San Joaquin Valley College
Program Improvement Proposal

Approved:	_____
Date:	_____

STANDARD: Proposed program revisions must support the outcomes of the program and be in alignment with SJVC's Mission Statement.

POLICY: The Proposal form is to be completed and submitted to the Curriculum Specialist.

PROCESS: The *Program Improvement Proposal* is to be completed in full and submitted with support documentation to the Curriculum Specialist. If the proposal involves a program on multiple campuses, stakeholders from those campuses will be asked to review the proposal during the vetting process. Proposals will also need the approval of the Senior Management Budget Committee.

TIMELINE: Program changes take a *minimum* of 120 days to implement. If the proposed improvements signify more than a 50% change in the program, ACCJC may need to be notified and approve the change. This process may take several months. Please plan accordingly.

Program Improvements include but are not limited to:

- Any change needing approval by an accreditation body
- Program name or course names
- Matrix changes
- Combining, deleting or adding courses

- Clock hour or unit value changes
- Changes to Program Learning Outcomes (PLOs)
- Changes to performance standards (typing tests etc.)

Campus:	*Visalia*
Program:	*Registered Nursing Generic*
Contact Person:	*Janine Spencer*
Program Director/ Division Manager:	*Janine Spencer*
Date:	*3/9/14*
Improvement Information-	- LVN-RN modifications for January 2015 start:

| Describe the proposed improvement? | ✓ Increase the passing standard from 74% to 75% for all courses

✓ Change the course name for RN 28 to Basic Medical Surgical Concepts

• RN (generic) modifications:

  ✓ Addition of PLO #9 for a total of 11 PLO's

  ✓ Term 1, Term 2, and Term 4 of incoming cohorts will be reduced by 1 unit per term

  ✓ Elimination of RN11, RN11L, and RN32

  ✓ Additional courses will include RN36, RN44, RN50, and RN51
    ❖ RN51-additional cost of $350-$375 for consultant (utilized in the program previously but new course has been created to assess the results)

  ✓ Additional CLO added to all clinical courses addressing Ethics

  ✓ Revised matrix (see attached) demonstrates modifications to course lengths and units
    ❖ Total program length has not changed

  ✓ Modification of grade weights in all courses

  ✓ Increase the passing standard from 74% to 75% for all courses

  ✓ PLO alignment

  ✓ 12 hour clinical will be reduced to 8 hours thereby reducing overtime hours of clinical instructors

  ✓ Addition of 2 textbooks (Nutrition and book for RN36-not yet identified)

    ❖ Estimated cost addition of ~$110 |

San Joaquin Valley College
Program Improvement Proposal

SECTION 1: SUMMARY OF BENEFITS

Provide a detailed narrative that clearly defines and explains the benefits of the proposed changes to the course, program and institution

- Program improvement outcomes to increase NCLEX pass rates, placement statistics, and CLO achievement
- Stronger foundational preparation with the additional theory units added to the program
- Providing an enhanced emphasis on Psychosocial Integrity earlier in the curriculum (term 1) will support student learning in this category
- Eliminating 12 hour clinical will promote a more effective learning environment, will increase likelihood of sites, and reduce overtime

SECTION 2: SUPPORT DATA (Include as attachments to the Proposal)

2.1 Documentation: *Attach at least **two** forms of documentation from outside sources that support the need for the change. Support documentation includes but is not limited to: Advisory Board minutes or statements from members; statements from career service department, extern sites or employers; detailed recommendations from programmatic accreditation associations or new laws and/or legislation; research on current industry trends; course comparison with other institutions*

2.2 Student Success Data: *Attach at least five forms of student support data listed below from the past 24 months. Student Success Data includes but is not limited to: CLO data, PLO data, Placement data, Retention data, Enrollment data, Attendance data, Course surveys*

List the supporting data to be included as attachments.

- BRN letter of improvement, after last site visit

- CLO achievement data

- NCLEX pass rates

- Placement data

Explain how the listed data support the proposed improvement(s).

BRN letter of improvement lists specific areas for improvement after the site visit in January 2013. Specifically referenced was Total Program Evaluation (#2 on attached form). It is suggested that the RN curriculum increase in rigor and the grading system be reevaluated.

CLO achievement data (attached packet)

Current CLO mastery data is below standard in all courses.

NCLEX pass rates below standard of 75%, at 67.53% (BRN website attachment). The addition of RN51 and increased course rigor will increase NCLEX pass rates.

Placement data

- Placement is at 66% (page 1 of CLO achievement data packet). This is mainly due to NCLEX pass rates being below standard for 2013. Increasing NCLEX pass rates will increase placement.

SECTION 3: IMPROVEMENT OF STUDENT LEARNING AND ACHIEVEMENT

Identify the expected measured result(s) the proposed improvements will have on student learning and achievement on the program and/or course levels. (Placement will increase to 90%; PLO 4 & 5 achievement will increase to 85%; etc.).

BRN letter improvement areas addressed:

- Proposed changes include additional CLO's to increase academic rigor.

  - ✓ All clinical courses to include a new CLO reading "Apply the ethical decision making process to specific ethical issues encountered in clinical practice". CLO will be align with PLO #11

- Proposed changes include increasing the grading component from minimum passing grade of 74% to 75%: thus leading to increased student achievement data (CLO achievement and NCLEX pass rates as well as better placement)

- Proposed changes to increase program rigor, as recommended by BRN consultant (see attached letter), includes modifying grade weights in all RN courses as follows:
  - ✓ Theory courses- Projects/Homework 20%   Quizzes/Exams 80%
  - ✓ Clinical courses-Projects/Homework 30%   Clinical Performance 70%

- The BRN Nursing Consultant, Kelly McHan, recommended an additional PLO be added to the program which reflects current health care requirements for competency in various types of technical and electronic resources.

  - ✓ *PLO to read: "Utilize a variety of resources, including electronic media and medical technology to provide safe, quality care of the patient and family"*

CLO mastery data collected shows low mastery achievement. Increasing course rigor with curriculum revision and SLO additions will lend to increased student achievement of outcomes.

- Example: RN42: Nursing Seminar 4: Leadership (page 14 of CLO achievement data packet) shows mastery achievement of CLO 1 and 2 as 37% and 42% respectively.   Current CLO's are:
  - ✓ Discuss current issues in health care and their relationship to nursing practice
  - ✓ Discuss nursing roles and management strategies to prepare for a successful professional nursing practice career
  - ✓ Complete a personalized NCLEX exam preparation plan
- The proposed plan modifies this course, building a stronger foundation of Leadership skills in our students with the outcomes rewritten as:
  - ✓ Discuss the history and development of the Nursing Profession (Common Mastery Assessments to be determined)
  - ✓ Discuss current issues in Health Care and their relationship to nursing practice (Common Mastery Assessments to be determined)
  - ✓ Describe leadership and management roles within the nursing profession (Common Mastery Assessments to be determined)
- The new CLO's are a better reflection of current standards of practice and will promote CLO mastery to 80% benchmark.

Proposed changes include a specific course, RN51, dedicated to NCLEX preparation. This course is specifically designed to prepare students for studying and passing of the NCLEX exam, thereby increasing NCLEX pass rates to 75% benchmark required by Board of Registered Nursing.
- Course will include NCLEX exam preparation by an outside, contracted consultant
- CLO will read-"Complete a personalized NCLEX plan"

SECTION 4: ALIGNMENT WITH OUTCOMES

Provide a narrative that explains how the proposed changes align with and support the Student Learning Outcomes identified within the program (CLOs, and PLO). For Academic Affairs Use only.

- The removal of RN11/RN11L is a direct result of PLO misalignment. The courses Introduce the same PLO's as RN10/10L and are removed for redundancy.

- The removal of RN32 is a direct result of PLO misalignment. The course develops identical PLO's as other RN courses, with the exception of ethics. The course is removed for redundancy.   A CLO addressing ethics is added into the following courses for alignment: RN10L, 20L, 21L, 33L, 35L, 43L & 45L to maintain alignment with PLO #11.

- The addition of RN36 is a direct result of PLO misalignment. RN36 will Develop and Master PLO's #2 and #7.

- The addition of RN51 is a direct result of CLO misalignment. NCLEX preparation is currently coupled with Leadership, therefore not allowing for Mastery. The course addition will correct this misalignment.

- The addition of PLO #9, recommended by the BRN consultant-Kelly McHan, is a direct result of our current probationary status with the BRN. This PLO will be assessed in the following courses for alignment: RN 10L, 23L, 24L, 30L, 35L, 37L, 43L, & 46L.

SECTION 5: TEACH-OUT

A "teach-out" is when current students will need to finish their original class schedule while new students will be given the changes – this can create the need for additional classrooms, teachers, or changes to student contracts.

This proposal will create a "Teach Out" situation: **YES   X**   **NO**

Plan for addressing teach-out situation:

RN cohort 5 will continue with current courses in terms 3 and 4 as previously scheduled. Incoming cohort 6 will start in the modified courses in the new matrix (attached). The clinical schedule will be modified to accommodate both cohorts.

SECTION 6: IMPACT ON STUDENTS

Provide a detailed narrative that clearly explains how the proposed changes will impact current students both positively and negatively.

Current RN students will not be impacted. Current lab schedules will be adjusted accordingly with LVN-RN students but will not create a conflict. Lab time will be extended from 2 weeks to 4 weeks in RN10L and RN37L (see attached matrix).

SECTION 7: IMPACT ON FACULTY

Provide a detailed narrative that clearly explains how the proposed changes will impact any faculty scheduling or qualifications.

- Reducing the clinical courses from 12 hours daily to 8 hours daily will reduce staff overtime pay.
- An increase in theory course hours taught will counter balance with the hours freed up with the elimination of RN11 and RN32, therefore not contributing to an increase in instructor pay.
- The reduction of clinical course, RN11L, will reduce utilization of adjunct clinical instructors.
- With the addition of RN36, a current instructor will be assigned.

SECTION 8: IMPACT ON RESOURCES

Provide a detailed narrative that clearly explains how the proposed changes will impact any space/ facility usage or need new/additional equipment.

Heavier utilization of lab time during the initial RN10L course will increase scheduling time in that classroom.
No new equipment needed.
No additional space needed.
No software/hardware needed.

SECTION 9: IMPACT ON PROGRAMATIC ACCREDITATION

Does your program have an external accrediting body? What are their requirements for this sort of change?

BRN accredits the program. Curriculum was sent to them and approved on 3/6/14 (see attached approval letter).

SECTION 10: INPUT FROM ACADEMIC LEADERSHIP

Include statements, as separate attachments, from the academic leadership on your campus (Program Director or Division Manager, Academic Dean and Campus Director)

I support this proposal due to the current health care environment requiring competency with various types of technical and electronic resources as well as better use of student's time in the classroom. I also strongly support reducing the clinical hours from 12 to 8 since

they are also gaining knowledge and practice hours in the skills lab. The BRN does not require 12 hours of lab and this will be a substantial savings to the college by not having to pay overtime for the extra four hours – Tami Olson, Academic Dean.

I fully support the proposed changes to the Generic RN Program curriculum. The RN Team has worked diligently to assess student outcomes and fine tune the curriculum to enhance success both in the classroom and when sitting for the NCLEX. I feel that we will experience enhanced clinical outcomes as a result of reducing the clinical day from 12 to 8 hours. This will allow for a more focused learning environment while more effectively utilizing instructor hours. – Don Wright, Campus Director