



# STATE OF IOWA

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Governor Kim Reynolds  
Lt. Governor Adam Gregg

BOARD OF NURSING  
Kathleen R. Weinberg, MSN, RN  
Executive Director

July 23, 2020

Beth Johanns, MSN, RN, CIC, CPHQ  
Associate Dean of Health Occupations  
Iowa Valley Community College District  
3702 S. Center Street,  
Marshalltown, IA 50158

Dear Ms. Johanns,

At the July 15, 2020 board meeting, the Iowa Board of Nursing accepted the Nursing Education Program Report and granted approval for a period of six years to the Practical Nursing and Associate Degree in Nursing programs submitted by Iowa Valley Community College.

The Board appreciates your participation in the nursing education process. If you have any questions or comments please contact me at 515-326-4400.

Sincerely,

*Jimmy A. Reyes*

Jimmy A. Reyes, Ph.D.(c), DNP, AGNP, RN, FRE  
Associate Director of Practice and Education  
NCSBN Fellow of Regulatory Excellence



Iowa Valley Community College Corrective Measures  
Planned and Implemented Template

Approved by the <sup>1</sup>  
Iowa Board of Nursing  
on July 15, 2020  
Kathleen R. Weisberg  
Executive Director

2.6(1) *Program evaluation.* A written plan shall outline the evaluation process for all aspects of the program and identify the methodology, tools, responsible parties and time frame. Evidence of implementation shall reflect achievement of program outcomes.

**[ Partially Met ] Provide a brief description of the evaluation plan, i.e., systematic evaluation or program assessment and how it is utilized to meet program outcomes.**

The Criteria for Program Evaluation (Nursing Faculty Handbook, pg. 35) is updated annually by the nursing faculty evaluation committee. Listed in this document are the criteria, methodology, time frame and measurement of the evaluation of faculty, students, and the program, as well as resources, facilities, and services. *The Nursing Faculty Handbook is included with this report.*

Based on discussions with administration, there is an opportunity to revise and implement a nursing systematic evaluation plan to set benchmarks, and determine and evaluate program outcomes. As identified in the literature, some program outcomes may include the NCLEX-PN and RN examinations, graduation rates, and employment surveys, to name a few (Hyland, 2012; Serembus, 2016). This information may help identify areas for improvement, make curriculum changes, and implement modifications in admission, progression, and testing policies (Hyland, 2012; Serembus, 2016).

**Recommendation #1:**

Revise and implement a nursing systematic evaluation plan to identify, assess, evaluate, set benchmarks, and provide an action plan for all aspects of the nursing program (i.e. admission, attrition, graduation) and include all stakeholders in the decision-making process (i.e. Advisory Committee, Faculty).

**Narrative supporting corrective measures planned and implemented for Recommendation #1:**

We completed the Systematic Evaluation Plan Document which addresses all aspects of the program. Some areas for improvement were identified and will be addressed in our goal setting process for next year. This document will be completed annually.

We are currently utilizing WEAVE district wide for documentation of CSLO's. Associate Dean has access to all WEAVE projects and can run reports to summarize, see progress, etc. Each course has been mapped so that each course will be evaluated over the course of 3 years. Faculty is encouraged to continue to monitor if benchmark set is not met. Instructors base decisions to make changes to delivery of content, and ultimately curriculum based on the results of the projects.

We were due for an internal college program review last year. This is a 3 year process and it walks us through analyzing each component of our program. We have revised the student learning outcomes for the institution and the nursing department, which are now in alignment. We revised our by-laws, our program philosophy, program goals, and program framework. We have aligned the syllabi across the district so they are the same and consistent with curriQnet. We received generous funding from Perkins for our efforts in the program review process. This year, we presented our results to all faculty in the District, and made our purchases for Perkins.

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Executive Director

We are researching admission criteria including TOFL scores to help our students be more successful in the program. There is a misalignment with admission criteria and the rigorous schedule/curriculum which makes it difficult for average students to be successful. This change will most likely not take place until 20/21.

We are also focusing on improving our attrition rates. Each instructor has been reflecting on our curriculum and trying some new approaches to identify weaker students earlier. We are also assessing if the material is in the best order to assist with learning and success. We have great teachers with great ideas and just need some time to brainstorm. We encourage flipped classrooms and hands on learning. We utilize lecture, assignments, simulation, clinical, virtual simulation, case studies, skills drills, games, etc. to reach all types of learners. Our all day workshop this year gave each instructor a chance to demonstrate these types of alternative teaching methods to other instructors. There were many great ideas and everyone picked up something new. Our attrition rates improved by 50% district wide from last year to this year.

The Associate Dean has been working closely with Admissions and recruitment employees to visit schools and explain the benefits of attending a community college. Even if they have big goals, to earn advanced degrees, they can benefit from less debt, and becoming employable at a faster pace than attending a four year college from the start. We have held many recruiting events on campus while working with the Intermediary Network Coordinators at both campuses. The Associate Dean has also started a spreadsheet with information related to BSN programs that are available and align with our program. Many students have sought out advice on this topic and the spreadsheet is shared with them to help them make informed decisions.

I have also started tracking all students that are not successful for one reason or another. I am including the date (week) that they drop and the reason they give upon exit interview. I ask them for feedback related to our program and give the feedback to the faculty. Also looking at TEAS or ACT scores, grade point related to pre-requisite sciences to see if this has an impact on the success of the student.

We are utilizing all of this data including test scores and clinical grades to continuously assess and drive decisions related to our program. Examples of changes we have made include promoting the learning center, utilization of remediation packets before and/or after exams, doing critical thinking exercises in study groups, utilizing open book, closed book, and collaborative exams to improve critical thinking, and making curriculum changes including combining two 8 week courses into one 16 week course. These changes were approved on April 3<sup>rd</sup> 2019 at the Iowa Board of Nursing meeting. District wide we have decreased our attrition by 50% from last year to this year.

We also had training on our ATI package to try to utilize it more fully to improve critical thinking skills. Each instructor was asked to implement two new ATI activities into their courses by year's end. This goal was met and the student's responded positively. ATI is evidence based, geared toward passing the NCLEX exam and expensive, so we should be using it. We offered our students an optional Hurst Review for state boards after they finished the summer session prior to taking boards. This was the first time a comprehensive review class has been offered at Iowa Valley. The students had good feedback, so we are offering again this summer.

We are doing a small test of change with a new product from Shadow Health. This is a virtual sim lab. It does not take the place of sim or clinical, but is used as an adjunct assignment. The student interacts



with an avatar and can manipulate the environment, give treatments, make decisions, and practice therapeutic communication. We hope to include this product in their book list for next year.

The Associate Dean was new last year and noticed that there was some animosity between campuses. To improve teambuilding across the district, we have stopped having separate campus monthly meetings, and gone to district wide monthly meetings. We are utilizing Zoom equipment for these. The meetings have become more interactive and productive. Respect has grown among the faculty for one another and responsibilities are being shared district wide. The sub committees have representatives from both campuses involved. We continue to do team building exercises at our workshop days, and faculty has been floating to both campuses for certain classes/sims.

The Associate Dean also noticed that a lot of data was being collected on clinical site evals, course evals, and simulation evals, but that the information was not being disseminated back to the appropriate faculty. Data is now aggregated and disseminated. Faculty knows that the Associate Dean sees the comments and have addressed some of the more negative ones. Improvement has been seen in the comments from last year to this year. Associate Dean uses this opportunity to mentor/coach faculty. Course evals are being handled in the same way. A trend was recognized related to a few of the clinical adjuncts. This was addressed with them, mentoring/coaching offered. If the adjuncts did not respond they were replaced with new adjuncts. Actively recruited high quality amazing adjuncts to teach our students clinical.

An area of concern is our board passage rates. We had an increase in number of students failing boards last year. We are using data from the past two years ATI Comprehensive Review to identify weak areas to focus improvements on. We had an extremely weak class last year, district wide. More data will be collected to determine if that class was an outlier or if we need to make further changes.

**2.6(1) [ Partially Met ] Provide a brief description of how evaluation process results in programmatic changes.**

The evaluations that students do of clinical instructors and agencies are reviewed individually by evaluated parties and the program director then improvements are made as necessary. The end of program evaluation is reviewed and discussed at faculty meetings where improvements are made as necessary. Classroom instructors are evaluated by students annually per college policy. An example of how the end of program evaluation affected change is with the delivery of content during class time. Students were asking for more instruction/training related to critical thinking. Lectures were put on-line and instructors either created activities or created simulation scenarios that encouraged critical thinking. This positively affected student learning outcomes.

**Recommendation #2:**

**Include within the nursing program's systematic evaluation, a plan to evaluate adjunct clinical faculty and a method for students to provide feedback to clinical faculty.**

**References:**





DiBartolo, M.C. & Seldomridge, L.A. (2005). A review of intervention studies to promote NCLEX-RN success of baccalaureate students. *Nurse Educator*, 30, 166–171.

Hyland, J.R. (2012). Building on the evidence: Interventions promoting NCLEX success. *Open Journal of Nursing*, 2, 231–238.

Serembus, J. F. (2016). Improving NCLEX first-time pass rates: A comprehensive program approach. *Journal of Nursing Regulation*, 6(4), 38-44.

### **Narrative supporting corrective measures planned and implemented for Recommendation #2:**

All clinical evals are completed by students at the end of each semester. The data is compiled, aggregated and disseminated to each instructor. Comments are kept in a spreadsheet. Trends are addressed with faculty and problem solving, coaching, suggestions offered. This has historically been a lot of work for Associate Dean, so Survey Monkey account has been purchased and students will complete evals with results flowing into spreadsheet.

As mentioned earlier, some instructors have not been reassigned due to feedback from students. It is imperative to employ adjuncts that represent the mission, vision, core values of the college, and Nursing program. Positive feedback from students and instructors have been noted since making staffing changes. Another big piece of this is assigning the most appropriate adjunct to the clinical site that is the best fit for them.

We are also keeping a log on Sharepoint of all meetings, communication, with adjunct faculty. I am doing site visits to each facility and building relationships with Directors of Nursing and CEO's in hospitals that we haven't historically utilized. We have reassigned the clinical scheduling piece to a staff member with strong arrangement skills. Associate Dean is actively participating in scheduling sites, instructors, and schedules with staff person. This has helped to identify trends where clinical is being scheduled too heavily and other sites have been secured to improve experiences for students. We currently have more clinical sites requesting students than we have clinical hours.

Also, lead instructors have been asked to meet with adjuncts to go over paperwork, care plans, skills lists and expectations. This has improved communication and made the adjuncts feel more involved as a faculty member.

2.9(3) Design, implement, evaluate, and revise the curriculum.



**2.9(3) [ Partially Met ] Cite where documentation of the above is located.**

These functions are documented in the Nursing Education Faculty Organization By-Laws which are located in the Nursing Faculty Handbook (pgs 28-33) and under the Criteria for Program Evaluation in the Nursing Faculty Handbook (pgs. 35-38). This is also stated in faculty job descriptions found in the Nursing Faculty Handbook (pgs. 21-23).

*The Nursing Faculty Handbook is included with this report.*

According to the literature, as the NCLEX-PN and NCLEX-RN test plan transforms, patient and sociodemographic variables change, and health care evolves, nursing education programs are challenged to systematically evaluate their curriculum and make modifications as needed (DiBartolo & Seldomridge, 2005; Hyland, 2012; Pennington et al., 2010; Serembus, 2016). During discussions with faculty and administration there is an opportunity to examine all variables that may impact NCLEX-PN and RN test results in order to improve student success rates and program outcomes. Some interventions, based on evidence and research, may include modifications in admission, progression, and testing policies. Furthermore, faculty and administration may discuss the importance of collecting data in a systematic approach to inform and make prospective curriculum changes (Serembus, 2016).

**Recommendation #3:**

**Continue to use strategies to improve NCLEX-RN test results and examine all variables impacting student's success rates.**

**Narrative supporting corrective measures planned and implemented for Recommendation #3:**

As previously mentioned we are scrutinizing our curriculum to make sure it is in the best sequence. We have also looked at new tools through ATI that can assist in critical thinking required to pass NCLEX PN and RN boards. As a faculty we have trialed 'Real Life Scenarios' which allow the student to decide the care and priority. The video is directed based on their decision. They are told immediately if they have made a critical error. They can attempt the scenarios as many times as needed. They explain rationale when an error is made or at the end of the scenario once the student makes the best choices. We are trialing Shadow Health which is geared toward critical thinking development and are leaning towards his product over the ATI Real Life Scenarios.

We also looked at ATI math tutoring which is a weak area for our students. Faculty has discussed hiring a PRN nursing tutor that is ideally a grad from our program. Associate Dean analyzed the ATI predictor scores and shared with the instructors the areas of weakness for all cohorts. This helps us drill down on topics so we can emphasize them more during class. We have been in discussions with a seasoned faculty member who will be retiring this year to have her do some tutoring directly related to Nursing content.

I also met with both ATI and HURST Review Services to explore having a live 3 day intense review for PN and AD before they sit for boards. The company offers slightly different products. Since the students are exposed so much content through ATI throughout the curriculum, we made the decision to try Hurst last summer. Students gave positive feedback related to Hurst Review so it will be offered again this summer. Out of the students that failed boards last summer, only one of them participated in the Hurst Review.



Also, as previously mentioned we changed the curriculum to combine 8 week courses into 16 courses. The same material will be covered in the same amount of time, however, the student will have more of a chance to recover if they are unsuccessful in a unit, and more time to adjust to thinking like a nurse.

We are also exploring how we can allow students to progress in certain ways even if they need to repeat a course. We currently only have one start date per year, so the students must sit out an entire academic year until the course is offered again. This is not ideal for the student or the college.

We are also at the beginning of discussion related to admission criteria, including adding a TOFL score, and the selection process.

Also, as mentioned earlier, Instructors are utilizing different learning domains to reach students in several ways. Included are Lecture, assignments, ATI tools, case studies, presentations, community involvement, simulation, clinical, virtual simulation, researching and educating certain populations, skills drills, games, open book, closed book and collaborative testing, etc.

#### **Recommendation #4:**

**Encourage faculty to apply to the NCSBN as item writers for the exam.**

#### **References:**

**DiBartolo, M.C. & Seldomridge, L.A. (2005). A review of intervention studies to promote NCLEX-RN success of baccalaureate students. *Nurse Educator, 30*, 166–171.**

**Hyland, J.R. (2012). Building on the evidence: Interventions promoting NCLEX success. *Open Journal of Nursing, 2*, 231–238.**

**Pennington, T.D. & Spurlock, D. Jr. et al. (2010). A systematic review of the effectiveness of remediation interventions to improve NCLEX-RN pass rates. *Journal of Nursing Education, 49*, 485–492.**

**Serembus, J. F. (2016). Improving NCLEX first-time pass rates: A comprehensive program approach. *Journal of Nursing Regulation, 6*(4), 38-44.**

#### **Narrative supporting corrective measures planned and implemented for Recommendation #4:**

Downloaded the brochure to apply to be a volunteer test writer to NCLEX PN or RN from NCSBN. Sent information to instructors via email on 10.29.18. The only obstacle is that the instructors work full time here and a requirement of being a test writer is that they must have 8 hours or more per week with direct patient care. Each of our instructors are required to teach at least one round of clinical per semester. Uncertain if that would meet this requirement.



I do have an instructor that is currently on the committee to review Chapter 6 related to scope of practice for LPN and RN licensees.

**2.9(3) [ Partially Met ] Cite how and where documentation of academic advising is located.**

This is documented in the College Catalog (pg. 6) and in faculty job descriptions which are located in the Nursing Faculty Handbook (pgs. 21-23).

*The College Catalog and Nursing Faculty Handbook are included with this report.*

**Based on discussions with faculty, there is an opportunity to examine the role of faculty in the academic advising process. This role may enhance communication and mentorship of students, in particularly those who may be struggling in the nursing program. Along the same lines, pursuant to Iowa Administrative Code, chapter 2.9, faculty shall participate in academic advising and guidance of students.**

**Recommendation #5:**

**Develop, implement, and review guidelines for the faculty advisor role and implement an advising/counseling record/documentation process to be placed in the student's file.**

**References:**

**Harrison, E. (2009). What constitutes good academic advising? Nursing student's perceptions of academic advising. *Journal of Nursing Education, 48(7)*, 361-366.**

**O'Neal, D., Zomorodi, M., & Wagner, J. (2015). Nursing education progression. *Nurse Educator, 40(3)*, 129-133.**

**Narrative supporting corrective measures planned and implemented for Recommendation #5:**

Each student is now assigned to a faculty member at the start of the year. Faculty meets with the students at least once per semester. If a student is identified as at risk, the advisor meets with them again (or as many times as necessary) All advising is documented in Jenzabar EX. This is an electronic file that is a permanent part of the student record and can be viewed by other instructors as the student progresses throughout the program. Jenzabar training was done on September 4<sup>th</sup>, 2018. This process went smoothly throughout last year and this year. This may be contributing to our improvement in attrition rates.





**2.9(3) [ Partially Met ] Cite where process for student, self and peer evaluation of teaching effectiveness is located.**

Faculty evaluation by the nursing program director, which includes self-evaluation, is done every year for the first two years of employment and then on an every other year basis. Classroom evaluation of faculty by students is done annually through the office of the Dean of Students (Nursing Faculty Handbook pg. 8). All full and part-time nursing faculty participate in peer review at least once every 5 years (The peer evaluation form is found in the Nursing Faculty Handbook pg. 18). Students evaluate clinical faculty after selected clinical rotation (That evaluation form is located in the Nursing Faculty Handbook pg. 20).

*The Nursing Faculty Handbook is included with this report.*

Based on discussions with faculty and administration, there is an opportunity to improve the faculty peer review process to assess and determine teaching efficacy and effectiveness. According to the research, the peer review process shall be collaborative and not punitive (Boehm & Bonnel, 2010; Fernandez & Yu, 2007). In other words, peer review shall provide an opportunity to enhance the faculty's teaching abilities and professional practice.

**Recommendation #6:**

Incorporate a formal plan for the implementation of peer review among faculty.

**References:**

Boehm, H., & Bonnel, W. (2010). The use of peer review in nursing education and clinical practice. *Journal for Nurses in Staff Development, 26(3)*, 108-115.

Fernandez, C. & Yu, J. (2007). Peer review of teaching. *The Journal of Chiropractic Education, 21(2)*, 154-161.

**Narrative supporting corrective measures planned and implemented for Recommendation #6:**

Formal peer review policy was written and incorporated. Each instructor was peer reviewed by another faculty member. Each instructor utilized the same peer review document.

New faculty members were asked to view a class of every other faculty member district wide.

Associate Dean visited each instructor's classroom. Documentation completed and feedback given.



**2.12(2) [ Partially Met ] Provide a brief description of how a. and b. are met.**

(a) All facilities used for clinical experiences are accredited/approved by the appropriate agencies and documented in the Annual Report to the Iowa Board of Nursing.

(b) Joint planning is done with program directors and clinical schedulers when more than one program uses the same facility. Schedules are coordinated so that students from each program are assigned to different clinical days/hours.

*Clinical schedules and copies of communications will be available at the time of site visit.*

**Recommendation #7:**

**Modify the clinical site agreement to indicate the approving agency name and date of recertification and/or approval.**

**Narrative supporting corrective measures planned and implemented for Recommendation #7:**

The clinical site agreement was edited to include the approving agency name and date of recertification. Iowa Valley updated an umbrella agreement. Each department has an addendum specific to them. This was meant to streamline contract review. For instance some clinical sites have an agreement with Continuing Education to host CNA students and an agreement with EMT students, and with Health Occ. Students. This would use one agreement with addendums attached. There is now a place on the Health Occ addendum that indicates approving agency and date of recertification. Was rolled out at the beginning of the 2019-2020 academic year and sent out for contract renewals.

**Iowa Valley Community College Recommendations Table**

| <b>Category</b>          | <b>Identified areas for improvement</b> | <b>Supporting data and analysis</b> | <b>Corrective measures planned and implemented</b> | <b>Timeline (including evaluation date)</b> | <b>Prospective Evaluation Methods</b> |
|--------------------------|---|-------------------------------------|--|---|---------------------------------------|
| <b>Recommendation #1</b> |   |                                     |  |   |                                       |
| <b>Recommendation #2</b> |   |                                     |  |   |                                       |
| <b>Recommendation #3</b> |   |                                     |  |   |                                       |
| <b>Recommendation #4</b> |   |                                     |  |   |                                       |
| <b>Recommendation #5</b> |   |                                     |  |   |                                       |
| <b>Recommendation #6</b> |   |                                     |  |   |                                       |
| <b>Recommendation #7</b> |   |                                     |  |   |                                       |



## DEMOGRAPHIC DATA

| Student Enrollment        |    | *Nursing Faculty |    |
|---------------------------|----|------------------|----|
| First Year                | 56 | Full-time        | 7  |
| Second Year               | 49 | Part-time        | 0  |
| Third Year                |    | Adjunct          | 14 |
| Fourth Year               |    |                  |    |
| RN-BSN Completion         |    |                  |    |
| Masters in Nursing        |    |                  |    |
| Post-Master's Certificate |    |                  |    |
| Doctoral                  |    |                  |    |

### NCLEX® PASSING PERCENTAGE FOR FIVE (5) YEARS (FOR FIRST-TIME TESTERS)

| Registered Nurse |              |          | Practical Nurse |              |          |
|------------------|--------------|----------|-----------------|--------------|----------|
|                  | # Candidates | % Passed |                 | # Candidates | % Passed |
| 1/14-12/14       | 45           | 87%      | 1/14-12/14      | 56           | 93%      |
| 1/15-12/15       | 35           | 89%      | 1/15-12/15      | 41           | 100%     |
| 1/16-12/16       | 50           | 88%      | 1/16-12/16      | 42           | 100%     |
| 1/17-12/17       | 27           | 85%      | 1/17-12/17      | 36           | 100%     |
| 1/18-12/18       | 35           | 94%      | 1/18-12/18      | 44           | 93%      |

### ADVANCED PRACTICE CERTIFICATION EXAMINATIONS FOR FIVE (5) YEARS

| Certifying Agency: |              |          | Certifying Agency: |              |          |
|--------------------|--------------|----------|--------------------|--------------|----------|
|                    | # Candidates | % Passed |                    | # Candidates | % Passed |
| 1/14-12/14         |              |          | 1/14-12/14         |              |          |
| 1/15-12/15         |              |          | 1/15-12/15         |              |          |
| 1/16-12/16         |              |          | 1/16-12/16         |              |          |
| 1/17-12/17         |              |          | 1/17-12/17         |              |          |
| 1/18-12/18         |              |          | 1/18-12/18         |              |          |

| Certifying Agency: |              |          | Certifying Agency: |              |          |
|--------------------|--------------|----------|--------------------|--------------|----------|
|                    | # Candidates | % Passed |                    | # Candidates | % Passed |
| 1/14-12/14         |              |          | 1/14-12/14         |              |          |
| 1/15-12/15         |              |          | 1/15-12/15         |              |          |
| 1/16-12/16         |              |          | 1/16-12/16         |              |          |
| 1/17-12/17         |              |          | 1/17-12/17         |              |          |
| 1/18-12/18         |              |          | 1/18-12/18         |              |          |

\*Full-time faculty – position which meets full-time employment requirements and receives full-time benefits.

Part-time faculty – position which meets part-time employment requirements and receives part-time benefits.

Adjunct faculty – position which does not meet full-time or part-time requirements.



## FACULTY LIST

| NAME              | IA LICENSE NUMBER & EXPIRATION DATE | STATUS FT/PT | POSITION  | TEACHING RESPONSIBILITIES  | EDUCATION PREPARATION                                     | CURRENT ENROLLMENT TYPE OF PROGRAM AND PROJECTED COMPLETION DATE  | DATE OF HIRE   |
|-------------------|-------------------------------------|--------------|---|--|---|---|--|
| Johanns, Beth     | 087309<br>Ex: 10/15/21              | F/T          | Associate<br>Dean of<br>Health Occu-<br>pations | Administrative and Substitute<br>teach in a bind.  | BSN Complete (2007)<br>MSN Complete<br>(2016)             | N/A   | 7/2018   |
| Ferneau, Janie    | 144655<br>Ex: 5/15/22               | F/T          | Faculty   | <u>Didactic</u> - OB (PN & OB); Peds;<br>(PN & AD) Foundations (AD)<br><u>Clinical Instruction</u> (AD)<br><u>Lab-PN</u><br><u>Simulation</u> (AD)   | BNS Complete (2018)<br>MSN in Progress                    | Enrolled at Purdue Global University<br>Master's Science Nursing Education<br>(in progress)<br>Graduation projected- 2023.          | 8/2019   |
| Killian, Tanya    | 144347<br>Ex: 8/15/21               | F/T          | Faculty   | <u>Didactic</u> - Med/Surg 1, 2, & V (AD)<br><u>Clinical Instruction</u> (AD)<br><u>Lab-PN</u><br><u>Simulation</u> (AD)   | BSN Complete (2017)<br>MSN in Progress                    | Enrolled at Western Governor's Uni-<br>versity<br>Master's Science Nursing Education<br>(in progress)<br>Graduation projected- 2021 | 8/2018 (adjunct)<br>9/2019 (FT)                        |
| Larson, Shelly    | 079978<br>Ex: 4/15/21               | F/T          | Faculty   | <u>Didactic</u> - Family Centered/Mater-<br>nal Newborn (AD)<br>Foundations of Professional Nurs-<br>ing (AD)<br>Adult Client 1 (PN)<br>Adult Client 2 (PN)<br><u>Clinical Instruction</u> (AD)<br><u>Lab- PN</u><br><u>Simulation</u> (PN & AD) | BSN Complete (1988)<br>MS Ed- Complete<br>(2004)          | N/A   | Fall 2001  |
| Stufflebeam, Jill | 092823<br>Ex: 1/15/22               | F/T          | Faculty   | <u>Didactic</u> - Med Surg 1(AD)<br>Pharmacology (PN)<br>Pediatric Nursing Concepts (AD)<br>Transitions to Prof. Nursing (AD)<br><u>Clinical instruction</u> (PN)<br><u>Lab</u> (PN)<br><u>Simulation</u> –Coordinator (PN &<br>AD)              | BSN Complete (1994)<br>MSN-Education –<br>Complete (2008) | N/A   | 2002 (adjunct)<br>2004 (part time)<br>2013 (full time) |
| May, Kathleen     | 068977<br>Ex: 3/15/22               | F/T          | Faculty   | <u>Didactic</u> -Fundamentals (PN)<br>Mental Health Concepts (PN)<br>Psych Mental Health Nursing (AD)<br>Intro to OB & Peds (PN)<br><u>Clinical Instruction</u> (PN & AD)<br><u>Lab</u> (PN)<br>Simulation (PN & AD)                             | BSN- Complete<br>(1981)<br>Master ED-Complete<br>(2004)   | N/A   | 2000 (full time)                                       |





| NAME              | IA LICENSE NUMBER & EXPIRATION DATE | STATUS FT/PT | POSITION         | TEACHING RESPONSIBILITIES  | EDUCATION PREPARATION                                 | CURRENT ENROLLMENT TYPE OF PROGRAM AND PROJECTED COMPLETION DATE  | DATE OF HIRE     |
|-------------------|-------------------------------------|--------------|------------------|--|---|---|------------------|
| Off, Charisse     | 097370<br>Ex: 9/15/20               | F/T          | Faculty          | Didactic: Med Surg 1 (AD)<br>Med Surg 2 (AD)<br>Med Surg V (AD)<br>Clinical Instruction- Med Surg 1 (AD)<br>Med Surg 2 (AD)<br>Lab (PN)<br>Simulation –Coordinator (PN & AD) | BSN- Complete (1996)<br>MSN-Education-Complete (2018) | N/A   | 2013 (full time) |
| Warburton, Monica | 101727<br>Ex: 12/15/22              | F/T          | Faculty          | Didactic: Fundamentals (PN)<br>Leadership (PN)<br>Pharmacology (PN)<br>Adult Client 1 (PN)<br>Adult Client 2 (PN)<br>Clinical- (PN)<br>Lab (PN)<br>Simulation (PN)           | BSN- Complete (1998)<br>MSN-Education –In Progress    | Enrolled at Walden University<br>Master of Science Nursing Education (In progress)<br>Graduation Projected (2020) | 2005 (full time) |
| Larson, Desiray   | 112583<br>Ex: 10/15/22              | P/T          | Clinical Adjunct | Clinical Instruction-<br>Med Surg 1 (AD)<br>Fundamentals (PN)  | BSN- Complete (2016)                                  | N/A   | 2016             |
| Tripp, Brandy     | 106124<br>Ex: 12/15/22              | P/T          | Clinical Adjunct | Clinical Instruction- Fundamentals (PN)  | BSN- Complete   | N/A   | 2018             |
| Hatchett, Shawna  | 144987<br>Ex: 9/15/21               | P/T          | Clinical Adjunct | Clinical Instruction- Med Surg 1 (AD);<br>Adult Client 1 (PN)<br>Fundamentals (PN)   | BSN-complete  | N/A   | 2018             |
| Dawley, Kayla     | 133247<br>Ex: 9/15/21               | P/T          | Clinical Adjunct | Clinical Instruction-<br>Med-Surg 1(AD)  | BNS-Complete (2014)                                   | N/A   | 2015             |
| Anderson, Kathy   | 098095<br>Ex: 2/15/21               | P/T          | Clinical Adjunct | Clinical Instruction-<br>Med-Surg 1 (AD)   | BSN- Complete (2002)                                  | N/A   | 2006             |
| Williams, Jamie   | 107417<br>Ex: 7/15/22               | P/T          | Clinical Adjunct | Clinical Instruction-<br>Med-Surg 1 (AD)   | BSN-Complete (2011)                                   | N/A   | 2006             |
| Gould, Jamie      | 144233<br>Ex: 6/15/21               | P/T          | Clinical Adjunct | Clinical Instruction:<br>Med Surg-1 (AD)   | BSN-Complete (2018)                                   | N/A   | 2018             |
| Ashley Ebersole   | 140498<br>Ex: 11/15/20              | P/T          | Clinical Adjunct | Intro to Pediatrics (PN)<br>Didactic Nursing Concepts (AD)   | AD-Complete (2015)                                    | Enrolled in Western Governor's University for RN-MSN, Nursing Education Track (Start Spring 2020)                 | 2018             |







**Iowa Valley Community College District  
(IVCCD)  
Nursing Program Systematic Evaluation Plan**

2019-2020

**Mission & Administrative Capacity**

**Standard 1:** The vision, mission, & core values of the nursing education unit reflects the governing organization's vision, mission & core values. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified program outcomes.

**Criterion 1.1** The vision, mission, & core values of the nursing education unit reflects the governing organization's core values and is congruent with its vision, mission, & goals.

**Expected Level of Achievement:** There is 100% congruency between the vision, mission and core values of the IVCCD and the IVCCD nursing program.

| <b>Evidence:</b>   |   | <b>Responsibility:</b>  | <b>Time/Frequency cycle:</b>  |
|--|---|---|---|
| IVCCD Catalog and Nursing Student Handbook                       |   | Nursing Director and Faculty  | Every four years or when Nursing or IVCCD makes changes.<br>Due: 2022   |
| <b>Components</b>  | <b>Assessment Methods</b>   | <b>Results</b>  | <b>Action Taken</b>   |
| IVCCD & IVCCD nursing program's vision, mission and core values. | Nursing Director & Faculty will review the vision, mission, & core values. Results are reviewed and changes made as needed. | Completed the review, 8/2018. IVCCD & IVCCD's vision, mission, and core values are reviewed.<br><br>Mission, vision, core values, program philosophy, and program framework were all reviewed and changes were made to align with institutional mission, vision, core values. | Completed throughout 2018-2019 Academic year. Changes approved by Iowa Board of Nursing on July 10 <sup>th</sup> , 2019.<br><br>Updates were made to student handbooks. |
| Internal Program Review  | Submitted formal program review to Academic Deans and   | In depth review of: <ul style="list-style-type: none"> <li>• Curriculum</li> <li>• Program Data</li> <li>• Advisory Committee members/meetings</li> </ul>   | Completed year 1 of 3 year cycle 2019.<br><br>Currently in year 2. Perkins funding awarded and spent.   |

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| <p>Completed 18-19</p> | <p>Presented Summary to all Faculty in 2019.</p> | <ul style="list-style-type: none"> <li>• Community Partners and Resources</li> <li>• Program Articulations</li> <li>• Faculty Development</li> <li>• Assessment of Student Learning Outcomes</li> <li>• Budgetary Planning</li> <li>• External Accreditation Recommendations</li> <li>• SWOT Analysis</li> <li>• Perkins Requests</li> <li>• Summary &amp; Conclusions</li> </ul> | <p><b><u>Purchased the following Items:</u></b></p> <p>Fetal Monitoring and Labor Process Model- (Both campuses- \$1038.00)</p> <p>Edema Trainer- (Both- \$231.00)</p> <p>P.L. Injection Pads (MCC- \$500.00)</p> <p>Medication Cart- (ECC- 2,529.52)</p> <p>IV pump- (ECC- \$2,373.20)</p> <p>Wound care inserts (MCC- 1,995.00)</p> <p>Thigh injections pads (Both- \$94.00)</p> <p>Laerdal Sounds trainer (Both- \$1,500.00)</p> <p>Genitalia Kit (Both- \$360.00)</p> <p>Nursing Annie (MCC- \$4,995.00)</p> <p>Crash Cart (ECC- \$1,496.00)</p> <p>AED (Both- \$737.00)</p> <p>Laminating Machine (Both- \$216.98)</p> <p>Zoom Camera (Both- \$1500.00)</p> <p>HDMI converter (Both- \$240.00)</p> <p>Ipad and Stand (Both- \$1,600.00)</p> <p>HDMI cables ( Both- \$120.00)</p> <p>Display port to HDMI- (Both- \$40.00)</p> <p>75" Display- (Both- \$4,000.00)</p> <p>Display stand (Both- \$1000.00)</p> |
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|  |  |  | <p>Elmo HDMI Inputs (Both \$1,150.00)</p> <p>Zoom Camera for faculty X 8 (Both \$400.00)</p> <p><u>TOTAL= \$28,11570</u></p> <p>Presentation on Results of Program Review to entire Faculty Fall/2019.</p> <p>Assisting with training of faculty whose programs are up for review this year.</p> |
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| <p><b>Criterion 1.2:</b> The governing organization and nursing education unit ensure representation of students, faculty, and the nursing director in ongoing governance activities.</p>                |  |   |  |
| <p><b>Expected Level of Achievement:</b> All, 100% of the time there is opportunity for representation of students, faculty, and the nursing director in ongoing governance activities at IVCCD.</p>     |  |   |  |
| <p><b>Evidence:</b></p> <p>Nursing students, faculty, and nursing director are active participants included on the rosters of governing activities including Advisory Board, and committee meetings.</p> | <p><b>Responsibility:</b></p> <p>Nursing Director</p>                                    | <p><b>Time/Frequency cycle:</b></p> <p>Advisory Board:<br/>Annually in October-Marshalltown Campus<br/>Annually in April-Ellsworth Campus</p>                         | <p><b>Action Taken</b></p> <p>Meeting held per Nursing Department By-Law guidelines.</p> |
| <p><b>Components</b></p> <p>IVCCD nursing committee membership and meeting roster.</p>   | <p><b>Assessment Methods</b></p> <p>Review IVCCD and IVCCD nursing committee roster.</p> | <p><b>Results</b></p> <p>All, 100% of full-time faculty are assigned to at least one departmental committee. Students may be invited per nursing handbook.</p>        | <p><b>Students and faculty actively participate in Advisory Board Activities.</b></p>    |
| <p>IVCCD nursing advisory board membership and meeting roster.</p>   | <p>Review IVCCD advisory board member and meeting roster</p>                             | <p>Two (2) students represent each nursing cohort at the annual Nursing Advisory board meetings. All faculty attend at least one advisory board meeting per year.</p> | <p>Students and faculty actively participate in Advisory Board Activities.</p>           |

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| Curriculum, scheduling, steering and safety committee membership and meeting roster. | Review nursing director's involvement in governance activities. | The nursing director serves on the Scheduling, Quality, Distance Education, and Safety committees of IVCCD.<br><br>Administration is no longer allowed to participate in Faculty Curriculum Meetings on campus (per bargaining agreement). Representatives from the Nursing Faculty carry out duties for the Nursing Program. | Continued participation in committees. |
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**Criterion 1.3:** Communities of interest have input into program processes and decision making.

**Expected Level of Achievement:** All, 100% of communities of interest will have the opportunity for input into program processes and decision making.

| <b>Evidence:</b>                                    |   | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b>  |
|---|---|--|---|
| Nursing advisory board minutes. Clinical Agreements |   | Nursing Director   | Annually in October and April   |
| <b>Components</b>                                   |   | <b>Results</b>   | <b>Action Taken</b>   |
| Nursing advisory board minutes                      | Review distribution list for Nursing Advisory committee participation.<br><br>Review minutes and attendance of Nursing Advisory committee meetings. | Nursing advisory boards meet once on the Marshalltown Community College in the fall and once in the spring on the Ellsworth Community College campus.<br><br>Comments include:<br>* continue to encourage critical thinking in course work<br>* great work with simulation activities<br>* excellent board passage rates<br>* Graduates are well respected and sought after. | Continue to maintain strong relationship with communities of interest so that program improvement is an ongoing process.<br><br>We currently have more clinical sites wishing to host students than we have clinical opportunities. |
| Clinical Agreements                                 | Review contracts for clinical experiences for changes in requirements.  | Clinical contracts have been reviewed. Several health care facilities have up dated their immunization requirements to reflect recommendations from the CDC.   | Contracts were reviewed across the district in 2018. Changes were made to the core agreement and to the nursing addendum. Updated contracts were distributed fall of 2019.  |



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| <b>Criterion 1.4:</b> Partnerships that exist promote excellence in nursing education, enhance the profession, and benefit the community.  |   |                              |
| <b>Expected Level of Achievement:</b> Partnerships will be maintained that serve the nursing program and the community of interest.  |   |                              |
| <b>Evidence:</b>   | <b>Responsibility:</b>                                | <b>Time/Frequency cycle:</b> |
| <p>Clinical Agreements<br/>Preceptorship Agreements (per policy)<br/>Documentation/Observation of partnership results<br/>ACE partnership with Hansen Family Hospital-2019-2024.<br/>Many supporters through nursing scholarships and grant dollars.<br/>Partner with McFarland Clinic to present 'Intro to Health Occupations Day' each fall.<br/>Partnering with Career Academy in Cedar Falls<br/>Guest speakers in area high schools and Middle Schools.<br/>Host a 'Day in the Life' event with Hansen Family Hospital Spring 2020.<br/>Partner with Marshalltown High School and Iowa Veterans Home for nursing apprenticeship. To go live Summer 2020.<br/>Nursing students participate in educating middle school and high school students on health related topics.<br/>Director serves on Intermediary Advisory Board.<br/>Director serves on William Penn Advisory Board.<br/>Director taught 'Intro to Health Occupations' on line class at Marshalltown High School.<br/>Director completed LIFE class (Live Iowa Falls Experience) a 7 month Leadership Experience.<br/>Director serve on Senior Provider Alliance Committee in Marshalltown.<br/>Nursing Club at ECC does many service projects within the Iowa Falls Community</p> | <p>Nursing Director, Faculty &amp; Support Staff.</p> | <p>Ongoing/Continuous.</p>   |

| Components                | Assessment Methods  | Results   | Action Taken  |
|---------------------------|---|---|---|
| Clinical agreements       | Analysis of all clinical agreements to determine the presence of responsibilities of all parties.   | 52 total clinical agreements signed and current. (Not all are used every year, but we like to maintain partnerships.  | Continue to maintain strong partnership with area health care facilities and or agencies. |
| Preceptor Agreements      | Analysis of all clinical agreements to determine the presence of responsibilities of all parties, and to evaluate if a preceptor agreement is needed. | 81 preceptors were used last year. Policy is that if the Preceptor functions under a current clinical contract, a separate preceptor agreement is not needed. (We are currently evaluating this process and expect some changes).   | Continue to maintain strong partnership with area health care facilities and or agencies. |
| Educational Organizations | Discussion to enhance partnerships.   | Established relationship with both Iowa State University and University of Iowa to explore a formal articulation agreement. We also have informal relationships with Chamberlain University, Upper Iowa University, and William Penn University.<br><br>We offer a transfer fair once a year in April and invite Bachelor's Nursing Programs to attend. | Continuous and ongoing.   |

**Criterion 1.5:** The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing.

**Expected Level of Achievement:** The nurse administrator will hold a minimum degree of Masters in Nursing.

| Evidence:                     | Responsibility:                | Time/Frequency cycle:                              |
|-------------------------------|--------------------------------|--|
| Review of college transcripts | IVCCD Dean of Academic Affairs | Upon appointment of IVCCD Dean of Academic Affairs |
| Components                    | Assessment Methods             | Results  |
|                               |                                | Action Taken                                       |

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| Nursing program administrator transcript  | Review of college transcripts  | Beth Johanns, MSN, RN, CIC, CPHQ<br>Associate Dean of Health Occupations at IVCCD holds a Master Degree in Nursing Education from Indiana State University   | Complete.  |
| <b>Criterion 1.6:</b> The nurse administrator is experientially qualified, meets governing organization and state requirements, and is oriented and mentored to the role.   |  |  |  |
| <b>Expected Level of Achievement:</b> The nursing administrator will hold a minimum degree of Masters in Nursing and meet the requirement of the Iowa Board of Nursing (IBON) for PN & ADN program administrator. |  |  |  |
| <b>Evidence:</b>  |  | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b>                       |
| Review of college transcripts and curriculum vitae.<br>Review of Nursing Administrator's job description  |  | IVCCD Dean of Academic Affairs   | Upon appointment of IVCCD Dean of Academic Affairs |
| <b>Components</b>   |  | <b>Results</b>   | <b>Action Taken</b>                                |
| Nursing program administrator transcript<br><br>Nursing program administrator's curriculum vitae.<br><br>IBON requirements of the Nursing Administrator for   | <b>Assessment Methods</b><br><br>IBON Recommendations<br><br>Review of curriculum vitae, college transcripts of nursing administrator.<br><br>Review of chapter 2 rules enforced by the IBON regarding the required qualifications of the nursing administrator. | Beth Johanns, Associate Dean of Health Occupations administers the Nursing Program and has the responsibilities of the director of the PN and ADN program. She holds a Master of Nursing Education Degree and is certified in Infection Control (CIC) and Healthcare Quality (CPHQ). She has 27 years of nursing experience and 15 years of management experience.<br><br>The job description of the Associate Dean of Health Occupations demonstrates administrative authority over faculty assignments, curriculum evaluation and changes, course scheduling, clinical | Continuous and ongoing.                            |

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| <p>PN and AD programs.</p> |  | <p>scheduling, budget development and implementation, liaison with community and regulatory bodies, overall program policy development and changes, faculty recruitment, as well as program goal setting and systematic program evaluation.</p> |  |
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**Criterion 1.7:** When present, nursing program coordinators and/or faculty who assist with program administration are academically and experientially qualified.

**Expected Level of Achievement:** The nursing program coordinator will be qualified with a minimum of a Master's degree in Nursing, hold a current unencumbered Iowa state nursing license, and meet the job description

| <b>Evidence:</b>   | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b>                              |
|--|--|---|
| <p>Review of college transcripts and curriculum vitae. IBON licensure report<br/>IVCCD Associate Dean of Health Occupations job description</p>  | <p>IVCCD Dean of Academic Affairs</p>  | <p>Upon appointment of IVCCD Dean of Academic Affairs</p> |
| <b>Components</b>  | <b>Results</b>   | <b>Action Taken</b>                                       |
| <p>Nursing Program Coordinator Qualifications</p> <p>Review of curriculum vitae, college transcripts, and IBON licensure report.</p> <p>Review of IVCCD Associate Dean of Health Occupations job description</p> | <p>Beth Johanns, Nursing administrator has the responsibilities of the director of the PN and ADN program. She holds a Master of Nursing Education Degree, and an unencumbered Iowa state nursing license. She meets all the qualifications of the IVCCD Associate Dean of Health Occupations job description.</p> | <p>No action needed.</p>                                  |

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| <p><b>Criterion 1.8:</b> 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.</p>   |  |  |  |
| <p><b>Expected Level of Achievement:</b> The nurse administrator will have the authority and responsibility for the development and administration of the program. The nurse administrator will agree there is adequate time and resources to fulfill the role responsibilities</p> |  |  |  |
| <b>Evidence:</b>  |  | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b>   |
| Nursing administrator's job description   |  | IVCCD Dean of Academic Affairs   | Annually in the fall.  |
| <b>Components</b>   | <b>Assessment Methods</b>  | <b>Results</b>   | <b>Action Taken</b>  |
| Nursing Program Administrator Roles, Authority, and Responsibility  | <p>IBON recommendations.</p> <p>The job description of the nursing administrator is analyzed to determine whether authority and responsibility of the nursing program is clearly outlined.</p> | <p>The nursing administrator provides leadership regarding curricular, and budgetary decisions.</p> <p>The nursing director agrees that there is adequate time and resources to fulfill the responsibilities of leading/managing the PN &amp; AD programs.</p> | <p>Annual mentoring, coaching, and goal setting occurs through Catalytic Coaching tool. Reports to Academic Deans at each campus:</p> <p>Patrick Kennedy (MCC)</p> <p>Amanda Estey (ECC)</p> |

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| <b>Criterion 1.9:</b> The nurse administrator has the authority to prepare and administer the program budget with faculty input.  |  |  |  |
| <b>Expected Level of Achievement:</b> The nurse administrator will have the authority to prepare and administer the program budget. The nurse administrator solicits faculty input in preparing and administering the program budget. |  |  |  |
| <b>Evidence:</b>  |  | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b>   |
| Nursing division budget   |  | Nursing Director   | Budgets are prepared and approved during the summer months.  |
| <b>Components</b>   | <b>Assessment Methods</b>                                | <b>Results</b>   | <b>Action Taken</b>  |
| Budgetary process   | Examination of the budget with Dean of Academic Affairs. | Nursing faculty have developed a "wish list" of items that would enhance student learning. Nursing faculty and staff review the nursing needs on an as needed basis. | Continue to evaluate needs/wants yearly. Work within budgetary guidelines set forth by IVCCD.<br><br>Other funding is sometimes available such as Perkins, Levy funding, donations to the foundation, ACE partnership with Hansen Family Hospital, also recently invited to apply for Aspen Award (pending). |

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| <p><b>Criterion 1.10:</b> Policies of the nursing education unit 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.</p> |   |
| <p><b>Expected Level of Achievement:</b> The policies of the nursing unit will be consistent with the policies of the college, unless justified by the nature of the nursing unit and reviewed/ approved by faculty senate</p>  |   |
| <p><b>Evidence:</b></p>   |   |
| <p>IVCCD faculty policies and nursing program faculty policies.</p>   | <p><b>Responsibility:</b><br/>IVCCD Administration and Nursing Director</p>   |
| <p><b>Time/Frequency cycle:</b><br/>Annually</p>  |   |
| <p><b>Components</b></p>  |   |
| <p>Consistency of policies.</p>   | <p><b>Assessment Methods</b><br/>Comparative analysis of the policies of IVCCD Employee Handbook and the Nursing Faculty Handbook. Results are examined to identify level of agreement.</p> |
| <p><b>Results</b><br/>All policies of the nursing program are comprehensive, provide for the welfare of faculty and staff and are consistent with those of IVCCD; differences are justified by the goals and outcomes of the nursing program.</p>                                     |   |
| <p><b>Action Taken</b><br/>Continue to update handbook yearly to ensure cohesiveness between IVCCD and nursing program.</p>   |   |

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| <p><b>Criterion 1.11:</b> Distance education, when utilized, is congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit.</p> |  |   |
| <p><b>Expected Level of Achievement</b> Distance education will be 100% congruent to the mission of the college and the nursing education unit.</p>                                    |  |   |
| <p><b>Evidence:</b></p>  |  |   |
| <p>IVCCD distance education policies.</p>  |  |   |
| <p><b>Responsibility:</b></p>  |  |   |
| <p>Nursing Director and faculty.</p>   |  |   |
| <p><b>Time/Frequency cycle:</b></p>  |  |   |
| <p>With development or revision of on-line nursing courses.</p>  |  |   |
| <p><b>Components</b></p>   |  |   |
| <p>Consistency of policies.</p>  | <p><b>Assessment Methods</b></p> <p>The Nursing Department adheres to the distance education policies of IVCCD. On-line courses are audited by the Academic Dean to ensure compliance with best practices.</p> | <p><b>Results</b></p> <p>College On-line policies are followed.</p> |
|  |  | <p><b>Action Taken</b></p> <p>Ongoing and continuous.</p>           |



| <b><u>Faculty &amp; Staff</u></b>   |  |  |
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| <p><b>Standard 2:</b> Qualified and credentialed faculty are sufficient in number to ensure the achievement of the student learning outcomes and program outcomes. Sufficient qualified staff are available to support the nursing education program.</p> <p><b>Criterion 2.1:</b> Full and part-time faculty includes those individuals teaching and/or evaluating students in the classroom, clinical, or laboratory settings. Full-time faculty hold a minimum of a graduate degree with 50% or greater holding a Master in Nursing (MSN).</p> <p><b>Expected Level of Achievement</b> All, 100% of nursing faculty are qualified and meet the needs of the program.</p> |  |  |
| <b><u>Evidence:</u></b>   | <b><u>Responsibility:</u></b>  | <b><u>Time/Frequency cycle:</u></b>  |
| IBON recommendations<br>Job descriptions<br>Faculty transcripts   | Nursing Director   | Upon hire and annually with faculty review.  |
| <b><u>Components</u></b>  | <b><u>Assessment Methods</u></b>   | <b><u>Action Taken</u></b>   |
| Full-time faculty credentials   | Review IBON recommendations.<br>Review of faculty transcripts.   | With any future hiring of a full-time nursing faculty member a MSN degree will be a mandatory requirement or be working towards a MSN degree showing progression annually. |
|   | <b><u>Results</u></b>  |  |
|   | As of fall 2019, 2 nursing faculty have earned an MSN degree & 3 are presently working on earning an MSN. Two hold MEd degrees. All above faculty are at full-time status. |  |

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| <b>Criterion 2.2:</b> Part-time faculty holds a minimum of a baccalaureate degree with a major in nursing        |  |   |  |
| <b>Expected Level of Achievement</b> All 100% of the part-time faculty hold or are working towards a BSN degree. |  |   |  |
| <b>Evidence:</b>   |  | <b>Responsibility:</b>  | <b>Time/Frequency cycle:</b>   |
| IBON recommendations<br>Job descriptions<br>Faculty transcripts  |  | Nursing Director  | Upon hire and annually with faculty review.  |
| <b>Components</b>  |  | <b>Assessment Methods</b>   | <b>Action Taken</b>  |
| Part-time faculty credentials  | Review IBON recommendations.<br>Review of faculty transcripts. | <b>Results</b><br>As of fall 2019 one part-time nursing faculty member is working towards an AD-MSN (Nursing Education).<br>All other's hold BSN. | With any future hiring of a part-time nursing faculty member a BSN degree will be a mandatory requirement or be working towards a BSN degree showing progression annually. |

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| <b>Criterion 2.3:</b> Faculty (full and part-time) credentials meet governing organization and state requirements.             |  |   |   |
| <b>Expected Level of Achievement</b> All, 100% of the full and part-time nursing faculty maintains an Iowa state RN licensure. |  |   |   |
| <b>Evidence:</b>   |  | <b>Responsibility:</b>  | <b>Time/Frequency cycle:</b>                |
| Unencumbered RN license  |  | Nursing director  | Upon hire and annually with faculty review. |
| <b>Components</b>  |  | <b>Assessment Methods</b>   | <b>Action Taken</b>                         |
| Faculty credentials  | Review of faculty, full and part-time, personnel files for an unencumbered Iowa RN license.<br><br>Used online verification on IBON website. | <b>Results</b><br>All, 100% of nursing faculty, full and part-time, have an unencumbered Iowa RN license. | Next scheduled review Summer 2020.          |

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| <p><b>Criterion 2.4:</b> Preceptors, when utilized, are academically and experientially qualified, oriented, mentored, and monitored, and have clearly documented roles and responsibilities.</p> <p><b>Expected Level of Achievement:</b> All, 100% of preceptors will receive documentation of their roles and responsibilities. All, 100% of preceptors will be academically and experientially qualified to fulfill their roles and responsibilities. All, 100% of preceptors will be mentored and oriented by an assigned faculty member. All, 100% of preceptors will be monitored by an assigned faculty member.</p> |  |  |
| <p><b>Evidence:</b></p> <p>Completion of training for first time preceptors.<br/>Preceptor credentials<br/>Completion of nursing faculty documentation of preceptor visit.<br/>Preceptor handbook</p>   |  |  |
| <p><b>Responsibility:</b></p> <p>Nursing Director &amp; course faculty mentor</p>   |  |  |
| <p><b>Time/Frequency cycle:</b></p> <p>Throughout each preceptorship experience</p>   |  |  |
| <p><b>Action Taken</b></p> <p>Evaluate each Spring prior to Preceptor assignments.</p>  |  |  |
| <p><b>Results</b></p> <p>All, 100% of preceptors hold a nursing license, PN or RN depending upon course requirements. All, 100% preceptors possess the abilities required to fulfill their roles and responsibilities.</p>  |  |  |
| <p><b>Assessment Methods</b></p> <p>Review of current preceptor licensure to assess their ability to fulfill their roles and responsibilities.</p>  |  |  |
| <p><b>Components</b></p> <p>Preceptor credentials</p>   |  |  |
| <p><b>Results</b></p> <p>A better process for tracking who are first time preceptors. Looking at utilizing a preceptor/student agreement for each individual.<br/>Visits were made to the preceptors but without documentation. Will work on process improvement for documentation of site visits (Beginning Summer 2020).</p>  |  |  |
| <p><b>Assessment Methods</b></p> <p>Review of completed preceptor orientation for first time preceptors.<br/>Review of nursing faculty visit documentation.</p>   |  |  |
| <p><b>Components</b></p> <p>Roles, training, and visit documentation.</p>   |  |  |
| <p><b>Results</b></p> <p>A committee has been formed to develop a workable orientation and training program with documentation. This committee also will be developing an evaluation tool of the preceptor to be completed upon their required visits.</p>  |  |  |

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| <b>Criterion 2.5:</b> The number of full-time faculty is sufficient to ensure that the student learning outcomes and program outcomes are achieved.                  |  |
| <b>Expected Level of Achievement</b> All, 100% of Nursing Program courses will have adequate faculty to enable achievement of student learning and program outcomes. |  |
| <b>Evidence:</b>   |  |
| Faculty assignments<br>Clinical assignment schedules   |  |
| <b>Responsibility:</b>   |  |
| Nursing Director   |  |
| <b>Time/Frequency cycle:</b>   |  |
| Each semester  |  |
| <b>Action Taken</b>  |  |
| Reviewed each semester.  |  |
| <b>Components</b>  | <b>Assessment Methods</b>  |
| Faculty load sheets.   | Review of faculty assignments  |
|  | <b>Results</b>   |
|  | Program outcomes are achieved with the number of full-time faculty and adjuncts instructors. Loads are distributed among faculty in an equitable and efficient manner to reliably achieve student learning outcomes.<br><br>IVCCD nursing program follows IBON mandate that clinical groups have no more than 8 students per faculty member. |

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| <b>Criterion 2.6:</b> Faculty (full and part-time) maintains expertise in their areas of responsibility and their performance reflects scholarship and evidence-based teaching and clinical practices.  |  |   |   |
| <b>Expected Level of Achievement</b> All, 100% of full and part-time faculty will maintain expertise in their areas of responsibility. Eighty percent (80%) of full and part-time faculty will engage in professional development activities. Eighty percent (80%) of full and part-time faculty performance will reflect scholarship and evidence-based teaching and clinical practices. |  |   |   |
| <b>Evidence:</b>  | <b>Responsibility:</b>                   | <b>Time/Frequency cycle:</b>  |   |
| Faculties' Curriculum Vitae<br>Faculty professional development documents<br>Peer Review<br>Performance Appraisal<br>Renewal of current licensure   | Nursing director and nursing faculty     | Each semester   |   |
| <b>Components</b>   | <b>Assessment Methods</b>                | <b>Results</b>  | <b>Action Taken</b>   |
| Application of knowledge  | Review of curriculum vitae               | Faculty have updated curriculum vitae within their files.   | Nursing faculty will be required to complete an updated curriculum vitae annually.  |
|   | Review of professional development plans | Professional development plans were developed and provided to the Academic Deans.   | Professional development plans to be completed per institutional Personal Professional Plan Guidelines.<br><br>Several workshops are offered by the College each year.<br><br>Several workshops are offered to Nursing Faculty each year.<br><br>Faculty are encouraged to attend other conferences to support Professional Development and money is set aside to assist with this. |
|   | Peer review documents                    | To foster collaboration between faculty through a formative and developmental approach. Allows peers to provide instructional, collegial, and professional support to team members. | Peer review are to be completed annually. See Peer to peer review policy for guidelines.  |

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|  | Performance Review | The nursing director and faculty review performance appraisals. | Performance appraisals completed every other year by Associate Dean of Health Occupations. |
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**Criterion 2.7:** The number, utilization, and credentials of staff and non-nurse faculty within the education unit are sufficient to achieve the program goals and outcomes.

**Expected Level of Achievement:** The Nursing Program will have sufficient staff and non-nurse faculty to achieve the program goals and outcomes.

| <b>Evidence:</b>  | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b>  |
|---|--|---|
| Program is staffed sufficiently so that it runs smoothly, has faculty loads evenly distributed per institutional guidelines (30-36 load hours), and personnel designated for the Administration of the program. | Nursing director   | Reviewed annually and as needed.  |
| <b>Components</b>   | <b>Assessment Methods</b>  | <b>Results</b>  |
| Sufficiency of staff and non-nurse faculty  | Review of staff and non-nurse faculty job descriptions and credentials | <p>New (2018) Associate Dean of Health Occupation has management experience and is able to meet the demands of the position. Nursing department has sufficient staff and non-nurse faculty to achieve the program goals and outcomes. Some responsibilities were redistributed related to clinical scheduling, recruiting, and advising.</p> <p>All students are actively advised by Nursing faculty at least once per semester. The 0.5 faculty position at ECC was not filled for over a year so was discontinued. Administrative assistant that was working a .75 FTE was increased to full time at ECC and took over clinical scheduling responsibilities. The administrative assistant at MCC was only in the Nursing Department 0.5, however, she is now located in Nursing Department full time.</p> |
| <b>Components</b>   | <b>Assessment Methods</b>  | <b>Action Taken</b>   |
|   |  | Ongoing assessment- CQI model.  |

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|  | Faculty participated in a strengths assessment and load assignments were adjusted to increase efficiency, expertise, and faculty satisfaction. |  |
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| <b>Criterion 2.8:</b> Faculty (full and part-time) are oriented and mentored in their areas of responsibilities.            |  |   |
| <b>Expected Level of Achievement:</b> All, 100% of faculty complete orientation after hire and are provided with mentoring. |  |   |
| <b>Evidence:</b>  |  |   |
| Nursing faculty handbook<br>IVCCD faculty handbook<br>Orientation and mentoring processes                                   | <b>Responsibility:</b><br>Nursing director & IVCCD Academic Dean   | <b>Time/Frequency cycle:</b><br>Completed with new faculty hire |
| <b>Components</b>   | <b>Assessment Methods</b>  | <b>Action Taken</b>   |
| Faculty orientation and mentoring   | Review of full time faculty orientation attendance and Orientation/Mentor Checklist  | Continue to assess needs of new faculty and respond as needed.  |
|   | <p>Full time faculty orientation and mentoring are carried out in accordance with the policy guidelines of IVCCD. New faculty members are guided through a structured orientation process.</p> <p>New faculty members attend a District orientation presented by HR and Administration. Mission, Vision, Core Values, Institutional Learning Outcomes, and Marketing services, are covered.</p> <p>New faculty members meet at least twice with Associate Dean of Health Occupations exclusively to discuss expectations, questions, and processes. New faculty are scheduled to observe veteran faculty teach class and simulation, and review orientation checklist.</p> <p>All faculty participate in district wide staff meetings held monthly, as well as, full day workshops held at least 3 times per year.</p> |   |



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|  |  | Education is set up related to Blackboard, ATI, SLS, Jenzabar training (Advising notes), CurricUNET, and WEAVE. |  |
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| <b>Criterion 2.9:</b> Systematic assessment of faculty (full time & adjunct) performance demonstrates competencies that are consistent with program goals and outcomes.   |  |   |   |
| <b>Expected Level of Achievement</b> All, 100% of faculty (full time & adjunct) demonstrate competencies that are consistent with program goals and outcomes as measured by systematic performance reviews on a two year rotation for full/part-time, one-year rotation for adjunct instructors. Eighty percent (80%) of faculty will receive satisfactory student evaluations. |  |   |   |
| <b>Evidence:</b>  |  | <b>Responsibility:</b>  | <b>Time/Frequency cycle:</b>  |
| Faculty performance appraisal forms and policies  |  | Nursing Director and Human Resources<br>Although I meet with adjuncts regularly and visit them on site, improvements need to be made for better documentation of eval process and site visits. Students are required to evaluate classroom and clinical instructors. These evals are compiled by Director, aggregated and distributed to the faculty. | Two year rotation for part-time & full-time faculty<br>One year rotation for adjunct instructors  |
| <b>Components</b>   | <b>Assessment Methods</b>  | <b>Results</b>  | <b>Action Taken</b>   |
| Professional development  | Review of faculty professional development plans.  | Professional development plans have been completed by faculty and provided to the academic deans.   | Continue to follow polices related to faculty evaluations.  |
| Performance evaluation  | Performance appraisal as specified by faculty contract which include:<br>Self-evaluation | All, 100% of full time and part-time nursing faculty have been evaluated per policy outside of peer evaluation.   | Peer review evaluations are to be completed along with self, student and nursing director evaluations.<br><br>Continue to obtain student evaluations of adjunct instructors as well as including an evaluation by the nursing director on-site. |

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|  | Student evaluations<br>Nursing director evaluation<br>Peer evaluation | At present, adjunct clinical instructors have been evaluated by students, but not every adjunct has had an onsite eval by the nursing director. | All student feedback is aggregated and shared with clinical and classroom instructors. |
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**Criterion 2.10:** Faculty engages in ongoing development and receives support for instructional and distance technologies.

**Expected Level of Achievement** All, 100% of faculty will have access to support for instructional and distance technologies.

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| <b>Evidence:</b>  |  | <b>Responsibility:</b><br>Nursing director  | <b>Time/Frequency cycle:</b><br>Annually  |
| Faculty professional development plans                      |  |   |   |
| <b>Components</b>   | <b>Assessment Methods</b>                | <b>Results</b>  | <b>Action Taken</b>   |
| Faculty engage in ongoing development in distance education | Review of professional development plans | IVCCD provides workshops related to distance education. Faculty are strongly encouraged to participate.<br><br>IVCCD has a distance education coordinator who is available for teaching and assistance when needed. | Address as needed.<br><br>New distance formats are being explored. Appears that we will change formats from Blackboard to Canvas. Training will be offered for all faculty. |

**Students**

**Standard 3.** Student policies, development, and services support the goals and outcomes of the nursing education unit.

**Criterion 3.1:** Student policies of the nursing education unit are congruent with those of the governing organization, publicly accessible, non-discriminatory, and consistently applied; differences are justified by the program outcomes.

**Expected Level of Achievement** Student policies of the nursing program will be in alignment with those of the college with any exceptions justified by student learning and program outcomes.

| <b>Evidence:</b>  |  | <b>Responsibility:</b>  | <b>Time/Frequency cycle:</b>  |
|---|--|---|---|
| Nursing Handbooks<br>IVCCD Catalog<br>IVCCD Student Handbook<br>IVCCD Student Code of Conduct<br>Nursing course syllabi |  | Nursing director and IVCCD Academic Deans   | Annually or when changes are made.  |
| <b>Components</b>   | <b>Assessment Methods</b>  | <b>Results</b>  | <b>Action Taken</b>   |
| Congruence and accessibility of policies.   | Review and compare student policies in the IVCCD student handbook, catalog, and Student Code of Conduct with the Nursing Student Handbook and Course Syllabi.<br><br>Signed student acknowledgement of receipt and understanding of Nursing Student Handbook contents. | Student policies of the IVCCD nursing program are consistent with those of IVCCD college, student handbook, and syllabi.<br><br>Student policies are publicly accessible. | Policies and expectations are reviewed with students on the first day of each new class or an orientation day.<br><br>Policies are reviewed annually prior to publication of handbook.<br><br>Policies were discussed and updated at the December 2019 workshop. A few discrepancies were noted between the PN and AD handbook. Tanya Killian is making the agreed upon edits and combining the handbooks into one document. Due by May 2020. |

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| <b>Criterion 3.2:</b> Public information is accurate, clear, consistent, and accessible.  |  |   |   |
| <b>Expected Level of Achievement</b> All, 100% of public information about the IVCCD Nursing Program will be accurate, clear, consistent, and accessible. |  |   |   |
| <b>Evidence:</b>  |  | <b>Responsibility:</b>  | <b>Time/Frequency cycle:</b>  |
| IVCCD Nursing Department website<br>IVCCD Nursing Department marketing fliers<br>IVCCD Nursing Orientation material<br>IVCCD Nursing Handbook             |  | Nursing Director  | Ongoing and continuous. Catalog edits must be submitted in January the year before the change will go into effect.  |
| <b>Components</b>   |  | <b>Results</b>  | <b>Action Taken</b>   |
| Public information  | <p>Review of:</p> <ul style="list-style-type: none"> <li>IVCCD Nursing Department website</li> <li>Marketing fliers.</li> <li>Nursing Orientation materials</li> <li>IVCCD Nursing Handbook</li> </ul> | <p>Every attempt is made to have 100% of public information concerning the IVCCD Nursing program is accurate, clear, consistent, and accessible.</p> <p>Currently there is a discrepancy between program fliers and college catalog related to curriculum change in Spring 2019. The catalog deadline for changes is in January, and the curriculum approval process was not complete until Fall of 2020.</p> | <p>Fliers updated with current course names and numbers.</p> <p>Catalog will be updated for 20-21 Academic year. Jimmy Reyes was notified at the Iowa Board of Nursing related to discrepancy with catalog.</p> <p>Appropriate paperwork completed so that registrar can document correct course completed.</p> |

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| <p><b>Criterion 3.3:</b> Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.</p> <p><b>Expected Level of Achievement:</b> All, 100% of program and policy changes are communicated to students by distribution of student handbook or revised policies to all students in their new term. Any changes at other times, will be communicated through the IVCCD email or handouts in classroom.</p> |  |   |
| <p><b>Evidence:</b></p> <p>Nursing Handbook<br/>IVCCD Nursing Department website<br/>Printed nursing program documents</p>  |  |   |
| <p><b>Responsibility:</b></p> <p>Nursing Director, staff, and faculty</p>   |  | <p><b>Time/Frequency cycle:</b></p> <p>Annually</p>                             |
| <p><b>Components</b></p> <p>Communication of changes in the programs, and /or policies and procedures.</p>  |  |   |
| <p><b>Assessment Methods</b></p> <p>Review of communication networks.</p> <p>Review of the Student Satisfaction Survey.</p> <p>Review of clinical, faculty, and program evaluations.</p>  |  | <p><b>Action Taken</b></p> <p>Continue to revise and communicate as needed.</p> |
| <p><b>Results</b></p> <p>Changes of program and policy have been communicated during orientation when the Nursing Program handbook is reviewed.</p>   |  |   |

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| <b>Criterion 3.4:</b> Student services are adequate in meeting the needs of nursing students, including those receiving instruction using alternative methods of delivery. |   |  |  |
| <b>Expected Level of Achievement</b> All, 100% of IVCCD Student Services are available to nursing students.  |   |  |  |
| <b>Evidence:</b>   |   | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b>   |
| IVCCD Nursing handbook<br>Nursing evaluation form  |   | Nursing director & faculty   | Annually in the fall semester  |
| <b>Components</b>  | <b>Assessment Methods</b>   | <b>Results</b>   | <b>Action Taken</b>  |
| Access to services   | Review IVCCD student services offered<br><br>Review Student Evaluation Survey | All, 100% of students have had access to student services. However, evaluation surveys indicate there are limited services related to nursing tutoring.<br><br>Student Success Center-<br>Counseling services offered to students free of charge.<br><br>Reasonable accommodations for qualifying students | Discussing possibility of hiring retired nursing staff as part time tutors for nursing content. Funding has been secured for this option and Dean of Academic Affairs has approved.<br><br>Math remediation set up for fundamentals students identified in need. |

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| <b>Criterion 3.5:</b> Student educational records are in compliance with the policies of the governing organization and state and federal guidelines.         |  |   |                              |
| <b>Expected Level of Achievement:</b> All, 100% of student educational records are in compliance with IVCCD policies and state and federal guidelines (FERPA) |  |   |                              |
| <b>Evidence:</b>  |  | <b>Responsibility:</b>  | <b>Time/Frequency cycle:</b> |
| Student Educational Records   |  | Nursing director & IVCCD registrars   | Annually                     |
| <b>Components</b>   |  | <b>Assessment Methods</b>   | <b>Action Taken</b>          |
| Student Educational Records   | Annually review student record compliance with IVCCD registrars. | Results<br>Student records are in compliance with policies of IVCCD and FERPA guidelines. | Ongoing evaluation.          |

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| <b>Criterion 3.6:</b> Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements are maintained, including default rates and the results of financial or compliance audits. |  |   |                              |
| <b>Expected Level of Achievement</b> IVCCD will maintain compliance with the Higher Education Reauthorization Act Title IV eligibility and certification.   |  |   |                              |
| <b>Evidence:</b>  |  | <b>Responsibility:</b>  | <b>Time/Frequency cycle:</b> |
| Higher Education Reauthorization Act Title IV.  |  | Nursing director/IVCCD Financial Aid Advisors                                 | Annually                     |
| <b>Components</b>   | <b>Assessment Methods</b>  | <b>Results</b>  | <b>Action Taken</b>          |
| Financial records   | Review compliance with IVCCD financial services<br><br>Report of U.S. Department of Education annual audit<br><br>Review of annual official default rate | IVCCD is in compliance with the Higher Education Reauthorization Act Title IV | No action needed             |



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| <p><b>Criterion 3.6.1:</b> A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.</p>   |   |  |   |
| <p><b>Expected Level of Achievement</b> All, 100% of students who have loans will have a written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders available</p> |   |  |   |
| <p><b>Evidence:</b></p> <p>Student Loan Repayment Program</p>  |   | <p><b>Responsibility:</b></p> <p>IVCCD Financial Aid Advisors</p>  | <p><b>Time/Frequency cycle:</b></p> <p>Annually</p> |
| <p><b>Components</b></p> <p>Student loan responsibilities</p>  | <p><b>Assessment Methods</b></p> <p>Review compliance with IVCCD Financial Services.<br/>Report of U.S. Department of Education annual audit.</p> | <p><b>Results</b></p> <p>All, 100% of student that have loans receive a written, comprehensive student loan repayment program addressing student loan information counseling, monitoring, and cooperation with lender.</p> | <p><b>Action Taken</b></p> <p>No action needed.</p> |

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| <b>Criterion 3.6.2:</b> Students are informed of their ethical responsibilities regarding financial assistance.   |  |                              |
| <b>Expected Level of Achievement</b> All, 100% of students who apply for loans will be informed of their ethical responsibilities upon completion of application. |  |                              |
| <b>Evidence:</b>  | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b> |
| Information of ethical financial responsibilities   | IVCCD Financial Aid Advisors   | Annually                     |
| <b>Components</b>   | <b>Assessment Methods</b>  | <b>Action Taken</b>          |
| Ethical financial responsibility  | <p>Review compliance with IVCCD Financial Services.</p> <p>Report of U.S. Department of Education annual audit.</p>  | No action needed             |
|   | <b>Results</b>   |                              |
|   | <p>All students have been informed of their ethical responsibilities regarding financial assistance.</p> <p>We have a financial advisor come into the classroom again in second semester to review the financial responsibility of the students.</p> |                              |

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| <b>Criterion 3.6.3:</b> Financial aid records are maintained in compliance with the policies of the governing organization, state, and federal guidelines.  |  |   |  |
| <b>Expected Level of Achievement</b> All, 100% student financial aid records are in compliance with policies related to the maintenance of those records by the governing organization and state, and federal guidelines. |  |   |  |
| <b>Evidence:</b>  |  | <b>Time/Frequency cycle:</b>  |  |
| Financial records   |  | Annually  |  |
| <b>Responsibility:</b>  |  | <b>Action Taken</b>   |  |
| IVCCD Financial Aid Advisors  |  | No action needed  |  |
| <b>Assessment Methods</b>   |  | <b>Results</b>  |  |
| Review compliance with IVCCD Financial Services.  |  | All student's financial aid records are maintained at IVCCD in compliance with policies of IVCCD and state, and federal guidelines. |  |
| <b>Components</b>   |  |   |  |
| Maintenance of financial aid records  |  |   |  |

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| <b>Criterion 3.7:</b> Records reflect that program complaints and grievances receive due process and include evidence of resolution.  |   |  |  |
| <b>Expected Level of Achievement</b> All, 100% of student grievances will receive due process with evidence of attempt at resolution. |   |  |  |
| <b>Evidence:</b>  |   | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b>   |
| Student grievances and program complaints documentation.  |   | Nursing director & IVCCD Academic Dean   | Annual and when applicable.  |
| <b>Components</b>   | <b>Assessment Methods</b>   | <b>Results</b>   | <b>Action Taken</b>  |
| Due processes related to grievances and complaints<br><br>Document on Student conference form and Advising notes if applicable.       | Review documentation of all student and program grievances for due process and resolution.<br><br>Review grievance policy and procedures. | All, 100% of students received due process with any grievances or complaints.<br><br>Meet with students when complaint occurs.<br>Document both parties comments/concerns. | Provide impartial disposition, fact finding, referrals, and follow up. |

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| <b>Criterion 3.8:</b> Orientation to technology is provided and technological support is available to students.                                       |   |   |                                 |
| <b>Expected Level of Achievement</b> Orientation to technology available to 100% of students. Technical support will be available to 100% of students |   |   |                                 |
| <b>Evidence:</b>  |   | <b>Responsibility:</b>  | <b>Time/Frequency cycle:</b>    |
| Orientation to technology information (IT) in print and within the IVCCD webpage.<br>Information technology helpdesk ticket procedure                 |   | Nursing director/IT administrator   | Beginning of each cohort start. |
| <b>Components</b>   | <b>Assessment Methods</b>   | <b>Results</b>  | <b>Action Taken</b>             |
| Orientation to technology utilized at IVCCD   | Review of Student Evaluation surveys<br><br>Review of orientation program related to technology resources required for nursing students<br><br>Review materials: print, online, tutorials available to students related to technology | Mandatory orientations were scheduled for each nursing cohort. All Elsevier-Evolve products were introduced along with the company's tech support information. ATI products were introduced as well as the company's tutorials and tech support information. Blackboard instructions were given along with tutorial written material.<br><br>Services related to IVCCD technical support were reviewed. | Individual attention as needed. |

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| <b>Criterion 3.9:</b> Information related to technology requirements and policies specific to distance education is clear, accurate, consistent, and accessible.                                   |   |  |                     |
| <b>Expected Level of Achievement</b> All, 100% of students involved with on-line instruction will have accurate, clear, consistent, and accessible information related to technology requirements. |   |  |                     |
| <b>Evidence:</b>   |   | <b>Time/Frequency cycle:</b>   |                     |
| On-line orientation materials  |   | Annually   |                     |
| <b>Responsibility:</b>   |   | <b>Action Taken</b>  |                     |
| Nursing director & faculty   |   | Unable to access on line student evaluations. We have had to administer via paper. This process is time consuming and cumbersome. Survey Monkey license will be purchased Spring 2020 to assist in more timely and anonymous student evaluations.                                    |                     |
| <b>Components</b>  | <b>Assessment Methods</b>   | <b>Results</b>   | <b>Action Taken</b> |
| Student on-line technology orientation.  | Review of Student Evaluation Surveys.<br><br>Review materials: print, online, tutorials available to students related to classes with on-line delivery. | All, 100% of students involved with on-line instruction have accurate, clear, consistent, and accessible information related to technology requirements.<br><br>Director has Blackboard access to all on-line portions of classes, student grades, materials, and reviews regularly. |                     |

### Curriculum

**Standard 4.** The curriculum prepares students to achieve the outcomes of the nursing education unit, including safe practice in health care environments.

**Criterion 4.1:** The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning and program outcomes consistent with safe practice.

**Expected Level of Achievement** Side-by-side comparison of the nursing student learning and program outcomes and current professional standards, guidelines and competencies indicate they are congruent.

| <b>Evidence:</b>   |  | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b>   |
|--|--|--|--|
| Nursing program outcomes<br>Nursing student's learning outcomes<br>Current professional standards, guidelines and competencies | Nursing director & curriculum committee  | Annually   |  |
| <b>Components</b>  | <b>Assessment Methods</b>  | <b>Results</b>   | <b>Action Taken</b>  |
| Professional standards, guidelines, and competencies   | <p>Review listed guidelines, standards, and competencies for updates and changes.</p> <p>Review nursing student &amp; program outcomes for congruency with updated guidelines, standards, and competencies and revise curriculum as necessary.</p> | <p>We are always trying to improve our graduation rates and board passage rates. These benchmarks indicate readiness for professional competency. Each cohort has unique strengths and weaknesses, and requires agility to meet their needs.</p> <p>Our board passage rates went down this past year. We had 8 AD students fail. They were evenly distributed across both campuses. We had a weak class last year for some reason. We are now offering an optional NCLEX review course after graduation through HURST Review. We are also using data from ATI predictor to target curriculum strengths and weaknesses. We are adding 'Shadow Health' products to enhance critical thinking skills.</p> <p>It is possible that we are giving too much information and that the students cannot assimilate all of it. I have funding available to subscribe to 'Keith RN' to assist the faculty in recognizing relevant need to know vs. nice to know information.</p> | <p>Nursing personnel target instruction to encompass four types of learning. <i>Visual learners</i> benefit from videos, Powerpoints, note taking, demonstrations, pictures, diagrams, concept maps, anatomical models, and written instructions. <i>Auditory learning</i> is enhanced through live lectures, recorded lectures, and open discussions in class. <i>Kinesthetic learning</i> is a program strength. Students begin with skills labs, where they get considerable hands-on practice. They progress to the simulation lab where they become a dynamic part of an unfolding case study. Clinical hours are required throughout the program and include patient care in settings such as geriatrics, medical surgical, acute care, obstetrics, pediatrics, mental health, and community health nursing. Students who learn best by reading and writing have many opportunities to take notes, complete study guides, submit written assignments, research topics, and read from textbooks. The Program utilizes technology through use of electronic medical records, high fidelity mannequins, and computer-based learning. The program will add virtual simulation next year using a realistic Avatar to promote critical thinking that appeals to students through its similarity to a video game.</p> <p>Student learning outcomes are included in every syllabi. Rubrics and checklists are used to ensure objective grading. Faculty advise</p> |

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|  | All courses were reviewed this year and updates were put into Meta.   | <p>all Nursing students. Marshalltown Community College has an early alert system for at-risk students, and makes referrals to the Academic Success Center. Based on recent student learning outcome data, the Program made changes to address weak math skills. Required remediation allowed the Program to retain several students. Leadership and professionalism are very important to the Nursing Program. Expectations are reviewed on the first day of class and high standards for promptness, appearance, and communication are enforced at clinical sites. An eight week course entitled Leadership and Professional Nursing reinforces these concepts</p> <p>WEAVE software program purchased and utilized for documentation. Student Learning Outcome projects are entered into WEAVE by each faculty member for their course.</p> <p>Alignment achieved 2019. Mapped out courses to be assessed over 3 year cycle.</p> |
|  | College wide initiative to work on alignment of learning outcomes with institution, program, and course outcomes. |   |

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| <b>Criterion 4.2:</b> The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.   |                              |
| <b>Expected Level of Achievement</b> Nursing student learning outcomes & program outcomes will be utilized to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress. |                              |
| <b>Evidence:</b>   | <b>Time/Frequency cycle:</b> |
| Program learning outcomes<br>Student learning outcomes<br>Course syllabi   | Each semester                |
| <b>Components</b>  | <b>Assessment Methods</b>    |
| Nursing director, curriculum committee, Academic Dean  | <b>Results</b>               |
|  | <b>Action Taken</b>          |



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| Student learning & Program outcomes | Outcomes are examined to ensure clarity, adequate depth and scope, relevance to nursing practice, measurability, and alignment with institutional outcomes.  | Nursing outcomes were revised and approved in 2019 during the Program review process.  | Revisit annually.  |
| Curriculum organization             | All courses are examined for the relationship of course competencies to program outcomes. Organization of courses, student learning and program outcomes are analyzed to determine that: outcomes are clearly articulated; arranged in a logical fashion with rationale for sequencing; designed to promote student achievement. | All courses are scheduled to be examined over a three year cycle to ensure that outcomes are being met. Data used from this analysis are used to drive curriculum changes. Continuous Quality Improvement model. | Continuous and ongoing.  |
| Learning activities                 | Course syllabi are examined for student learning activities and the related learning/course competencies to determine if the activities are designed to promote achievement of outcomes.   | Student learning activities promote the achievement outcomes. As mentioned previously, different student cohorts may need adjustment to delivery methods of material to achieve outcomes.                        | Continuous Quality Improvement model. "That went well, what can we do better". Formative and Summative reflection and review of student evaluations. Teaching methods adjusted for each cohort and their learning needs. Utilize lecture, skills drills, labs checkouts, return demonstration, clinical (patient care), assignments, simulation lab, Technology (ATI, SLS, Sim Chart, Epic Training, Shadow Health, community education, etc). |

**Criterion 4.3:** The curriculum is developed by the faculty and regularly reviewed for rigor and currency.

**Expected Level of Achievement.** All, 100% of the Nursing Department faculty will be involved in curriculum development and review, chaired by the curriculum committee.

**Evidence:**

**Responsibility:**

**Time/Frequency cycle:**

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| <p>Course syllabi<br/>NCLEX test plan<br/>ATI comprehensive test results<br/>Student learning outcomes<br/>Program outcomes</p>   | <p>Nursing director, Nursing Faculty &amp; Curriculum committee</p>  | <p>Annually</p>  |
| <p><b>Components</b></p>  | <p><b>Results</b></p>  | <p><b>Action Taken</b></p>   |
| <p>Curriculum development and review</p>  | <p>Faculty have participated in workshops geared toward the upcoming changes for Next Gen State Board testing.</p> <p>Review of data and comments from departing students were the driving force behind the curriculum change from 2 separate 8 week courses, to one 16 week course.</p> | <p>Revised curriculum (Combined 8 week courses into 16 week course).</p> <p>Best practices explored. Incorporated closed book, open book and collaborative tests to improve development of critical thinking.</p> <p>Adding shadow health products which use an Avatar and allow the student to practice therapeutic communication, safety, triaging, and critical thinking skills.</p> <p>Workshop where each faculty member had to present at least one interactive, hands on learning activity to share with group.</p> <p>ATI workshop and challenged faculty to incorporate at least two new ATI activities in their classrooms.</p> <p>Expanded simulation and case study activities to promote collaboration.</p> <p>Challenged hybrid instructors to update all lectures, using cameras, instead of voiceover, powerpoints, and patient centered scenarios.</p> <p>Expanded instructor face to face hours for hands on activities and review of content covered on-line.</p> |
| <p>Review of:<br/>- Course Syllabi<br/>-NCLEX test plan/results<br/>-ATI comprehensive test results<br/>-IVCCD Nursing outcomes<br/>-Comments from Advisory Board about Employment readiness<br/>-Attrition Data/<br/>Exit Interviews</p> | <p>Reviewed on-line content of Hybrid classes.</p>   |  |

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

**Expected Level of Achievement:** All, 100% of required General Education Courses provides foundation for nursing knowledge, practice, and advancement

| <b>Evidence:</b>  |   | <b>Responsibility:</b>  | <b>Time/Frequency cycle:</b>   |
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| Attrition rates<br>TEAS test scores<br>Evaluation of nursing unit test scores |   | Nursing director & curriculum committee   | Annual- at selection time.   |
| <b>Components</b>   | <b>Assessment Methods</b>   | <b>Results</b>  | <b>Action Taken</b>  |
| General education courses.  | <p>Review attrition rates and variables to ensure students are being adequately prepared for the program.</p> <p>Review nursing class unit test scores to assess student's readiness to be successful in the nursing program.</p> <p>Review data for all exiting students. Look at grades in pre-reqs, TEAS or ACT scores, grades at time of departure.</p> | <p>Attrition rates for 2018:<br/>-PN 23%<br/>-AD 23%</p> <p>Test scores are dropping in areas of:<br/>- math scores<br/>-writing skills</p> <p>Attrition spreadsheet.</p> | <p>Review general education course outcomes. Consider additional training in basic math &amp; writing skills prior to students entering the nursing program.</p> <p>Targeting higher level students in recruiting efforts. Advising early and often. Utilizing remediation if scores fall below a certain level.</p> <p>Offered state board review class for both PN and AD students. Class was optional, but available. Will offer again this year immediately following conclusion of program.</p> <p>Program readiness is a major challenge at the community college, especially with the rigor and need for knowledge of scientific principles in Nursing programs. The Nursing Program has established admissions requirements to address the needed preparation. Applicants must have a 2.7 grade point average in all Nursing prerequisites and at least a C- in each course. All science courses included in the curriculum must be within ten years of admission. For entrance into the first rung of the ladder program students must achieve at least an 18 on ACT exam or minimum scores on the Test of Essential Academic Skills exam (Reading- 47.6 percent; Mathematics 46.7 percent; Science 33 percent; and English and Language Usage 40 percent.) Because Nursing is a complex profession and safe practice is required from graduates, students must earn a grade of at least 80 percent in each Nursing course to advance. The Student Success Center offers math and reading remediation. English is a second language for many of our students, so we identify at-risk students early and refer them to the Success</p> |

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|  |  |  | Center. The College also provides accommodations for students that qualify. Faculty advise each student on effective study strategies. Each class is unique and faculty adjust teaching techniques to meet the needs of each cohort. Class sizes are small and students receive individual attention. |
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| <b>Criterion 4.5:</b> The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives. |  |  |   |
| <b>Expected Level of Achievement</b> All, 100% of nursing courses will incorporate concepts related to cultural, ethnic, and social diversity.                                  |  |  |   |
| <b>Evidence:</b>  |  |  |   |
| Course syllabi<br>IVCCD student learning outcomes   |  | <b>Responsibility:</b><br>Nursing director & curriculum committee  | <b>Time/Frequency cycle:</b><br>Annual  |
| <b>Components</b>   | <b>Assessment Methods</b>  | <b>Results</b>   | <b>Action Taken</b>   |
| Diversity concepts  | Review of<br>-Course Syllabi<br>-Course Evaluations<br>relative to IVCCD<br>Student Learning<br>Outcomes related to<br>diversity | The curriculum includes cultural, ethnic, and socially diverse concepts including content on ethnicity, race, income, age, health, intellectual abilities, physical disabilities, gender identity, and cultural differences. | Expanded clinical experiences to larger metro areas to allow exposure to diverse patient populations.<br><br>Striving to improve diversity in Advisory Board Membership.<br><br>Marshalltown Community College targets several populations for equity in access and success. The College was recognized by Excellencia in Education and the Hispanic Association of Colleges and Universities as an Emerging Hispanic-Serving Institution (EHSI) in 2015 and 2019. The College's current Hispanic enrollment is approximately 17 percent of the student body. The College aims to have 25 percent Hispanic enrollment by 2025, to earn the Hispanic Serving Institution (HSI) designation. The marketing department posted news releases about the EHSI designation. A subcommittee branded a logo and a color theme for outreach and marketing activities planned throughout the year targeting Hispanic speaking students. The marketing phrase is "MCC es para mi" (MCC is for me).<br><br>The Meskwaki Native American Sac and Fox Tribe of the Mississippi in Iowa, located 17 miles from Marshalltown, is another |

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|  |  |  | <p>underrepresented population in the District. The College partners with the Meskwaki Higher Education Program to help promote post-secondary education and career training opportunities for the Meskwaki people. There are several scholarship opportunities for Meskwaki members, including healthcare related scholarships. Meskwaki high school students are eligible to participate in concurrent enrollment courses.</p> <p>Overall, males are underrepresented in the Nursing profession both nationally and at the College. In recent years the College has developed posters and advertisements featuring MCC graduates and current nursing students. The Nursing fliers were updated this summer. Radio ads are aired during Iowa State Cyclone and Iowa Hawkeye football broadcasts as well as on four local radio stations. The Nursing Program was also featured on an MCC TV/Digital Commercial in addition to 30 social media posts featuring nursing students in January 2019.</p> <p>Marshalltown Community College values and honors military veterans. Veterans have a designated advisor, a dedicated lounge with computer and printer access, and a student organization called Collegiate Veterans Association. The Student Senate purchases red, white, and blue honors cords for veterans to be worn with their graduation regalia. The Student Senate also sponsors group activities throughout the academic year and provides financial support to send student veterans to a national conference. A Veterans Day celebration and meal is held annually in November.</p> |
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| <b>Criterion 4.6:</b> The curriculum and instructional processes reflect educational theory, interprofessional collaboration, research, and current standards of practice.                |  |   |  |
| <b>Expected Level of Achievement</b> The curriculum and instructional processes reflect educational theory, interprofessional collaboration, research, and current standards of practice. |  |   |  |
| <b>Evidence:</b>  |  | <b>Responsibility:</b>  | <b>Time/Frequency cycle:</b>   |
| Advisory board minutes<br>Curriculum plan<br>Course syllabi   | Nursing director & faculty   | Annually  |  |
| <b>Components</b>   | <b>Assessment Methods</b>  | <b>Results</b>  | <b>Action Taken</b>  |
| Review of educational theory, educational best practices, and technology advances.  | Curriculum review and comparison of educational theory, educational best practices, and technology advances.<br>Examination of feedback from Advisory Board members, and Clinical Site contacts and instructors. | Advisory board feedback reflect students are being adequately prepared in the standards of nursing practice. Suggestions recommended focusing on prioritizing care, and leadership responsibilities. These are more difficult concepts to learn and involve a certain level of mentorship and experience.<br><br>Interprofessional collaboration is achieved at many different levels. Nursing students are active in the community by administering hundreds of vaccines in infant, adult, and workplace vaccination clinics. Students attend a conference on dependent adult and child sexual abuse and shadow school nurses to better understand their complexity of their positions. Students visit the National Alliance on Mental Health site and practice therapeutic communication with clients. Nursing students participate in school health fair events at various local high schools, preparing lessons on healthy living for children of different age groups. Nursing students met with state | Revised curriculum (Combined 8 week courses into 16 week course).<br><br>Best practices explored. Incorporated closed book, open book and collaborative tests to improve development of critical thinking.<br><br>Adding shadow health products which use an Avatar and allow the student to practice therapeutic communication, safety, triaging, and critical thinking skills.<br><br>Workshop where each faculty member had to present at least one interactive, hands on learning activity to share with group.<br><br>ATI workshop and challenged faculty to incorporate at least two new ATI activities in their classrooms.<br><br>Expanded simulation and case study activities to promote collaboration.<br><br>Challenged hybrid instructors to update all lectures, using cameras, instead of voiceover, powerpoints, and patient centered scenarios. Expanded instructor face to face hours for hands on activities and review of content covered on line. |



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|  |  | The college hosts a large Career Fair and the Nursing Program hosts a Transfer Fair. Local employers and baccalaureate programs are invited to attend and recruit talent. |  |
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| <b>Criterion 4.7:</b> Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning.                            |   |  |  |
| <b>Expected Level of Achievement</b> Evaluation methodologies are varied and appropriate. Side-by-side comparison of these evaluation strategies with the program learning outcomes are congruent. |   |  |  |
| <b>Evidence:</b>   |   | <b>Time/Frequency cycle:</b>   |  |
| Course syllabi<br>Evaluation tools<br>CSLO projects in WEAVE   | <b>Responsibility:</b>  | Each Semester  |  |
|  | Nursing director, faculty, Academic Deans   |  |  |
| <b>Components</b>  | <b>Assessment Methods</b>   | <b>Results</b>   | <b>Action Taken</b>  |
| Varied methods to determine the various methods of evaluation used in theory, clinical, & lab instruction.   | Course syllabi are examined to determine the various methods of evaluation used in theory, clinical, & lab instruction. | <p>Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes.</p> <p>Evaluation methodologies include but are not limited to:</p> <ul style="list-style-type: none"> <li>-Unit exams</li> <li>-Final exams</li> <li>-Standardized exams</li> <li>-Group presentations</li> <li>-Written work</li> <li>-Simulation</li> <li>-Clinical performance</li> <li>-Math exams</li> <li>-Medication administration lab test</li> <li>-Skills lab test</li> <li>-Case studies</li> <li>-skills drills</li> </ul> | <p>Continuous and ongoing. Everything we do is purposeful and helps to ensure student learning outcomes are being achieved. This is a dynamic process depending on cohort interaction.</p> <p>In March 2019 the college had a workshop to complete these two tasks:</p> <ol style="list-style-type: none"> <li>1.) Develop a curriculum map that ties courses to PSLO's</li> <li>2.) Develop a curriculum map that ties PSLO's to ISLO's.</li> </ol> <p>Nursing can be found on IVCCD Sharepoint/Assessment of Student Learning Folder/program_CurriculumMap_Nursing</p> <p>Each instructor is required to do an assessment project on every course outcome over a 3 year period. Individuals Instructor schedules can also be found on Sharepoint/Assessment of Student Learning Folder/2019 March 8 CSLO Assessment Schedule. (2</p> |



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|  | <p>presentations to high school audience</p> <ul style="list-style-type: none"> <li>-Technology (ATI, Shadow Health, SLS, Electronic Medical Records, Pyxis and Omnicell training)</li> </ul> | <p>folders). These schedules align with the specific semester that the courses are being taught.</p> <p>All CSLO work is documented in WEAV software system. This allows the Deans and Director to review projects.</p> |
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**Criterion 4-8:** The length of time and the credit hours required for program completion are congruent with the attainment of identified student learning outcomes, program outcomes and are consistent with the policies of the governing organization, state and national standards, and best practices.

**Expected Level of Achievement.** The program length is congruent with the attainment of identified outcomes and consistent with the policies of the governing organization, state and national standards and best practices.

| <b>Evidence:</b>                        | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b>   |
|---|--|--|
| Program plan of study<br>IVCCD outcomes | Nursing director, faculty, Academic Deans  | Annual   |
| <b>Components</b>                       | <b>Assessment Methods</b>  | <b>Action Taken</b>  |
| Program length and credit hours.        | Review the program of study and required credit hours.   | Continue to assess. Analyze data from ATI comprehensive predictor, Hurst Review, student evaluations, attrition rates, and state board pass rates. |
|   | <p>Program length is congruent with the attainment of identified outcomes and consistent with the policies of the governing organization, state, and national standards and best practices.</p> <p>Total credits:<br/>-PN 47.5<br/>-AD 86.5</p> <p>Program length<br/>-PN 2 semesters + 5 week summer session<br/>-AD 2 semesters + 5 week summer session<br/>(Does not include prerequisite courses in time frame).</p> |  |

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| <b>Criterion 4.9:</b> Practice learning environments support the achievement of student learning outcomes and program outcomes.   |  |   |
| <b>Expected Level of Achievement</b> All, 100% of faculty and students will have the opportunity to evaluate their experiences related to the skill lab, varied clinical sites, and simulation lab. |  |   |
| <b>Evidence:</b>  | <b>Responsibility:</b>                             | <b>Time/Frequency cycle:</b>  |
| Skill lab evaluations<br>Clinical evaluations<br>Clinical simulation evaluations  | Nursing director & faculty                         | Following each course/clinical/sim lab  |
| <b>Components</b>   | <b>Assessment Methods</b>                          | <b>Action Taken</b>   |
| Skill lab experiences   | Review skill lab evaluations.                      | Checklists used for evaluation.   |
| Student clinical experiences  | Review Clinical Site Evaluations.                  | Evaluations are reviewed by director, aggregated and disseminated to instructors. All results comments are anonymous. |
| Student simulated clinical experiences  | Review Simulated Clinical Experiences Evaluations. | Evaluations are reviewed by director, aggregated and disseminated to instructors. All results comments are anonymous. |

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| <b>Criterion 4.10:</b> Students participate in clinical experiences that are evidenced-based and reflect safe practice with nationally established patient health and safety goals.                             |  |
| <b>Expected Level of Achievement:</b> All, 100% of students participate in clinical experiences that are evidenced-based and reflect safe practice with nationally established patient health and safety goals. |  |
| <b>Evidence:</b>  |  |
| Clinical schedules<br>Clinical evaluations  | Nursing director & faculty   |
| <b>Time/Frequency cycle:</b><br>Each semester   |  |
| <b>Responsibility:</b>  |  |
| <b>Assessment Methods</b>   |  |
| Clinical experience   | Review clinical experiences and complete side-by-side review for evidence based experiences reflecting safe practice with nationally established patient health and safety goals.  |
| <b>Results</b>  |  |
| Clinical experience   | <p>Clinical experiences have been reviewed by faculty for best-practices reflecting safe practice with nationally established patient health and safety goals.</p> <ul style="list-style-type: none"> <li>Identify patients correctly (2 forms)</li> <li>Improve Staff Communication (relay pertinent information to right person)</li> <li>Use medicines safely (label medications, extra care with pt. who take meds that thin blood, Med Rec and teaching)</li> <li>Use alarms safely (heard and responded to)</li> <li>Prevent Infection (Hand hygiene, use proven guidelines for resistant infections, CLABSI's, prevention of SSI's and CAUTI).</li> <li>Identify patient safety risks (suicide, braden, falls)</li> <li>Prevent mistakes in surgery (Time out, Surgical site marked)</li> </ul> |
| <b>Action Taken</b>   |  |
| Clinical experience   | <p>Based on student feedback and some concerns, change in adjunct faculty assignments were made.</p> <p>Several new high quality adjuncts were hired. Use of adjuncts that raised concerns was discontinued.</p> <p>Active recruiting of high quality, skilled, and professional nurses was undertaken to hire qualified adjuncts.</p> <p>Associate Dean of Health Occupations spends time going over student handbook with new adjuncts, and touring facility with them. More support is given through email communication.</p> <p>Lead faculty meet with adjuncts to go over course expectations, skills checklists, and assignments.</p>  |

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|  | <p>Students receive evaluation on clinical performance.</p> <p>Students are required to evaluate clinical instructors and facilities.</p> |  |
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| <p><b>Criterion 4.11:</b> Written agreements for clinical practice agencies are current, specify expectations for all parties, and ensure the protection of students.</p>                       |   |  |
| <p><b>Expected Level of Achievement</b> All, 100% of clinical practice agency contracts will be current, with specific expectations of all parties, and will ensure protection of students.</p> |   |  |
| <p><b>Evidence:</b></p>   |   |  |
| Clinical contracts  | Nursing director  | Each semester  |
| <p><b>Components</b></p>  |   |  |
| Clinical contracts  | <p><b>Assessment Methods</b></p> <p>Review of all clinical practice agency contracts.</p> | <p><b>Results</b></p> <p>All, 100% of clinical practice agency hold a current contract with IVCCD.</p>   |
|   |   | <p><b>Action Taken</b></p> <p>All clinical scheduling is being done by consistent staff. (Administrative Assistant and Associate Dean of Health Occupations). This helps ensure that contracts are being checked to ensure they are current prior to start of clinical experience.</p> <p>New form distributed at December workshop for better documentation of preceptor selection. Form includes that the faculty member assigning preceptors verify the license on line, makes sure that either a clinical contract or preceptor agreement is</p> |

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|  |  |  | in place and that the first time preceptor completes the training module. Preceptor handbooks are also distributed to all preceptors. |
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| <b>Criterion 4.12:</b> Learning activities, instructional materials, and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes.                |   |  |   |
| <b>Expected Level of Achievement:</b> Learning activities, instructional materials, and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes. |   |  |   |
| <b>Evidence:</b>  |   | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b>  |
| IVCCD outcomes<br>Course evaluations  |   | Nursing director & faculty   | Course evals are done at the end of each semester.  |
| <b>Components</b>   | <b>Assessment Methods</b>   | <b>Results</b>   | <b>Action Taken</b>   |
| Learning activities, instructional materials, and evaluation methods.   | Review of course evaluations.<br>Review delivery format and verify outcomes are being achieved. | Best practices explored. Incorporated closed book, open book and collaborative tests to improve development of critical thinking.<br>Adding shadow health products which use an Avatar and allow the student to practice | Continuously assessing and adapting to needs of cohorts.<br>Continuous quality improvement model.<br>Look at strengths and preferences of each faculty member for course assignments. |

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| <p>Test scores.<br/>Course grades.<br/>Board pass rates.<br/>Attrition rates.<br/>Review of text books.</p> | <p>therapeutic communication, safety, triaging, and critical thinking skills.</p> | <p>Workshop where each faculty member had to present at least one interactive, hands on learning activity to share with group.<br/><br/>ATI workshop and challenged faculty to incorporate at least two new ATI activities in their classrooms<br/><br/>Expanded simulation and case study activities to promote collaboration.<br/><br/>Challenged hybrid instructors to update all lectures, using cameras, instead of voiceover, powerpoints, and patient centered scenarios.<br/>Expanded instructor face to face hours for hands on activities and review of content covered on line.<br/><br/>Course evals, Clinical instructor evals, and clinical site evals are shared with the instructors and facilities. This feedback was previously not being shared. This closes the loop on communication, and assists instructors to evaluate their delivery methods and approachability.</p> |
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| <p style="text-align: center;">Resources</p> <p><b>Standard 5:</b> Fiscal, physical, and learning resources are sustainable and sufficient to ensure the achievement of the student learning outcomes and program outcomes of the nursing education unit.</p> <p><b>Criterion 5.1:</b> Fiscal resources are sustainable, sufficient to ensure the achievement of the student learning outcomes and program outcomes, and correspond with the resources of the governing organization.</p> <p><b>Expected Level of Achievement.</b> All, 100% of staff, full-and part-time faculty positions required to fulfill student learning and program outcome needs will be budgeted for annually.</p> |   |
| <p><b>Evidence:</b><br/>Nursing budget</p>  | <p><b>Responsibility:</b><br/>Nursing director &amp; IVCCD Academic Dean</p> <p><b>Time/Frequency cycle:</b><br/>Annual</p> |
| <p><b>Components</b></p>  | <p><b>Assessment Methods</b></p>  |
| <p><b>Results</b></p>   | <p><b>Action Taken</b></p>  |

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| <p>Fiscal resources:<br/>Personnel</p>  | <p>Review nursing program annual budget annually.</p>  | <p>Continuously monitor the best use of our money, for effective education while keeping costs down for students. This takes a lot of work and is an ongoing effort. I continue to learn more about budgeting and best practices in education.</p> <p>Fiscal responsibility also increases confidence and respect among faculty and increases job satisfaction.</p> |
| <p>Many financial resources are available to our program. The Iowa Valley Community College District is a committed steward of the resources it receives and works diligently to keep the cost of college affordable for the residents of its district. Tuition costs for the District are significantly lower than those of public and private baccalaureate institutions. Tuition is \$178.00 per credit hour and, with various fees, the average student pays about \$2500.00 for tuition each semester. On-campus student housing and meal plans are also offered. The College offers a number of scholarships through its foundation, including several that are designated to assist only Nursing students (to a total of \$30,300.00).</p> | <p>A <b>Nursing Emergency Fund</b> helps to address unexpected needs for continuing students to enable students to complete their programs and succeed. Nursing students also have access to the <b>Pathways for Academic Career Employment (PACE)</b> program, which assists with the cost of education, housing, food, and healthcare; provides advising for academic and career decisions; provides assistance with employment search processes; and provides referrals to off-campus resources. To qualify for PACE funding, a student must be unemployed or underemployed, a dislocated worker, have low skill levels, or have an income below 250% of poverty level. <b>TRIO</b> is a set of federally funded programs designed to ensure equal educational opportunities. TRIO Student Support Services are available for first generation students and those with documented disability or demonstrate financial need. TRIO students receive advising; meet and build relationships with other students; learn financial skills, including understanding credit card use and managing student loan debt; gain leadership skills; and obtain academic and personal support.</p> | <p>The Foundation is very generous giving the nursing program both scholarships and funding</p>   |

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|  | <p>for innovative new approaches to teaching nursing.</p> <p>The school district recently passed a bond referendum to update, beautify, and modernize the facilities across the district.</p> <p>The Ellsworth campus has entered a partnership with Hansen Family Hospital and has access to nearly \$20,000 annually for the next 5 years. This is being used to purchase state of the art equipment, for professional development, improvements to classrooms, developing a "Boot Camp" for interested high school students, setting up an advanced simulation lab at the hospital, and recruiting events and marketing materials.</p> <p>As mentioned before, the college Perkins Funding Committee was extremely supportive and generous allowing us to purchase classroom and sim lab equipment across the district. The Zoom Equipment enhances interaction between campuses making us feel like one team rather than two teams that work together sometimes. It has also enhanced our ability to communicate with students via distance education. This is especially true at the ECC campus where we run a hybrid program in the AD year. Last winter the weather was terrible for our students and we had to cancel classes frequently in the Spring semester. The faculty feels this may have contributed to our lower board passage rates. The Zoom equipment will allow the teacher to either record a lecture for asynchronous viewing or do a virtual class to prevent falling behind and rushing through important material.</p> <p>We were selected to apply for the ASPEN award at the MCC campus. This would be another major funding source if we would happen to receive it. \$25,000 for scholarships, and \$25,000 for program improvements.</p> |  |
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| <b>Criterion 5.2:</b> Physical resources are sufficient to ensure the achievement of the nursing education unit outcomes and meet the needs of faculty, staff, and students.   |  |
| <b>Expected Level of Achievement</b> Physical resources (classroom, laboratories, offices, etc.) are sufficient to ensure the achievement of the nursing education unit outcomes and meet the needs of faculty, staff, and students. |  |
| <b>Evidence:</b>   | <b>Responsibility:</b>   |
| Nursing budgets<br>Student evaluation of program<br>IVCCD student outcomes   | Nursing director & IVCCD Academic Dean   |
| <b>Time/Frequency cycle:</b>   | Annually (Budgets due in June). Continuously assess the best use of our resources.   |
| <b>Components</b>  | <b>Action Taken</b>  |
| Physical resources   | The District worked very hard to get the Bond referendum to pass. It was placed on the ballot two different times. The Bond passed in November 2019. A district wide survey was taken to prioritize the projects for the best use of our dollars. This will improve the safety, beauty, and comfort for our students to learn.   |
| <b>Assessment Methods</b>  | <b>Results</b>   |
| Student evaluations assessed for satisfaction with physical resources.<br>Assess student outcomes related to the availability of physical resources.   | Physical resources (classrooms, laboratories, offices, etc.) are sufficient to ensure the achievement of the nursing education unit outcomes and meet the needs of faculty, staff, and students. Although the campuses need some much needed improvements, Nursing classrooms and sim labs have always been a priority and are the most pleasant work spaces on both campuses. |

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| <b>Criterion 5.3:</b> Learning resources and technology are selected with faculty input and are comprehensive, current, and accessible to faculty and students.   |   |
| <b>Expected Level of Achievement</b> All, 100 % of faculty will have the opportunity for input into the Nursing Department budget recommendations. Eighty percent of faculty and students will agree that learning resources and technology are comprehensive, current, and accessible. |   |
| <b>Evidence:</b>  |   |
| Instructional resources<br>Student program evaluation<br>Faculty wish list  | Responsibility:<br>Nursing director & faculty   |
| <b>Time/Frequency cycle:</b><br>Annually  |   |
| <b>Action Taken</b><br>Continuous and ongoing.  |   |
| <b>Components</b>   | <b>Assessment Methods</b>   |
| Instructional resources   | Student evaluations assessed for satisfaction with instructional resources.<br><br>Faculty assessed for satisfaction with instructional resources.  |
|   | <b>Results</b><br>Faculty have the opportunity for input into the Nursing Department budget recommendations. Eighty percent of the faculty and students agree that learning resources and technology are comprehensive, current and accessible.<br><br>Since we were eligible for Perkins Funding this year, and have additional funding from ACE relationship with Hansen Family Hospital, we have had several brainstorming sessions to discuss wants and needs that would best serve our students. |

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| <p><b>Criterion 5.4:</b> Fiscal, physical, technological, and learning resources are sufficient to meet the needs of faculty and students engaged in alternative methods of delivery.</p> <p><b>Expected Level of Achievement</b> Eighty percent of students will agree that technology, technology assistance and learning resources were adequate. Eighty percent of faculty will agree that technology, technology assistance and learning resources were adequate for preparation and delivery of content through alternative methods.</p> |  |  |
| <p><b>Evidence:</b></p> <p>Learning resources of delivery of content through alternative methods<br/>Student program evaluation</p>  |  |  |
| <p><b>Responsibility:</b></p> <p>Nursing director &amp; faculty</p>  |  |  |
| <p><b>Time/Frequency cycle:</b></p> <p>Each semester.</p>  |  |  |
| <p><b>Components</b></p> <p>Resources for alternative delivery methods</p>   |  |  |
| <p><b>Assessment Methods</b></p> <p>Student evaluations assessed for satisfaction with technology and the delivery of content through alternative methods.</p> <p>Faculty assessed for satisfaction with technology and the delivery of content through alternative methods.</p>   |  |  |
| <p><b>Results</b></p> <p>Eighty percent of the faculty and students agree that learning resources and technology are comprehensive, current and accessible.</p> <p>ATI<br/>Sim Chart<br/>SLS<br/>EPIC training<br/>Shadow Health- virtual sim<br/>Simulation lab-high, medium, and low fidelity manikins.<br/>Blackboard- changing to Canvas next year.<br/>Omnicell and Pyxis training</p>  |  |  |
| <p><b>Action Taken</b></p> <p>Technology is always evolving. We have had a faculty workshop for ATI this year as well as a workshop for Shadow Health. One cohort is trialing Shadow Health to evaluate its effectiveness.</p> <p>Research being done to purchase a mock medication dispensing unit (such as Omnicell or Pyxis) to be used in the sim lab.</p> <p>Continue to evaluate new products to make sure we are using the best available.</p>  |  |  |

**Outcomes**

**Standard 6:** Program evaluation demonstrates that students and graduates have achieved the program outcomes, and role specific graduate competencies of the nursing education unit.

**Criterion 6.1:** The systematic plan for evaluation (SEP) of the nursing education unit emphasizes the ongoing assessment and evaluation of each of the program outcomes & role specific graduate competencies.

**Expected Level of Achievement:** The systematic plan of evaluation emphasizes the ongoing assessment and evaluation of the program outcomes and role specific graduate competencies.

| <b><u>Evidence:</u></b>                                 |   | <b><u>Responsibility:</u></b>   | <b><u>Time/Frequency cycle:</u></b>   |
|---|---|---|---|
| Systematic Program Evaluation Plan for nursing program. |   | Nursing director & evaluation committee                                 | Annually  |
| <b><u>Components</u></b>                                | <b><u>Assessment Methods</u></b>  | <b><u>Results</u></b>   | <b><u>Action Taken</u></b>  |
| Written SEP document                                    | Review of the SEP working document  | Most recent SEP Completed Fall/2019.                                    | <p>Areas of needed improvement have been identified through this process. They include:</p> <ul style="list-style-type: none"> <li>• Obtaining updated resumes from active adjuncts.</li> <li>• Reviewing all checklists for skills labs as an evaluation tool</li> <li>• Implement a specific preceptor agreement in addition to the clinical contract, improve documentation for preceptor training and site visits. Complete new spreadsheet provided by director when faculty is scheduling preceptorship experiences.</li> <li>• Improve AD Board Pass Rates.</li> </ul> |
| Implementation of plan                                  |   | Reviewed at Feb. 6, 2020 Faculty Meeting.                               | Ongoing. Continuous Quality Improvement model. This is a working document that changes frequently.  |
| Evaluation of plan                                      | Examination and analysis of the SEP to ensure the plan was implemented as written, on time, and results utilized. | Evaluation of the current plan reviewed at Feb. 6, 2020 Faculty Meeting | Review scheduled for 2.6.20.  |

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| <b>Criterion 6.2:</b> The program demonstrates evidence of achievement in meeting the program outcomes & competencies.                        |  |
| <b>Expected Level of Achievement:</b> Graduates demonstrate achievement of program outcomes and competencies appropriate to role preparation. |  |
| <b>Evidence:</b>  | <b>Responsibility:</b>   |
| NCLEX pass rates<br>End of program evaluation<br>Employer surveys   | Nursing director & evaluation committee  |
| <b>Time/Frequency cycle:</b>  | Annually   |
| <b>Components</b>   | <b>Action Taken</b>  |
| <b>Assessment Methods</b>   | <b>Results</b>   |
| NCLEX pass rates<br>Review NCLEX pass rates:<br>Goal of 95% of national average.  | <b>2019 – PN 93%</b> (2 failed- both from MCC)<br><b>2019 – PN 93%</b> (2 failed- both from MCC)<br>The Iowa Pass Rate percentage for PN 2019 was 95.6 so we are below the Iowa average for the first time in many years,<br><br>The National Pass rate percentage for PN 2019 was 85.63 so we are above the National average.<br><br><b>2019-AD 84%</b> . (8 failed- 5 from ECC/3 from MCC)<br>Five have retaken – (3 have failed a second time).<br><br>The Iowa Pass Rate percentage for 2019 was 87% so we fall below the Iowa average for the first time in many years.<br><br>The National Pass Rate percentage for 2019 was 85.17% so we fall below the National Pass rate for the first time in many years.<br><br>We are still within 95% of the National Average which would fall at 80.91%. |
|   | Continue to strive for higher AD NCLEX pass rates. Target specific weak areas noted in the ATI Comprehensive predictor. Analyze data from HURST review to further identify weak areas.<br><br>Although we are hopeful that the 2019 results are representative of outliers, we are focusing on specific areas of weakness and encouraging a comprehensive state board review class upon graduation.<br><br>We also hope to utilize Zoom equipment in the event that the courses would fall behind related to inclement weather.  |

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| End of program evaluation | Review end of program evaluation for areas of strengths and areas of improvement.                               | Students overall are very satisfied with their educational experience at IVCCD. Many of them return to work for us as either clinical site instructors, classroom instructors or preceptors.<br>Comments include:<br>Implement a second start time each year and offer a part time program for working students. | Actively recruiting high performing students into our program. It is our hope to grow the program so that we can offer a second start time. If a student needs to repeat a course, they would not have to wait an entire year. This wait is not ideal as they lose much of the knowledge they have gained by being away from the field for a year. This requires financial analysis, staffing analysis, and analysis of student learning outcomes.  |
| Advisory evaluations      | Access employer surveys and evaluate their comments during the meeting for areas of strengths and improvements. | Employers share overall they are satisfied with IVCCD nurses abilities.<br>Comments include:<br>Teach critical thinking skills   | <p>Trialing Shadow Health to improve critical thinking skills.</p> <p>Utilizing more case studies in courses to improve critical thinking skills.</p> <p>Utilize a combination of Closed, Open, and Collaborative exams to improve critical thinking skills.</p> <p>Faculty have attending 2 Next Gen conferences this year to prepare our students better for the upcoming changes.</p> <p>Provide education to hospitals related to mentoring student nurses, and explain the development of critical thinking skills takes practice and experience so that the nurses have realistic expectations of new nurses.</p> |

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| <b>Criterion 6.3:</b> The program demonstrates evidence of graduates' achievement on the licensure examination.                          |                        |
| <b>Expected Level of Achievement:</b> The program's licensure pass rate will be equal or exceeds 95% of the national passing percentage. |                        |
| <b>Evidence:</b>   | <b>Responsibility:</b> |
| <b>Time/Frequency cycle:</b>   |                        |

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| NCLEX Pass Rates                         |   | Nursing director  | Annually  |
| <b>Components</b>                        | <b>Assessment Methods</b>                                     | <b>Results</b>  | <b>Action Taken</b>   |
| NCLEX Pass Rates:<br>-IVCCD<br>-National | Compare IVCCD NCLEX pass rates with those compiled nationally | <p><b>2019 – PN 93%</b> (2 failed- both from MCC)</p> <p>The Iowa Pass Rate percentage for PN 2019 was 95.6 so we are below the Iowa average for the first time in many years,</p> <p>The National Pass rate percentage for PN 2019 was 85.63 so we are above the National average <b>2019-AD 84%</b>. (8 failed- 5 from ECC/3 from MCC) Five have retaken –(3 have failed a second time).</p> <p>The Iowa Pass Rate percentage for AD 2019 was 87% so we fall below the Iowa average for the first time in many years.</p> <p>The National Pass Rate percentage for 2019 was 85.17% so we fall below the National Pass rate for the first time in many years.</p> <p>We are still within 95% of the National Average which would fall at 80.91%.</p> | <p>Continue to strive for higher AD NCLEX pass rates. Target specific weak areas noted in the ATI Comprehensive predictor. Analyze data from HURST review to further identify weak areas.</p> <p>Although we are hopeful that the 2019 results are representative of outliers, we are focusing on specific areas of weakness and encouraging a comprehensive state board review class upon graduation.</p> <p>We also hope to utilize Zoom equipment in the event that the courses would fall behind related to inclement weather</p> |

**Criterion 6.4:** The program demonstrates evidence of students' achievement in completing the nursing program.

**Expected Level of Achievement** Eighty percent of students will graduate who are admitted into the nursing program.

| <b>Evidence:</b>  |   | <b>Responsibility:</b>   | <b>Time/Frequency cycle:</b>   |
|-------------------|---|--|--|
| Attrition rates   |   | Nursing director   | Annually   |
| <b>Components</b> | <b>Assessment Methods</b>   | <b>Results</b>   | <b>Action Taken</b>  |
| Attrition rates   | Determine attrition rates.<br>Interview those students not completing as to factors that contributed to them exiting the program. | 2019 IVCCD Attrition Rates:<br>PN - 37/48= 77% graduation rates (23% attrition)<br>AD - 50/65= 76% graduation rates (24% attrition), | Keep data on Attrition. I look at: <ul style="list-style-type: none"> <li>• entrance test scores, (TEAS)</li> <li>• grades in other courses</li> <li>• overall GPA</li> <li>• reason for withdrawing</li> <li>• grades in pre-requisite courses</li> <li>• which course they were unsuccessful in</li> <li>• which campus</li> <li>• what week they withdrew</li> </ul> Targeting students who are academically successful to explain the advantages of attending a community college program.<br><br>Frequent recruiting visits<br><br>Exploring hiring a nursing tutor from retired nursing faculty<br><br>Faculty are advising students each semester and make referrals to the success center.<br><br>Curriculum change from 8 week courses to 16 week courses.<br><br>Researching implementing a minimum TOEFL score for admission. English is a second language for many of our students.<br><br>Program readiness is a major challenge at the community college, especially with the rigor and need for knowledge of scientific principles in Nursing programs. The Nursing Program has established admissions requirements to address the needed preparation. Applicants must have a 2.7 grade point average in all Nursing prerequisites and at least a C- in each course. All science courses included in the curriculum must be within ten years of admission. For entrance into the first rung of the ladder program |



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|  |  |  | <p>students must achieve at least an 18 on ACT exam or minimum scores on the Test of Essential Academic Skills exam (Reading- 47.6 percent; Mathematics 46.7 percent; Science 33 percent; and English and Language Usage 40 percent.). Because Nursing is a complex profession and safe practice is required from graduates, students must earn a grade of at least 80 percent in each Nursing course to advance. The Student Success Center offers math and reading remediation. Center. The College also provides accommodations for students that qualify. Each class is unique and faculty adjust teaching techniques to meet the needs of each cohort. Class sizes are small and students receive individual attention. The College operates in a model of continuous quality improvement. If students are unable to be successful in Nursing, they are advised to either reenter the next year or consider other career path options.</p> |
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| <p><b>Criterion 6.5:</b> The program demonstrates evidence of graduates 'achievement in job placement.</p>                  |                               |                                     |
| <p><b>Expected Level of Achievement</b> Eighty-five percent of graduates will rate job competency as average or better.</p> |                               |                                     |
| <p><b>Evidence:</b></p>   | <p><b>Responsibility:</b></p> | <p><b>Time/Frequency cycle:</b></p> |

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| <p>Post graduate surveys</p>   | <p>Nursing director</p>   | <p>Annually</p>   |
| <p><b>Components</b></p> <p>Job placement of graduates<br/>Job competency of hired graduates</p>   | <p><b>Results</b></p> <p>Many employers seek our graduates.</p> | <p><b>Action Taken</b></p> <p>The data base for unemployment shows that 95% of our most recent graduating class are employed in the state of Iowa. This data is pulled by social security number for those contributing to the unemployment fund.</p> |
| <p><b>Assessment Methods</b></p> <p>Access graduates for :<br/>-Job placement-95% of most recent graduating class.<br/>-Job competency- This is more difficult to measure as it is subjective.</p> |   |   |