer Lab), Austin Campus West Building room (A228), Albert Lea Campus room (101A), and the Owatonna Campus room (123). The Riverland Online and Distance Learning pages on the Riverland website offer additional information about taking online classes for students. The Riverland's Office of Instructional Technology (OIT) staff helps faculty become familiar, and remain current, with multiple technologies. They also assist in exploring and utilizing new sources of technology to enhance student learning. The OIT staff is available to faculty and students when questions arise.

The college uses D2L Brightspace as the platform to deliver course materials online format. In the PN Program, most all course materials, assignments, tests, and grades are presented in a computerized format.

The Student Success Center (SSC), located in the East Building on the Austin campus, offers a variety of services to students, including professional and peer tutoring, tutoring software, study groups, study skills coaching, and testing/assessment services. The SSC provides appropriate accommodations for students with documented disabilities in compliance with the Americans with Disabilities Act. Some Nursing students require special testing accommodations; Nursing faculty work with the SSC to help meet student needs. Nursing tutors are available weekly to the Nursing students. The Nursing tutors have scheduled meeting times and topics each week during the academic year. All Nursing students encouraged to join in these study sessions.

Riverland Community College's Writing Center helps students in all disciplines become more effective and more confident writers. The Writing Center is located in the Austin East Building, room 104. Trained and supportive instructors and tutors are available to work one-on-one with students, with groups of students at all levels, in all disciplines, and through drop-in and scheduled sessions. They also offer workshops to improve academic writing.

Placement Services at Riverland Community College help students to develop the knowledge, technical skills, communication abilities, and job search techniques needed to be successful in the job market. Employment search support services are available to all students, including courses on employment search skills and career planning, job postings, job fair information, placement statistics, and career information.

There are numerous types of financial aid available at Riverland Community College. These include the Federal Pell Grant, Minnesota State Grant, Federal Supplemental Educational Opportunity Grant (SEOG), Minnesota GI Bill Grant, Aliss Grant, Minnesota Post-Secondary Child Care Grant, College Work Study Program, Federal Direct Stafford Loans, and numerous other scholarship opportunities. The Riverland Community College's website offers information to students about the estimated costs of attending the college, types of financial aid available, how to apply for financial aid online, open work-study positions, and other online resources for students. This information can be found at <http://www.riverland.edu/fa/index.cfm>. There are scholarships open to all students at Riverland Community College and ones that are specific to the health sciences and Nursing in particular. See <http://www.riverland.edu/scholarships/scholarships.cfm> for further details about all of the available scholarships and amounts of each award.

On-campus childcare is available in the Austin Campus West Building. Apple Lane Child Care Center provides care for children ages six weeks to preschool age. Space may be limited and rates depend on the number of hours per week. There are several grant and assistance programs that students may apply to obtain financial assistance for childcare. These programs are listed on the Riverland website at <http://www.riverland.edu/childcare/funding.cfm>.

The Parent Center is a new addition to the Riverland Campus. It is located in the East Building on the Austin campus. The center is open all day from Monday through Thursday and on Fridays until noon. Services offered to students who are also parents include parent education/parenting support groups, parent and child resources, problem-solving assistance, nutritious snacks, computers/printers, study space, and a lactation room.

Student housing is available on the Austin campus. Each furnished apartment has three bedrooms, two bathrooms, a kitchen, a living area, and can accommodate up to six students. The units are tobacco and alcohol free and are available on a first come first serve basis. A handicapped accessible unit is also available. More information about student housing can be found on the Riverland website at: <http://www.riverland.edu/studenthousing/index.cfm>.

In the Spring of 2017, the PN graduates completed a graduate exit survey and 94.74% agreed or strongly agreed that student services was sufficient to meet my needs and were easy to access and 100% agreed or strongly agreed that financial aid, bookstore, business office, and library was sufficient to meet my needs.

Please see [Appendix L](#) for a list of student services personnel.

Criteria 3.5

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

Educational records for the current Nursing students are kept in a locked file cabinet in the administrative assistant's office. The records of former Nursing students are kept in a locked file in a room near the Administrative Assistant's office area. Student files include program applications, transcripts, copies of acceptance letters, health forms, immunizations, background checks, Riverland's Policy form signed by each student, copy of current CPR certification, and any other necessary documentation. All health records are maintained for five years after the student graduates.

Criteria 3.6

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

The college's Financial Aid Department remains in compliance with the Higher Education Reauthorization Act Title IV. The Financial Aid Department submits appropriate documentation to the governing organization and the Minnesota State College and University System as needed to remain compliant. The Riverland Community College's Financial Aid Manual was developed to reflect the college's current practices in the delivery of financial aid and is intended to ensure compliance with regulatory and audit requirements by clearly and comprehensively documenting the policies and procedures by which the office operates. This manual can be found at the Financial Aid Office on the Austin Campus East Building. Currently the default rate for Riverland is 15.8% down from 17.1%. This information is tracked each year and is communicated to our Nursing department.

Criteria 3.61

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

According to the Department of Education Guideline's, students are required to do Financial Aid Entrance and Exit Counseling. At Riverland, this is done via the studentloans.gov website. On the Student Service Dashboard through the Minnesota State College and University System, the students cannot receive loan funds unless they have gone through Entrance Counseling, which gives students all their rights and responsibilities on the loan itself and the repayment options. The Financial Aid Department sends students a reminder during the semester they are graduating stating they must complete the Exit Counseling. The department monitors all Exit Counseling. All information is sent to them along with the website information for National Direct Student Loans so students can view their total loan indebtedness.

Criteria 3.62

Students are informed of their ethical responsibilities regarding financial assistance.

Information regarding the student's ethical responsibilities regarding financial aid is found in the Student Handbook and on the Financial Aid web link on the college website. This information is covered during student orientation to the college. This information is also provided in the Entrance and Exit Counseling provided online or face-to-face with the financial aid officers.

In the Spring of 2017, the PN graduates completed a graduate exit survey and 100% agreed or strongly agreed that they understand their obligations to financial aid.

Criteria 3.63

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

Financial aid records at Riverland Community College are kept in compliance with the Higher Education Reauthorization Act Title IV. Active student financial aid records are maintained electronically in Image Now. Student educational files are kept indefinitely college wide. The older files, that are not electronic, are housed in fireproof file cabinets in Student Services in the Austin East Building. The college is required by this Act to have a plan to keep them for 50 years.

Criteria 3.7

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

The Riverland Community College Human Resources Department accepts, tracks, and submits complaints to the Associate Dean/DON. The Associate Dean/DON keeps files of all student complaints and reports accordingly. The complaint/grievance process is explained in the PN Program Student Handbook, and general information is located at <http://www.riverland.edu/riverland/assets/File/policy/2000/2000%20-%20Student%20Complaint%20and%20Grievance%20Policy.pdf> . Audit of these records shows due process and includes evidence of resolution.

In the Spring of 2017, the PN graduates completed a graduate exit survey and 94.74% agreed or strongly agreed that the student handbook explains the program and college policy for handling program complaints and grievances.

Criteria 3.8

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

All Nursing students taking classes have access to the D2L Brightspace platform. The D2L Brightspace platform is introduced to students in an optional D2L Brightspace online orientation. Riverland's policies and available services are presented during this orientation. There is a two-hour D2L Brightspace orientation class offered to all new students; they can sign up online to take this class. All new students are required to attend a New Student Registration session after they complete the online orientation. This session includes advising, class registration, and information on accessing their Riverland account. Students will learn to access their online student accounts, receive their registration access codes and student e-mail accounts, review course offerings, and register for classes. Faculty and Enrollment Advisors are there to assist students with these tasks. Once students are registered for courses, they can access a D2L Brightspace Help Course available on D2L Brightspace prior to the start of the semester,

which allows them to experiment with the features of D2L Brightspace. The D2L Brightspace platform is also reviewed during the first class meeting. Students are instructed on the use of the discussion board, electronic drop box, quizzing/testing, grade book, and e-mail features that they will use for the course. Most students have their own personal computers, but there are adequate computers and iPads available on all three campuses. These computers are located in the computer labs, the Student Success Center, the Riverland Parent Center in the Austin East Building, and in the Nursing faculty office area. There are 30 iPads that can be used by students in the classroom as well. The iPads are located in a cabinet in the Biology area. All campuses have wireless internet access. For information regarding necessary computer/hardware requirements, students can go to <http://www.riverland.edu/dl/hardware-requirements.cfm>.

All new students accepted to Riverland are given a free e-mail account along with instructions how to access and use this account. Contact information for the Help Desk and technology staff is given to students to assist with any questions/concerns that may arise. Students are informed that faculty will use this e-mail address to communicate with them.

Student account information is accessible on the Riverland website through Minnesota State e-services. This allows students to check current grades, transcripts, financial aid disbursements, class schedules, and provides the ability to enroll in classes online. Orientation to these features is included in new student orientation.

Technological support is provided to all Riverland students by the Office of Instructional Technology (OIT) department and the Management Information Systems department (MIS). Students are able to access wireless internet on campus with personal computers. Technological support staff are available on all three campuses. There is also a link on D2L Brightspace to the Minnesota State D2L Brightspace Support Services Help Desk, which can be contacted via email or by telephone. This help desk is designed to assist students with technology needs. The help desk is open from 7:30 am to 11:30 pm, Sunday through Thursday, 7:30 am to 4 pm on Fridays, and 11 am to 6 pm on Saturdays. The hours are posted online and will vary with holidays. Riverland also has Help Desks on campus. Help Desks can be found in Austin East, Open Computer Lab; Austin West, Room A228; Albert Lea, Room 101A; and Owatonna, Room 123. At the beginning of the semester, the librarian attends classes (per instructor request) and orients students to the services available through the Riverland Library. She demonstrates how to use the research databases so Nursing students know how to search for quality journal articles. Information is given to students on how to access library services from home as well.

Nursing students utilize electronic medical record (EMR) charting in the clinical agencies for documenting patient cares. They also use a form of Bedside Medication Verification (BMV) to pass medications. Faculty members orient to the agency's EMR and BMV system or facility personnel before students begin clinicals. In the Owatonna, Austin, and Albert Lea clinical sites, technology resources for EMR questions/support are available to the faculty and students.

Any other orientation to various uses of technology is done by the faculty and is course specific. This may include the use of webinars, social media, E-folios, and podcasts. Faculty and students orient to the simulation lab and the equipment used prior to teaching Nursing courses. This might vary with the different simulation experiences in which the students participate.

In the Spring of 2017, the PN graduates completed a graduate exit survey and 100% agreed or strongly agreed that they received adequate orientation to the technology used in the Nursing program, technology support and orientation was readily available when they had questions or problems, information related to technology requirements were clearly stated, they were able to access the technology used in the nursing program with minimal problems, and they found the technology used in the Nursing program enhanced their learning.

Criteria 3.9

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

This standard does not apply to our program. All courses meet face to face.

Standard 4 Curriculum

The curriculum supports the achievement of the end of program student learning outcomes and program outcomes and is consistent with safe practice in contemporary healthcare environments.

Program Plan

The program plan with specific information can be found in [Criteria 4.8](#).

Abbreviated Syllabi

An abbreviated syllabus for each Nursing course is included in [Appendix E](#). Each syllabus includes course name and number, credit hours/contact hours, course description, course objectives/outcomes, methods of evaluation, including information regarding how each contributes to the overall course grade.

Criteria 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.

Professional Standards

The PN Curricular Framework is based on current national standards, is evidence based, and is congruent with the Minnesota Scope of Practice for the PN as passed by the Minnesota legislature in May of 2013.

Research of the literature and of national organizations that provided standards and competencies for Nursing programs was reviewed. The following resources were used to reflect current standards for the PN curricular framework for Minnesota.

- Minnesota Practical Nursing Scope of Practice (2013)
- National Association of Practical Nurses Education and Service (NAPNES), *Standards of practice and educational competencies of graduates of practical/vocational Nursing programs*, 2007.
- National League of Nursing (NLN) Outcomes and Competencies Educational Framework (2010).

Eight professional concepts were determined and defined using the resources listed above. The following table demonstrates an example of the comparison of student learning outcomes to the Minnesota LPN Scope of Practice, National Association of Practical Nurses Education and Service (NAPNES), and National League for Nursing (NLN) Outcomes and Competencies Education Framework. See the following table for an abbreviated version of the comparison of Student Learner Outcomes

(the entire document will be available on **USB** under Standard 4, Comparison of Student Learner Outcomes, for review).

Table 10: Comparison of Student Learning Outcomes to Professional Standards

Professional Concept	PN Student Learning Outcomes	Role Specific Competencies	LPN Scope of Practice (SOP) 2013	NAPNES (2007)	NLN (2010)
<p>Professional Concepts:</p> <ol style="list-style-type: none"> 1. Informatics/Technology 2. Managing Care of the individual patient 3. Nursing Judgment/Evidence Based Care 4. Patient/Relationship Centered Care 5. Professional Identity and Behaviors 6. Quality Improvement 7. Safety 8. Teamwork and Collaboration 	<p>Student Learning Outcomes have been developed for each of the 8 Professional Concepts.</p>	<p>Each Student Learning Outcome has 2 to 3 competency statements that are measured throughout the nursing program. The competency statements are focused around the 3 apprenticeships of the NLN Educational Model.</p>	<p>Minnesota Statute: 148.171 Minnesota Nurse Practice Act Sec. 6. Subd. 14. Practice of practical nursing. The "practice of practical nursing" means the performance, with or without compensation of those services that incorporates caring for individual patients in all settings through nursing standards recognized by the board at the direction of a registered nurse, advanced practice registered nurse, or other licensed health care provider and includes, but is not limited to:</p> <ol style="list-style-type: none"> (1) conducting a focused assessment of the health status of an individual patient through the collection and comparison of data to normal findings and the individual patient's current health status, and reporting changes and responses to interventions in an ongoing manner to a registered nurse or the appropriate licensed health care provider for delegated or assigned tasks or activities; (2) participating with other health care providers in the development and modification of a plan of care; (3) determining and implementing appropriate interventions within a nursing plan of care or when delegated or assigned by a registered nurse; (4) 	<p>Standards of Practice and Educational Competencies of Graduates of Practical/Vocational Nursing Programs</p>	<p>National League for Nursing Educational Competency Model. The 3 Apprenticeships of NLN are implemented into the competency statements.</p>

Professional Concept	PN Student Learning Outcomes	Role Specific Competencies	LPN Scope of Practice (SOP) 2013	NAPNES (2007)	NLN (2010)
			implementing interventions that are delegated, ordered, or prescribed by a licensed health care provider; (5) assigning nursing activities or tasks to other licensed practical nurses (LPNs); (6) assigning and monitoring nursing tasks or activities to unlicensed assistive personnel; (7) providing safe and effective nursing care delivery; (8) promoting a safe and therapeutic environment; (9) a dvocating for the best interests of individual patients; (10) assisting in the evaluation of responses to interventions; (11) collaborating and communicating with other health care providers; (12) providing health care information to individual patients; (13) providing input into the development of policies and procedures; and (14) accountability for the quality of care delivered, recognizing the limits of knowledge and experience; addressing situations beyond		

Professional Concept	PN Student Learning Outcomes	Role Specific Competencies	LPN Scope of Practice (SOP) 2013	NAPNES (2007)	NLN (2010)
			the nurse's competency; and performing to the level of education, knowledge, and skill ordinarily expected of an individual who has completed an approved practical nursing education program described in section 148.211, subdivision 1.		
<p><u>INFORMATICS/TECHNOLOGY</u> Informatics is defined as the use of information technology as a communication and information gathering tool that minimizes errors, supports clinical decision making and scientifically based nursing practice</p> <p>Essential to this concept is the utilization of information technology by the practical nurse</p>	<p><u>INFORMATICS/TECHNOLOGY</u> The practical nursing graduate will utilize information technology in the health care setting</p>	<ul style="list-style-type: none"> • <u>DOCUMENTATION / CONFIDENTIALITY COMPETENCY:</u> Identify (K), demonstrate (P), and appreciate (E) the use of information technology to accurately document patient care while consistently safeguarding confidential health information. • <u>INFORMATICS COMPETENCY:</u> Identify (K), demonstrate (P), and value (E) the use of information technology to access reliable information and resources that support evidence based patient care, reduce reliance on memory (NLN), and enhance competency within the practice setting. 	<p>(7) providing safe and effective nursing care delivery; (8) promoting a safe and therapeutic environment;</p>	<p>F. Managing Managing care is the effective use of human, physical, financial, and technological resources to achieve the patient identified outcomes while supporting organizational outcomes.</p> <p>Utilize information technology to support and communicate the planning and provision of client care.</p>	<p>Spirit of Inquiry PN Competency: “Question the basis for nursing actions, considering research, evidence, tradition, and patient preferences” (NLN, 2010, 36).</p> <p>Integrating Concept: “Context and Environment in relation to organizations refer to the conditions or social system within which the organization’s members act to achieve specific goals” (NLN, 2010, p. 65).</p> <p>Core Value: “Excellence means creating and implementing transformative strategies with daring ingenuity” (NLN, 2010, p. 66).</p>

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Criteria 4.2

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

Organization of Curriculum using the Student Learning Outcomes

The student learning outcomes have role specific graduate competencies developed from the three apprenticeships of NLN (2010). The three apprenticeships are used to level the curriculum between the first and second semesters. The NLN apprenticeships consist of (1) knowledge, (2) practice and (3) ethical comportment. The apprenticeships are integrated throughout the curriculum and can be found in the competency statement on the SLO organization table below. Additional information can be found on the **USB** under Essentials to Implementing the PN Curriculum Framework. The following table displays an example of the organization of the curriculum. The entire document will be available on the **USB** under Standard 4 (SLO-Organization of Curriculum Table).

Table 11: Example of SLO Organization Table

Student Learning Outcome (SLPO)	Role Specific Competencies (C)	Course Outcomes	Learning Activity	Evaluation of Student Progress
<p>1. Informatics Technology</p> <p>The practical nursing graduate will utilize informatics/technology in the health care setting</p>	<p>1A. Documentation/Confidentiality Identify (K), demonstrate (P), and appreciate (E) the use of informatics/technology to accurately document patient care while consistently safeguarding confidential health information.</p> <p>1B. INFORMATICS Identify (K) and demonstrate (P) and values (E) the use of technology to access reliable information and resources that support patient care, reduce reliance on memory, and enhance competency within the practice setting.</p>	<p>Semester 1 (Level 1) Course Outcomes</p> <p>PNUR 1110 Foundations Accurately document the provision and outcomes of patient care in lab and clinical setting</p> <p>1.1 Accurately document the provision and outcomes of patient care in the lab and clinical setting.</p> <p>1.2 Identify technology used to access reliable resources that support evidence based patient care, reduce reliance on memory, and enhance competency within the practice setting.</p> <p>PNUR 1120 Nursing Care of Older Adults</p> <p>1.3 Use reliable evidence based journals and online databases to find information related to the care of older adults with common health and safety issues.</p> <p>PNUR 1130 Pharmacology</p> <p>1.4 Identify reliable information related to pharmacology that supports patient care, reduces reliance on memory, and enhances competency within the practice setting</p> <p>PNUR Clinical 1140</p> <p>1.5 Maintain confidentiality when using information technology to accurately document the provision and outcomes of patient care</p> <p>1.6 Use technology to access reliable information and resources that support patient care, reduce reliance on memory and enhance competency within the practice setting.</p>	<p>1110, 1120 , 1130 Knowledge</p> <ul style="list-style-type: none"> Quizzes and test questions <p>1140 Clinical Practice Know How</p> <ul style="list-style-type: none"> Clinical Evaluation Tool evaluating the documentation/confidentiality competency Elder data gathering paper <p>Skills Lab for 1110</p> <p>Extra 32 hours for 1140 clinical (used for simulation)</p> <ul style="list-style-type: none"> Safety CHF Intractable Pain End of Life <p>Capstone Project Ethical Comportment</p> <ul style="list-style-type: none"> Self-reflection paper- Each student will write at least one paragraph describing how they met each outcome using specific examples. The capstone portfolio (1170) <ul style="list-style-type: none"> Concept maps Clinical evaluation tools Reflection papers Resume 	<p>Knowledge</p> <ul style="list-style-type: none"> Passing on Test Questions: a cumulative score of 78% <p>Practice Know How</p> <ul style="list-style-type: none"> Each student must achieve Assisted Level on the Bondy scale by the end of the semester for the Competency Documentation/Confidentiality Competency under Informatics/Technology Follow skills checklist for skills being covered Pass/Fail Simulation <p>Ethical Comportment</p> <ul style="list-style-type: none"> Students write journal entry for each of the SLOs (1-8) over the course of the semester Pass/Fail

Student Learning Outcome (SLPO)	Role Specific Competencies (C)	Course Outcomes	Learning Activity	Evaluation of Student Progress
		Semester 2 (Level 2) Outcomes	1150, 1160 Knowledge	Knowledge
		PNUR 1150 Nursing Care of Adults 1.7 Compare evidence based information through journals and online databases related to the care of adults with common medical/surgical health problems	<ul style="list-style-type: none"> Quizzes and test questions Concept maps 	<ul style="list-style-type: none"> Passing on Test Questions: a cumulative score of 78%
		PNUR 1160 Nursing Care of Women/Newborns/Children 1.8 Utilize evidence-based information through journals and online databases related to care of women, newborns, and children.	1190 Clinical Practice Know How <ul style="list-style-type: none"> Clinical Evaluation Tool evaluating the documentation/confidentiality competency Clinical Worksheet Weekly includes: <ul style="list-style-type: none"> Client diagnosis; multiple diagnoses and interaction of these Medications and rationale for use with clients conditions and interactions Lab worksheets and implications for medications and medical diagnosis Diet and rationale for client Organized means of data collection to facilitate accurate documentation 	Practice Know How <ul style="list-style-type: none"> Each student must achieve Supervised Level on the Bondy scale by the end of the semester for the Competency Documentation/Confidentiality Competency under Informatics/Technology Pass/fail clinical worksheet
		PNUR 1190 PNUR Clinical 1190 1.9 Demonstrate an understanding of the value of confidentiality and the ramifications associated with accurate documentation of patient care.		
		1.10 Examine reliable resources that support evidence based patient care, decrease the reliance on memory and enhance competency within the practice setting.	Skills Lab for 1160 Extra 32 hours for 1190clinical (used for simulation) <ul style="list-style-type: none"> Schizophrenia Perioperative 	<ul style="list-style-type: none"> Follow skills checklist for skills being covered Pass/Fail Simulation
			Capstone Project Ethical Compartmentment <ul style="list-style-type: none"> Self-reflection paper- Each student will write at least one paragraph describing how they met each outcome using specific examples. The capstone portfolio (1170) 	Ethical Compartmentment <ul style="list-style-type: none"> Students write journal entry for each of the SLOs (1-8) over the course of the semester Pass/Fail

Student Learning Outcome (SLPO)	Role Specific Competencies (C)	Course Outcomes	Learning Activity	Evaluation of Student Progress
			<ul style="list-style-type: none"> • Concept maps • Clinical evaluation tools • Reflection papers • Resume 	

Criteria 4.3

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

In August of 2012, Minnesota State provided funding for a statewide PN Curriculum Collaboration Project. The purpose of the project was to develop a PN Curriculum Framework in collaboration with the PN faculty throughout Minnesota that demonstrated excellence, met state and national standards required by the MBON and national accrediting agencies, and provided an education foundation for Minnesota's future Practical Nurses. Two Riverland Nursing faculty members represented the college on this project. The project timeline was from August 2012 to August 2013. The PN Curriculum Framework was adopted by the Riverland Community College Practical Nursing Program and implemented in the Fall of 2015.

The first group of PN students to graduate from this curriculum graduated in May of 2016. The NCLEX-PN pass rates for the year of 2016 was 91.30% for first time test takers. This curriculum is now being revised to reflect changes from student, faculty, and stakeholder feedback.

Based on student end of course surveys, student end of program surveys, ATI Pharmacology content mastery results, and faculty feedback adjustments were made to the program plan and individual courses. These changes were brought to the Program Nursing Advisory Board Committee for consideration and approval. Specifically, most skill labs will now be completed prior to students attending clinical in the first semester, and the Pharmacology and Nursing Care of the Older Adult courses had two additional credits added to lecture for a total of three credits. The requirement for Freshman English was eliminated to keep the program length the same as it was before the change to Pharmacology was made. The changes are detailed in the following table below. The changes were presented to the Advisory Committee on April 4th, 2016 and Approved May of 2016 by the college Academic Affairs and Standards Committee (AASC), which approves curriculum changes. These changes were implemented fall of 2016.

Table 12: PN Program Changes		
Old Program Plan	New Program Plan	Reasons for Change
Nursing Assistant/HHA (4 credits) or on registry	Unchanged	
Human Biology (3 credits)	Unchanged, however, the PN program has collaborated with the biology department to make sure that this course is geared towards PN students.	Based on student and faculty feedback, this Biology course focused on the cellular level. Needs to be geared towards anatomy body structure and function.

Table 12: PN Program Changes		
Old Program Plan	New Program Plan	Reasons for Change
Foundations of Practical Nursing (4 credit Lecture, 2 credit Lab)	Same plan for lecture and lab. Students will be practicing skills in the lab in the beginning of the semester so the students are more prepared before they go out to clinical.	In the initial program plan, the skill labs were spread across most of the semester. With the new plan, the students will be signed off on most of their skills before they go out to clinical in October. This will make lab more meaningful to the student. In addition, having the skills done prior to clinical will help them to build on what they already know at the clinical site. Students who are not proficient in skills at clinical will be sent back to the lab for remediation. Each student will be tracked and followed with remediation.
Nursing Care of Older Adults (2 credit lecture, 1 credit lab)	Nursing Care of Older Adults (3 credits lecture)	The lab portion of this class was moved to Foundations of Practical Nursing (see above class). Increasing the lecture credits in this class will help increase the time spent discussing the theory. It was found that there was not enough time in class to cover all of the necessary elements in this course.
Pharmacology (1 credit lecture)	Pharmacology (3 credits lecture)	Students surveyed suggested there was not enough time spent on pharmacology. They did not feel they had enough time in class to cover all of the necessary elements to be successful in the pharmacology portion on their state boards. In addition, the pharmacology portion on state boards has increased over the past couple of years. Pharmacology comprises about 14% of state board questions.
Clinical 1 (3 credits)	Unchanged	
Nursing Care of Adults (2 credits lecture, 1 credit lab)	Nursing Care of Adults (4 credits lecture)	The lab portion of this class was taken out and put into the foundations course (see above). The lab was taken out because it will decrease confusion and it will decrease the repetition of lab skills previously covered. Instructors and students believed that most of the skills covered in this lab had already been previously taught. Therefore, it made sense to make more time in class to cover all of the theory needed to be successful on state boards.
Nursing Care of Women/Newborns/Children (2 credit lecture, 1 credit lab)	Unchanged	Note: if students need more time in the lab to cover skills that were not covered in Nursing care of Adults/Foundations, the program can adjust to make room in this lab section for those purposes.
Transition to Practice (1 credit lecture)	Unchanged	

Table 12: PN Program Changes		
Old Program Plan	New Program Plan	Reasons for Change
Psychosocial Nursing Care (1 credit lecture)	Unchanged	
Clinical II (5 credits)	Unchanged	
Freshman English (3 credits lecture)	This class was removed from the PN curriculum plan	This class was removed to make additional room for more credits in Pharmacology and Nursing Care of Adults. Because it is a Diploma program, English does not have to be part of the curriculum.
Developmental Psychology (3 credits)	Unchanged	

Rigor

The curriculum is compared for rigor against the ATI Comprehensive Predictor exam. Topics that students scored below the national average in achievement are reviewed, analyzed, and trended for inclusion into curriculum. The table below contains data that displays the past five graduating groups and the results on the ATI Comprehensive Predictor Exam. From this data along with the TEAS entrance exam, data analyzed shows that students who scored lower on their ATI TEAS entrance exam also scored lower on the comprehensive predictor exam. Additional data is available for review on the **USB** drive under ATI Data. For the graduating class of 2015, the group mean was 33.3. This was the last year of the old curriculum. In addition, the primary instructor for PN Program was on sabbatical, and the faculty that replaced her for the year had not taught the curriculum before. From May of 2016 to May 2017, the predictor scores increased by 9%. In 2016/2017, the curriculum was updated to increase the credits in pharmacology and in older adults.

Content	Graduates (GR) May 2013	Graduates May 2014	GR: May 2015 Old Curriculum	GR: May 2016 New Curriculum	GR: May 2017 Updated
Predicted % Passing NCLEX					
99%	7	2	0	0	1
98%	3	6	1	3	1
97%	3	2	1	1	1
95-96%	6	9	0	1	4
91-94%	10	13	4	3	2
87-90%	16	6	4	5	3
82-85%	6	9	2	1	1
73-81%	14	12	5	2	4
63-70%	5	6	2	5	1
44-60%	3	6	3	3	1
1-41%	13	7	8	0	0
Individual mean national in %	67.1	67.1	67.7	68.4	69.1%
% of group above mean national	56.8	55.6	33.3	54.2	63.2%

From the 2015/2016 Comprehensive Predictor exams, areas that were below 50% were identified, and changes made to the curriculum were determined as displayed on the following table. There were only one to two questions in each category, but two of the categories had significant changes in the results for 2017.

2016 Results	Ideas for Improving	Action Plan	2017 Results
Behavioral management 50%	Behavioral management material was presented. Students felt they were performing redundant things in lab and did not have enough time to study content. Only 2 questions in this area.	Reduced number of hours for lab and increased theory content	52.6% Slight increase in results.
Chemical & other dependencies 35.4%	Content delivered but discussion on use of a simulation. Plan to track for another year. There were only 2 questions in this category.	Plan to track data.	36.8% Slight increase in results
Non-pharmacological comfort interventions 47.9%	This section was related to pain relief for a client in labor. This was taught in Maternal/Child. This section was referred to the Maternal/Child instructor. Only 1 question in this area.	Maternal Child instructor will include visualization, progressive relaxation, diversion, touch and massage in content area.	94.7% Significant change in results.
Unexpected response to therapies 45.8%	This section was related to unexpected response to therapies- fetal assessment during labor, fetal heart rate findings, fetal heart rate tones, complications of the postpartum period, priority findings following a C-section. Only 2 questions in category.	Maternal Child Instructor to cover more in depth in 2016/2017 school year.	68.4% Significant increase in results

Tests Statistics

Test construction and evaluation are important factors when determining rigor of the curriculum and deciding whether students are prepared to take state board examinations. Several factors are addressed to assess student outcomes and provide effective testing strategies. The Riverland Practical Nursing Program uses 78% as the passing level for tests and for the overall course. From experience, this is a foggy target. Faculty members attempt to write questions that make it possible for students who should succeed to succeed. Faculty also attempts to find the students who are having difficulty with content and find ways to help them improve their study habits and subsequently increase their ability to pass the Nursing courses. D2L Brightspace has multiple statistics that help do test item analysis and to judge the strength of testing. The following items are possible to assess.

- Reliability: Each test is of the appropriate length. Unit tests are at least 50 questions; a final exam is usually 100 points. A great deal of effort is used to improve reliability by writing clear question

stems, choosing plausible distractors that represent common student thinking errors, using a test template to ensure questions represent course objectives and varying levels of Bloom's taxonomy, and making distractors of the same length that do not cue students to the desired answer.

Whenever possible, faculty have another faculty member read test items to spot possible errors or unclear wording.

- **Difficulty:** This represents the number of students who get a particular item correct. In general, the faculty look for a difficulty in the range of 25%-80%. Items below 25% are reviewed to see if the question was keyed incorrectly or if there were unclear distractors that can be justified by well-prepared students. Sometimes the faculty members talk to students about various low-performing questions to understand how they interpreted language in the question. Words mean different things to different people. Most of the time, low-performing questions are adjusted in the test score. Questions over the 80% mark usually are left in the test statistics. They do not discriminate well but may be an indicator of concepts that were well understood by the group. Faculty often begin a test with an easy item to lower initial student anxiety. In subsequent years, if test questions are used again, this data helps faculty revise the test questions or delete them altogether.
- **Discrimination or point biserial correlation:** This measures who is getting the test question correct. If the group is divided into four groups—how well did the test question discriminate from those scoring in the top group from those that scored low on the test. Discrimination scores range from -1 to +1. The closer to +1 the better the test question discriminates between those who knew the material and those who were guessing. Faculty aim at a point biserial of greater than 0.2. This information is reviewed the next time the test question is used to look for keying errors, indications the test question should be reworked or replaced and whether the content needs more emphasis.
- **Distractor Analysis:** This looks at the four distractors in a multiple-choice question. The “right” distractor should clearly be correct. The “wrong” distractors should address errors in student thinking. If a distractor is not chosen by anyone, that makes the question easier. Distractors that do not “draw” a student to them should be changed for the next exam.
- **Mean Score:** This is the average of the test scores for the class. The mean tells how the class scored as a whole. If all the scores are lower, that may indicate students are not prepared or that the test was too difficult overall. The factors that must be addressed are content presentation, student preparation for the test, poorly written test questions, and chance errors.

- Standard Deviation: This tells how widely the scores were spread from the average test score. A large standard deviation means there was more variation between student scores. A small standard deviation says students' scores were more alike.

All of these factors are used along with teacher judgment to write, grade, and evaluate the test. Faculty attempt to correlate classroom test scores with ATI proctored exams, ATI Predictor, and passage on the NCLEX-PN exam.

Currency

The curriculum is compared to NCLEX- test plan every three years when the test plan is updated and revised. A new NCLEX-PN test plan was unveiled April of 2017. A copy of the new test plan was given to all instructors in the PN Program. Those who were new to the test plan were oriented to the test blue print book from NCSBN. There was very little change to the NCLEX-PN test plan, so no curriculum changes were made related to this.

Criteria 4.4

The curriculum includes general education courses/concepts that enhance professional nursing knowledge and practice.

The general education courses in 2015/2016 included English, Developmental Psychology, and Biology. For the 2016/2017 school year, it was decided to omit English as a required general education course in order to assign more credits to Nursing courses – Pharmacology and Nursing Care of the Adult. End of course student surveys, end of program student surveys, ATI results, Nursing faculty, and the advisory committee all supported this decision.

In addition, the Associate Dean/DON met with the Dean of the Biology department to discuss how they could make the biology course more meaningful to PN students. Surveys indicated that only 77% believed that biology enhanced their Nursing knowledge and practice. Starting Fall of 2016, biology will be more focused on human anatomy and body functioning instead of focusing on the cellular level. In fact, the biology course was redeveloped to meet the needs of the Nursing students and the results went from 77.27% in 2016 to 100% rating the biology course as enhancing their Nursing knowledge and practice. The following table displays the results of an exit survey question displaying 2016 and 2017 results.

See the table below that lists the survey results on general education courses.

Survey Question	2016 Results (N=22)	2017 Results (N=18)
Biology required for the Nursing program, enhanced my Nursing knowledge and practice.	77.27%	100%
Freshman English course enhanced my Nursing knowledge and practice	77.27%	No longer required
NA/HHA course enhanced my Nursing knowledge and practice	100%	100%
Developmental Psychology required for the Nursing program, enhanced my Nursing knowledge and practice.	90.1%	100%

The biology course was selected to provide a foundation for anatomy principles for the students. The Developmental Psychology course was selected to provide a foundation of growth and development across the lifespan. Other concepts that are integrated throughout the program include pathophysiology, anatomy, normal physiology, and medical terminology.

Criteria 4.5

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

At Riverland, the definition of cultural, ethnic, and socially diverse concepts included a wide range of individuals including but not limited to the multicultural, elderly, male/female, gender non-conforming, pediatric, LGBTQ, hearing impaired, and disabled to name a few.

In the PN Program, the following list has been adopted from Kaplan University.

- **Recognition** of the abundant diversity of cultures
- **Respect** for the differences
- **Acknowledging** the validity of different cultural expressions and contributions
- **Valuing** what other cultures offer
- **Encouraging** the contribution of diverse groups
- **Empowering** people to strengthen themselves and others to achieve their maximum potential by being critical of their own biases
- **Celebrating** rather than just tolerating the differences in order to bring about unity through diversity

The entire SLO-Organization of Curriculum Table that is found in table 11 in [Criteria 4.2](#) will be available in the resource room at the site visit and on the **USB** under Standard 4. This table has the SLO for Patient Centered Care and its' competency of **Communication Skills which states** students will describe, demonstrate, and value self-awareness, cultural sensitivity, and caring effective communication with patients. The table gives multiple examples of cultural, ethnic, and socially diverse concepts that are threaded throughout the curriculum.

In addition, case studies, which address cultural, ethnic, and diverse concepts, are used in the classroom. An example includes a mental health patient who typifies stigmatization of mental illness. Another classroom exercise includes students teaching each other about a cultural practice from their family life.

Simulations have cultural and ethnic variations including one in which a Hispanic non-English speaking patient experiences anxiety.

The students encounter primarily Caucasian and Hispanic patients of all ages, differing socioeconomic classes, and sexual orientations at the clinical setting. In addition, students have an opportunity to work with online interpreters from several languages. (Examples of cultural, ethnic, and diverse concepts will be available at the site visit).

In the Spring of 2017, the PN graduates completed a graduate exit survey and 100% agreed or strongly agreed that the course work includes cultural, ethnic, and socially diverse concepts.

Criteria 4.6

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

Curriculum and Instructional Process reflect Education Theory.

The program uses the Adult Learning Theory, and the following table displays ways in which it is implemented in the program.

Adult Learning Theory	Curriculum/Instructional Processes
Adults are internally motivated and self-directed	Objectives and course outcomes are leveled and mapped to program SLOs and competencies and reviewed with students throughout the program. Grading rubrics specific to each assignment are given. Reflection papers and the capstone project, which is a self-evaluation of their achievement of their SLOs, promote this as well.
Adults bring life experiences and knowledge to learning	Often the students bring their work and/or family experiences to learning. Empathy is developed by looking at their life circumstances and those of others. Reflective assignments on end-of-life issues and clinical self-evaluation bring past life experiences.
Adults are goal oriented	Grades are important to adults and personal development on the achievement of their goals is stressed. Students often do not see that they can succeed and strategies for success and encouragement are used to help to change their self-perception. Feedback is given to assist the students for goal achievement.
Adults are relevancy oriented	The faculty provide real life problem oriented content close to their own experiences. Faculty explain why particular content has relevance to their future professional lives. Faculty avoid theory based abstract instruction. ATI is incorporated into the program to provide practice NCLEX style questions and computer questions to prepare for NCLEX-PN. Discussions on the NCLEX-PN content and correlation with lecture is included.
Adults are practical	Simulations are used to show practical application, schedules are determined to assure consistency, preparations for courses are consistent, courses are

Adult Learning Theory	Curriculum/Instructional Processes
	correlated to assure symmetry between lecture, lab, and clinical. Lectures are taped so students can review lectures and study when practical to them.
Adult learners like to be respected.	Faculty encourage the expression of ideas in post-clinical conferences and classroom discussions. Faculty show respect to students by giving timely feedback, maintaining currency of online learning management system information, beginning and ending on time, maintaining office hours, and timely responding to emails. Student participation is encouraged by attending Advisory Board meetings, Nursing forum, and planning of pinning ceremony. In addition, faculty create safe environments in classroom, clinical, simulation, and skill labs.

Curriculum and Instructional Process Reflect Interprofessional Collaboration

Interprofessional collaboration is found in both simulation and in the clinical setting. One of the simulations incorporates the Radiology and Medical Assisting students.

Students also witness and experience interprofessional collaboration in a disaster simulation at the college with criminal justice students, EMT, HUCCS, and radiography. The PN students participate in the simulation as patients.

In the clinical setting, students work with PT, OT, Speech Therapists, Phlebotomists, Respiratory Therapists, Nurses, Physicians, Dietary, Housekeeping, Nursing Assistants, etc.

The program has an SLO of Teamwork, and collaboration is found on the SLO in table 11 in [Criteria 4.2](#).

This displays the multiple means that inter professional collaboration is threaded throughout the program and the assignments and evaluations that are completed to measure it. In the classroom setting, small group assignments and gaming are used to develop inter-professional collaboration among classmates.

Curriculum and Instructional Process reflect Research and Evidenced Based Practice

Current program textbooks have evidenced-based practices that are integrated throughout the content.

The program has an SLO of Nursing Judgment/Evidenced Based Care, which is found in the SLO-Organization of Curriculum Table 11 in [Criteria 4.2](#) and displays how Evidence-Based Practice is integrated throughout the program. Examples of assignments include several APA papers, which required evidence-based research. Another example is a group “Three Client Project” in which the students interview three clients who have the same disease, and the students are required to research the disease and treatment process and the nursing interventions using reliable sources.

Evidence-based care can be found using reliable resources such as Medscape, WebMD, Mayo Healthcare System resources, Nurse Tim and others. In addition, case studies, reflective journaling,

simulation, concept teaching, gaming, flipped classroom, concept mapping, group work, and interprofessional collaboration are used in the program.

Curriculum and Instructional Process reflect *Current Standards of Practice*

The program uses current standards of practice with examples being the NLN Outcomes and Competencies, NAPNES and the MN Scope of Practice. Textbooks are up to date and reflect current standards of practice. In addition, the library has full-text articles to review on content area for the program. In addition, the National Patient Safety Goals (NPSG) are used at the LTC and Acute Care Hospital settings. The clinical settings that review the NPSG have posters on their walls; students are oriented to them in the classroom setting and it is reinforced in the clinical setting.

Criteria 4.7

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

Evaluation methods are varied and include multiple-choice exams, quizzes, self-reflection papers, case studies, class discussion, simulation, games, APA format research papers, concept maps, clinical portfolios, clinical evaluation tool, and a capstone project. The program also uses Integrated Testing Product (ATI) that includes practice and proctored exams, tutorials, and other resources.

Clinical Evaluation Tools

In the program, there are two clinical courses, one in first semester (1140) and one in second semester (1190). The Student Learner Outcomes are used to guide the evaluation of the PN students through each clinical rotation. Clinical evaluations were created based on the eight SLOs and faculty input related to what competencies would be required for each SLO. These are leveled from 1st to 2nd semester. Using a modified Bondy scoring system, students are evaluated and must achieve a level of assisted for 1140 and supervised for 1190 in order to pass clinical. The Clinical Evaluation Tools can be found on the **USB** under Standard 4 and 6 and also in [Appendix F](#).

Capstone Project

The Capstone Portfolio assignment provides a way for students to show how well they have met the PSLOs. The Capstone Portfolio includes a number of assignments. Throughout the program, students write journal entries concerning clinical performance using the PSLOs as a starting point. By the end of each clinical course, students should have written two entries for every PSLO. The Capstone asks students to review their journal entries to establish a working list of strengths and weaknesses. A series of essays describe how they have developed over the course of the program, how they have changed their view of Nursing, their definitions of professionalism, a beginning philosophy of Nursing, and their

plans for future growth. Students are asked to choose assignments that prove they have met the PSLOs. Within this Capstone, students are asked to list their clinical sites and types of clients for whom they have cared, volunteer work that contributes to their professionalism, certificates, immunizations, resume, and cover letter. The Capstone Portfolio Rubric can be found on the **USB** under Standard 4 and 6 and in [Appendix L](#).

Syllabi

For all PNUR courses, the syllabi clearly reflect the SLOs with their associated outcomes or course objectives. The syllabi directly match what is on the SLO table. Assignments that are used throughout the two semesters are placed into the table to show how each SLO is being met in the courses of the program. This also helps the instructors to determine if the SLOs are being met, and it gives them a way to measure the SLOs.

The grading rubrics are found on the following table with 78% being the minimum passing grade.

Grading	%	C+	83-84.9
A	95-100	C	78-83.9 Minimum
A-	92-94.9	C-	75-77.9
B+	90-91.9	D	72-74.9
B	87-89.9	F	< or = to 71.9
B-	85-86.9		

Tests, quizzes, and ATI test points are completed in a proctored environment. Assignments are graded by a rubric. The rubric for simulation used is the Creighton Evaluation Tool; this is used for evaluation of simulations and can be found in the [Appendix K](#). All points are added for the final course grade.

In the Spring of 2017, the PN graduates completed a graduate exit survey and 100% agreed or strongly agreed that the evaluation methods were varied and provided effective feedback and enhanced their learning.

Criteria 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.

Nursing Program of Study

The Riverland Community College is on a semester system; each semester is 16 weeks.

The PN program is three semesters starting in the Summer of each year.

ACEN national statistics indicate PN programs range in length from 30 to 90 credits with a mean of 45 credits (ACEN 2015 Report to Constituents). The PN Program meets national standards.

The length of the program is congruent with Minnesota State, Minnesota Board of Nursing, and the Higher Learning Commission. The following table displays the regulatory body's requirements and how the PN program meets those requirements.

Table 13: PN Programs Align with Regulatory Bodies

Regulatory Bodies	Requirements of Regulatory Bodies	PN Program
Higher Learning Commission	"The institution's assignment and award of credit hours shall conform to commonly accepted practices in higher education" Number: FDCR.A.10.020.	Meets HLC and ACEN national standards
Minnesota State	Diploma. A diploma is awarded upon completion of a 31 to 72 credit undergraduate academic program that prepares students for employment. A minimum of 24 credits shall be in occupational or technical courses. http://www.mnscu.edu/board/procedure/336p1.html	35 credit diploma with 29 credits for Nursing courses
Board of Nursing	Article 6301.2340, REQUIRED CRITERIA FOR NURSING EDUCATION PROGRAMS, Subpart 3: C which states that a program should "provide a curriculum to enable the student to develop the competence necessary for the level, scope, and standards of nursing practice consistent with the type of licensure." https://www.revisor.mn.gov/rules/?id=6301.2340	Students are able to develop competence at the LPN scope of practice as evidenced by SLO and PO achievement

Program Specifics:

In the first semester of the program, students traditionally take general education courses to fulfill the pre-requisite requirements of the PN Program. The pre-requisites required are Biology 1030, which is Human Biology. The student must have an active-status on the Minnesota State Registry for Nursing Assistant. If a student is not currently on the Minnesota State Registry, a Nursing Assistant course can be taken during the Summer semester. Currently, the program is

advertised as 39 credits, which includes the Nursing Assistant course. As the faculty began writing the self-study, it became apparent that ACEN requires the program length to be without the Nursing Assistant. This change needs to be made officially through the college processes of review before the Academic Affairs and Standards Committee (AASC). Since this committee does not meet until September 2017, the change has not been officially made so the website program plan information remains at 39 credits. Once approved in September, it has to go through a second read through AASC. The website will be updated after AASC approves.

Developmental Psychology is one other general education course that is required. Many of the students take this in the Summer prior to the start of the PNUR courses. The Developmental Psychology course can be taken, however, concurrently in either semester.

There is one start for the PN program, and that is in the Fall semester. The Fall semester begins in August and ends in December of each year. The Spring semester starts in January and ends in May. When students graduate from the PN program, they will have 35 credits and will earn a diploma. There are 15 PNUR credits in the Fall semester and 14 credits in the Spring semester. If students choose to take Developmental Psychology during the program, it will increase the semester credits by three. There are few students who take the Developmental Psychology course during the program; developmental psychology will be implemented in Fall of 2018 as a pre-requisite course instead of a co-requisite course. This change will be brought to AASC in September of 2017 for the first read.

Credit Hours

The MSCF contract defines a credit hour as “the amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates not less than one hour of classroom or direct faculty instruction and a minimum of two hours of out of class student work”. Theory courses are one hour class time per credit, and clinical and lab credits are a ratio of two hours of lab time per one credit. The following table displays the program plan, the program credits and contact hours. A copy of the MSCF contract can be found here: <https://mnscu.sharepoint.com/sites/hrdocs/Documents/2015-2017-MSCF-Contract.pdf>

Table 14: Program Plan with Credit and Hour Requirements						
Course Number	Courses	Credits	Theory/Lab/ Clinical Credits	Theory Hours 1:1	Lab Hours 2:1	Clinical Hours 2:1
HCNA1200	NA Registry Or course pre-requisite					
	CPR pre-requisite					
	Human Biology below is a Pre-requisite, plans to change Developmental Psychology to a Pre-requisite (now is a co-requisite) will be brought forth to AASC in Sept. 2017					
BIOL1030	Human Biology	3	2/1/0	32	32	
PSYC1240	Psychology	3	3/0/0	48		
	Total Gen Ed Credits 6					
Semester One						
PNUR 1110	Foundations of Practical Nursing	6	4/2/0	64	64	
PNUR 1120	Nursing Care of Older Adults	3	3/0/0	48		
PNUR 1130	Pharmacology	3	3/0/0	48		
PNUR 1140	Clinical 1	3	0/1/2		32	64
	Total Semester Credits	15		160	96	64
Semester Two						
PNUR 1150	Nursing Care of Adults	4	4/0/0	64		
PNUR 1160	Nursing Care of Women, Newborn, and Children	3	2/1/0	32	32	
PNUR 1170	Transitions to Nursing Practice	1	1/0/0	16		
PNUR 1180	Psychosocial Nursing	1	1/0/0	16		
PNUR 1190	Clinical 2	5	0/1/4		32	128
	Total Semester Credits	14		160	64	128
Total Credits for Program						
	Program Total Credits	35		368	192	192
752 total hours in program						

Criteria 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.

The PN Program students utilize a wide variety of learning environments to provide high quality educational experiences.

Practice learning environments for the students include labs, simulations, and clinical experiences. The PN Program utilizes several area health facilities that have all levels of patient care across the lifespan. Student clinical experiences include (a) medical/surgical acute care nursing, (b) mental health, (c) long term care and sub-acute care, (d) clinics, and (e) simulation.

The clinical sites are chosen according to multiple factors including a review of the agency's regulatory survey results, compliance with the Department of Health criteria for skilled Nursing facilities and with Joint Commission for hospitals, behavioral health, and outpatient services. In addition, the size of the facility with the number of patient beds available, the proximity of the agency to the college, and services and ability to meet the student learning outcomes are considered. The faculty and Associate Dean/DON tour new facilities and interview the Nursing supervisor and staff members to determine the climate for Nursing students. A survey of faculty members that bring students to the site is completed after the initial experience, and faculty are surveyed yearly on the satisfaction of the site. Students are also surveyed at the end of each clinical semester to identify the strengths of the site and any problems and/or concerns from the clinical experience at the facility. If problems and/or concerns are identified, the faculty and Associate Dean/DON work with the clinical facility to identify an action plan to improve the situation or to terminate clinical experiences at the site.

On the graduate exit survey in May 2017, 16/17 or 94% of students expressed that clinical sites were appropriate for learning and achievement of SLOs. The one student who disagreed had clinical at the Mayo Health System in Austin in Spring of 2017. The student commented that the staff were not willing to work with students. To identify the specific problem, the clinical evaluation survey from Spring of 2017, which asks questions that are more specific, was reviewed by the Associate Dean/DON and faculty. Four out of nine students at the Mayo Health System in Austin did not believe the site was conducive for learning. The Associate Dean/DON reviewed these results with the Nursing Education Specialist at the Mayo Health System. In addition, the clinical instructor met with the staff on the floor and resolved the conflicts. Plans are to track student clinical evaluations and to address issues as they arise in the future. In addition, the clinical evaluation survey will be modified to capture more agency specific concerns for the 2017/2018 school year.

In addition, 100% of Nursing faculty members in a 2017 faculty survey found that their clinical site was appropriate for learning and the achievement of SLOs and POs. The other clinical site for students was the Mayo Clinic Albert Lea. There were five out of five or 100% of the students at the Mayo Clinic Albert Lea on the Spring of 2017 survey that believed this site was conducive for learning.

The first clinical experience in the PN program is PNUR 1140 Clinical I, and it is held at a long-term care facility focused on older adults. This experience provides the student an opportunity to apply Nursing judgment using the Nursing process to implement safe and patient/relationship centered care in selected settings. The clinical student demonstrates focused assessments, data collection, implementation of skills learned in the lab setting, documents findings, and reinforces teaching plans for

individual patients with common problems. The student develops communication and customer service skills working with individual patients and team members.

The second clinical experience in the PN program is PNUR 1190 Clinical II, and it is held in a hospital acute care setting. The Mayo Clinic Health Systems- Albert Lea and Austin is utilized to give the PN students experience in a wide variety of areas such as outpatient services, mental health, medical surgical, pediatrics, OB, and surgery to name a few. This experience builds on Clinical I and provides the student an opportunity to apply Nursing judgment using evidence based care, critical thinking and clinical judgment to implement safe, and patient/relationship centered care to individual patients across the lifespan. The clinical student reflects on the value of patient centered care, teamwork and collaboration, informatics, quality improvement, safety, managing care of the individual patient, and Nursing judgment/evidence-based care.

The following table lists the clinical sites used, the address of the site, and the expiration date of the site contract. In addition, it includes the accreditation or approval agency of the site, the specialty areas, and the number of students at the site. The PN program works with the facilities to schedule all of the student experiences. In addition, the clinical sites are part of the Nursing Program’s Advisory Committee group that meets twice a year. During the advisory committee meetings, the program’s clinical partners give feedback on ways to improve the PN Program at Riverland Community College.

Table 15: Clinical Sites Table					
Clinical Site	Address	Contract Signed and Expiration Date	Accreditation or Approval by	Specialty Area	# of students in rotation
Mayo Clinic Health System, Albert Lea, MN	404 West Fountain Street Albert Lea, MN 56007	Signed Exp: 4-1-21	Joint Commission	Acute Care with ER and Surgical Unit Behavior Health Out Pt. Clinic Maternal Child Unit	8-10
St Mark’s Assisted Living Facility	400 15 th Ave. SW Austin, MN 55912	Signed Exp: 12-31-17	MN. Department of Health	Skilled Nursing Facility	8 - 10
ComForcare Senior Citizen Center	1201 17 th St. NE Austin, MN 55912	Signed Exp: 12-31-20	MN. Department of Health	Skilled Nursing Facility	8 - 10
Good Samaritan Society Retirement Home	75507 240 th St. Albert Lea, MN 56007	Signed Exp: 12-31-20	MN. Department of Health	Skilled Nursing Facility	8 - 10

Mayo Clinic Hospital System, Austin, MN	1000 1 st Drive NW Austin, MN 55912	Signed Exp: 4-1-21	Joint Commission	Acute Care with ER and Surgical Unit Behavior Health Out Pt. Clinic Maternal Child Unit	8-10
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Evidence Based and Contemporary Practice at the Clinical Sites

The faculty related that National Patient Safety Goals are implemented at the Mayo Health System Clinic sites. In addition, the Mayo Clinic also implements elements of the National Quality Improvement Goals for hospitals. Examples of quality improvement areas chosen by the Mayo Clinic include Venous Thrombosis Embolism Discharge Instructions, Exclusive Breast Feeding, Elective Delivery, and Influenza Immunization to name a few.

The skilled Nursing facilities have extensive regulations that must be adhered to. Comforcare is a skilled Nursing facility that recently hired a wound nurse to address skin issues on site and educate the Nursing staff on quality practice in wound care and prevention.

Current standards of practice are stressed in the clinical and in the classroom. The Nursing faculty stay current by working in an acute healthcare setting, reading current literature, and by listening to podcasts and webinars. In addition, faculty members bring in experienced practitioners to share current practice in areas of interest for Nursing and other interdisciplinary departments.

Simulation

In the 1st semester clinical (1140), there is 33% simulation and 67% hands on patient care at the clinical sites. The clinical is three credits, which equals 96 hours. Sixty-four hours is in the clinical setting, and 32 hours is in the simulation lab. In the 2nd semester clinical (1190), the clinical there is 20% simulation and 80% hands on patient care at the clinical sites. It is five credits (clinical 1190), which is equal to 160 hours: 128 hours is in the clinical setting and 32 hours is in the simulation center.

Riverland Community College has a state-of-the-art Health Science Simulation Center. Simulations for the PN students start in the middle of the first semester, and they continue through the end of second semester. The faculty member, Jane McKinley, responsible for the Simulation Lab, completed a two day Simulation Conference on the Best Practices of Simulation in May 2017. McKinley also obtained a Certificate in Clinical Simulation in 2011 from the University of Southern Indiana.

Criteria 4.10

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

The written agreements for clinical practice are current, specify expectations for all parties and ensure the protection of students. The clinical agreements are standardized and approved by the Minnesota State Attorney General. The Administrative Assistant for the Nursing program keeps the contracts up to date and assures they are current. The Associate Dean/DON oversees the contracts and verifies that all are current and up to date prior to students' clinical experiences. The clinical agreements will be available at the site visit.

Criteria 4.11

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

The program is offered as a 100% face-to-face delivery model. The program uses D2L Brightspace as a Learning Management System (LMS) and the lectures, assignments, discussion boards, tests, and grade book are within the LMS. All activities are appropriate for the face-to-face classes along with the resources, testing tools, and gradebook in D2L Brightspace. As identified Criteria 4.2, the SLOs direct the learning activities and instructional materials, and according to Criteria 4.7, the SLOs direct the evaluation methods. All are appropriate for face-to-face delivery and are consistent with the SLOs.

Standard 5 Resources

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

Criteria 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.

Fiscal Resources

Riverland Community College's annual operating budget comes from the Minnesota State College and University System budget. Biennial funding is secured from the Minnesota Legislature in even-numbered years; annual operating budgets are then proposed to the Minnesota State Board of Trustees, which is charged with approving the Minnesota State College and University System budget. The college receives approximately 49% of operational costs from state appropriation. Additional funds are received from tuition, financial aid, Deans' initiative funds, grants, gifts, hospital donations and funding, and general fees. Funds to the Nursing program are used for salaries, benefits, faculty conferences and travel, and department supplies and equipment. Technology funding is also available and is managed by a separate college department.

Tuition and Fees

The tuition for the PN Program is \$218.22 per credit. Thirty-five credits = \$7,637.70 in tuition costs. In addition, students are responsible for the purchase of books, scrubs, and lab supplies. This information is listed on the PN Program's website.

Non-Personnel Budget

The Associate Dean/DON is responsible and accountable for the PN and AD Nursing Program non-personnel budgets. The Nursing Department Learning Resources Committee has the goal of assuring adequate material resources are available for the operation of the Nursing programs. Committee members include Nursing faculty, lab coordinator, and the Associate Dean/DON. This committee provides input into the annual non-personnel budget requests for the Nursing programs as well as the Simulation Lab budget. The budget requests for the following fiscal year are submitted in late Fall semester. The non-personnel budget for the Nursing programs has been adequate to meet the goals and objectives of the PN Program.

In both the 2015 and 2016 fiscal year, changes to the Associate degree program resulted in a dramatic decrease in AD program enrollments. This is reflected in the decreased actual dollar amount used for non-personnel expenditures as seen in the table below. In both the 2015 and 2016 faculty surveys, 100% of the faculty agreed or strongly agreed with the following question:

- Fiscal resources are adequate to meet the goals & objectives of the Nursing program.

Table 16: Non-Personnel Budget				
Cost Center	FY15 Non-Personnel Allocation	FY15 Actual Spent	FY16 Non-Personnel Allocation	FY16 Actual Spent
Practical Nursing/Associate Degree	\$65,000	\$46,550	\$49,500	\$22,982
Simulation Lab	\$15,000	\$15,000	\$13,000	\$13,000

Nursing Budget Comparison: The Nursing program budget is comparable to the medical assisting budget.

The College administration values and supports the Practical Nursing and Associate Degree Nursing programs and is committed to provide funding to deliver quality Nursing programs.

Table 17: Nursing Program-Revenue Generated Budget			
Categories	Year 2013/2014 (Pathways Program RN and PN combined)	Year 2014/2015	Year 2015/2016 (Projected)
Revenue of Program Tuition/Fees	\$584,249	\$114,970	\$144,311
Operational Budget	\$60,000	\$5000	\$5000
Faculty Salaries/Benefits	\$829,933	\$114,704	\$187,640
Totals	\$889,933	\$119,704	\$192,640

Table 18: Budgets per Program and Number of Students for Fiscal Year 2016/2017		
Program	Nursing Program Budget	Medical Assistant
# of Program Credits	39 Nursing Credits	36 Medical Assistant Credits
Budget	Non-Salary Budget= \$19,000 Salary Budget= \$187,640	Non-Salary Budget= \$7070.00 Salary Budget= \$98,865.55
Number of Students	23 Students	15 Students

Criteria 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.

Classrooms and Computer Labs

On the Austin campus in the West Building, classrooms B101, 102, and 104 hold 40 students each. Classrooms are equipped with the latest technology. The computer lab in the West Building in A108 has 36 computers. The Nursing department has an additional eight computers on wheels, and we can supply additional laptops and iPads if needed for testing purposes. Room A152 is an additional computer lab and has a study area with four computers and a printer. In the East Building, there are additional computer labs that can be used for testing purposes. Each computer lab in the East Building can hold up to 30 students.

Survey Results

In the May 2017 Graduate Exit survey, 100% of students agreed or strongly agreed with the following statements:

- Classrooms were sufficient to meet my needs.
- Simulation labs were sufficient to meet my needs.

In the May 2017 Faculty survey, 100% of faculty agreed or strongly agreed with the following statements:

- Classrooms are adequate to meet the needs of faculty and students.
- Computer lab is adequate to meet the needs of the faculty and students.
- Simulation lab resources are sufficient to meet the outcomes of the program.

Offices

Full-time and part-time faculty members have their own secure office space that allows for confidential discussion and private meetings with students. Each office is supplied with a private phone, voicemail, computer access, and a printer connection. Wireless internet connection is available throughout all Riverland buildings.

Survey Results

In the May 2017 Faculty Survey, 100% agreed or strongly agreed with the following statements:

- Office, classroom, and laboratory space are sufficient to meet the needs of faculty, students, and staff.

- Private conference areas are available to talk to students (whether office, conference room, etc.).

Classrooms

All Nursing lab and lecture classes are held on the Austin campus in the West Building. The Nursing department has four classrooms designated to Nursing, each having capacity for 40 students and the technology needed by the faculty to successfully run their classes. Other rooms are available upon request for lecture, meetings, and group work as needed.

Simulation Center

The Simulation Center includes a nine-bed practice lab, a ten-bed simulation lab, one conference room, and a classroom available upon request. The Center for Simulation Learning is unique in its design, having open bays, each with their own operator's station behind one-way glass. Six beds in the Center are equipped with video cameras and have the capability to record and stream, or live-stream, simulations. There are functioning head walls that have simulated oxygen and suction in each bay. One bay has the capability to be converted into an operating room with operating lights. The operator stations are equipped with mobile carts that house the video monitors and the encoders that connect to the server and provide the video streaming. These carts are designed to be used interchangeably with each bay.

The classrooms surrounding the Center are equipped with networked computers and projectors that interface with a server housed in the Center which allow viewing of recorded simulations and live simulations along with the patient monitor to follow as the scenario unfolds. The classrooms are used as debriefing rooms following a simulation.

Simulation Equipment

The Center has four high-fidelity adult simulators (SimMan) and one high-fidelity infant (SimBaby). The Nursing program also has the following medium fidelity simulators: two-Vital Ann's, ALS simulator, Megacode Kid, Vital Kid, Vital Baby, and Koken Birthing Simulator. Plans are in process to acquire Sim Junior and SimNewbie. Along with the human simulators, there are four Virtual IV stations.

Practice Lab

The practice lab is a more traditional lab with nine beds. It is equipped with functioning head walls that include simulated oxygen, suction, and BP cuffs.

Table 19: Physical Resources	
Area	Austin Nursing Room Numbers
Classroom Space	B104 & B102 Used for AD RN and PN program A108 Computer lab used for testing All are located in the Austin West Building <i>*Computer labs in the Austin East Building by the library are used when other programs are using the computer lab in the Austin West Building.*</i>
Laboratory/Simulation Space	B113E Simulation lab B114B Pharmacy Lab B113E Simulation storage room B110 Skills lab B101 Medical Assistant/PN/RN Lab All are located in the Austin West Building
Offices (including private space to meet with students)	B114F Jane McKinley- Lab supervisor B114E Laura Beasley- Director of Nursing A162 Melissa Wolff- AD RN instructor A161 Patty Kisley- PN instructor A160 Adjunct faculty office A158 Pat Parsons- PN instructor A157 Melissa Miller- AD RN instructor A154 Judy Thurnau- AD RN instructor A155 Ellen Goslee- AD RN instructor A153 Meeting room (used by students and faculty) All are located in the Austin West Building
Reception Space	B113 This is where the Administrative Assistant is located. Marlene Wipplinger

Criteria 5.3

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

In Spring semester 2014, a formal Nursing Department Organizational structure was developed. The structure and Nursing Department By-Laws were implemented Fall semester of 2014. The Learning Resources Committee was established as one of the standing committees under the new by-laws. The goal of this committee is to assure adequate material resources and clinical facilities for the operation of the Nursing program are available. The objectives of the committee are as follows:

- Serve as advisor to the Nursing Department Director in departmental budget matters
- Evaluate Learning resources and recommend changes and acquisitions on a yearly basis. (ATI, EMR, Library Books, Videos, etc.)

- Evaluate Nursing practice laboratory resources and recommend changes and acquisitions.
- Review physical facilities such as office space, storage space and classrooms for adequacy and appropriateness.
- Develop, evaluate and revise policies relating to material resources.
- Provide assistance to faculty regarding educational materials and technology currently available at the college.
- Annually review and revise the student and faculty handbook.

This committee meets a minimum of once a semester and more often as necessary.

Library

Riverland is committed to providing comprehensive, current, and accessible learning resources for its students and faculty. The Library on the Austin East Campus is open Monday through Friday, 8:00 am to 6:30 pm. It houses printed materials, including approximately 300 Nursing books, 12 different Nursing journal subscriptions, 2200 electronic books, and 200 videos related to Nursing care. When the Riverland librarian comes across new resources applicable to Nursing, she sends the information to Nursing faculty for review to determine if this resource should be purchased and/or made available to students and faculty. Faculty can also request new resources be made available in the library. In addition, each campus houses at least one computer lab, which provides access to the library through the internet <http://www.riverland.edu/library/index.cfm>.

The following online databases are available through the college library:

- EBSCO Health Resources
- Nursing & Allied Health Journals
- Health Reference
- Consumer Health Complete
- Gale Nursing Resource Center.
- Nursing Made Incredibly Easy
- American Journal of Nursing
- Lexis/Nexis Medical

Internet resources listed on the Library website include:

- Center for Disease Control and Prevention
- Mayo Clinic
- National Library of Medicine
- PubMed

- Science.gov Health and Medicine

Technology

The Office of Instructional Technology (OIT) provides a broad range of support to faculty and students related to instructional technology and intellectual property. This includes overseeing Riverland's online courses and instructional management system (D2L Brightspace), ITV and electronic classrooms, and related training to these, along with such services as lecture capture, clickers (TurningPoint), and plagiarism detection (TurnItIn).

D2L Brightspace is the instructional management system used at Riverland and throughout the Minnesota State system. D2L Brightspace includes a number of interactive tools which allow students to access course materials, upload assignments, participate in discussions, watch recorded lectures, take tests and quizzes, and see their grades. OIT provides support for D2L Brightspace for both students and faculty through workshops and training sessions and one-on-one consultation.

Faculty members are provided wireless laptops, which are updated every three years. Nursing faculty members have access to a variety of computer software and media. Microsoft Office is available to all faculty members, as is lecture capture, ATI, and textbook ancillaries from the publishers. Upon request, faculty members have access to scanners, digital cameras, web cameras, and digital camcorders. Specialty software for faculty is purchased through the Nursing Budget.

Faculty and Student Survey Results

On the May 2017 Faculty Survey, 100% of the faculty agreed or strongly agreed with the following statements:

- Nursing faculty participate in selection of library resources
- Nursing faculty participate in selection and use of learning resources.
- Library holdings and access are sufficient to meet the outcomes of the program.
- Audiovisual and computer equipment is sufficient to meet the outcomes of the program.
- Computer software & media is sufficient to meet the outcomes of the program.
- Technical support is sufficient to meet the outcomes of the program.
- The Learning Management System (D2L Brightspace) is sufficient to meet the outcomes of the program.

In the Spring of 2017, the PN graduates completed a graduate exit survey and 100% agreed or strongly agreed that the learner resources and technology are current, comprehensive, and accessible.

Criteria 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.

This standard does not apply to our program. All courses meet face to face.

Section Three: Standard 6 Outcomes

Development of Systematic Evaluation Plan (SEP)

Nursing faculty recognize the value of ongoing systematic evaluation of the Nursing program. The SEP is a working document used by faculty to measure and evaluate the degree to which student learning outcomes, program outcomes, and ACEN standards are achieved.

Although ACEN does not require an SEP for all standards, the PN SEP includes all six standards and criteria. The plan is reviewed and updated annually for measurable/applicable goals and analysis and trending of data at the annual May Nursing Department retreat.

The Spring 2015 and 2016 faculty review of the SEP resulted in only minor revisions to some estimated levels of achievement (ELAs) and the methods of assessment. Faculty determined that the goals are specific and measurable, and the methods of assessment are now providing useful information for use in program improvement (SEP Standard 6) is found in [Appendix M](#). The entire SEP will be available for review in the resource room at the site visit.

Program Outcomes

Program outcomes for the Riverland Nursing Program have been defined as NCLEX-PN pass rates, program completion rates, and job placement rates. Estimated levels of achievement and methods of assessment for each have been established.

- **NCLEX-PN pass rate ELA:** Riverland graduates' first time NCLEX pass rate will be at least 80% for all first time test takers during the same 12 month period.
- **Program completion Rate ELA:** 75% of Nursing students at Riverland Community College will successfully complete the Nursing program within 150 % of the time from entry into the first Nursing course
- **Job Placement:** 90% of graduates will be employed as a Licensed Practical Nurse within 6-12 months of program completion. 20% will be enrolled in an AD or BSN program.

The Program Outcomes Chart with three years of data is found in the table below; however, only the outcomes from May 2016 graduates reflect the PN curricular framework implemented in Fall 2015. Data for the 2014 graduates are hard to determine because of the "pathway program" model. Prior to 2014, the program was set up as a pathway program, with the first year as an LPN program, and the 2nd year as an RN program. Students who were in the pathway program did not traditionally stop out after the first year to become an LPN. Most went on to the RN portion of the program. Data were not specifically

gathered to measure just the PN program because of the design of the pathway program. The new stand-alone PN Program with the old pathway curriculum had its first graduates in May 2015. In Fall of 2015, a new PN Curriculum began with the first graduates of the new curriculum in May 2016.

Table 20: Program Outcomes Summary					
Required Program Outcomes	Expected Level of Achievement	Rationale for ELA	Actual Level of Achievement	Resulting Action(s) Taken/To be Taken With Time Frame for Implementation	
				Action(s)	Time Frame
Performance on NCLEX and/or Certifying Examinations**	80% or above for 1 st time testers	ACEN standard	2014: 96.97% 2015: 70% 2016: 91.30%	In 2014, the last cohort of the pathway program was completed (students not required to take NCLEX and could progress directly into AD program) Action: Stand-alone PN Program to be implemented. In 2015, the students graduated from the first stand-alone PN program of the old curriculum. All students required to take NCLEX PN boards. In addition, the FT faculty member teaching the PN courses was on sabbatical. Action: Update the curriculum to statewide framework. 2016 was the first year of the standalone new PN curriculum. 2016: Action Plan to increase credits for Pharmacology and increase lecture time	May 2014 May 2015 May 2016 May 2017
Program Completion	75% at 150% of length of program from 1 st Nursing course (3 semesters)	ACEN Report to Constituents is approximately 71% from 2015	2015: 87.8% 2016: 75% 2017: 80.95% at 100%	Determine means to track students for 150% of completion using a database	May 2015 May 2016 May 2017
Job Placement	90% within 6 to 12 months post-graduation 20% will continue on with their education in an	2015 ACEN Report to Constituents average job placement is 85%	2013/2014: ELA met. 51/52 contacted. 45/51 or 86.5% continuing on in education (pathway program) 6/6 or 100% those available for work are employed.	Continue to have institutional research survey students on a yearly basis.	Yearly in October for review

Table 20: Program Outcomes Summary					
Required Program Outcomes	Expected Level of Achievement	Rationale for ELA	Actual Level of Achievement	Resulting Action(s) Taken/To be Taken With Time Frame for Implementation	
				Action(s)	Time Frame
	AD or BSN program		<p>2014/2015: ELA met. 91.7% (19/29 students responded to the college's survey for job placement). Of these students, 11/12 were available for work and working as LPNs. 7/19 or 24.1% continued on for further education.</p> <p>2015/2016 Data not yet available for 2015/2016 from the Institutional Research Department will be available Oct. 2017.</p>		

Criteria 6.1

- ***The program demonstrates evidence of students' achievement of each end-of-program student-learning outcome.***
- ***There is ongoing assessment of the extent to which students attain each end-of-program 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.***

ELAs for SLOs:

Each SLO is measured according to the following ELAs:

By the end of the program:

- CAPSTONE PORTFOLIO: 90% of students received a satisfactory mark in the specific SLO on their clinical II Capstone Portfolio for each of the assignments.
- SIMULATION: 90% of students will demonstrate competence in the specific SLO in a simulation exercise
- EXIT SURVEY: 90% of graduates on the exit survey will agree or strongly agree to their ability to perform this SLO

In Spring of 2017, the clinical Capstone Portfolio ELA and the Exit Survey were measured for all 8 SLOs. The Simulation ELA was measured only for Teamwork and Safety SLOs. The eight student learning outcomes are measured on a cyclical rotation for the simulation only within a 3-year period as identified below:

- Year 1 (2017): 2 SLOs Teamwork/Safety
- Year 2 (2018): 3 SLOs Professionalism/Patient Centered Care/Quality Improvement
- Year 3 (2019): 3 SLOs Managing Care of the Ind. Pt/Informatics/Nursing Judgment
- Year 1 (2020): Etc....

The Clinical rubrics for grading each of SLOs in Clinical I (1140) and Clinical II (1190) can be found in [Appendix H](#).

The rubric for grading the Capstone (Clinical II) Portfolio is designed around the eight SLOs. Each student must have a satisfactory mark under each area. This rubric can be found on the **USB** under Standard 4 and 6 and in [Appendix L](#).

The PN Program uses the Creighton Evaluation tool to measure specific SLOs in various simulations throughout the program. For the 2016-2017 cohort, the SLOs Teamwork and Safety were evaluated. The entire Creighton Evaluation tool was used to measure Safety, and Teamwork was evaluated primarily

using the communication section of the evaluation tool. The Creighton Evaluation tool can be found on the **USB** under Standard 6 as a PDF and in [Appendix K](#). For the students starting in Fall of 2017, the Creighton Evaluation tool will be modified to more clearly reflect the eight SLOs in the program. The new evaluation tool is available on the **USB** under Standard 6 and it will be in the resource room at the time of the visit.

The Student Exit Survey specifically asks the students the following question. The Nursing program prepared me to demonstrate the student learner outcome (Each SLO is then listed separately and the students rank themselves on an agreement scale).

The results from the Spring 2017 graduating class included 94.7% (18/19) of the students successfully achieved each of the eight SLOs in the clinical Capstone Portfolio ELA. One student was unsuccessful in the Professional Identity SLO (94% or 18/19). The results of the simulation ELA were 100% of the students (19/19) were successful in the Teamwork and Safety SLOs. Plans are to continue to analyze and track data on a yearly basis for the exit survey and the clinical Capstone Portfolio and to analyze and track data for the simulation SLOs on a rotating basis over three years.

Criteria 6.2

- ***The program demonstrates evidence of graduates' achievement on the licensure exam.***
- ***The program's most recent annual licensure exam pass rate will be at least 80% for first-time test-takers.***
- ***There is ongoing assessment of the extent to which graduates succeed on the licensure exam.***
- ***There is analysis of assessment data and use of the analysis of assessment data in program decision-making for the maintenance and improvement of graduates' success on the licensure exam.***
- ***There is a minimum of the three most recent years of available licensure exam pass rate 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.***

The program meets the ACEN standard of 80% passing on the NCLEX licensure exam for 2016. The program receives results from January 1st to December 31st on a quarterly and yearly basis from the Minnesota Board of Nursing (MBON). There is one cohort, and one start date for the program. The program uses a database that compares the students TEAS entrance exams, withdrawal dates, students at risk, courses failed, ATI proctored exams, ATI Comprehensive Predictor, graduation on time/150% of time, and NCLEX results.

The 2012/2013 graduates, the first stand-alone cohort, had a pass rate of 96.97%. This group was part of our pathway program; the majority of the students continued on to complete their Associate degree.

The 2013/2014 graduates had a pass rate of 70%. To improve the pass rates, the program chose to incorporate the statewide PN Curriculum. A three day ATI live review was incorporated for the 2015/2016 cohort. A dedicated PN Nursing tutor was implemented for the 2015/2016 cohort and the Associate Dean/DON started reaching out to the students at-risk to develop plans for success. The program rigor was increased by including a stand-alone pharmacology course, increasing the number of Nursing course credits, and increasing the percentage needed for passing from 70 to 78%.

The results of the implementation of the changes proved successful with a pass rate for the 2015/2016 cohort of 91.30%, which ranked the second highest for the state of Minnesota.

Criteria 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 use of the analysis of assessment data in program decision-making for the maintenance and improvement of students' completion of the nursing program.***
- ***There is a minimum of the three 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 programs completion rates are measured at 150% of the time from the first Nursing course. The Nursing program is offered over two semesters, and the three semester point is the 150% of the program length for program completion. The ELA was chosen as 75%, which is higher than the ACEN Report to Constituents of 2015 that was 71%.

In 2015, the completion rates were 87.8%, and in 2016, they were 75% at 150%. In 2017, they were 80.9% at 100% of the program length (there are no students who remain to complete within the 150% time period).

As noted in 2015, the completion rate was 87.8%, but the pass rate was 70% for NCLEX PN. In 2016, the completion rates went down to 75%, and the NCLEX pass rates went up to 91.3%.

The program identified that the ATI TEAS test scores were higher for the incoming 2017 cohort of students than previous cohorts. In Fall of 2016, the program accepted students at the basic level (41-50%) and admitted only 23 students. The program was unable to fill its seats (23/40) for the 2016/2017 cohort. For the 2017/2018 cohort, the program had 60 applicants and was able to fill 35 seats with the ATI TEAS score higher than 58.8%.

In the Spring of 2017, the program identified data that the TEAS entrance scores of the graduating class of 2017 corresponded to lower ATI Comprehensive Predictor scores in all categories. To improve the success for the at-risk students, the director met with students individually to develop plans for success.

Criteria 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 obtain a job.***
- ***There is analysis of assessment data and use of the analysis of assessment data in program decision-making for the maintenance and improvement of graduates obtaining a job.***
- ***There is a minimum of the three most recent years of available job placement data and data are aggregated for the nursing program as a whole.***

The ELA for the program job placement was 90% within six to 12 months. The job placement rate ELA is set at 90%, which is higher than the ACEN Job Placement rate from the Report to Constituents of 2015 that was approximately 85%. The Minnesota Department of Employment and Economic Development (DEED) projects an increase of 13% of LPN vacancies in the southeast region of Minnesota between 2014 to 2024. Riverland Community College is within the southwest region (<https://mn.gov/deed/data/data-tools/oid/>). The job placement rate for the program is 100% for May of 2015 graduates and 86.5% for the May 2014 graduates. The job placement rate for the May 2016 cohort is being collected and analyzed by the Institutional Research Department at the college and will be available at the site visit. The program also measures the number and percentage of students who continue on for their AD/BSN or BSN degrees. The 2013/2014 cohort was still our pathway cohort, and we had 86.5% who continued on for their AD degree; the 2015/2016 data was that 24.1% or 7/19 went on for their AD/BSN degrees, 90% within six to 12 months post graduation.

The following table displays the job placement and continuing education for the past three years.

Graduation Year	Return Rate	Placement Rate	Continuing Education
May 2014	51/52 = 98%	6/6 or 100%	45/51 or 86.5%
May 2015	19/29 = 65%	11/12 or 91.7%	7/19 or 24.1%
May 2016	Available Oct 2017	Available Oct 2017	Available Oct 2017

Section Four: Appendices

Appendix A: Higher Learning Commission Evidence

Statement of Accreditation Status

As of February 15, 2017

Riverland Community College

1900 8th Ave. NW Austin, MN 55912

(507) 433-0600

www.riverland.edu

The information on this page describes the accreditation relationship between this institution and the Higher Learning Commission. General information about the Commission and the accreditation process is provided at the end of this document. In addition, links to definitions are provided for many of the terms used.

Accreditation Information

Current status: Accredited

Candidacy date(s):	11/01/1969 - 06/30/1996
Accreditation granted:	07/01/1996
Historical note:	* Note on date of accreditation: Accredited as a single entity on July 1, 1996. The result of the merger of Austin Community College, first accredited in 1971 the Austin Campus of Minnesota Riverland Technical College, first accredited in 1995 and the Albert Lea Campus of South Central Technical College, first accredited in 1995.

Most recent reaffirmation of accreditation: 2015 - 2016

- [Action Letter \(PDF\)](#)

Next reaffirmation of accreditation: 2025 - 2026

Upcoming or In-Progress Reviews

06/15/2017:	Interim Report	Program Review, Other
2019 - 2020:	Comprehensive Evaluation	
2025 - 2026:	Comprehensive Evaluation	

Appendix B: Minnesota Board of Nursing Evidence



2829 University Avenue SE, Minneapolis, MN 55414-3253
Email: nursing.board@state.mn.us
Website: www.nursingboard.state.mn.us

April 3, 2014

Nancy Genelin, EdD, MSN, BSN
Riverland Community College
Practical Nursing Program
1900 8th Avenue NW
Austin, MN 55912-1470

Dear Director Genelin,

Re: Extension of continuing approval for nursing programs without current national nursing accreditation

Program approval rules requiring programs obtain national nursing accreditation or be in candidacy by January 1, 2016 went into effect June 28, 2011. The implementation date of January 1, 2016 was revised to January 1, 2018 under the Good Cause Exempt Rule process and went into effect March 31, 2014.

On April 3, 2014, the Minnesota Board of Nursing extended continuing approval to Riverland College Practical Nursing Program due to the revised implementation date and continued compliance with applicable rules.

Subsequent Board consideration for continuing approval shall be when the program has become nationally accredited or after January 1, 2018 to determine if the program is in compliance with program approval rules.

Sincerely,

A handwritten signature in black ink, appearing to read "Ann M. Jones".

Ann M. Jones, PhD, RN
Director of Education and Credentialing
Minnesota Board of Nursing
612-317-3014
ann.m.jones@state.mn.us

A handwritten signature in black ink, appearing to read "Mary M. Hoepfner".

Mary M. Hoepfner, EdD, RN
Nursing Education Specialist
Minnesota Board of Nursing
612-317-3016
mary.hoepfner@state.mn.us

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Appendix C: Faculty and Laboratory Personnel Profile Tables

Name of Institution: Riverland Community College

Name of Nursing Education Unit: Riverland PN Nursing Program

Academic Term(s) and Date(s) Included: Fall 2017/Spring 2018

Date Form Completed: 09/07/17

The program must provide the educational and experiential faculty qualifications required by each agency below.

Agency	Name of Agency	Requirement	N/A Explain Why
The program's state regulatory agency for Nursing	Minnesota Board of Nursing	Reference: 6301.2340 Subpart 3 Practical Nursing G. ensure practical nursing program faculty have a baccalaureate or graduate degree in nursing from a regionally or nationally accredited college or university recognized by the United States Department of Education or by a comparable organization if the baccalaureate- or graduate-level degree is from a foreign country; Associate Degree Nursing H. ensure professional nursing program faculty have a graduate degree for full-time faculty and the majority of part-time faculty hold a graduate degree from a regionally or nationally accredited college or university recognized by the United States Department of Education or by a comparable organization if the baccalaureate- or graduate-level degree is from a foreign country;	
Other state agency (e.g., state department of education, state system, etc.)	Minnesota State Colleges and University system	Reference: 500040: Nursing, Practical (revised 1/21/09) Minimum Qualifications: Education Requirement: Bachelor's Degree in Nursing Reference: 500039: Nursing, A D (revised 1/21/09) Minimum Qualifications:	N/A

	<p>Education Requirement Master's degree with a major in nursing, nursing administration, nursing education, public health nursing or a nursing clinical specialty.</p> <p><u>The following is the same for PN and AD credentialing:</u> Reference: 500040: Nursing, Practical (revised 1/21/09) Reference: 500039: Nursing, A D (revised 1/21/09)</p> <p>Occupational Experience Requirement: 2 full-time years (or equivalent) of verified related paid work experience as a RN at the professional level.</p> <p>Recency Requirement: 1 year of this work experience shall be within the 5 years immediately preceding the date of application for the credential field. The recency requirement shall be waived if the individual has 2 years of successful full-time (or equivalent) postsecondary teaching experience in the credential field within the last 5 years.</p> <p>Professional Requirement: Current Minnesota RN license</p> <p>Teaching and Learning Competency Requirement:</p> <ul style="list-style-type: none"> • Course construction (credit course)* • Teaching/instructional methods (credit course)* • Student outcomes assessment/evaluation (credit course)* • Philosophy of community and technical college education (credit or non-credit course)** <p>Faculty shall have a degree in education or 3 years of successful full-time (or equivalent) teaching experience prior to being hired, or shall be required to complete coursework in the above content area (or their equivalent) prior to being granted unlimited status.</p> <p>*These courses shall be waived for individuals who at the time of hire have: a degree in education, or have documented evidence of successful completion of equivalent coursework in the specified teaching and learning content areas, or have 3 years of successful full-time (or equivalent) secondary, postsecondary, industry, or trade apprenticeship teaching experience in the field for which they are being hired. (Procedure 3.32.1 College Faculty Credentialing, Part 5, Subpart B.2).</p>	
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		**This course shall be waived for individuals who, at the time of hire, have documented evidence of successful completion of equivalent coursework.	
The program's governing organization	Minnesota State College and Universities System	Same as Minnesota State Requirements	
The governing organization's accrediting agency	Higher Learning Commission	<p>Higher Learning Commission Policy CRRT.B.10.020 Assumed Practices B2a</p> <p>Faculty Roles and Qualifications</p> <p>a. Qualified faculty members are identified primarily by credentials, but other factors, including but not limited to equivalent experience, may be considered in addition to the degrees earned by the institution in determining whether a faculty member is qualified. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) possess an academic degree relevant to what they are teaching and at least one level above the level at which they teach, except in programs for terminal degrees or when equivalent experience is established. In terminal degree programs, faculty members possess the same level of degree. When faculty members are employed based on equivalent experience, the institution defines a minimum threshold of experience and an evaluation process that is used in the appointment process. Faculty teaching general education courses, or other non-occupational courses that transfer, typically hold a master's degree or higher in the discipline or subfield. If a faculty member holds a master's degree or higher in a discipline or subfield other than that in which he or she is teaching, that faculty member should have completed a minimum of 18 graduate credit hours in the discipline or subfield in which they teach.</p> <p>Adopted Commission Policy: Assumed Practices © Higher Learning Commission policycomments@hlcommission.org • hlcommission.org • 800-621-7440 Page 5</p>	

Qualifications of Full-Time Faculty Exclusive to PN Nursing Program

1	2	3	4	5	6	7
FACULTY MEMBER'S NAME (Alpha Order by Last Name)	DATE OF INITIAL APPOINTMENT AS FT Faculty	FACULTY MEMBER'S ACADEMIC DEGREES	FACULTY MEMBER'S AREA OF EXPERTISE/ EXPERIENCE	ALL NURSING COURSE(S) TAUGHT BY FACULTY MEMBER DURING CURRENT ACADEMIC YEAR	NON- TEACHING AREA(S) OF RESPONSIBILITY	FACULTY MEMBER'S OTHER QUALIFICATIONS RELATED TO NURSING COURSE(S) TAUGHT
Parsons, Pat	Month/Year: December 17, 1973	BSN Winona State College 1971 MSN University of Minnesota 1979 Masters in Community Counseling Winona State University 1992	Med Surg and Mental Health Has taught for over 40 years in the AD Nursing Program and PN Program in several different course subjects such as foundations, OB/Peds, med surg, psychology, pharmacology, and transitions.	For Program Being Reviewed Term: 1 and 2 Course Prefix and Number: PNUR 1110 Foundations PNUR 1120 Care of the Older Adult PNUR 1130 Pharmacology PNUR 1140 Clinical I PNUR 1150 Nursing Care of Adults PNUR 1160 Maternal Child PNUR 1170 Transitions PNUR 1180 Psychosocial Nursing Care	<ul style="list-style-type: none"> • Office hours • Practical Nursing Curriculum Committee • Learning Resources Committee • Admission and Progression Committee • Teaching Team Practical Nursing Committee • Advisory Board 	Master's degree in Mental Health Counseling in 1992 (Reads articles from the following journals to keep up with Mental Health). <ul style="list-style-type: none"> • Journal of Behavioral Medicine • American Journal of Health Behaviors • American Journal of Psychiatry • Psychosocial Medicine • American Journal of Public Health • Journal of Psychology • Journal of Mood Disorders • American Journal of

1	2	3	4	5	6	7
FACULTY MEMBER'S NAME (Alpha Order by Last Name)	DATE OF INITIAL APPOINTMENT AS FT Faculty	FACULTY MEMBER'S ACADEMIC DEGREES	FACULTY MEMBER'S AREA OF EXPERTISE/ EXPERIENCE	ALL NURSING COURSE(S) TAUGHT BY FACULTY MEMBER DURING CURRENT ACADEMIC YEAR	NON- TEACHING AREA(S) OF RESPONSIBILITY	FACULTY MEMBER'S OTHER QUALIFICATIONS RELATED TO NURSING COURSE(S) TAUGHT
						<p>Community Psychology</p> <ul style="list-style-type: none"> • Online Journal of Issues in Nursing <p>Currently works per diem on the Mayo Clinic Medical Surgical Floor (several shifts a month).</p> <p>Licensed in Minnesota as RN (see Table 7)</p>

Qualifications of Part-Time Faculty Exclusive to Nursing Program

1 FACULTY MEMBER'S NAME (Alpha Order by Last Name)	2 DATE OF INITIAL APPOINTMENT AS FT Faculty	3 FACULTY MEMBER'S ACADEMIC DEGREES	4 FACULTY MEMBER'S AREA OF EXPERTISE/ EXPERIENCE	5 ALL NURSING COURSE(S) TAUGHT BY FACULTY MEMBER DURING CURRENT ACADEMIC YEAR	6 NON- TEACHING AREA(S) OF RESPONSIBILITY	7 FACULTY MEMBER'S OTHER QUALIFICATIONS RELATED TO NURSING COURSE(S) TAUGHT
Kisley, Patricia	Month/Year: January 12, 2015	BSN University of Iowa 2007	Area of expertise/ experience: Med Surg, Hospice	<u>For Program Being Reviewed</u> Term: 1 and 2 Course Prefix and Number: PNUR 1140 Clinical I PNUR 1190 Clinical II and PN program Tutor Skills lab for Semester 1 and 2	<ul style="list-style-type: none"> • Office hours • Tutoring • Practical Nursing Curriculum Committee • Admission and Progression Committee • Team Teaching Committee for Practical Nursing • Advisory Board 	Licensure as RN in Minnesota (see Table 7) Instructor in the past in Iowa at Community College Experience as director in LTC, worked as nurse in ICU, nurse manager for skilled unit, worked in hepatology, anticoagulation unit, diabetic and BP project manager, etc. (see CV)

LABORATORY PERSONNEL PROFILE TABLE

Name of Institution: Riverland Community College

Name of Nursing Education Unit: Riverland PN Nursing Program

Academic Term(s) and Date(s) Included: Fall 2017/Spring 2018

Date Form Completed: 09/07/17

The program must provide the educational and experiential faculty qualifications required by each agency below.

The program must provide the educational and experiential laboratory personnel qualifications required by each agency below.			
Agency	Name of Agency	Requirement	Not Applicable <i>Directions: If not applicable, provide a brief explanation why.</i>
The program's state regulatory agency for nursing	Minnesota Board of Nursing	Reference: 6301.2340 Subpart 3 Practical Nursing G. ensure practical nursing program faculty have a baccalaureate or graduate degree in nursing from a regionally or nationally accredited college or university recognized by the United States Department of Education or by a comparable organization if the baccalaureate- or graduate-level degree is from a foreign country;	
Other state agency (e.g., state department of education, state	Minnesota State Colleges and University system	Reference: 500040: Nursing, Practical (revised 1/21/09) Minimum Qualifications: Education Requirement: Bachelor's Degree in Nursing Reference: 500039: Nursing, A D (revised 1/21/09)	

system, etc.)		<p>Minimum Qualifications:</p> <p><i>Education Requirement</i> Master's degree with a major in nursing, nursing administration, nursing education, public health nursing or a nursing clinical specialty.</p> <p><i>The following is the same for PN and AD credentialing:</i> Reference: 500040: Nursing, Practical (revised 1/21/09) Reference: 500039: Nursing, A D (revised 1/21/09)</p> <p>Occupational Experience Requirement: 2 full-time years (or equivalent) of verified related paid work experience as a RN at the professional level.</p> <p>Recency Requirement: 1 year of this work experience shall be within the 5 years immediately preceding the date of application for the credential field. The recency requirement shall be waived if the individual has 2 years of successful full-time (or equivalent) postsecondary teaching experience in the credential field within the last 5 years.</p> <p>Professional Requirement: Current Minnesota RN license</p> <p>Teaching and Learning Competency Requirement:</p> <ul style="list-style-type: none"> • Course construction (credit course)* • Teaching/instructional methods (credit course)* • Student outcomes assessment/evaluation (credit course)* • Philosophy of community and technical college education (credit or non-credit course)** <p>Faculty shall have a degree in education or 3 years of successful full-time (or equivalent) teaching experience prior to being hired, or shall be required to complete coursework in</p>	
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		<p>the above content area (or their equivalent) prior to being granted unlimited status.</p> <p>*These courses shall be waived for individuals who at the time of hire have: a degree in education, or have documented evidence of successful completion of equivalent coursework in the specified teaching and learning content areas, or have 3 years of successful full-time (or equivalent) secondary, postsecondary, industry, or trade apprenticeship teaching experience in the field for which they are being hired. (Procedure 3.32.1 College Faculty Credentialing, Part 5, Subpart B.2).</p> <p>**This course shall be waived for individuals who, at the time or hire, have documented evidence of successful completion of equivalent coursework.</p>	
The program's governing organization	Minnesota State College and Universities System	Same as Minnesota State Requirements	
The governing organization's accrediting agency	Higher Learning Commission	Higher Learning Commission Policy CRRT.B.10.020 Assumed Practices B2a Faculty Roles and Qualifications Qualified faculty members are identified primarily by credentials, but other factors, including but not limited to equivalent experience, may be considered in addition to the degrees earned by the institution in determining whether a faculty member is qualified. Instructors (excluding for this requirement teaching assistants enrolled in a graduate program and supervised by faculty) possess an academic degree relevant to what they are teaching and at least one level above the level at which they teach, except in programs	

		<p>for terminal degrees or when equivalent experience is established. In terminal degree programs, faculty members possess the same level of degree. When faculty members are employed based on equivalent experience, the institution defines a minimum threshold of experience and an evaluation process that is used in the appointment process. Faculty teaching general education courses, or other non-occupational courses that transfer, typically hold a master's degree or higher in the discipline or subfield. If a faculty member holds a master's degree or higher in a discipline or subfield other than that in which he or she is teaching, that faculty member should have completed a minimum of 18 graduate credit hours in the discipline or subfield in which they teach.</p> <p>Adopted Commission Policy: Assumed Practices © Higher Learning Commission policycomments@hlcommission.org • hlcommission.org • 800-621-7440 Page 5</p>	
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Laboratory Personnel Profile Table

Qualifications of Full-Time Laboratory Personnel Exclusive to Nursing Program

1	2	3	4	5	6	7
LABORATORY PERSONNEL MEMBER'S NAME (Alpha Order by Last Name)	DATE OF INITIAL APPOINTMENT AS FULL-TIME LABORATORY PERSONNEL MEMBER AT INSTITUTION	LABORATORY PERSONNEL MEMBER'S RESPONSIBILITY IN LABORATORY	LABORATORY PERSONNEL MEMBER'S NON-LABORATORY RESPONSIBILITY	LABORATORY PERSONNEL MEMBER'S ACADEMIC DEGREES	LABORATORY PERSONNEL MEMBER'S EXPERIENTIAL QUALIFICATIONS	LABORATORY PERSONNEL MEMBER'S OTHER QUALIFICATIONS RELATED TO LABORATORY RESPONSIBILITY
Jane McKinley	Month/Year: 1994	<p>Provide technical skills to support an interdisciplinary simulation center</p> <p>Supervises students, and assists faculty and outside agencies in the proper usage of simulators and smart media.</p> <p>Ensures that sufficient quantities of supplies and working equipment are available within the simulation and practice labs so that practice,</p>	Jane helps teach the skills lab and simulation lab for the PN program in semester 1 and 2	<p>Associate Degree in Nursing from Riverland Community College 1980</p> <p>BSN from Winona State University Fall 2015</p>	Supervision, OBGYN, Surgery, Med Surg, Labor and Deliver, Simulation	<p>Certificate in Clinical Simulation from the University of Southern Indiana 2011</p> <p>Licensure as an RN in Minnesota (see Table 7)</p>

		<p>demonstration and testing of nursing skills can be properly conducted.</p> <p>Functions in a liaison capacity between students, nursing faculty, radiology faculty, and the Faculty Nursing Program Director. Acts as a central communication link, through which outside agencies can gain access to the Health Science Simulation Lab.</p> <p>Establishes safety and security procedures.</p>				
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Appendix D: Faculty Scholarship Table

Faculty Name Alpha by Last Name	Years of experience with Nursing Program	Years of experience in Nursing Education	Scholarly Activities Knowledge, teaching, service, practice and research.	Maintenance of Evidence Based Practice In Teaching Methodology	Maintenance of Expertise in teaching areas
Patty Kisley	30 years	2 years	<p>Scholarship of teaching: Uses Standards of Practice as set forth by the University of Iowa that incorporates safety, hand hygiene, patient rights, and infection control to name a few.</p> <p>Uses current published studies to help guide her teaching strategies in clinical and lab such as those found in the NLN report, Minnesota Board of Nursing updates, Iowa Board of Nursing updates, and the American Nurses Association.</p>	Attended ATI workshop March 22 nd , 2016.	Clinical Expertise: Attended a geriatric conference March 16 th , 2016
Jane McKinley	22 Years	22 years	<p>Scholarship of teaching: Active in simulation practices through utilization of membership through organizations such as SSIH,</p>	Nurse Tim: Nursing Skills Lab Teaching Strategies: Learning and Assessment August 2016	Reads journals for Simulation in Healthcare, NLN, American Nurses Association, and Medscape. Clinical expertise in OBGYN,

Faculty Name Alpha by Last Name	Years of experience with Nursing Program	Years of experience in Nursing Education	Scholarly Activities Knowledge, teaching, service, practice and research.	Maintenance of Evidence Based Practice In Teaching Methodology	Maintenance of Expertise in teaching areas
			INASCL, MNSHEP & Sim Ghosts.	Attended a two-day simulation conference in Minneapolis Minnesota on May 17 th and 18 th . Pam Jeffries was the keynote speaker along with the NLN on best practices in simulation.	Surgery and Med surg.
Patricia Parsons	43	43	<p>Scholarship of practice: Works part-time at the Mayo Health System as an RN</p> <p>Scholarship of teaching: Flipped classroom, use of reflective journals at clinical, help students develop portfolios, incorporate ATI in the classroom, games for review, and has created many simulations for classroom-based learning.</p> <p>Scholarship of knowledge: Attends many seminars at Mayo Clinic for CEUs, works at Mayo clinic on med surg, and has to</p>	<p>Attended ATI workshop March 22nd, 2016.</p> <p>Reads journals and textbooks related to current best practice and evidenced based learning.</p> <p>Was a member of the MANE (Minnesota Alliance for Nursing Education) curriculum committee in 2014/2015.</p> <p>Follows teaching blogs such as KeithRN and Faculty Focus newsletter.</p> <p>Attended an ACEN workshop on Standard 4</p>	Reads journals related to current best practice in nursing and evidenced based learning.

Faculty Name Alpha by Last Name	Years of experience with Nursing Program	Years of experience in Nursing Education	Scholarly Activities Knowledge, teaching, service, practice and research.	Maintenance of Evidence Based Practice In Teaching Methodology	Maintenance of Expertise in teaching areas
			<p>maintain her CEUs for RN licensure in the state of MN.</p> <p>All CEUs kept on file.</p>	<p>and 6 on May 16th, 2017</p>	

Faculty CV and Scholarship Table

Name: Jane McKinley

Work experience/clinical practice

Work experience/clinical practice	Dates
Place: Riverland Community College <i>Nursing Faculty</i> Responsibilities: Develop, plan, and conduct didactic, laboratory and clinical courses in the practical nursing program. Develop curriculum integrated with technology aligned with course learning outcomes. Advise students. Participate in college committees.	1994 -present
Place: Mayo Clinic Health Systems-Austin (Then known as Austin Medical Clinic) Address 1000 First Drive NW Austin, MN 55912 <i>Job title</i> Supervisor/ Staff nurse/ First surgical assistant Responsibilities: Coordination of care, direct patient care. Patient and family teaching, and surgical assistant for an OB/GYN clinic	1985- 1994
Place: Mayo Clinic Health Systems- Austin (Then known as St. Olaf Hospital) Address 1000 First Drive NW Austin, MN 55912 <i>Job title</i> Staff nurse Responsibilities: Direct patient care on Medical/Surgical floor. Charge and labor and delivery nurse	1980-1985

2. Current licensure:

Name of Licensee	State of Licensure	License #	Expiration date
Jane Ann McKinley	Minnesota	R 92532-1	4/30/ 2018

3. Relevant continuing education for the last three (3) years:

Name: Jane McKinley	Years of nursing experience: 36.5 Years of nursing education experience: 23		
Topic of Study/ Name of development activity	Source for education	Date	How this information will be applied
Current trends in nursing practice:	Two-day simulation conference in Minneapolis MN	May 2017	Jane learned the latest practices in using evaluation in simulation, debriefing after simulations, how to incorporate more simulations into existing curriculum, and understanding teaching pedagogy of simulation

	Treating Pressure Ulcers and Chronic Wounds	March 2016	Jane applies this to skills lab using the latest information related to pressure ulcers and wounds.
	Celiac Disease- Continuing education	March 2016	Maintaining current knowledge on celiac disease. This was a CEU course.
	Post-Traumatic Stress Disorder	April 2016	Jane learned more about this disorder to be able to create a simulation exercise that included PTSD
	Nursing Skills Lab Teaching Strategies	Sept 2016	Jane teaches in the skills lab and this will help her to implement new strategies to help our nursing student learn
	ACES- Innovation in Teaching	April 2014	NLN- ACES cases that can be applied to simulation. Jane is the person that creates most of our simulation exercises. This helps her to think of new ideas in simulation.
	Faculty duty days prior to the start of each semester	2017	These days are designed to help faculty prepare for the next academic year. Keynote speakers are invited to talk about current practices in education. In addition, other break out workshops include things like curriculum development, strategic planning, etc.

4. Relevant scholarly work for the last three (3) years:

DATE (January 2014 – present)	Scholarly Work/Activities
	Scholarship is defined by the ACEN glossary (p. 14) as activities that facilitate the enhancement of a nursing faculty member’s expertise and support the achievement of the end of program student learning outcomes and program outcomes. These include, but are not limited to, application of knowledge, teaching, service, practice and research. <i>Examples:</i> publications, presentations, research, book reviews, or the evidence based teaching and evidence based clinical practices that you implemented in your teaching which demonstrate the scholarship of teaching, etc.
2013	Transforming Teaching and Learning Using Virtual Worlds. –Jone Tiffany and Jane McKinley – NLN Immersive Experience Conference 2013
2013	Immersive and Interactive Simulation – Carol Duham, Danyel Germain, Jone Tiffany, Jane McKinley- NLN Immersive Experience Conference 2013

Name: Patricia Kisley

Work experience/clinical practice

Work experience/clinical practice	Dates
<p>Place: Instructor Practical Nursing Riverland Community College. Austin, MN (2014-current). Registered nurse instructing practical nursing students in study group, lab, and clinical. Instructing students how to complete tasks and skills, offering feedback and encouragement. Counseling and grading students in the practical nursing section.</p>	2014 to current
<p>Place: Instructor/Evaluator Nurse Aide program at North Iowa Area Community College Mason City, IA. Registered nurse instructing nurse aide students in lab, and clinical. Instructing students how to complete tasks and skills, offering feedback and encouragement. Counseling and grading students in the certified nurse aide program.</p>	2013- present
<p>The Diabetic and ASA Project coordinator. Employee and Community Health (ECH).</p>	2012-2013
<p>Place: Minnesota Community measures. The Diabetic and blood pressure Project manager. Employee and Community Health (ECH).</p>	2012-2013
<p>Place: Nurse Supervisor. Employee and Community Health (ECH) Primary Care and Anticoagulation Units. Mayo Foundation</p>	2007-2013
<p>Place: RN Research Supervisor for Gastroenterology/Hepatology.</p>	2005-2007
<p>Place: Nurse Manager for the Skilled Unit, Assistant Director of Nursing Charter House.</p>	2001-2005
<p>Place: Staff RN: Vascular/Thoracic ICU 7MB RN Charge Nurse, Orthopedic Charge RN Surgery 1MB RN Study Coordinator MPACT.</p>	1995-2001
<p>Place: RN Nurse Manager Vascular/Thoracic/General Surgery ICU/CCU.</p>	1986-1993
<p>Place: Director of Nursing Maple Manor Care Center Osage, Iowa</p>	1987-1992
<p>Place: Director of Nursing Nora Springs Care Center Nora Springs, Iowa</p>	1986-1987
<p>Place: Staff nurse at North Iowa Mercy Mason City, IA</p>	1981-1993

2. Current licensure:

Name of Licensee	State of Licensure	License #	Expiration date
Patty Kisley	Minnesota	#R 131366-0	3-31-19

3. Relevant continuing education for the last three (3) years:

Name Patricia Kisley		Years of nursing experience: 36 Years of nursing education experience: 4	
Topic of Study/ Name of development activity	Source for education	Date	How this information will be applied
Current trends in nursing practice:	Geriatric Conference Mayo Foundation Rochester MN. Geriatric Conference North Iowa Community College, Mason City, IA. (2014-16)	2016	Patty does clinical in long-term care facilities. This will help her to stay current on current and best practices in geriatrics.
	Mayo's Nurses Fair Rochester, MN.	2016	Attending the Mayo Clinic Health Fair helps Patty to stay up to date on what is happening in the workforce and in the Mayo Health System where she does clinicals for our PN students
	Geriatric Conference North Iowa Community College, Mason City, IA.	2016	Patty does clinical in long-term care facilities. This will help her to stay current on current and best practices in geriatrics.
	Faculty Duty Days prior to the start of each semester	2017	Before the beginning of fall semester, faculty are to attend 2 faculty duty days. These days are designed to help faculty prepare for the next academic year. Keynote speakers are invited to talk about current practices in education. In addition, other break out workshops include things like curriculum development, strategic planning, etc.

	CNA update on mandatory reporting in the state of IA.	2017	
	Adult/Child mandatory reporting update	2017	
Teaching/Learning strategies:			

4. Relevant scholarly work for the last three (3) years:

DATE	Scholarly Work/Activities
(January 2014 – present)	Scholarship is defined by the ACEN glossary (p. 14) as activities that facilitate the enhancement of a nursing faculty member’s expertise and support the achievement of the end of program student learning outcomes and program outcomes. These include, but are not limited to, application of knowledge, teaching, service, practice and research. <i>Examples:</i> publications, presentations, research, book reviews, or the evidence based teaching and evidence based clinical practices that you implemented in your teaching which demonstrate the scholarship of teaching, etc.
Current	Uses Standards of Practice as set forth by the University of Iowa that incorporates safety, hand hygiene, patient rights, and infection control to name a few.
Current	Uses current published studies to help guide her teaching strategies in clinical and lab such as those found in the NLN report, Minnesota Board of Nursing updates, Iowa Board of Nursing updates, and the American Nurses Association.

Name: Pat Parsons

Faculty CV and Scholarship Table

Name: Patricia A. Parsons

1. Work experience/clinical practice

Work experience/clinical practice	Dates
College Name: Riverland Community College Patricia A. Parsons Responsibilities: Develop, plan, and conduct didactic, laboratory and clinical courses in practical nursing program. Develop curriculum integrated with technology aligned with course learning outcomes. Advise students. Participate in college committees.(Faculty Shared Governance 2016-2017) Classes taught. PNUR 1110 Foundations; PNUR 1120 Older Adult; PNUR 1130 Pharmacology; PNUR 1140 Lab I; PNUR 1150 Med/Surg; PNUR 1170 Transitions; PNUR 1180 Psychiatric; PNUR 1190 Lab II	1973 -present
Place Mayo Clinic Health Systems Albert Lea Address Fountain Street, Albert Lea <i>Job title: Staff nurse</i> Responsibilities: work on a medical surgical unit giving direct patient care. In the summers, vacations, and sabbaticals continue to work 0.5 position; during rest of school year pick up on a casual basis.	2007- present

2. Current licensure:

Name of Licensee	State of Licensure	License #	Expiration date
Patricia A. Parsons	Minnesota	R 69628-1	07/31/2018

3. Relevant continuing education for the last three (3) years:

Name Patricia A Parsons		Years of nursing experience: 46 Years of nursing education experience:43	
Topic of Study/ Name of development activity	Source for education • Conference • Workshop • Coursework • Other	Date (Jan 2014 – present)	How this information will be applied • Maintenance of expertise • Curriculum development • Teaching pedagogy • Contribution to professional community • Informatics
Current trends in nursing practice:			
			I read many more things than show in documented meetings, CEU's or classes. Maintenance of current expertise in nursing; useful in my classes; use of technology—see attached list; Continue to work in a clinical setting on a regular basis; continue to read and through my union membership am aware of current trends both clinically and politically.
LGBTQ Community Part 1 and 2	3.5 hours on line	1/28/17	
See attached from my continuing education requirements from Mayo Clinical Health Systems in Albert lea.			
Information technology/Distance education:			
			I read many more things than show in documented meetings, CEU's or classes. Maintenance of current expertise in nursing; useful in my classes; use of technology—see attached list
Big Data and Future of Nursing Knowledge: working to complete the other 5 hours of this content	2 contact hours on line 1/29/17		

[Appendix E: Two-Page Syllabi](#)

PNUR 1110 Foundations of Practical Nursing

Course Credits: 6 credits

Classroom Theory and Concept-Based Curriculum: 4 lecture credits- 2 lab credits.

COURSE DESCRIPTION

Foundations of Practical Nursing provides an introduction to the theoretical foundation for focused assessment and nursing skills. The student is given an opportunity to demonstrate these skills in the laboratory setting. An introduction to the nursing process provides the student with a beginning framework for decision-making. The key concepts of teamwork and collaboration, safety, quality improvement, professional identity /behavior, patient/relationship centered care, nursing judgment/evidence based practice, managing care of the individual patient, and informatics/technology are introduced. Pre requisite: Admission to the PN program. Co-requisite: PNUR1120, PNUR1130, PNUR1140 (6 Cr – 4 lect; 2 lab)

Student Learner Outcomes Students will be able to:	OUTCOMES The student will successfully:
1. INFORMATICS/TECHNOLOGY Utilize information technology in health care settings.	1.1 Accurately document the provision and outcomes of patient care in the lab and clinical setting. 1.2 Identify technology used to access reliable resources that support evidence based patient care, reduce reliance on memory, and enhance competency within the practice setting.
2. MANAGING CARE OF THE INDIVIDUAL PATIENT Work within an established plan of care for an individual patient to organize, and assign aspects of care to UAP's and LPN's under the direction of an RN or other licensed Health Care Provider to provide a safe and effective environment.	2.1 Identify ways to plan and organize care in cooperation with team members, utilizing plans of established care in the provision of quality nursing care. 2.2 Assign aspects of care under the direction of an RN or other HCP.
3. NURSING JUDGMENT/EVIDENCE BASED CARE Utilize evidence based nursing judgment when prioritizing care, implementing interventions, reporting changes, and promoting the health of individual patients across the lifespan within the healthcare system.	3.1 Identify patient care concepts and their relationships to providing care that is safe for the nurse and the patient.
4. PATIENT/RELATIONSHIP CENTERED CARE Demonstrate effective communication skills while providing patient care founded on basic physical, developmental, spiritual, cultural, functional, and psychosocial needs of individual patients across the lifespan.	4.1 Discuss caring and communication skills when using the nursing process in the provision of culturally sensitive patient care across the lifespan in various healthcare settings. 4.2 Provide examples of health care information and reinforcement of established teaching plans.

<p>5. PROFESSIONAL INTEGRITY AND ETHICAL BEHAVIOR Demonstrate professional behaviors and accountability with legal and ethical nursing practice standards for a competent Practical Nurse.</p>	<p>5.1 Discuss personal integrity, professional boundaries and behaviors related to established codes of ethics, nurse practice acts, and legal/ethical frameworks.</p>
<p>6. QUALITY IMPROVEMENT Provide input into systematic processes that measure patient outcomes/variances and contribute to the development of changes in policies/procedures to achieve effective patient outcomes.</p>	<p>6.1 Identify patient care concerns and methods to improve patient care, environmental safety, customer service and patient satisfaction.</p>
<p>7. SAFETY Provide a safe care environment for patients, self, and others.</p>	<p>7.1 Demonstrate basic nursing skills using proper techniques and measures that ensure patient safety (i.e. national patient safety campaigns).</p>
<p>8. TEAMWORK AND COLLABORATION Participate as a member of the inter-professional team collaborating and communicating with other health care providers to promote safe, quality patient centered care.</p>	<p>8.1 Demonstrate effective communication skills when working with inter-professional teams, documenting care, and reporting to appropriate team members.</p>

TEACHING METHODS USED BY FACULTY (Individual, Group, or On-line Strategies)

Modeling, dialogue, practice, affirmation, simulation, debate, case studies, learning contracts, cooperative/collaborate learning, narrative pedagogy, games, imagery, concept mapping/mind mapping, scholarly web sites, webinars, portfolio, poster, journals, writing, self-learning modules, role playing, analogies, and provision for an environment for growth are core elements of the teaching strategies. A variety of learning activities are correlated with the classroom presentations. These activities are designed to assist the student to meet course objectives. Students are expected to participate in experiential exercises, individual and group accountability, preparation of written work, oral discussions and presentations.

EVALUATION of COURSE REQUIREMENTS

There will be four unit exams and one comprehensive final. These exams will cover learning outcomes selected from the readings, commentary, discussion, and self-study and written assignments. One hour will be allotted for each 50 questions on tests. These exams will consist of a variety of types of questions—multiple choice, multiple select, matching, etc. written at a higher level than recall. The final exam will be comprehensive (integrating material across the entire course). Students will not be permitted to use textbooks or any other supplemental notes during any exam.

THEORY

THEORY	POTENTIAL POINTS
Unit Exams (4)	200
Final exam (comprehensive)	100
Medical Terminology weekly quizzes and comprehensive test	150
Quizzes (unannounced)	70
Self-reflection papers (3)	30 points
Total Theory Points	550 potential points.

Grading	%
A	95-100
A-	92-94.9
B+	90-91.9
B	87-89.9
B-	85-86.9
C+	83-84.9
C	78-83.9 Minimum
C-	75-77.9
D	72-74.9
F	< or = to 71.9

PNUR 1120 Nursing Care of Older Adults

Course Credits: 3 credits

Classroom Theory and Concept-Based Curriculum: 3 credits.

COURSE DESCRIPTION

Nursing Care of Older Adults introduces students to the care of geriatric patients with a focus on health promotion and safety. Emphasis is on common health problems of the older adult in restorative and residential facilities as well as safety and end-of-life care. Application of pathophysiology, nutrition and pharmacology are applied to common diseases within each topic area. Pre-requisite: Admission to the Practical Nursing Program. Co-requisite (PNUR 1110, 1130, 1140)

Student Learner Outcomes Students will be able to:	Outcomes The student will successfully:
1. Informatics/Technology Utilize information technology in health care settings	1.3 Use reliable evidence based journals and online databases to find information related to the care of older adults with common health and safety issues.
2. Managing Care of the Individual Patient Work within an established plan of care for an individual patient to organize, and assign aspects of care to UAP's and LPN's under the direction of an RN or other HCP to provide a safe effective environment.	2.3 Identify priorities of care in the provision of emergency response plans under the direction of a RN or other licensed HCP.
3. Nursing Judgment/Evidence Based Care Utilize evidence based nursing judgment when prioritizing care, implementing interventions, reporting changes, and promoting the health of individual patients across the lifespan within the healthcare system.	3.2 Choose interventions (e.g. reporting changes, identifying action to take) within an established plan of care for potential/ actual complications of the older adult patient. 3.3 Discuss rationales for nursing judgments and prioritization of care of the older adult patient.
4. Patient/Relationship Centered Care Demonstrate effective communication skills while providing patient care founded on basic physical, developmental spiritual, cultural, functional, and psychosocial needs of individual patients across the lifespan.	4.3 Give examples of patient/relationship centered care when using the nursing process to contribute to individualized plans of care for the older adult. 4.4 Recognize and identify barriers to learning when proving or reinforcing health care information to older adult patients regarding health care and safety issues.
5. Professional identity and ethical behavior Demonstrate professional behaviors and accountability with legal and ethical nursing practice standards for a competent Practical Nurse.	5.2 Describe the legal and ethical implications/aspects of caring for older adults.
7. Safety Provide a safe care environment for patients, self, and others.	7.2 Demonstrate application of safe nursing practice when performing skills in the lab setting.

<p>8. Teamwork and Collaboration Participate as a member of the inter-professional team collaborating and communicating with other health care providers to promote safe, quality patient centered care.</p>	<p>8.2 Demonstrate effective inter-professional collaboration when reporting and documenting focused assessment findings and interventions utilized for the older adult patient in simulated lab settings.</p>
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TEACHING METHODS USED BY FACULTY (Individual, Group, or On-line Strategies)

Modeling, dialogue, practice, affirmation, simulation, debate, case studies, learning contracts, cooperative/collaborate learning, narrative pedagogy, games, imagery, concept mapping/mind mapping, scholarly web sites, webinars, portfolio, poster, journals, writing, self-learning modules, role playing, analogies, and provision for an environment for growth are core elements of the teaching strategies. A variety of learning activities are correlated with the classroom presentations. These activities are designed to assist the student to meet course objectives. Students are expected to participate in experiential exercises, individual and group accountability, preparation of written work, oral discussions and presentations.

EVALUATION of COURSE REQUIREMENTS

There will be three unit exams and one comprehensive final. These exams will cover learning outcomes selected from the readings, commentary, discussion, and self-study and written assignments. One hour will be allotted for each 50 questions on tests. These exams will consist of a variety of types of questions—multiple choice, multiple select, matching, etc. written at a higher level than recall. The final exam will be comprehensive (integrating material across the entire course). Students will not be permitted to use textbooks or any other supplemental notes during any exam.

THEORY

THEORY	POTENTIAL POINTS
Unit Exams (3)	150
Final exam (comprehensive)	100
Quizzes (unannounced)	50
Self-reflection papers (3)	30 points
Elder Paper	75
Three Client Project	25
Total Theory Points	430 potential points

COURSE FINAL GRADE is determined by adding all points together and divided by total possible. The percent obtained determines the grades as described below.

Grading	%
A	95-100
A-	92-94.9
B+	90-91.9
B	87-89.9
B-	85-86.9
C+	83-84.9
C	78-83.9 Minimum
C-	75-77.9
D	72-74.9

F	< or = to 71.9
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PNUR 1130 Pharmacology

Course Credits: 3

Classroom Theory and Concept-Based Curriculum: 3 hours per week

COURSE DESCRIPTION

Included in this course is information on pharmacokinetics, pharmacodynamics, common adverse/side effects, and contraindications to drug use. Emphasis is placed on drug classifications and nursing care related to safe administration of medications to patients across the life span. Pre-requisites: Admission to the Practical Nursing Program; Co-requisite: PNUR 1110, PNUR 1120, PNUR 1140

Student Learner Outcomes Students will be able to:	Outcomes The student will successfully:
1. Information/Technology Utilize information technology in health care settings.	1.4 Identify reliable information related to pharmacology that supports patient care, reduces reliance on memory, and enhances competency within the practice setting.
3. Nursing Judgment/evidence based care Utilize evidence based nursing judgment when prioritizing care, implementing interventions, reporting changes, and promoting the health of individual patients across the lifespan within the healthcare system.	3.4 List the major classifications of medications, common medications within each classification, potential/actual complications (side effects), contraindications, and rationales for medication administration.
4. Patient/Relationship Centered Care Demonstrate effective communication skills while providing patient care founded on basic physical, developmental spiritual, cultural, functional, and psychosocial needs of individual patients across the lifespan.	4.5 Identify information needed for patients taking various classifications of medications.
5. Professional identity and ethical behavior Demonstrate professional behaviors and accountability to legal and ethical nursing practice standards for a competent Practical Nurse.	5.3 Describe the legal and ethical implications/aspects of medication administration.
7.Safety Provide a safe care environment for patients, self, and others.	7.3 Describe principles of safe medication administration in relation to pharmacology, pharmacokinetics, and pharmacodynamics and the nurse's role in preventing medication errors.

TEACHING METHODS USED BY FACULTY (Individual, Group, or On-line Strategies)

Modeling, dialogue, practice, affirmation, simulation, debate, case studies, learning contracts, cooperative/collaborate learning, narrative pedagogy, games, imagery, concept mapping/mind mapping, scholarly web sites, webinars, portfolio, poster, journals, writing, self-learning modules, role playing, analogies, and provision for an environment for growth are core elements of the teaching

strategies. A variety of learning activities are correlated with the classroom presentations. These activities are designed to assist the student to meet course objectives. Students are expected to participate in experiential exercises, individual and group accountability, preparation of written work, oral discussions and presentations.

THEORY

THEORY (proctored exams)	POTENTIAL POINTS
Unit Tests (3)	150
Final exam (comprehensive)	100
Quizzes (unannounced) (5)	50
Math test*	25
Three self-appraisal papers 10 points each	30
Drug family concept maps	45
Total Theory Points	400 points

Grading	%
A	95-100
A-	92-94.9
B+	90-91.9
B	87-89.9
B-	85-86.9
C+	83-84.9
C	78-83.9 Minimum
C-	75-77.9
D	72-74.9
F	< or = to 71.9

PNUR 1140 Clinical 1

COURSE DESCRIPTION

Clinical I provides the student an opportunity to apply nursing judgment using the nursing process to implement safe, patient/relationship centered care in selected settings. Pre-requisite: Admission to Practical Nursing Program Co- requisite: PNUR1110, PNUR1120, PNUR1130 (3 Cr – 3 lab)

Student Learner Outcomes Students will be able to:	Outcomes The student will successfully:
1. INFORMATICS/TECHNOLOGY Utilize information technology in health care settings.	1.5 Maintain confidentiality when using information technology to accurately document the provision and outcomes of patient care. 1.6 Use technology to access reliable information and resources that support patient care, reduce reliance on memory, and enhance competency within the practice setting.
2. MANAGING CARE OF THE INDIVIDUAL PATIENT Work within an established plan of care for an individual patient to organize or assign aspects of care to UAP's and LPN's under the direction of an RN or other HCP to provide a safe effective environment.	2.4 Demonstrate ways to organize and plan work in the provision of safe, quality patient centered care.
3. NURSING JUDGMENT/EVIDENCE BASED CARE Utilize evidence based nursing judgment when prioritizing care, implementing interventions, reporting changes, and promoting the health of individual patients across the lifespan within the healthcare system.	3.5 Provide appropriate rationales for prioritization of care and nursing judgments. 3.6 Demonstrate sound nursing judgment when performing focused assessments, choosing nursing interventions from an established plan of care, monitoring and reporting changes in the patient's condition.
4. PATIENT/RELATIONSHIP CENTERED CARE Demonstrate effective communication skills while providing patient care founded on basic physical, developmental, spiritual, cultural, functional, and psychosocial needs of individual patients across the lifespan.	4.6 Demonstrate caring communication skills and cultural sensitivity when using the nursing process to contribute to the plan of care for the older adult patient. 4.7 Provide health care information and reinforce established teaching plans for patients.
5. PROFESSIONAL IDENTITY AND ETHICAL BEHAVIOR Demonstrate professional behaviors and accountability to legal and ethical nursing practice standards for a competent Practical Nurse.	5.4 Demonstrate personal integrity, professional behaviors and maintain professional boundaries within the scope of nursing practice.

<p>6. QUALITY IMPROVEMENT Provide input into systematic processes that measure patient outcomes/variances and contribute to the development of changes in policies/procedures to achieve effective patient outcomes.</p>	<p>6.2 Demonstrate methods to improve patient satisfaction, customer service and enhance cost-efficient health care services.</p>
<p>7. SAFETY Provide a safe care environment for patients, self, and others.</p>	<p>7.4 Implement the national patient safety goals and safe nursing practice in the clinical setting.</p>
<p>8. TEAMWORK AND COLLABORATION Participate as a member of the inter-professional team collaborating and communicating with other health care providers to promote safe, quality patient centered care.</p>	<p>8.3 Collaborate with other health care providers to promote safe, quality, patient centered care.</p>

EVALUATION

Clinical/lab outcomes are determined by the student’s performance in a long-term care agency and on campus simulation lab or practice lab activities. The clinical instructor’s evaluation and student’s self-evaluation, utilizing specific clinical evaluation tools and portfolio presentations, are used to determine the student’s level of success. A pass/fail grade is awarded.

Theory application scores

Theory application points	Potential points
Clinical Portfolio Project	Pass/fail
Clinical evaluation tool	Pass/fail

PNUR 1150 Nursing Care of Adult

Course Credits: 4 credits

Classroom Theory and Concept-Based Curriculum: 4 credits lecture

COURSE DESCRIPTION

Nursing Care of Adults focuses on the care of adults with common medical/surgical health problems. Emphasis is placed on the physiological disorders that require management in an acute care facility. Application of pathophysiology, nutrition and pharmacology are applied to co-morbid diseases within each topic area. Pre-requisite: PNUR 1110, 1120, 1130, 1140; Co-requisite PNUR 1160, 1170, 1180, 1190. (4 credits)

Student Learner Outcomes Students will be able to:	Outcomes The student will successfully:
1. Informatics/Technology Utilize information technology in health care settings.	1.7 Compare evidence based information through journals and online databases related to the care of adults with common medical/surgical health problems.
2. Managing Care of the Individual Patient Work within an established plan of care for an individual patient to organize or assign aspects of care to UAP's and LPN's under the direction of an RN or other HCP to provide a safe effective environment.	2.5 Differentiate priorities of care for individual patients with co-morbid diseases.
3. Nursing Judgment/Evidence Based Care Utilize evidence based nursing judgment when prioritizing care, implementing interventions, reporting changes, and promoting the health of individual patients across the lifespan within the healthcare system.	3.7 Use focused assessment data to select interventions from an established plan of care for the adult patient with common medical/surgical health problems. 3.8 Differentiate interventions (reporting changes, identifying action to take, etc.) within an established plan of care for potential/actual patient complications of the adult patient. 3.9 Provide rationales for prioritizing nursing judgments for the adult patient with common medical/surgical health problems. 3.10 Demonstrate knowledge of pharmacology, pathophysiology and nutrition for adult patients with medical surgical health problems.
4. Patient/Relationship Centered Care Demonstrate effective communication skills while providing patient care founded on basic physical, developmental spiritual, cultural, functional, and psychosocial needs of individual patients across the lifespan.	4.8 Use the nursing process to collect data and contribute to the plan of care for the adult patient with common medical/surgical health problems. 4.9 Outline barriers to communication and learning for individual patients when providing health care information or reinforcing teaching plans.
7. Safety Provide a safe care environment for patients, self, and others.	7.5 Perform advanced nursing skills safely in the lab setting.

<p>8. Teamwork and Collaboration Participate as a member of the inter-professional team collaborating and communicating with other health care providers to promote safe, quality patient centered care</p>	<p>8.4 Differentiate interventions (reporting changes, identifying action to take, etc.) within an established plan of care for potential/actual patient complications for the adult patient.</p>
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TEACHING METHODS USED BY FACULTY (Individual, Group, or On-line Strategies)

Modeling, dialogue, practice, affirmation, simulation, debate, case studies, learning contracts, cooperative/collaborate learning, narrative pedagogy, games, imagery, concept mapping/mind mapping, scholarly web sites, webinars, portfolio, poster, journals, writing, self-learning modules, role playing, analogies, and provision for an environment for growth are core elements of the teaching strategies. A variety of learning activities are correlated with the classroom presentations. These activities are designed to assist the student to meet course objectives. Students are expected to participate in experiential exercises, individual and group accountability, preparation of written work, oral discussions and presentations.

EVALUATION of COURSE REQUIREMENTS

There will be 4 unit exams and one comprehensive final. These exams will cover learning outcomes selected from the readings, commentary, discussion, and self-study and written assignments. One hour will be allotted for each 50 questions on tests. These exams will consist of a variety of types of questions—multiple choice, multiple select, matching, etc. written at a higher level than recall. The final exam will be comprehensive (integrating material across the entire course). Students will not be permitted to use textbooks or any other supplemental notes during any exam.

THEORY

THEORY	POTENTIAL POINTS
Unit Exams (4)	200
Final exam (comprehensive)	100
Math test	25
Quizzes	50
Reflection papers 2	20
Total Theory Points	395 potential points

COURSE FINAL GRADE

Grading	%
A	95-100
A-	92-94.9
B+	90-91.9
B	87-89.9
B-	85-86.9
C+	83-84.9
C	78-83.9 Minimum
C-	75-77.9
D	72-74.9
F	< or = to 71.9

PNURS 1160 Nursing Care of Women/Newborns/Children

Course Credits: 3 (2 lect/1 lab)

COURSE DESCRIPTION

Nursing Care of Women/Newborns/Children provides an integrative approach to the care of the childbearing woman, newborns, and children. Emphasis is placed on normal pregnancies, normal growth and development, and common pediatric disorders.

Pre-requisites PNUR1110, PNUR1120, PNUR1130, PNUR1140. Co-requisites: PNUR11500, PNUR1170, PNUR1180, PNUR1190. **(3 Cr – 2 lec; 1 lab)**

Student Learner Outcomes Students will be able to:	Outcomes The student will successfully:
1. INFORMATICS/TECHNOLOGY Utilize information technology in health care settings.	1.8 Utilize evidence based information through journals and online databases related to care of women, newborn, and children.
3. NURSING JUDGMENT/EVIDENCE BASED CARE Utilize evidence based nursing judgment when prioritizing care, implementing interventions, reporting changes, and promoting the health of individual patients across the lifespan within the healthcare system.	3.11 Analyze (potential/actual) patient complications and interventions to implement for the pregnant woman, newborn, and child. 3.12 Provide rationales for nursing judgements and prioritization of care for women, newborns, and children. 3.13 Apply knowledge of pharmacology, pathophysiology, and nutrition to the care of women, newborns, and children with common health care problems.
4. PATIENT/RELATIONSHIP CENTERED CARE Demonstrate effective communication skills while providing patient care founded on basic physical, developmental, spiritual, cultural, functional, and psychosocial needs of individual patients across the lifespan.	4.10 Distinguish data needed for a holistic assessment that contributes to the individualized plans of care for women, newborns, and children. 4.11 Recognize health education and safety needs for women and children. 4.12 Choose culturally and developmentally appropriate verbal and nonverbal caring communication techniques when working with children.
5. PROFESSIONAL IDENTITY AND ETHICAL BEHAVIOR Demonstrate professional behaviors and accountability to legal and ethical nursing practice standards for a competent Practical Nurse.	5.5 Distinguish legal and ethical implications when caring for women, newborns, and children.
7. SAFETY Provide a safe care environment for patients, self, and others.	7.6 Perform safe nursing skills related to the care of women, newborns, and children in the lab setting.
8. TEAMWORK AND COLLABORATION	8.5 Report to appropriate interprofessional health care personnel and document findings and interventions

Participate as a member of the inter-professional team collaborating and communicating with other health care providers to promote safe, quality patient centered care.	for women, newborn, and children in simulated lab settings.
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EVALUATION

The course grade for PNURS 1160 will be determined by performance of the student in 2 sections: classroom (theory) and lab. All course work is to be completed individually. Working in pairs or small groups is only acceptable for course requirements that clearly state that they can be done with other students.

EVALUATION/COURSE GRADE

The course grade for PNURS 1160 will be determined by performance of the student in two areas: class and lab. All course work is to be completed individually. Working in pairs or small groups is only acceptable for course requirements that clearly state that they can be done with other students.

Class Assignments	Points
Exam #1	48
Exam #2	48
Final Exam	75
ATI tests*	26
Family Interview assignment	40
Peds Assignment	50
Group presentations	50
Lab Points (Five 7-point quizzes and a 10-pt pediatric dosage calculation quiz)	45
Total Class Points	382

COURSE FINAL GRADE:

The percentage of total possible points will be calculated and the course grade will be awarded based on the following scale:

Grading	%
A	95-100
A-	92-94.9
B+	90-91.9
B	87-89.9
B-	85-86.9
C+	83-84.9
C	78-83.9 Minimum
C-	75-77.9
D	72-74.9
F	< or = to 71.9

*There is no rounding up of numbers/percentages when grades are calculated.

**Point totals for any assignment are subject to change at the instructor's discretion.

PNUR 1170 Transition to Nursing Practice

Course Credits: 1 credit

Classroom Theory and Concept-Based Curriculum: 1 credit lecture

COURSE DESCRIPTION

This course facilitates the transition of the student to the LPN role and to the workplace. Concepts related to career development options that enhance career mobility are reviewed. Standards of practice and the importance of practicing according to state regulations and statutes for the scope of practice for the LPN are examined. Pre-requisites: PNUR 1110, 1120, 1130, 1140. Co-requisites: PNUR 1150, 1160, 1180, 1190

Student Learner Outcomes Students will be able to:	Outcomes The student will successfully:
2. Managing care of the individual patient Work within an established plan of care for an individual patient to organize or assign aspects of care to UAP's and LPN's under the direction of an RN or other HCP to provide a safe effective environment.	2.6 Summarize factors that influence the assigning and monitoring of patient assignments to LPNs and UAPs.
5. Professional Identity and Ethical Behavior Demonstrate professional behaviors and accountability to legal and ethical nursing practice standards for a competent Practical Nurse.	5.6 Develop a plan which includes strategies and resources to demonstrate the importance of seeking lifelong, continuous learning for one's self as a LPN. 5.7 Value ethical, legal, and regulatory bodies within the PN scope of nursing practice.
6. Quality Improvement Provide input into systematic processes that measure patient outcomes/variances and contribute to the development of changes in policies/procedures to achieve effective patient outcomes.	6.3 Clarify the LPN role in providing input in the development and revision of policies/procedures to improve patient care outcomes.
8. Teamwork and collaboration Participate as a member of the inter-professional team collaborating and communicating with other health care providers to promote safe, quality patient centered care.	8.6 Recognize conflict and when to report conflict to supervisor.

TEACHING METHODS USED BY FACULTY (Individual, Group, or On-line Strategies)

Modeling, dialogue, practice, affirmation, simulation, debate, case studies, learning contracts, cooperative/collaborate learning, narrative pedagogy, games, imagery, concept mapping/mind mapping, scholarly web sites, webinars, portfolio, poster, journals, writing, self-learning modules, role playing, analogies, and provision for an environment for growth are core elements of the teaching strategies. A variety of learning activities are correlated with the classroom presentations. These

activities are designed to assist the student to meet course objectives. Students are expected to participate in experiential exercises, individual and group accountability, preparation of written work, oral discussions and presentations.

EVALUATION of COURSE REQUIREMENTS

There will be one comprehensive final. These exams will cover learning outcomes selected from the readings, commentary, discussion, and self-study and written assignments. The Portfolio project asks the students to pull together evidence from their entire course of study and show proof of mastery of program objectives. Reflection papers are used to help students consider their values and beliefs; clarify their thinking, and grow as professionals.

THEORY

THEORY	POTENTIAL POINTS
Final exam (comprehensive)	50
Quizzes	50
Capstone Portfolio Project	100
Reflection papers (5)	50
Total Theory Points	250 potential points.

COURSE FINAL GRADE

Grading	%
A	95-100
A-	92-94.9
B+	90-91.9
B	87-89.9
B-	85-86.9
C+	83-84.9
C	78-83.9 Minimum
C-	75-77.9
D	72-74.9
F	< or = to 71.9

PNUR 1180 Psychosocial Nursing

Course Credits: 1 credit

Classroom Theory and Concept-Based Curriculum: 1 credit lecture

COURSE DESCRIPTION

Psychosocial Nursing Care focuses on the care of patients with psychiatric and behavioral disorders. Emphasis is placed on common psychiatric and behavioral disorders as well as promoting and maintaining the mental health of individuals. Pre-requisites: PNUR 110, 1120, 1130, 1140. Co-requisites: PNUR 1150, 1160, 1170, and 1190. (1 cr-1 lec.)

Student Learner Outcomes Students will be able to:	Outcomes The student will successfully:
3. Nursing Judgment/Evidence Based Care Utilize evidence based nursing judgment when prioritizing care, implementing interventions, reporting changes, and promoting the health of individual patients across the lifespan within the healthcare system.	3.14 Provide rationales for nursing judgments and prioritization of care for individual patients with psychiatric or behavioral disorders. 3.15 Analyze (potential/actual) patient complications and interventions from an established plan to implement for individual patients with psychiatric or behavioral disorders (i.e., report changes to the appropriate health care provider, etc.)
4. Patient/Relationship Centered Care Demonstrate effective communication skills while providing patient care founded on basic physical, developmental spiritual, cultural, functional, and psychosocial needs of individual patients across the lifespan.	4.13 Organize data to contribute to established plans of care for individual patients with psychiatric or behavioral disorders. 4.14 Describe caring, culturally sensitive, therapeutic communication with individual patients experiencing psychiatric or behavioral disorders.
5. Professional Identity and Ethical Behavior Demonstrate professional behaviors and accountability to legal and ethical nursing practice standards for a competent Practical Nurse.	5.8 Analyze ethical and legal implications related to the care of individual patients with psychiatric or behavioral disorders.
7. Safety Provide a safe care environment for patients, self, and others.	7.7 Analyze (potential/actual) patient complications and interventions from an established plan of care to implement for individual patients with psychiatric or behavioral disorders (i.e., report changes to the appropriate health care provider)

TEACHING METHODS USED BY FACULTY (Individual, Group, or On-line Strategies)

Modeling, dialogue, practice, affirmation, simulation, debate, case studies, learning contracts, cooperative/collaborate learning, narrative pedagogy, games, imagery, concept mapping/mind mapping, scholarly web sites, webinars, portfolio, poster, journals, writing, self-learning modules, role playing, analogies, and provision for an environment for growth are core elements of the teaching

strategies. A variety of learning activities are correlated with the classroom presentations. These activities are designed to assist the student to meet course objectives. Students are expected to participate in experiential exercises, individual and group accountability, preparation of written work, oral discussions and presentations.

EVALUATION of COURSE REQUIREMENTS

There will be three unit exams and one comprehensive final. These exams will cover learning outcomes selected from the readings, commentary, discussion, and self-study and written assignments. One hour will be allotted for each 50 questions on tests. These exams will consist of a variety of types of questions—multiple choice, multiple select, matching, etc. written at a higher level than recall. The final exam will be comprehensive (integrating material across the entire course). Students will not be permitted to use textbooks or any other supplemental notes during any exam.

THEORY

THEORY	POTENTIAL POINTS
Unit Exams (3)	90
Final exam (comprehensive)	50
Quizzes	50
Simulation preparation and reflection papers	50
Total Theory Points	240 potential points*.

COURSE FINAL GRADE

Grading	%
A	95-100
A-	92-94.9
B+	90-91.9
B	87-89.9
B-	85-86.9
C+	83-84.9
C	78-83.9 Minimum
C-	75-77.9
D	72-74.9
F	< or = to 71.9

PNUR 1190 Clinical 2

COURSE DESCRIPTION

Clinical II provides the student an opportunity to apply nursing judgment using evidence based care, critical thinking and clinical judgment to implement safe, patient/relationship centered care to individual patients across the lifespan (including maternal/child/pediatric).

The clinical student reflects on the value of patient centered care, teamwork and collaboration, informatics, quality improvement, safety, managing care of the individual patient, and nursing judgment/evidence based care in his/her career as a LPN. Pre-requisites: PNUR 1110, PNUR 1120, PNUR1130, PNUR1140

Co-Requisites: PNUR1150, PNUR1160, PNUR1170, PNUR1180 **(5 Cr – 5 lab)**

MAJOR CONTENT AREAS:

Application of nursing judgment using evidence based care, critical thinking and clinical judgment to implement safe, patient/relationship centered care to individual patients across the lifespan (including maternal/child/pediatric).

Student Learner Outcomes Students will be able to:	Outcomes The student will successfully:
1. INFORMATICS/TECHNOLOGY Utilize information technology in health care settings.	1.9 Demonstrate an understanding of the value of confidentiality and the ramifications associated with accurate documentation of patient care. 1.10 Examine reliable resources that support evidence based patient care, decrease the reliance on memory and enhance competency within the practice setting.
2. MANAGING CARE OF THE INDIVIDUAL PATIENT Work within an established plan of care for an individual patient to organize or assign aspects of care to UAP's and LPN's under the direction of an RN or other HCP to provide a safe effective environment.	2.7 Assign nursing tasks/activities to other LPN's and assign and monitor nursing tasks/activities to UAPs to achieve patient care goals.
3. NURSING JUDGMENT/EVIDENCE BASED CARE Utilize evidence based nursing judgment when prioritizing care, implementing interventions, reporting changes, and promoting the health of individual patients across the lifespan.	3.16 Provide evidence for one's prioritization of nursing judgements across the lifespan. 3.17 Demonstrate nursing judgment when selecting appropriate and prioritized interventions (including reporting changes), and monitoring the patients response across the lifespan

<p>4. PATIENT/RELATIONSHIP CENTERED CARE Demonstrate effective communication skills while providing patient care founded on basic physical, developmental, spiritual, cultural, functional, and psychosocial needs of individual patients across the lifespan.</p>	<p>4.15 Evaluate one’s communication skills and cultural sensitivity when working with diverse patients across the lifespan. 4.16 Compare individualized established plans of care for patients across the lifespan.</p>
<p>5. PROFESSIONAL IDENTITY AND ETHICAL BEHAVIOR Demonstrate professional behaviors and accountability to legal and ethical nursing practice standards for a competent Practical Nurse.</p>	<p>5.9 Value personal integrity, professional behaviors, professional boundaries, and lifelong learning.</p>
<p>6. QUALITY IMPROVEMENT Provide input into systematic processes that measure patient outcomes/variances and contribute to the development of changes in policies/procedures to achieve effective patient outcomes.</p>	<p>6.4 Provide input quality improvement methods used to develop or revise policies/procedures.</p>
<p>7. SAFETY Provide a safe care environment for patients, self, and others.</p>	<p>7.8 Demonstrate nursing judgment when selecting appropriate and prioritized interventions (including reporting changes), and monitoring the patients response across the lifespan. 7.9 Analyze one's responsibility to prevent actual/potential patient complications, demonstrate safe nursing practice, and follow the national patient safety goals.</p>
<p>8. TEAMWORK AND COLLABORATION Participate as a member of the inter-professional team collaborating and communicating with other health care providers to promote safe, quality patient centered care.</p>	<p>8.7 Recognize conflict and when to report conflict to supervisor.</p>

EVALUATION

Clinical/lab outcomes are determined by the student’s performance in a long-term care agency and on campus simulation lab or practice lab activities. The clinical instructor’s evaluation and student’s self-evaluation, utilizing specific clinical evaluation tools and portfolio presentations, are used to determine the student’s level of success. A pass/fail grade is awarded.

THEORY APPLICATION SCORES

Theory application points	Potential points
---------------------------	------------------

Clinical Portfolio Project	Pass/fail
Clinical evaluation tool	Pass/fail

Updated and received from faculty June 2016-LLB

Appendix F: Clinical Evaluation Rubrics

PNUR 1140 Clinical Evaluation Form

[Hyperlink to Standard 6.1](#)

Competencies	Independent = I /Supervised = S /Assisted = A Marginal = M / Dependent = D	Date: _____						
Competencies	Criteria	NA	I	S	A	M	D	Comments
Informatics/Technology <ul style="list-style-type: none"> • Documentation/ Confidentiality • Informatics/Technology 	Confidentiality/Documentation: Maintains confidentiality of medical record and patient information. Documents care in electronic medical record and/or chart. Vital signs and medications charted in an appropriate timeframe after completion. <ul style="list-style-type: none"> • Differentiate information that can or should be shared with appropriate personnel from information that cannot be shared • Discuss client concerns in an appropriate setting • Use safeguards with papers concerning client’s health data to assure confidentiality • Use medical terminology appropriately in charting • Demonstrate basic principles of effective documentation 							
	Informatics/Technology: Effectively responds to safety technologies. (Examples barcodes, scanners, automatic alerts/alarms, bed alarms, call lights). <ul style="list-style-type: none"> • Effectively navigate the technology used in the clinical I setting 							
Managing Care of the Individual Pt (IP) <ul style="list-style-type: none"> • Managing Care of the IP 	Managing Care of the IP: Follows the hierarchy of leadership within the clinical setting. Plans and organizes time and resources appropriately. <ul style="list-style-type: none"> • Demonstrates ability to develop own plan of daily care based on established client priorities • Identifies and works within the established plan of care for individual clients • Asks appropriate questions of health care personnel to assure student understands what is being asked of them 							

Competencies	Independent = I /Supervised = S /Assisted = A Marginal = M / Dependent = D	Date: _____						
Competencies	Criteria	NA	I	S	A	M	D	Comments
	<ul style="list-style-type: none"> • Prepares for procedures by data gathering, reviewing practice, asking questions, and gathering equipment. • Asks for help appropriately • Demonstrates flexibility depending on the health state and circumstances of the individual being cared for. • Carries through with tasks appropriately assigned by other HCP; questions inappropriate assignments. • Identifies nursing tasks/activities to assign and monitor to UAP's 							
Nursing Judgment <ul style="list-style-type: none"> • Prioritization • Nursing Judgment 	Prioritization: Prioritizes daily plan of care and makes adjustments as needed. Provides rationale for priorities for care of one patient. <ul style="list-style-type: none"> • States common rationales for setting priorities of care for individuals across the life span • Use common methods to set priorities (Maslow's Hierarchy of Needs, ABCs, Acute vs. Chronic, Life Threatening vs. Non-Life Threatening, Client Preference) 							
	Nursing Judgment: Performs focused assessments, chooses nursing interventions, monitors, evaluates responses to interventions, and reports changes in the patient's condition. Example: Informs instructor/appropriate staff immediately when vital signs change. <ul style="list-style-type: none"> • Identifies client's diagnosis • Identifies possible complications of client with diagnosis • Identifies assessments needed in certain client situations and identifies/develops interventions • Can state rationale for the use of particular medications • Can state implications for certain lab and diagnostic values for conditions or medications • Knows when to contact supervisor or faculty for problems with clients outside of expected norm 							

Competencies	Independent = I /Supervised = S /Assisted = A Marginal = M / Dependent = D	Date: _____							
Competencies	Criteria	NA	I	S	A	M	D	Comments	
	<ul style="list-style-type: none"> • Differentiates common potential high risk symptoms • Monitors client’s pain levels and responses to pain interventions • Monitors client’s responses to nursing activities • Reports changes in the client’s condition to nursing personnel • Begins to differentiate relevant from irrelevant information 								
Patient/Relationship Centered Care <ul style="list-style-type: none"> • Communication Skills • Nursing Process • Learning Needs 	Communication: Identifies and demonstrates use of verbal and nonverbal therapeutic communication. <ul style="list-style-type: none"> • Begins to use therapeutic communication techniques • Demonstrates communication that is culturally appropriate with clients, peers, and staff • Begins to establish trusting relationships with patients. 								
	Communication/Caring Behaviors: Demonstrates caring behaviors: Comforting, honesty, patient attentive listening, touch when appropriate, respect, calls patient by preferred name (In LTC use person/resident and not patient). Performs pain assessments and appropriate interventions. <ul style="list-style-type: none"> • Begins to understand influence of time, space, communication preferences, gender, family orientation, and religion on client’s health care decisions • Respects personal and professional boundaries • Provides privacy for client as the situation permits • Begins to identify own cultural biases and preferences 								
	Nursing Process/ADL’s/Assessment: Performs ADL’s independently to meet patient needs. Performs focused assessments and reports abnormalities. <ul style="list-style-type: none"> • Identifies, utilizes, and contributes to the development and modification of the established care plan 								
	Nursing Process/Data Collection: Data collection complete, includes								

Competencies	Independent = I /Supervised = S /Assisted = A Marginal = M / Dependent = D	Date: _____						
Competencies	Criteria	NA	I	S	A	M	D	Comments
	basic physical, developmental, spiritual, cultural, functional and psychosocial needs from multiple sources (report, chart, family, patient, staff, etc.).							
	Learning: Provides health care information to the older adult patient Reinforces education from an established teaching plan. <ul style="list-style-type: none"> Works to provide health care information and reinforces established teaching plans in clear language the client can understand 							
Professional Behaviors <ul style="list-style-type: none"> Professionalism Ethical/Legal 	Professional Values: Follows professional values in nursing handbook, college handbook, and according to PN Scope of Practice. <ul style="list-style-type: none"> See standards below 							
	Ethical/Legal: Demonstrates accountability in providing patient care. Demonstrates compliance with facility policy and procedures. <ul style="list-style-type: none"> Accepts responsibility for own behaviors/ accepts direction Identifies accepted procedures and policies for the clinical agency Begins to identify role as a patient advocate i.e. mandated reporting 							
Quality Improvement <ul style="list-style-type: none"> Patient Care Concerns 	Patient Satisfaction: Identifies patient care concerns and works on improving patient satisfaction. <ul style="list-style-type: none"> Listens to patient satisfaction concerns and reports them to facility staff Identifies ways to improve work environment Identifies potential waste and uses resources appropriately Identifies common ways of improving patient satisfaction, customer service 							
Safety <ul style="list-style-type: none"> Pt Complications Safe Nursing Practice 	Complications: Recognizes potential and/or actual patient complications and responds appropriately (reports to instructor/licensed personnel) for 1 patient. <ul style="list-style-type: none"> Begins to identify changes in the patient's condition that indicate potential complications Also see standards below 							

Competencies	Independent = I /Supervised = S /Assisted = A Marginal = M / Dependent = D	Date: _____						
Competencies	Criteria	NA	I	S	A	M	D	Comments
	Safety: Demonstrates safety and competency in nursing skills, medication administration, standard precautions, and treatments. <ul style="list-style-type: none"> • See standards below 							
Teamwork <ul style="list-style-type: none"> • Communication 	Communication: Communicates and reports (using SBAR) to appropriate personnel (including instructor). Works cooperatively with others. Uses assertive rather than aggressive communication style. <ul style="list-style-type: none"> • Describes and begins to practice effective communication when working with members of the inter-professional teams • Begins to understand and identify with the role of LPN in the inter-disciplinary team • Identifies techniques such as SBAR to improve communication between professionals • Recognizes conflict and begins to understand own responses to conflict • Accepts appropriate delegation and assignments 							
<p><i>The following list are expected professional standards.</i></p> <p>Pt./Relationship Centered Care Competency: Data Collection</p> <ul style="list-style-type: none"> • Listens to and takes notes during report • Seeks assistance if information is incomplete. <p>TECHNOLOGY/INFORMATICS Competency: Confidentiality:</p> <ul style="list-style-type: none"> • Keeps computer screen out of view of others. 	<p>PROFESSIONAL IDENTITY AND BEHAVIOR Competency: Accountability</p> <ul style="list-style-type: none"> • Research completed correctly to care for pt. • Complies with dress code • On time and follows policy if absent or late. • Assignments turned in on time. • Follows facility rules for personal belongings, parking 	<p>Competency: Professional Boundaries</p> <ul style="list-style-type: none"> • Maintains professional boundaries • Does not discuss too much about self with patient. • Does not keep secrets with patient. • Realizes that others can meet pt. needs if needed. 	<p>Competency: Safe Nursing Practice</p> <ul style="list-style-type: none"> • Consistently uses 2 patient identifiers • Demonstrates safe nursing skills • Displays behaviors that promote the safety (call light within reach, hand washing, use of universal precautions, lowering bed, gloving, brakes, side rails in safe positions, prevention of patient falls, patient never leave unattended in unsafe situation, disposal of needles safety,). 					

Competencies	Independent = I /Supervised = S /Assisted = A Marginal = M / Dependent = D			Date: _____						
Competencies	Criteria			NA	I	S	A	M	D	Comments
<ul style="list-style-type: none"> Does not discuss confidential information in public areas. <p>Competency: Documentation</p> <ul style="list-style-type: none"> Able to navigate the EMR/chart. Documents in EMR/chart/and written assignments completely, accurately, and timely. Charting contains minimal grammatical errors and no unapproved abbreviations and completed with minimal assistance. Vital signs and medications charted immediately after completion. 	<p>and consumption of food, smoking, etc.</p> <ul style="list-style-type: none"> Exhibits dependability through good attendance, punctuality, and compliance with break schedules. Can make adjustment to plan of care or time line as needed. Can maintain care level under stress/pressure with sufficient support. Does not proceed with patient care against instructor direction. Keeps instructor and staff nurse informed about patient condition throughout shift. Reports off prior to learning the unit. Seeks out learning opportunities to complete required skills and to seek new learning opportunities. Initiates cares without prompting or assistance Adapts to changing situations by seeking guidance as needed. 	<ul style="list-style-type: none"> Does not spend inappropriate time with patient. Does not flirt with patient, communicate in flirtatious manner, and employ sexual innuendo, off color jokes or offensive language. Recognizes boundary crossings, consult instructor when needing to support boundaries. 	<ul style="list-style-type: none"> Maintains patient privacy. <p>Medication Administration</p> <ul style="list-style-type: none"> Uses the 6 rights in medication administration. Uses safe medication administration Knowledgeable of drug action/classification, interaction, side effects, rationale, injection sites, normal dosage, and nursing considerations Relates meds to patient diagnosis Accurately records med administration <p>Med Administration errors:</p> <ul style="list-style-type: none"> Missed meds (beyond ½ hour a or p scheduled time) Medication error (ID'd by instructor after 2nd check) Administering medication without looking up first Not documenting on MAR Giving medication without instructor supervision. 							

Competencies	Independent = I /Supervised = S /Assisted = A Marginal = M / Dependent = D	Date: _____						
Competencies	Criteria	NA	I	S	A	M	D	Comments
	<ul style="list-style-type: none"> • Accepts performance critique and implements changes as a result of suggestions given. • Comes to post-conference prepared to participate • Identifies personal learning goals based on appraisal of own knowledge base 							

Rubric for Grading			
Scale label	Professional Standard	Quality of Performance	Assistance required
Independent	-Safe -Accurate -Action produces desired result -Appropriate verbal and non-verbal behaviors	-Proficient, coordinated, confident -Occasional expenditure of excess energy -Within an expedient time period	-Without supportive cues
Supervised	-Safe -Accurate -Action produces desired results -Appropriate verbal and non-verbal behavior.	-Efficient, coordinated, confident -Some expenditure of excess energy -Within a reasonable time period	-Occasional supportive cues
Assisted Passing for 1140	-Safe -Accurate -Action produces desired results -Appropriate verbal and non-verbal behavior	Skillful in parts of behavior Inefficient and uncoordinated at times but showing progress Expend excess energy at times -Within a delayed time period but improving	Occasional verbal and directive cues in addition to supportive ones.
Marginal	-Unsafe -Performs at risk -Action does not produce desired result -Inappropriate verbal and/or non-verbal behavior	-Unskilled, inefficient -Considerable expenditure of excess energy -Prolonged time period	Continuous verbal and frequent physical cues

Dependent	-Unsafe -Unable to demonstrate desired behavior -Inappropriate verbal and/or non-verbal behavior	-Unable to demonstrate procedure/behavior	-Continuous verbal and physical cues
Adapted from: Bondy, K.M. (1983). Criterion – referenced definitions for rating scales in clinical evaluation. <u>Journal of Nursing Education</u> . 22: 376-381			

The student is required to receive a minimum scoring of **assisted** in each area by the end of the semester to pass the clinical courses.

[Appendix G: HLC Program Length Requirements](#)

Higher Learning Commission Policy Title: Assignment of Credits, Program Length, and Tuition:

Number: FDCR.A.10.020

- An institution shall be able to equate its learning experiences with semester or quarter credit hours using practices common to institutions of higher education, to justify the lengths of its programs in comparison to similar programs found in accredited institutions of higher education, and to justify any program-specific tuition in terms of program costs, program length, and program objectives. Affiliated institutions shall notify the Commission of any significant changes in the relationships among credits, program length, and tuition.

Higher Learning Commission: Assignment of Credit Hours.

- “The institution’s assignment and award of credit hours shall conform to commonly accepted practices in higher education. Those institutions seeking, or participating in, Title IV federal financial aid, shall demonstrate that they have policies determining the credit hours awarded to courses and programs in keeping with commonly-accepted practices and with the federal definition of the credit hour, as reproduced herein for reference only, and that institutions also have procedures that result in an appropriate awarding of institutional credit in conformity with the policies established by the institution.
- **Federal Credit Hour Definition:** *A credit hour is an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally-established equivalency that reasonably approximates not less than:*
- *(1) one hour of classroom or direct faculty instruction and a minimum of two hours of out-of-class student work each week for approximately fifteen weeks for one semester or trimester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different amount of time; or (2) at least an equivalent amount of work as required in paragraph (1) of this definition for other activities as established by an institution, including laboratory work, internships, practica, studio work, and other academic work leading toward to the award of credit hours. 34CFR 600.2 (11/1/2010)”.*
- <http://policy.hlcommission.org/Federal-Regulation/assignment-of-credits-program-length-and-tuition.html>

[Appendix H: Minnesota State Colleges' Program Length](#)

Minnesota State Colleges and Universities Procedure 3.36.1 Academic Programs

Subpart Q. Credit Hour Definition.

- An amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates not less than -
- One hour of classroom or direct faculty instruction and a minimum of two hours of out of class student work each week for approximately fifteen weeks for one semester or the equivalent amount of work over a different amount of time, such as in distance learning environments; or b. At least an equivalent amount of work as required in paragraph (1.a.) of this definition for other academic activities as established by the system college or university including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours.

Part 3 - Subpart B. Academic Award Attributes. Academic awards shall have the following attributes.

- Diploma. A diploma is awarded upon completion of a 31 to 72 credit undergraduate academic program that prepares students for employment. A minimum of 24 credits shall be in occupational or technical courses.
A diploma may have one or more emphases of at least 9 credits when there are at least 30 credits in the major that are common to the emphases.
A diploma may be individualized according to the standards outlined in Part 5. Subpart C, to provide a student an opportunity to design an academic program to meet specific occupational goals that cannot be met by current program offerings.
At least one-third of the credits in the diploma shall be taught by the faculty recommending the award. This requirement may be decreased upon recommendation by the faculty and approval by the president of the college.
A diploma of more than 72 credits in length may be approved when the academic program prepares an individual for employment and the length is (1) required by an employer, a licensing body or other regulatory agency, accrediting association, or board, or (2) based on a formal task analysis conducted within the previous three years and the results endorsed by an advisory committee.
<https://www.Minnesota State.edu/board/procedure/336p1.html>

[Appendix I: Faculty Contract for Hours/Credits](#)

Faculty under the former MCCFA bargaining unit are covered under the [Minnesota State](#) College Faculty Contract Section 2. This contract specifies how many hours/credits faculty must fulfill.

According to the contract:

Section 2. Teaching Faculty in the Former MCCFA Bargaining Unit. A faculty member in the former MCCFA bargaining unit may be assigned either the thirty (30) credits per academic year limit or the forty (40) contact hours per academic year limit. Whenever either limit has been reached, the instructor may accept additional credit or contact hour assignments only as overload. When making full-time faculty assignments for Spring term, the teaching credits and the resulting contact hours shall be assigned before the non-teaching assignments. When making part-time faculty assignments, the credit/contact hour limitations shall be a proration of the fifteen (15) credit or twenty (20) contact hour term limits based on the FTE percentage. When calculating the workload for Part-time faculty who have a combination of credits and contact hour assignments, the calculation, which produces the higher amount of salary, will be used.

- An individual instructor may be assigned as many as eighteen (18) credits in a given semester if this assignment is necessary to provide the course offerings within a specific program or department. The total credits assigned for the year shall not exceed thirty (30), and any additional assignments beyond thirty (30) shall be considered overload. (2015-2017 MSCF contract, p.24).

Former MCCFA Subd. 3. Science Laboratory Courses. Science laboratory courses (chemistry, biology, physics, and natural science) shall be credited on the basis of one (1) credit for each one (1) lecture hour and one (1) credit for each two (2) laboratory hours. Credits for science laboratories shall be averaged over the academic year with totals in odd numbers being rounded to the nearest whole number. For purposes of rounding, .5 shall be rounded up to one (1) (2015-2017 MSCF Contract, p. 25)

- **Subd. 5. Office Hours.** Each instructor shall post and maintain one (1) office hour or one (1) hour of student availability in some other campus location per week for each three (3) credits taught to a maximum of fifteen (15) credits. Additional office hours or student availability may be scheduled at the instructor's option. If a faculty member's entire assignment is online, the office hours can be held entirely online. If the entire assignment is onsite, the office hours are held entirely onsite. If the assignment is mixed, the office hour locations are mixed in reasonable proportions to allow for faculty availability to students (2015-2017 MSCF Contract, p. 26)

Appendix J: Student Services

Service	Location	Staff/Credentials
Counseling	Austin East	Jeanne Poppe, MS in Counseling Psychology Paul Anderson, MS in Counseling Secondary School
Academic Advising	Austin East	Amanda Mathews- Director of Academic Advising, MS in School Counseling; K-12, BS in Sociology/Criminal Justice Mary Kay Wilson, BET, Bachelors in Engineering Technology Amber Caswell, MBA Business Administration Nicole Nelson, Bachelor’s Degree in Public Administration: Human Resources and a degree in Psychology and Industrial/Organizational Psychology
	Albert Lea	Kris Gullord, MS in Education; BS in Social Sciences, Psychology
	Owatonna	Juliana Sammon, BS in Industrial Engineering
Library Services	Austin East	Jeannie Kearney, MS in Library & Information Science Keith Cich, BFA in Photography and an MLS Degree
Writing Center	Austin East	Jenny Corey-Gruenes, MS in English
Financial Aid	Austin East	Patty Hemann, BS in Business Krista Olson, BS in Business Administration and Master’s degree in Educational Leadership
	Albert Lea	Renee Njos, AA degree in Liberal Arts and AAS degree in in Administrative Assisting Linda Wasmoen, Diploma
Diversity and Multicultural Program Advisors	Austin East	Mel Morem, BA in Organizational Management Miguel Garate, BA in Accounting Edel Fernandez, BA in Public Relations
Student Activities	Albert Lea	Eliminated this position

Career and Employment Services		Eliminated this position
Disability Services	Austin East	Sharon Stiehm, BS in Social Work
Veterans Services	Albert Lea	Linda Wasmoen, Diploma in Accounting
Student Support and Tutoring Services	Albert Lea	Suhai Boyer
	Austin West	Vicki Fisher, AA, AS-OTA
Parent Resource Center	Austin West	Carol Robinson, MS in Education
	Albert Lea	Suhai Boyer
Foundation/Student Scholarship Center	Austin West	Laurie Minehart, BA
TRIO Student Support Services	Austin East	Chelsea Anderson Bachelor of Arts in Social Sciences and a Master's of Education in Educational Leadership
		Katelyn Flatness BS in Sociology, MS in Counseling and Student Personnel
Office of Instructional Technology (OIT)	Austin East/West	J.C. Turner. Ph.D. Radio Television Film M.A. Radio Television Film B.A. Speech
		Shawn Martin, AA, Bach in Communications, and an MBA
		Theo Beckman, AAS in Computer Technology
		Bob Fix Bachelor's of Science from the University of Wisconsin Stevens Point in Mathematics and Computer Information Systems Minor
Management Information System (MIS)	Austin	Terry Pelovsky, Certificate in Micro Business Programming
	Albert Lea	Monica McBee
		Craig Nelson
	Austin/Owatonna	Tom Andrist
	Owatonna	Dan Harber, Electronics Technician Diploma Shane Wrede
PSEO Advisor	Austin East	Kathy Kirkpatrick, Bachelor's degree in Marketing and a Minor in Business Administration

Appendix K: Creighton Evaluation Tool

Student Name: _____ Staff Nurse Instructor Name: _____	0= Does not demonstrate competency 1= Demonstrates competency NA= Not applicable	Date: ___/___/___ MM / DD / YYYY
ASSESSMENT 1. Obtains Pertinent Data 2. Performs Follow-Up Assessments as Needed 3. Assesses the Environment in an Orderly Manner	Circle Appropriate Score for all Applicable Criteria - If not applicable, circle NA 0 1 NA 0 1 NA 0 1 NA	COMMENTS:
COMMUNICATION 4. Communicates Effectively with Intra/Interprofessional Team (TeamSTEPPS, SBAR, Written Read Back Order) 5. Communicates Effectively with Patient and Significant Other (verbal, nonverbal, teaching) 6. Documents Clearly, Concisely, & Accurately 7. Responds to Abnormal Findings Appropriately 8. Promotes Professionalism	0 1 NA 0 1 NA 0 1 NA 0 1 NA 0 1 NA	
CLINICAL JUDGMENT 9. Interprets Vital Signs (T, P, R, BP, Pain) 10. Interprets Lab Results 11. Interprets Subjective/Objective Data (recognizes relevant from irrelevant data) 12. Prioritizes Appropriately 13. Performs Evidence Based Interventions 14. Provides Evidence Based Rationale for Interventions 15. Evaluates Evidence Based Interventions and Outcomes 16. Reflects on Clinical Experience 17. Delegates Appropriately	0 1 NA 0 1 NA 0 1 NA 0 1 NA 0 1 NA 0 1 NA 0 1 NA	
PATIENT SAFETY 18. Uses Patient Identifiers 19. Utilizes Standardized Practices and Precautions Including Hand Washing 20. Administers Medications Safely 21. Manages Technology and Equipment 22. Performs Procedures Correctly 23. Reflects on Potential Hazards and Errors	0 1 NA 0 1 NA 0 1 NA 0 1 NA 0 1 NA 0 1 NA	

COMMENTS

Revised for DEU use 8/20/2013

Total: _____
Total Applicable Items: _____
Earned Score _____

Creighton Competency Evaluation Instrument (CCEI)

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Appendix L: Rubric for Capstone (Clinical II) Portfolio

Capstone Portfolio

Description of portfolio project:

Portfolios provide a meaningful way for students to assess and illustrate their achievement of mastery of the program of study. It is a way for students to reflect on and show tangible proof of their successful fulfillment of course requirements. A portfolio can shed light on thinking, processing, and analyzing abilities. Further, students may use the portfolio as a means to show their skills and range of experience when applying for future employment. Graduate nurses may use this portfolio as a foundation and begin to track their personal and professional development over the course of a career.

Purpose of Assignment:

The purpose of this project is to address the student's mastery of the student learning outcomes as follows:

By completing this project, students will be able to:

1. Reflect on changes/growth they have seen over the course of the program of study
2. Evaluate whether they have met the identified end of program learning outcomes
3. Identify areas for continued growth as a professional
4. Develop goals and a simple plan for continued growth as a professional

What Students are to include in the portfolio:

1. A summary of clinical reflection papers. In each clinical/simulation/lab week students were asked to write a brief reflection paper concerning what they learned during that experience. The student should have described what happened, the observations they made, and the new skills practiced (communication, psychomotor, interpersonal, teambuilding, time management, handling anxiety, problem solving, data gathering, multitasking, etc.) and tied them back to the end of the program outcomes. In the Capstone Project students can include insights gained from interacting with clients, staff members, fellow students, or instructor. Over the course of the semester, the student should have made at least two entries for each of eight program outcome sets. For example, the student might have focused one week on safe care set and another week on relationship/patient centered care or informatics/technology.
2. A short essay summarizing the growth of the student as a professional nurse. How has the student changed views of nursing from the beginning to end of the program? Students should refer to journals about their experience with clients from all semesters to

help illustrate how they are thinking now and how that translates into interacting and caring for clients. The student can include previous assignments such as the reflection paper on professional behaviors or the beginning philosophy of nursing.

3. A summary of each of the Student Learning Outcomes showing how the student has met the program requirements. Students can include sample work (papers, care reflections, group project descriptions, pictures, concept maps, Instructor, peer, and self-evaluations) that illustrates mastery. The student should write a rationale showing how each of these led to or shows mastery of the student program outcomes.

Program Outcomes to validate:

1. **Patient/Relationship centered care:** The practical nursing graduate will demonstrate effective communication while providing patient care founded on basic physical, developmental, spiritual, cultural, functional, and psychosocial needs of individual patients across the lifespan.
2. **Teamwork and collaboration:** The practical nursing graduate will participate as a member of the inter-professional team collaborating and communicating with other health care providers to promote safe, quality, patient centered care.
3. **Quality improvement:** The practical nursing graduate will participate in quality improvement by providing input into the development of policies and procedures and effectively using resources to achieve patient outcomes.
4. **Safety:** The practical nursing graduate will recognize and report changes and responses to intervention to a RN or appropriate licensed HCP while providing a safe environment for patients, self and other.
5. **Informatics and technology:** The practical nursing graduate will utilize information technology in the health care setting.
6. **Professional identity and behaviors:** The practical nursing graduate will demonstrate professional behaviors and accountability to legal and ethical nursing practice standards for a competent PN.
7. **Nursing judgment/evidence based care:** The practical nursing graduate will utilize evidence based nursing judgment when setting priorities of care, implementing interventions, reporting changes and promoting the health of individual patients across the lifespan.
8. **Managing Care:** The practical nursing graduate will work within an established plan of care for an individual patient to organize and assign aspects of care under the direction of a RN or other HCP.

4. A brief description of areas identified for continued growth and a simple plan outlining means of continuing professional growth in those areas as they transition from student to graduate and how might be a means for lifelong learning.
5. A list of clinical sites, clinical learning activities, and client populations with whom the student worked.
6. Volunteer work or employment that contributed to Student Learning Outcomes.
7. Special classes or certificates earned that contributed to professional growth.
8. Immunization Records
9. Sample resume and cover letter

Grading:

1. Provides all elements of the portfolio (20 %)

- _____ Clinical reflection papers (summary)
- _____ Summary of growth as a professional nurse from both semesters
- _____ Summary of each of student learning outcomes (sample work, group project descriptions etc.)
- _____ Rationale how each these lead to mastery of student outcomes
- _____ Areas identified for continued growth
- _____ Simple plan for continuing professional growth
- _____ List of clinical sites
- _____ clinical learning activities
- _____ client populations
- _____ Volunteer work or employment that contributed to SLO

_____ Immunization records
_____ Certifications
_____ Resume

2. Provides competent essay summarizing growth as a nurse (20 %)
 - a. Changed views of nursing care from beginning to end
 - b. How this has translated into interacting and caring for clients
 - c. How has your definition of professional nursing behavior and philosophy of nursing changed
 - d. Coherent writing, logical thinking, sentence structure, good examples
 - e. APA format
3. Provides objective evidence for meeting student learning outcomes (40 %)

Papers used to show mastery show a connection to the SLO's; the student is able to draw conclusions about how effectively they met or did not meet the SLO:

Students' expectation of their performance is consistent with the scope of practice; student presents information all the SLO's listed above.

4. Identifies areas for further growth (5 %)
 - a. Logical outgrowth of previously presented materials
 - b. Coherent descriptions—shows understandings of scope of practice of LPN
 - c. Presentation: APA format, grammar and spelling
5. Identifies workable plan for continued professional growth (15 %)
 - a. Logical outgrowth of areas for further growth, based on data, identifies problems to be addressed, sets measurable goals, identifies at least a few specific actions, identifies time frames for success, identifies how success will be determined
 - b. Coherent plan—goals, actions, how will the person know they have accomplished what they set out to do
 - c. Presentation: APA format, grammar and spelling

Further comments:

(OVERALL: neat and complete; work is put together in a logical way; folio, e-folio. Easy to navigate; instructor does not have to search for elements etc.)

Appendix M: Systematic Evaluation Plan

6.1 PN Student Learning Outcomes							
Program Outcome	Date Mo/Year Of Review	Expected Levels of Achievement (ELA)	State the Person(s) Responsible	Was the ELA Met	Analysis of Assessment Data to Inform Program Decision Making	Improvement Plan	Date of Minutes
Informatics Technology The practical nursing graduate will utilize information technology in the health care setting	May 2017	CAPSTONE PORTFOLIO: 90% of students received a satisfactory mark in the specific SLO on their clinical II portfolio for each of the assignments.	PN Faculty	Yes	CAPSTONE PORTFOLIO: 19/19 or 100% passed this ELA	Continue to track and analyze data	May 2017
		SIMULATION: 90% of students will demonstrate competence in the specific SLO in a simulation exercise	Simulation Faculty and PN Faculty	Yes	SIMULATION: NOT MEASURED.	Plan to measure in 2019	
		EXIT SURVEY: 90% of graduates on the exit survey will agree or strongly agree to their ability to perform this SLO	Dean/DON and Faculty	Yes	EXIT SURVEY: 100% Agreed or strongly agreed to their ability to perform this SLO	Continue to track and analyze data	
Managing Care of the Individual Patient The Practical nurse graduate will work within an established plan of care for an individual patient to	May 2017	CAPSTONE PORTFOLIO: 90% of students received a	PN Faculty	Yes	CAPSTONE PORTFOLIO: 19/19 or 100% passed this ELA	Continue to track and analyze data	May 2017

6.1 PN Student Learning Outcomes

Program Outcome	Date Mo/Year Of Review	Expected Levels of Achievement (ELA)	State the Person(s) Responsible	Was the ELA Met	Analysis of Assessment Data to Inform Program Decision Making	Improvement Plan	Date of Minutes
organize, and assign aspects of care to UAP's and LPN's under the direction of an RN or other licensed Health Care Provider to provide a safe effective environment.		<p>satisfactory mark in the specific SLO on their clinical II portfolio for each of the assignments.</p> <p>SIMULATION: 90% of students will demonstrate competence in the specific SLO in a simulation exercise</p> <p>EXIT SURVEY: 90% of graduates on the exit survey will agree or strongly agree to their ability to perform this SLO</p>	<p>Simulation Faculty and PN Faculty</p> <p>Dean/DON and Faculty</p>	<p>Yes</p> <p>Yes</p>	<p>SIMULATION: NOT MEASURED.</p> <p>EXIT SURVEY: 100% Agreed or strongly agreed to their ability to perform this SLO</p>	<p>Plan to measure in 2019</p> <p>Continue to track and analyze data</p>	
<p>Nursing Judgement/ Evidence Based Care</p> <p>The practical nurse graduate will utilize evidence based nursing judgment when prioritizing care, implementing interventions, reporting changes, and promoting the health of individual patients across the lifespan within the healthcare system</p>	May 2017	<p>CAPSTONE PORTFOLIO: 90% of students received a satisfactory mark in the specific SLO on their clinical II portfolio for each of the assignments.</p> <p>SIMULATION: 90% of students will</p>	<p>PN Faculty</p> <p>Simulation Faculty and PN Faculty</p>	<p>Yes</p> <p>Yes</p>	<p>CAPSTONE PORTFOLIO: 19/19 or 100% passed this ELA</p> <p>SIMULATION: NOT MEASURED.</p>	<p>Continue to track and analyze data</p> <p>Plan to measure in 2019</p>	May 2017

6.1 PN Student Learning Outcomes							
Program Outcome	Date Mo/Year Of Review	Expected Levels of Achievement (ELA)	State the Person(s) Responsible	Was the ELA Met	Analysis of Assessment Data to Inform Program Decision Making	Improvement Plan	Date of Minutes
		demonstrate competence in the specific SLO in a simulation exercise EXIT SURVEY: 90% of graduates on the exit survey will agree or strongly agree to their ability to perform this SLO	Dean/DON and Faculty	Yes	EXIT SURVEY: 100% Agreed or strongly agreed to their ability to perform this SLO	Continue to track and analyze data	
Patient Relationship Centered Care The practical nurse graduate will apply effective communication skills while providing patient care founded on basic physical, developmental, spiritual, cultural, functional, and psychosocial needs of individual patients across the lifespan.	May 2017	CAPSTONE PORTFOLIO: 90% of students received a satisfactory mark in the specific SLO on their clinical II portfolio for each of the assignments. SIMULATION: 90% of students will demonstrate competence in the specific SLO in a simulation exercise EXIT SURVEY: 90% of graduates on the exit survey will agree or strongly	PN Faculty Simulation Faculty and PN Faculty Dean/DON and Faculty	Yes Yes Yes	CAPSTONE PORTFOLIO: 19/19 or 100% passed this ELA SIMULATION: NOT MEASURED. EXIT SURVEY: 100% Agreed or strongly agreed to their ability to perform this SLO	Continue to track and analyze data Plan to measure in 2018 Continue to track and analyze data	May 2017

6.1 PN Student Learning Outcomes							
Program Outcome	Date Mo/Year Of Review	Expected Levels of Achievement (ELA)	State the Person(s) Responsible	Was the ELA Met	Analysis of Assessment Data to Inform Program Decision Making	Improvement Plan	Date of Minutes
		agree to their ability to perform this SLO					
PROFESSIONAL IDENTITY AND ETHICAL BEHAVIOR The practical nurse graduate will apply professional behaviors/accountability with legal and ethical nursing practice standards for a competent Practical Nurse.	May 2017	CAPSTONE PORTFOLIO: 90% of students received a satisfactory mark in the specific SLO on their clinical II portfolio for each of the assignments.	PN Faculty	Yes	CAPSTONE PORTFOLIO: 94% 18/19 students passed this SLO. One student did not pass this SLO. In addition, this particular student did not pass the program.	Continue to track and analyze data	May 2017
		SIMULATION: 90% of students will demonstrate competence in the specific SLO in a simulation exercise	Simulation Faculty and PN Faculty	Yes	SIMULATION: NOT MEASURED.	Plan to measure in 2018	
		EXIT SURVEY: 90% of graduates on the exit survey will agree or strongly agree to their ability to perform this SLO	Dean/DON and Faculty	Yes	EXIT SURVEY: 100% Agreed or strongly agreed to their ability to perform this SLO	Continue to track and analyze data	
QUALITY IMPROVEMENT The practical nursing graduate will provide input into systematic processes that measure patient outcomes/variances and contribute	May 2017	CAPSTONE PORTFOLIO: 90% of students received a satisfactory mark	PN Faculty	Yes	CAPSTONE PORTFOLIO: 19/19 or 100% passed this ELA	Continue to track and analyze data	May 2017

6.1 PN Student Learning Outcomes							
Program Outcome	Date Mo/Year Of Review	Expected Levels of Achievement (ELA)	State the Person(s) Responsible	Was the ELA Met	Analysis of Assessment Data to Inform Program Decision Making	Improvement Plan	Date of Minutes
to the development of changes in policies/procedures to achieve effective patient outcomes.		in the specific SLO on their clinical II portfolio for each of the assignments.	Simulation Faculty and PN Faculty	Yes	SIMULATION: NOT MEASURED.	Plan to measure in 2018	
		SIMULATION: 90% of students will demonstrate competence in the specific SLO in a simulation exercise		Yes	EXIT SURVEY: 100% Agreed or strongly agreed to their ability to perform this SLO	Continue to track and analyze data	
SAFETY The practical nurse graduate will recognize and report changes and responses to interventions to and RN or the appropriate licensed health care provider while providing a safe environment for the patients, self, and others.	May 2017	CAPSTONE PORTFOLIO: 90% of students received a satisfactory mark in the specific SLO on their clinical II portfolio for each of the assignments.	PN Faculty	Yes	CAPSTONE PORTFOLIO: 19/19 or 100% passed this ELA	Continue to track and analyze data	May 2017
		SIMULATION: 90% of students will demonstrate	Simulation Faculty and PN Faculty	Yes	SIMULATION: 19/19 OR 100% passed this ELA	Plan to measure in 2020	

6.1 PN Student Learning Outcomes

Program Outcome	Date Mo/Year Of Review	Expected Levels of Achievement (ELA)	State the Person(s) Responsible	Was the ELA Met	Analysis of Assessment Data to Inform Program Decision Making	Improvement Plan	Date of Minutes
		<p>competence in the specific SLO in a simulation exercise</p> <p>EXIT SURVEY: 90% of graduates on the exit survey will agree or strongly agree to their ability to perform this SLO</p>	Dean/DON and Faculty	Yes	EXIT SURVEY: 100% Agreed or strongly agreed to their ability to perform this SLO	Continue to track and analyze data	
<p>TEAMWORK AND COLLABORATION</p> <p>The practical nursing graduate will participate as a member of the interprofessional team collaborating and communicating with other health care providers to promote safe, quality, patient centered care.</p>	May 2017	<p>CAPSTONE PORTFOLIO: 90% of students received a satisfactory mark in the specific SLO on their clinical II portfolio for each of the assignments.</p>	PN Faculty	Yes	CAPSTONE PORTFOLIO: 19/19 or 100% passed this ELA	Continue to track and analyze data	May 2017
		<p>SIMULATION: 90% of students will demonstrate competence in the specific SLO in a simulation exercise</p>	Simulation Faculty and PN Faculty	Yes	SIMULATION: 19/19 OR 100% passed this ELA	Plan to measure in 2020	
		<p>EXIT SURVEY: 90% of graduates on the exit survey will agree or strongly agree to their</p>	Dean/DON and Faculty	Yes	EXIT SURVEY: 100% Agreed or strongly agreed to their ability to perform this SLO	Continue to track and analyze data	

6.1 PN Student Learning Outcomes

Program Outcome	Date Mo/Year Of Review	Expected Levels of Achievement (ELA)	State the Person(s) Responsible	Was the ELA Met	Analysis of Assessment Data to Inform Program Decision Making	Improvement Plan	Date of Minutes
		ability to perform this SLO					

Criteria 6.2 NCLEX Pass Rates		
Assessment		
Expected Level of Achievement (ELA)	Frequency	Assessment Method
1. The program's most recent annual licensure exam pass rate will be at least 80% for first-time test-takers.	May Retreat and Share with Spring Advisory Board	Minnesota Board of Nursing Pass Rates published in January for the previous year
Implementation and Evaluation		
<u>Results of Data</u>	<u>Staff Meeting Minutes Date</u>	<u>Action Plan</u>
<p>2014 Annual exam licensure pass rate 2014- 96.97% In 2014, the pass rates from the 2012/2013 graduates was 96.97%. This group was part of our pathway program and represented very few students as the majority of the students continued on to complete their AD degree without taking the licensure examination for PN.</p>	May Retreat and Share with Spring Advisory Board	<p>1. Licensure Rate: Continue current method of assessment</p>
<p>2015 Annual exam licensure pass rate: 2015- 70% In 2015 the pass rates were 70% which was from the 2013/2014 graduates. This was the first stand-alone cohort of students, which used the old pathway curriculum. 100% of the students took their NCLEX-PN board.</p>	May Retreat and Share with Spring Advisory Board	<p>1. Plan to incorporate the statewide PN Curriculum with modifications 2. Incorporate A 3-day ATI live review was graduates in 2016 3. Implement a PN tutor for the 2015/2016 cohort 4. Director to work with at risk students to develop plans for success. 5. Eliminate bonus points and extra assignments that inflated grades</p>

<p>2016</p> <p>Annual exam licensure pass rate: 2016- 91.30%. All action items from 2015 were implemented for this cohort. Students requested additional pharmacology and less lab time/more lecture time.</p>	<p>May Retreat and Share with Spring Advisory Board</p>	<ol style="list-style-type: none"> 1. Continue to action plan from 2015 2. Increase pharmacology to 3 credits 3. Increase Older Adult to 3 credits 4. Remove 1 lab credit
<p>2017</p> <p>Annual exam licensure pass rate: TBD</p> <p>All action items have been implemented from 2016 and continued from the 2015 action plan.</p>	<p>May Retreat and Share with Spring Advisory Board</p>	

Criteria 6.3 Program Completion		
Assessment		
Expected Level of Achievement (ELA)	Frequency	Assessment Method
<ol style="list-style-type: none"> 1. Completion Rate: 75% of nursing students at Riverland Community College will successfully complete the practical nursing program within 150 % (3 semesters) of the time from entry into the first nursing course 	<p>October</p> <p>May Retreat</p>	<ol style="list-style-type: none"> 1. Completion Rate: Quantitative Analysis of student completion rate at 150% from time of entry into program. This equals 3 semesters.
Implementation and Evaluation		
<u>Results of Data</u>	Meeting Minutes Date	<u>Action Plan</u>

<p>2015 Program completion: 2015 (Spring Graduates)- 87.8%</p>		<p>1. Program completion rate: 2015- This was excellent! No changes necessary. Continue to monitor</p>
<p>2016 Program completion: 2016 (Spring Graduates)- 75% 2016 they were 75% at 150%. In 2015, the completion rate was 87.8% but the pass rate was 70% for NCLEX PN. In 2016, the completion rates went down to 75%, and the NCLEX pass rates went up to 91.3%. In this cohort, this number dropped because of a pharmacology class that was too condensed. The course was to be offered for the entire semester, 1 credit course, but instead, it was only offered ½ of the semester, which made it difficult for students to digest that much information in such a short amount of time. For the Fall 2016 students, we changed the pharmacology course to 3 credits based on student survey feedback. This course is now being offered all semester with more time being dedicated to the theory portion in this course.</p>		<p>Program completion rate: For the Fall 2016 students, change the pharmacology course to 3 credits Increase lecture in Care of Older Adults PNUR 1120 from 2 credits to 3 credits</p>
<p>2017 Program completion: 2017 (Spring Graduates)- 80.95% In 2017, they were 80.9% at 100% of the program length (there are no students that remain to complete within the 150% time period). This number is climbing back up! The increased time in pharmacology and the consistency of the instructors helped to stabilize the program this past year. Three out of the four</p>		<p>Program completion rate: Will continue to monitor and analyze this data moving forward.</p>

<p>students who did not complete the program dropped out for personal reasons. Only one student failed the program due to clinical reasons.</p> <p>The program identified that the ATI TEAS test scores are higher for the incoming 2017 cohort of students than previous cohorts. In Fall of 2016, the program accepted students at the basic level (41-50%) and admitted only 23 students. The program was unable to fill its seats (23/40) for the 2016/2017 cohort. For the 2017/2018 cohort, the program had 60 applicants and was able to fill the 40 seats with the ATI TEAS score higher than 58.8%.</p>		
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Criteria 6.4		
Assessment		
Expected Level of Achievement (ELA)	Frequency	Assessment Method
Job Placement: ELA: 80% of graduates will be employed as an LPN within 6 -12 months of program completion or enrolled in AD/BSN program.	Institutional Research Dept.	Job Placement: the nursing department will collect data from the IR department when the data is available. The data from IR is always 1 year behind.
Implementation and Evaluation		
<u>Results of Data</u>	<u>Meeting Minutes Date</u>	<u>Action Plan</u>
2013/2014 graduating students. Data collected in Spring 2015. 51/52 contacted. 45/51 or 86.5% continuing on in education (pathway program) 6/6 or 100% of those available for work are employed.	May Retreat and Share with Advisory	Job Placement: Continue current method of assessment

	Board in Spring or Fall or When Results are Available Update on Website Quarterly	
2014/2015 graduates data obtained in Spring 2016: 19/29 responded 11/12 or 91.7% available for work and working as LPNs 7/19 or 24.1% continued on for further education.		Job Placement: Great rates! Continue current method of assessment
2015/2016 graduates to be obtained in Spring/Summer 2017 Job Placement Rates will be available in September 2017		Job Placement: Continue current method of assessment

The Chief Executive Officer hereby confirms the statements made herein are true and correct.

Name (Print): Dr. Adenuga Atewologun

Date: 9/8/2017

Name (Signature): 

Date: 9/8/2017