<u>Agency Mission:</u> To assure the citizens of Kansas safe and competent practice by nurses and mental health technicians.

Kansas Board of Nursing
Education Committee Agenda
March 23, 2021

NOTE: The meeting will be held via Zoom. Link to access meeting to follow agenda.

Time: 8:30 a.m. – 12:00 p.m.

Committee Members: Patsy Zeller, MSN, APRN, NP-C, Chair
Carol Bragdon, PhD, APRN, Vice-Chair
Gita Noble, Public Member
Christina Rudacille, MSN, RNC
Karen Kidder, DNP, RN, CNE
Dee Bohnenblust, EdD, MSN, APRN, RN
Amy Hite, DNP, EdS, APRN, FNP

Staff: Janelle Martin, MHSA, RN – Nursing Education Compliance Officer
Chelsey Stephenson, Education Specialist, C.N.E.

I.   Call to Order

II.   Review of On-Site Packet

III.   Additions/Revisions to the Agenda

IV.   Announcements

V.   Approval of Minutes – December 8, 2020

VI.   Nursing Education Compliance Officer Report

VII.   Site Visit Reports

    A. Site Visit/Approval Task Force report
    B. Kansas Wesleyan University – BSN reapproval site visit report
    C. Seward County Community College – ADN focus visit report (virtual)
    D. Colby Community College – ADN follow-up focus visit report (virtual)
    E. Johnson County Community College – PN reapproval survey visit report (virtual)
    F. Baker University – BSN reapproval survey visit report (virtual)

VIII.   New Business

    A. Major Curriculum Change Request – Flint Hills Technical College
    B. Major Curriculum Change Request – MidAmerica Nazarene University
    C. Major Curriculum Change Request – Kansas City Kansas Community College

D. Major Curriculum Change Request – University of Kansas – Graduate Program
E. Major Curriculum Change Request – Donnelly College
F. Major Curriculum Change Request – Washburn University – Graduate Program
G. Major Curriculum Change Request – Newman University – Graduate Program
H. Major Curriculum Change Request – Seward County Community College
I. 2020 NCLEX First Time Pass Rates
J. Five Year Legislative Review
   a. K.A.R. 60-1-103
   b. K.A.R. 60-17-110
   c. K.A.R. 60-17-111
   d. K.A.R. 60-5-103
   e. K.S.A. 65-4206
   f. K.S.A. 65-4207

IX. Unfinished Business
A. Practice-Academic Partnerships Task Force – Report
B. Annual Report – review new report template w/NCSBN Core Data
C. Fall 2021 Site visits – virtual or in-person
D. 2021 Nursing & MHT Program Site Visit Schedules

X. Petitions
A. Request from Petitioners due 12/31/20 to extend time to complete clinical observation
B. Petition for Permission to Test/Retest Summary 11/8/2020 – 2/18/2021

XI. Agenda for June 2021

XII. Adjourn

Please note: Additional items which have come to the attention of the Board or Committee will be handled as time permits. Agenda is subject to change based upon items to come before the Board. Handouts or copies of materials brought to the Board or Committee for discussion by Committee Members or visitors must be submitted to staff 30 calendar days prior to start of the meeting. Any items received after the 30th calendar day may be addressed at the meeting at the discretion of the President of the Board or Chairperson of the Committee.

Please click the link below to join the webinar:
https://us02web.zoom.us/j/84952121001?pwd=T0NQMm84cCtLSnlCSmQ4QTRzTCtaZz09
Passcode: KsbnEDComm
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   US: +12532158782,,84952121001#,,,,*3786539334# or +13462487799,,84952121001#,,,,*3786539334#
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   Dial(for higher quality, dial a number based on your current location):
      US: +1 253 215 8782 or +1 346 248 7799 or +1 669 900 6833 or +1 301 715 8592 or +1 312 626 6799 or +1 646 876 9923
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Education Report

March 2021

Janelle B. Martin, MHSA, RN

Nursing Program Updates:

- **Benedictine College** - effective 12/1/2020, Jackie Harris, DNP, APRN is the new Director of Nursing programs.

- **Rasmussen University** – Overland Park, with a satellite in Topeka, has hired a new Dean of Nursing for the Professional Nursing Associate and Bachelor of Science in Nursing programs. Effective January 11, 2021, Dr. Sharon White-Lewis, PhD, RN, assumed the role of Dean of Nursing / Nurse Administrator. Dr. White-Lewis comes to Rasmussen University with over 12 years of experience in nursing education and over 42 years of experience in the nursing field.

- **Wichita State University** - WSU School of Nursing had a change of administration, effective Feb 1, 2021. Debra Pile, DNP, APRN, PCNS will assume the Interim SON Chair position and Dr. McCleary-Jones will transition to full-time as the Associate Dean of the College of Health Professions.

- **Osawatomie State Hospital/LMHT Program** - Susan Lynch, RN has been named the new Director of Nursing Education at OSH. Ms. Lynch informed KSBN that Janet Badders, RN, resigned as Director of MHT Programs at OSH, and Breanna Bishop, MSN, RN will be the new Director for the program and another new instructor will be hired to help teach in the program.

- **Hutchinson Community College, PN Program** is closing its Ft. Riley satellite nursing program on July 25, 2021. Current students will graduate July 24, 2021 and all records will be moved to the main campus for HCC and maintained with other nursing program records.

Site Visits: Board decided at December 2020 meeting that all spring site visits would be done virtually. Virtual site visits went smoothly and included two visits that were done in conjunction with accreditation teams. Virtual resource rooms (VRR) were sent up with access to site visitors done in advance of site visit dates. All required documents were available to site visitors as requested. File reviews were managed by Zoom or with VRR.

- Johnson County Community College, PN program reapproval visit – January 24-25, 2021
- Colby Community College, ADN program w/ ACEN – February 14-17, 2021
- Baker University, BSN program w/ CCNE – February 17-19, 2021
- WSU Tech, PN program – March 2-3, 2021

Education Activities / Projects

- **LMHT Exam** give on Feb. 3, 2021 to seven graduates of the OSH MHT program. Four were from the OSH campus and three were from the Larned campus.
- Assisted in ensuring applicants meet educational requirements for licensure:
  - Reviewed 7 transcripts from out of state schools / military programs
  - Reviewed 17 CGFNS reports for internationally educated nurses
    - Philippines – 10
    - Kenya – 2
    - 1 each from Fiji, Ethiopia, Jordan, Guyana, and India
  - No TOEFL's were required

- *FQRs* – Faculty Qualification Reports moved to an all-electronic process via the website on June 30, 2020. Delayed processing and approval for incomplete FQRs has decreased considerably with only eight (8) incomplete submissions received. Most incompletes are still due to missing transcripts and Hire Exceptions that are not submitted with an updated or initial FQR. Most missing transcripts are transcripts for initial licensure programs at the diploma and ADN level. Transcripts are required from the initial RN licensure program and any subsequent nursing degree. FQR activity this quarter:
  - 100 FQRs submitted this quarter (56 from BSN programs, 29 ADN, 12 PN, 3 APRN)
    - 69 were Initial requests
    - 31 were updates to previous FQRs
    - 15 for Full-time positions, 6 Part-time, 78 Adjunct and 1 Other/contract)
  - 21 submitted with Degree plans (12 for BSN programs, 8 ADN, 1 PN)
  - 43 submitted with Hire Exceptions (26 for BSN programs, 14 ADN, 3 PN) – most Hire Exceptions are for new Adjunct clinical faculty
  - 5 updated FQRs submitted for completion of Degree plans
  - 8 (down from 34 last quarter) were returned as incomplete (not mutually exclusive categories)
    - 1 – no FQR with a Hire Exception
    - 7 – did not include all required transcripts
    - 1 – no transcripts
    - 2 – no Degree plan or Hire exception when one was required for approval

- *Minor Curriculum changes* – 3 reviewed and approved requests
  - KCKCC – ADN program – moved Pathophysiology to a prerequisite class in the articulation program
  - OSH, MHT program – added content on Trauma-informed care to Behavioral Science course
  - MidAmerica Nazarene University – BSN program – change of course name, description and objectives to align the course being taught in both TBSN and ABSN programs

- Responded to three NCSBN survey requests from other state Boards of Nursing or NCSBN. Topics were:
  - o Clinical Coordination – statewide scheduling system (VA)
  - o Changes made for simulation / clinical secondary to COVID (WA)
  - o BON allowances / adjustments secondary to COVID (WA)

- **Responded** to 10 potential petitioners regarding KS requirements for NCLEX exam and licensing. Eight (8) petitioners completed the conditions of their petition and were made eligible to test. Currently have 24 active petitioners.

- Continue to work on reviewing and updating education information on KSBN website and updating links.
  - o Program Administrator Orientation – the Sept. 21, 2020 virtual presentation was recorded and is available on YouTube. The updated PP presentation is available on the KSBN website under Administrator Resources.

  - o Reminder of new resource added for Program Evaluation. There are many acceptable ways to present a Program Evaluation Plan (PEP), and one example template and a PEP guideline were added to the website in response to the request. **This is not a mandatory template from KSBN but intended as a resource for administrators.**

  - o Developing process to accept and approve Minor Curriculum Change requests electronically – *progress was temporarily delayed due to priority move of the data center during Jan-Feb.*

  - o Continue working on documentation for the petition process to move this to an all-electronic process for submission, approvals and follow-up.

  - o Continue to work on new section under Education to direct the inquiries from higher education (see next bullet) regarding Kansas requirements for prelicensure nursing programs

- Responded to 22 requests from higher education entities or potential students regarding Kansas approval for / educational requirements for prelicensure undergraduate and advanced practice nursing programs. A requirement from the Department of Education has all schools with distance learning programs or hybrid programs researching requirements for all states from which they could accept students.

- Developed draft of a new Annual Report template for all KS nursing programs using the NCSBN Core Data template. Board approved the change to the new template which will include Core data that NCSBN is collecting and will be reporting on when data from the first year of the project becomes available. About 7-8 states participated in the first year of the template's availability. The Core data is only for the undergraduate pre-licensure program but NCSBN is working with KS to also create a template for use with the Graduate programs also that will include information

required by regulation and for continued approval by the US Dept. of Education for KSBN as a approval body.

- Completed the 2020 scholarship essay competition. Forty-six complete applications were received (12 more applicants had incomplete submissions). Two PN and two RN winners were chosen by highest total scores from five Board members.

Taskforce regarding Process for Site Visits Report

February 28, 2021

<u>Charge for the taskforce</u> (*from Dec 8, 2020 Education Committee meeting*):

- Review the policies and procedures for site visits
- Draft proposals for templates to be used in site visits
- Discuss clarification of processes and policies for focus visits

<u>Taskforce members:</u>

- Patricia Zeller, Education Committee Chair
- Janelle Martin, Nursing Education Compliance Office, Agency Staff
- Carol Moreland, Executive Administrator, Agency Staff

<u>Task force meetings:</u>

- January 21, 2021
  - Reviewed the charge for the taskforce from the Education Committee
  - Discussed first task is to clarify processes and policies for all site visits, which includes focus site visits
  - After processes and policies for all site visits are developed then we can move to templates to be used in site visits
  - Initial discussion about format for algorithm template
  - Initial discussion about what algorithms should be included:
    - Initial approval site visit
    - Site visit after 1st graduation
    - Re-approval site visit
    - NCLEX pass rates algorithm
    - Conditional approval
    - Unannounced (unscheduled) site visit
    - Satellite program approval
- February 8, 2021
  - Reviewed initial draft of algorithms and made revisions to be presented to Education Committee on March 23, 2021

Documentation for Re-Approval of RN Nursing
Programs in Kansas
60-2-102 through 60-2-107

Program: Kansas Wesleyan , BS, Major in Nursing _____**Date(s):** September 24-25, 2020 _____

Last KSBN Visit: April 12-13, 2017 _____**Accrediting Agency& Date of Last Visit:** CCNE April 16-18, 2018

Visitors: Janelle Martin, MHSA, RN, Education Compliance Officer, KSBN; Rebecca Sanders, MSN, RN, KSBN Board Member

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Home Institution & Nursing Program 60-2-102					
Description of legal body responsible for policy and support of the program and/or home institution	Address of the institution	Self-Study	X		Self-study report (SSR), pg 3
	Names of primary administrative officials	Self-Study	X		SSR pg 3
	Organizational chart for the institution	Self-Study	X		SSR pg 4
	Current contact information	Self-Study	X		SSR pg 4
	An audited fiscal report covering the previous two years, including a statement of income and expenditures	On Site	X		Document room
	Copy of school's current catalog	Self-Study	X		With SSR, USB drive (2019-20) Also on website and available in document room (current 2020-21)
Description of nursing program	Organizational chart for nursing program	Self-Study	X		SSR, pg. 5; DNE Faculty HB
	Number of faculty	Self-Study	X		SSR pg 5 6 FTE, 3 Adjunct, & Director teaches 3 credit hours/semester
	Number of non-teaching staff	Self-Study	X		SSR pg 5; 1 Administrative Assistant
	Number of students admitted per year	Self-Study	X		SSR pg 5 Approved to admit 40 students/year Current enrollment: 15

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Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Nursing Program Administrator, Faculty & Preceptors 60-2-102 & 60-2-103					
Nursing Program Administrator	Name and credentials	Self-Study	X		SSR, pg. 6 Janeane Houchin, MSN, RN
	Qualifications	Self-Study	X		SSR pg 6 Curriculum Vitae, App A, pg. 45
	Responsibilities	Self-Study	X		SSR pg 6 Appendix A – Job description
Faculty selection and input into program	Faculty organizational by-laws	Self-Study	X		SSR pg 205 Appendix B, pg. 49
	Faculty job description	Self-Study	X		SSR pg 56-74 Appendix C
	Faculty selection process	Self-Study	X		SSR pg 6 Appendix D, pg. 82 – faculty search Appendix E,, pg. 84 – all KWU staff
	Faculty orientation plan	Self-Study	X		SSR pg 6 Appendix F, pg. 87 Nursing Faculty HB, pg. 3
	Faculty handbook	Self-study On-site	X		SSR, Appen F pg. 87 Document room
	General faculty meeting minutes for last 3 years	On-site	X		Document room – new templates and regular meetings
Faculty qualifications (Enclose a table that displays the following information):	Name of faculty	Self-Study	X		SSR pg 8-15
	FT or PT (use FTE)	Self-Study	x		SSR pg 8-15
	Academic Credentials	Self-Study	x		SSR pg 8-15
	Institution granting degree	Self-Study	x		SSR pg 8-15
	Area of clinical expertise	Self-Study	x		SSR pg 8-15
	Area(s) of assignment	Self-Study	x		SSR pg 8-15
	Licensure	Self-Study	x		SSR pg 8-15
	Indicate degree plan and progress towards degree if applicable	Self-Study	X		SSR, pg. 17 - 1 on degree plan- filed with FQR with KSBN
	List all faculty hire exceptions including course hired to teach	Self-Study	n/a		none
	Faculty file review	On-site	X		Files complete, all KSBN required documents present
Preceptor qualifications and information (for current semester)	Preceptor criteria & selection	Self-Study	X		SSR pg 18 Appendix G ((Preceptor Handbook)
	Preceptor job description	Self-Study	X		SSR pg 18 Appendix G
	Identified roles of preceptors, faculty, and students	Self-Study	X		SSR pg 18 Appendix G

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	Preceptor orientation materials	Self-Study	X		SSR pg. 18 Appendix H
	Preceptor signatures showing date orientation completed	Self-Study/On-site	X		SSR pg. 18 Appendix I – Preceptor Profile
	Name of preceptor and course with Prefix& number (NURS 1011)	Self-Study	X		SSR pg 18 Appendix H
	Preceptor State of license &License number	Self-Study	X		SSR pg. 18 Appendix I – Preceptor Profile
	Methods of contact between faculty & preceptor	Self-Study	X		SSR pg. 18 Appendix G, pg. 15

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Students 60-2-102 & 60-2-107					
Student policies: Provide written evidence of the following	Admission of generic, transfer, and articulation students	Self-Study	X		SSR pg. 20 Appendix J pg. 93 (link) KWU Catalog pg. 12-14, 170-174
	Degree plan for each degree being granted	Self-Study	X		SSR pg. 19-20 (part of admission policy – see above)
	Oral and written English proficiency	Self-Study	X		SSR pg 21 KWU Academic catalog pg. 11
	Readmission	Self-Study	X		SSR pg. 21 KWU academic catalog pg. 173
	Progression	Self-Study	X		SSR pg.21 KWU academic catalog (AC) pg. 173
	Counseling &guidance	Self-Study	X		SSR pg. 22 KWU AC pg. 6, 9
	Student role versus employee role	Self-Study	X		SSR pg.22 App K (SNHB, pg.37-38) KWU AC pg. 174
	Representation on faculty governance	Self-Study	X		SSR pg. 22-23 Nursing Student handbook pg 12
	Graduation	Self-Study	X		SSR pg. 23 KWU AC pg. 48-52
	Refund policies governing all fees and tuition paid by students	Self-Study	X		SSR pg. 23 KWU AC pg. 11-16 Admissions webpage
	Ethical practices including recruitment, admission, and advertising	Self-Study	X		SSR pg. 23 KWU AC pg. 11-16 Admissions webpage Student Nursing HB pg. 2
	Information to any student who may be subject to licensure denial under K.S.A. 65-1120. (Must be provided prior to program admission)	Self-Study	X		SSR pg 23 Application for Admission to Nursing Program With Admission policy, pg. 4 SNHB pg. 13 (and on website)

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Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
	Student Handbook	On-site USB	X		Think about adding Progression policy statement to the SNHB (policy is in KWU AC)
Student support services	Description of student safety measures	Self-Study	X		SSR pg. 24 Appendix L (KWU student HB pg. 9)
	Description of student health services (available on-site or students have knowledge of available health services)	Self-Study	X		SSR pg. 24 Appendix M – list of area health services. KWU does not have a health center onsite but does partner with Stat Care for preferential service KWU Student HB pg. 8, 10, 12-13
Student records	Review student files	On-site	X		Student files complete Reviewed a sample of files from 2019-20 graduating class and current class
Student documentation submitted to meet course objectives	Samples of completed student work for both theory and clinical courses (include observational and preceptor experiences)	On-Site	X		Several types of class work available in Document room (CETs, papers, posters, self-reflections)

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Curriculum **60-2-102, 60-2-104, & 60-2-105**					
Curriculum Requirements: Copy of current curriculum with date of last revision. Include:	Required non-nursing courses	Self-Study	X		SSR pg 25-26 KWU AC pg. 175-176
	Required Nursing courses that includes course description, objectives, content outline and method of evaluation (include list of clinical facilities if applicable)	Self-Study	X		SSR pg 27-28 KWU AC pg. 175-176
	Credit hours for each non-nursing course	Self-Study	X		SSR pg 25-26 KWU AC pg. 175-176
	Credit and clock hours for each nursing course (must equal or exceed 30 credit hours for RN programs and 15 credit hours for PN Programs)	Self-Study	X		SSR pg 27-28 KWU AC pg. 175-176
	Identify clinical hours for combined nursing didactic and clinical courses	Self-Study	X		SSR pg 28 Appendix O Document Room – all syllabi available – all clinical hrs noted by type (clinical site, obs, sim, preceptor)
	List all clinical observation hours for each relevant course (cannot exceed 15% of total clinical hours/course) and objectives for clinical observation experiences (reflect observation rather than participation in nursing activities)	Self-Study	X		SSR pg 28 NURS 355 – 15.5% (7 hrs)

			Met	Not Met	
	List all preceptor hours for each relevant course. (cannot exceed 20% excluding capstone of total clinical hours/nursing program – does not apply to capstone course)	Self-Study	X		SSR pg 28 NURS 408, 432, 479, 355 (17% excluding capstone)
	Testing process with test analysis and the written test procedure	Self-Study	X		SSR pg 28 Appendix Q pg. 101-107
	Number of students per class	Self-Study	X		SSR pg. 27-28
	Clinical rotation schedules with responsible faculty listed – (evidence of 1:10 clinical faculty/student ratio – includes observational sites)	Self-Study	X		SSR pg. 28 Appendix P pg. 99-100
Curriculum includes the following:	Content in biological, physical, social, and behavioral sciences that provides a foundation for safe and effective nursing practice	Self-Study	X		SSR pg. 28-29 Appendix R pg. 108-110
	Art and science of nursing	Self-Study	X		
	Didactic content and clinical experiences to meet the objectives in curriculum table that follows	Self-Study	X		

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Curriculum Table: Identify the nursing and non-nursing courses that contribute to the students' learning for these outcomes: For Registered Nurse (professional) Program:	Aspects of a safe, effective care environment, including management of care, safety, and infection control	Self-Study	X		SSR pg 29 Appendix S pg. 111
	Health promotion and maintenance, including growth and development through the life span and prevention and early detection of disease	Self-Study	X		SSR pg 29 Appendix S pg. 111
	Psychosocial integrity, including coping, adaptation and psychosocial adaptation	Self-Study	X		SSR pg 29 Appendix S pg. 111
	Physiological integrity, including basic care and comfort, pharmacology, parenteral therapies, reduction of risk potential, physiological adaptation	Self-Study	X		SSR pg 29 Appendix S pg. 111
KSBN ADN Alignment	KSBN ADN alignment program outcomes included in curriculum, if applicable	Self-Study	n/a		N/A
Curriculum changes	List current changes not requiring board approval that have occurred since last annual report submitted	Self-Study	X		SSR pg. 29 No major or minor curriculum changes since 2019 annual report

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Educational Facilities 60-2-106

			Met	Not Met	Comments
Description of facilities and tour	Classrooms, laboratories and conference rooms adequate in size, number, and type to accomplish student learning.	Self-Study & On-Site	X		SSR pg. 29 Tour of present space which meets requirements. Also able to tour the new Nursing Education Center (north side of campus
	Faculty offices are adequate in size, number, and type to provide the facility with privacy in counseling students	Self-Study & On-Site	X		SSR pg. 29-30 Private offices for FT; one shared office for Adj with conf room available.
	Secure space for student records	Self-Study & On-Site	X		Locked cabinets in nursing office which also is locked
	Technological resources are of sufficient quality and quantity to meet student learning needs and there is support available to student when accessing	Self-Study & On-Site	X		SSR pg. 30 Computer policy Appendix L
	Satellite program facilities		n/a		N/A
	Other points of interest		X		New Nursing Education Center – renovation of old physician office for nursing program – 2 levels with classrooms, simulation lab with HF simulators and ability to record and televise simulation for debriefing, computer lab, skills labs, student areas with lockers, study areas, faculty offices and storage. Scheduled to be in use Spring 2021
Library resources and tour	Library materials are of sufficient quality and quantity to meet student learning needs	Self-Study & On-Site	X		SSR pg 31 Library tour – 6 medical databases; nursing research guide built with al resources listed; reserve section for nursing Presentation for nursing students done during orientation

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments

Clinical Resources 60-2-105

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Written contractual agreements between the nursing education program and affiliating agencies	View current contracts with affiliating agencies for signatures. Ensure they are current and kept in nursing education program office	On-site	X		Contracts reviewed – all dated and signed
Clinical learning experiences and site are adequate	The number of affiliation agencies and types of patients are adequate to meeting curriculum objectives	Self-Study & On-site	X		SSR pg. 32 Appendix U – 26 facilities available with room for growth (currently have 28 nursing students)
	If more than one nursing program uses	Self-Study &	X		SSR pg. 32 – local hospital (SRHC) is primary site with other groups;

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			X		
	the same affiliating agency, the nursing program documents availability of appropriate learning experiences for all students	On-Site			SRHC uses FISDAP system for scheduling – KWU is one of 2 schools given first options at scheduling
	Each affiliating agency used for clinical instruction shall be staffed independently of student assignments	Self-study & On-Site	X		SSR pg. 33 -Clinical site usage forms stipulate this
	Tour selected clinical agencies to determine adequacy of facility to meet expected program and course objectives	On-Site	X		1) SRHC – OB unit w/ Sr students (NURS432 Family Centered Health). Due to COVID, we met with students, faculty and staff in small groups in the conference room) Staff very complimentary of students and faculty

Administrative Policies & Procedures
60-2-102, 60-2-103, &60-2-104

			X		
Program NCLEX pass rates	NCLEX RN or PN Pass rates for the last 5 years (first time candidates)	Self-Study	X		SSR pg. 33 2015: 53.57% 2016: 57.14% 2017: 0 2018: 75% (3/4) 2019: 100% (2/2) 2020: current rate is 100% (4/4) with no more 1st time test takers
Financial support for nursing program	Audited nursing program fiscal report for the previous two (2) years including income and expenditures	Self-Study	X		Reviewed
	Budget procedures		X		SSR pg.34-35 DNE serves on Institutional Direction Committee where fiscal and physical resources are reviewed with development and implementation integrated into the SP. Using new zero-based budgeting system
Advisory Committee	Review Advisory Committee minutes	On-Site	X		SSR pg. 35 Appendix AA – minutes present – well organized with review of program and program outcomes consistent
Meet with the following members of the educational institution to determine adequate support for nursing program	Administration	On-Site	X		See notes below
	General education and required support course faculty	On-Site	X		
	Support services	On-Site	X		
	Students	On-Site	X		Met with 36 nursing students and pre-nursing students – they like the personal attention they receive from the dept. They like the small class sizes and everyone mentioned the

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Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
					Student Success Coordinator, Jerri!
Meet with the following members of selected affiliating clinical agencies to determine adequacy of facility to meet expected program outcomes	Chief Nursing Officer	On-Site	X		Met with Education Director, Kathy Pike and CEO Joel Phelps
	Staff RN's	On-Site	X		2 staff nurses working with students (4) and also met with faculty member, Melissa Calvillo Met w/ Gisela DeWald who serves as clinical adjunct – no students today but works as NP at facility
	Preceptors	On-Site	X		Met w/ preceptor at Salina Surgical Hospital – she did not have a student today, but we talked w/ preceptor and reviewed evals of this preceptor experience
	Individuals conducting observational experiences	On-Site	n/a		No observation available with current courses
Program Evaluation	Program Evaluation Plan developed with faculty along with evidence of data (collected, aggregated, trended and analyzed) and actions taken	Self-study/ USB On-site	X		SSR pg. 35-36 Appendix AC and AD (policy and process for use of MEP (Master Evaluation Plan) Newly developed with 2017 curriculum redesign – well organized with data, assessments and actions – trending since 2017
	Use of program evaluation data for ongoing program improvement	Self-study/ On-site	X		SSR pg. 36-37; App AD Noted use in faculty minutes and Advisory minutes

Interviews conducted during site-visit:

Administration:
   Matthew Thompson, PhD, President/CEO
   Damon Kraft, PhD, Provost
   Janeane Houchin, MSN, RN, Nursing Program Director

General Education Faculty: Curriculum Committee members
   Milt Allen – Fine Arts
   Anita Specht – History, Committee Chair
   Daniel Botz – Social Sciences
   Kevin Wright – Natural Sciences
   Jasmin Dauner - Registrar

Student Support Services:
   Bryan McCullar, Director of Student Success Center
   Kelley Weber, Director of Library Services

Department Stakeholders:
  Rhonda Bethe, CFO
  Ken Oliver, VP of Advancement, Marketing and Admissions
  Michelle Jensen, Associate Director for Student Financial Planning
  Bridget Weiser, Vice President for Student Development
  Steve Wilson, Director of Athletics
  Dr. Bill Backlin, Academic Dean

Nursing Dept. Support staff:
  Jerri Zweygardt, Asst. Professor and Nursing Student Success Coordinator
  ElenaClaire Lundquist, DNE Administrative Assistant

Classroom Observation:
  NURS 304 – Nursing Interventions; Faculty: Asst. Professor, Linda Henningsen, MSN, RN; 21 junior students – good interaction b/w faculty
      and students with "active" learning strategies to engage students
  NURS 380 – Assessment Lab; Faculty: Wendy Gibson, MSN, RN, MBA – all students masked, shields or protective eyewear – good
      interactions and questions

Students: 5 senior, 11 junior students, several pre-nursing students (20) –
      like small class size and personal attention they receive from nursing dept. Feel faculty always very willing to help. Communication good.
      Program very integrated with the college. About 75% of students are also athletes. Many in the nursing program! Athletes maintain their
      scholarship money for athletics for 4 years even if they don't play for 4 years once they reach the nursing program

Nursing Faculty:
  Wendy Gibson, MSN, RN - Skills and Sim Lab Coordinator
  Linda Henningsen, MSN, RN – Asst. Professor (non-tenure)
  Kathy Sweeney, MSN, RN – Asst. Professor (tenure track)
  Melissa Calvillo, MSN, RN – Asst. Professor and Clinical Instructor (tenure track)
  Andrea Picklesimer, MSN, RN – Asst. Professor (tenure track)

Clinical Site:
  Salina Regional Medical Center
    NURS 432 Family Centered Health
    Faculty: Melissa Calvillo, MSN, RN
    5 junior students

  Salina Surgical Center:
    Preceptor, Julie Banninger, MSN, RN

Nursing Advisory Committee: 8 facilities represented on Advisory with 11 members (5 present today)
  Kathy Pike, MSN, RN – Director of Organizational Development, SRHC
  Mary Quinley, MBA, BSN, RN – retired Director of Inpatient Medical, SRHC
  LuAnn Puvogel, BSN, MBA, RN – Chief Executive Officer, Salina Surgical Center
  Luanne Smith, MBA, RN – Chief Nursing Officer, SRHC
  Casy Ziegler – Program Coordinator, Heartland Early Education Program

Strengths Identified:

1. We commend KWU for all the hard work since the April 2017 site visit. All recommendations have not only been met but have been met well. The NCLEX first time pass rate has now had 2 years above 75% and 2020 so far is at 100% with all known test takers.
2. Integration of the nursing program with the college – very interdisciplinary. Also integration within the nursing program that has created a solid curriculum and students consider it a strength
3. Success Coordinator position for nursing – unique and very effective. Jerri was mentioned as the contact by many key positions at the school as well as by most students.
4. Commitment by Community of Interest/Advisory Board – very involved and supportive of this program.
5. Improvement in student professionalism and preparedness in clinical (from clinical sites). This also speaks to the faculty expectations and role modeling of professionalism.
6. Students are all positive and would recommend this program to others – feel personally and academically supported.
7. Communication with clinical sites
8. Strong leadership for nursing program by Director, Janeane Houchin – mentioned by many (faculty, students, clinical leaders, staff, college peers) as dedicated, knowledgeable and persistent!
9. Master Evaluation Plan, curriculum plan, templates, testing policy, clinical evaluation processes – very nicely done! Organized, well documented – kudos to college for supporting this process to provide a strong base for the nursing program moving forward
10. Communication is open, continuous, interdisciplinary, and interdepartmental
11. Faculty are committed to the success of the nursing program and have good teamwork. Faculty utilize active teaching strategies. This was observed during the site visit and also mentioned by students. Students very complimentary of faculty. Report faculty very approachable.
12. College Administration - Strong commitment to the nursing program. Committed to continued program improvements and support of program as program rebuilding
13. Nursing Administrative Assistant very helpful and detailed in arranging document room. Supportive of department and students!

Opportunities for Improvement:

1. Progression policy – is currently in the Academic Catalog but not in the Nursing student handbook. Anything the nursing student needs to know should be in nursing handbook. If they sign a statement they have reviewed and understand what is in the DNE student handbook then you want to be sure all the pertinent policies (from KSBN regulation) are in the nursing student handbook.
2. Consider inviting clinical sites that reside outside of Salina to be part of Advisory (more diversity).

Recommendations:

1. Recommend program be removed from conditional approval status to full approval with a return visit with national accreditation in Spring 2023.

Focused Site Visit Report Based on NCLEX First Time Pass Rates

Program: Seward County Community College - ADN Program

Site Visit Date: 10/21-22/2020 (virtual site visit due to increased COVID19 rates in county/city)

Site Visitors: Rebecca Sander, MSN, RN, KSBN Education Committee and Board member; Janelle B. Martin, MHSA, RN, KSBN Education Compliane Officer

Accreditation Agency & Status: ACEN - accredited, no stipulations (due for reapproval and focus visit for low pass rates Fall 2021)

First time NCLEX pass rates for past five years:

Year	NCLEX pass rate
2015	84.62
2016	88.89
2017	73.33
2018	73.33
2019	74.07

Date action plan report submitted by nursing program to KSBN: 9/25/2020

Factor Identified	Action Plan	Findings During Site Visit
Faculty /Faculty retention: - 2015 saw complete turnover of experienced nursing faculty and retirement of an experienced nursing program director - new program director hired July 2015 and was gone by Nov. 2015 - new program director hired 2016 from current faculty ranks and new director had one MSN faculty who remained but only had 1 year teaching experience - current faculty (3 FT, not including program director who teaches 25%, 1 PT) 　*1 MSN faculty - hired 2016 w/ BSN and no teaching experience; now has 4 years exp. and completed MSN/Ed	*Director is ACEN reviewer w/ teaching experience at SCCC prior to taking the Director position; *2 FT faculty preparing for CNE exam; *Using KNI grant money to fund half the salary for the first year of a FT Simulation Facilitator (position will be funded by school in subsequent years); *want to seek OADN memebership for faculty development	New faculty hire for AD program is replacing an MSN faculty for OB/NB focus. She has over 15 years exp in OB and will complete BSN in Dec. 2020 and will start MSN in 2021. Though faculty is mostly new, they are very energgized about the work they are doing on curriculum and the improvements they have made with simulation work and initial work on leveling in the bi-level program. They have a true "team" approach and are working together to analyze data and use for improvements.

*1 BSN faculty on DP for DNP/CNE, 4 yrs exp *1 ADN faculty on DP for BSN, 15 years OB exp, no teaching exp - new fall 2020 *1 BSN faculty on DP for DNP-FNP - was FT last 2 yrs but moved to Adjunct this year due to school demands, 2 yrs teaching exp.		
Faculty development /Professional development - most faculty are new to teaching but all have good clinical experience	Perkins funding for professional development in last 3 years for simulation, test item writing, Nurse educator conferences, ACEN conferences, NCLEX/NGN conference; purchased Keith RN for faculty use. Two faculty attended a "boot camp" for new educators last year. *Perkins funding in 2019-20 had some re-allocation awy from faculty due to COVID. Funds used for purchase of NurseTim and ShadowHealth vClinicals for students to help with clinical hours	*Program director is a new ACEN reviewer -did first virtual visit this fall. *Faculty development opps are shared by those who attend with other faculty and with Advisory group. Conferences and programs are focused on areas that have been noted to need improvement - simulations, nursing education, test item-writing, NGN etc. Perkins funding also purchased KeithRN to help with faculty development with online class and clinical experiences.
Curriculum - program changed to a bi-level AND program in 2005 with very minimal change from the old curriculum. Very minor changes in curriculum since that time. Current curriculum is content-heavy and is taught in silos - this leads to redundancy and little continuity for students. Also lacks pharmacology focus and is not conducive to critcal thinking or development of clinical judgement	With the complete turn over of faculty and administration in nursing, it provided an opportunity for fresh eyes to review curriculum. Review of entire curriculum has been undertaken by current faculty (starting 2018-19AY) for redundancy and leveling; plan is to get back to a "general" education focus with more rigor in clincal content- new curriculum will benefit students with a more structured learning approach that includes more opps that	Currently students are able to attend clinical at several clinical sites including Southwest Medical Center which is the primary medical facility in the region. There has been tremendous growth at SWMC due to the closing of many higher level services at the closest competitor hospital so students are gaining more opportunities for learning with direct clinical hours. *New simulation center in the new Allied Health building -

	will employ critical thinking, clinical reasoning and clinical jdugment. This will help make better connections between content and submect areas.New curriculum design has been approved by Advisory and SCCC admin. Plan to take MajorCCR to KSBN in December 2020. *Clinical curriculum will focus on general med-surg concepts across the lifespan with specific specialty content added with a leveled approach. This will allow more general nursing experiences appropriate for an entry level RN. *Simulation development and serach for a Simulation Facilitator to enhance clinical learning opps for students. *Perkins funding to purchase NurseTim an ShadowHealth for vClinicals. *Will move curriculum from a 5 semester program to 4 semesters and allow for the summer between levels to study and pass NCLEX and get IV certified.	has 4 medical "rooms" that each have recording and observation capabilities with the HF mannequins. Being used for low to moderate-fideltiy sims at present but faculty are engaged with learning to use and hope to add an experienced simluation facilitator soon.
Kaplan- Kaplan services have been used by SCCC for several years to provide resources and testing for students to add in content mastery and NCLEX preparation. In the last 3 years, Kaplan services have often not been provided when requested and Kaplan content seems to be behind what the NCLEX is testing.	After discussion with Kaplan and exchange of information with several other nursing programs, a decision wa made in 2019 to change to ATI services starting Fall 2020. ATI has provided start-up training (virtually) for the faculty and they are working with program director to set new benchmarks with ATI use.	Student feedback is very positive at this midpoint of the semester. The ADN students would have used Kaplan in their first year and their was full agreement from those present at the student meeting that ATI has been much more helpful.

	Students oriented to the ATI resources and platform with the fall 2020 class.	
Testing	changed rounding policy; increased Test Mastery to 80%; using ExamSoft and will gain test stats; creating and utilizing test blueprints;	Are using Mountain Measures for exam analysis/outcomes
Simulation -SCCC purchased four HF simulators in 2018-19 in anticipation of the new sim center. They are currently being utilized as moderate-fidelity due to lack of training and dedicated time by faculty. NCLEX is moving toward a more scenario-based design and simulation can be highly beneficial to student learning with scenario-based sims.	Nursing education is shifting toward decreased lecture content and more clinical-based instruction with simulation providing much of the increased instruction. *Plan is to hire a Simulation Facilitator as FT faculty with Perkins funding to contribute half the salary in the first year. SCCC will provdie the other half in the first year and then fully fund the position in subsequent years.	New Allied Health building with new state-of-the-art simulation center
Student issues with Financial Aid w/ current curriculm credit hours - current program set up with nursing credit hours of 7, 12, 5, 10, and 10 for the five semester program.	Financial aid - for FA purposes a student must carry 12 credit hours to be consider FT student. currently students can only reach that if they leave co-requisites to take along with nursing courses. Most students coming into the nursing program have pre- and co-req courses complete or mostly complete when they start so it is difficult for them to get full FA packages. Proposed curriculum will help students maintain FT status even if most co-requisites are done before nursing courses	SCCC has many FA opps for nursing students but there are also many eligible for Federal FA. The current curriculum set up makes it difficlut for students to be FT students in nursing without several co-req courses.

Additional factors identified during site visit:

Factor Identified	Action Plan	Findings During Site Visit
Admission requirements	review admission requirements and compare NCLEX failures to admission criteria	Admission requirements changed from Kaplan KNAT to ATI TEAS test - no analysis of change for those admitted under new criteria yet

Outcomes on Program Evaluation Plan and ELA met/not met

Outcome	ELA	Met	Not Met
Performance on Licensure Exam	Licensure examination pass rate is at least 80% for all first-time test takers druing the same 12-month period. Three-year ave. 73.57%. (2017-19). (Previous 3-yr ave. was 78.52% for 2016-18)	☐	☒
Program completion	Completion rates will be 80% of higher for al nursing cohorts within 150% of normal completion time of the nursing program Three-year ave. was 88.15% (2016-18)	☒	☐

Job placement rates	80% of graduates will report securing a job as an RN by uearly review. Three-year ave. was 93.8% (2016-18)	☒	☐

7 Student Learning Outcomes for End of Program:
1) Integrate caring behaviors:
    1a) Not Met 2016 -2019 (2 yrs @
        66.8%)
    1b) Met - new 2019
    1c) Met - 2016-19
 	
2) Implement professional standards and scope of practice within the legal, ethical and regulatory frameworks:
    2a) Met 2016-19
    2b) Not Met 2016-19
 	
3) Collaborate with clients and members of the interprofessional health care team to optimize client outcomes:
    3a) no data - new 2019-20
    3b) Not Met 2016-2019
    3c) Met 2016-19
    3d) new Spring 2020
 	
4) Formulate safe and effective Clinical Judgements guided by the nursing process, clinical reasoning and EBP:
    4a) Met 2017; Not met 2016, '18, '19
	1a) Kaplan Secure Predictor score above normed score of 67% on KSP Psychosocial A
	1b) 80% find Comm Service Project beneficial in nursing career
	1c) Clinical evals - 90% of students will obtain 100% on critical clinical objectives
	2a) Class socre of 61% or above Nat'l Group Mean for KSP: Mgment of Care exam;
	2b) 73% or above on Kaplan Management & Professional Issues standardized exam
	3a) 100% of clinical sites report positive clinical experiences 90% of the time with SCCC nrsg students
	3b) KSP: Reduction Risk Potential 61%
	3c) KSP: Pharma and Parenteral Therapies at or above 61%
	3d) 80% of students achieve 90% or greater on Comm Leadership & Teaching clinical project
	4a) Overall class performance will be at or above 61% or above Nat'l Group Mean for
		☒	☒

4b) MET - 2016-19 4c) Not met 2016-19 4d) Not met 2016-19	KSP: BasicC&C and 4b) Safety&IC 4c) 80% of nursing students will achive 2,3, or 4 on critical thinking scores (admission test) 4d) 30% obtain NCLEX probability success score of 61% or higher or 65% or greater on the Kaplan Exit exam.		

5) Manage care and provide leadership to meet client needs using available resources and current technology
   5a) MET 2016-20
 	
   5b) MET 2016-19
 	
   5c) Met 2019 (1st year for ELA)
 	
   5d) implement Fall 2020
	5a) 80% of nursing students will use current tech utilized in nursing profession 100% of the time
	5b) Overall class perf on KSP: Mgment of Care is at or great than 61%
	5c) 100% of nrsg students will be oriented to ExamSoft
	5d) 100% of nrsg students will be oriented to the LMS each fall		

6) Generate teaching and learning processes to promote and maintain health and reduce risks for a global population
   6a) Not Met? - outcome does not match ELA statement
   6b) Met 2016; Not Met 2017-19
 	
6c) Met 2017-19
	6a) 100% of nursing students will participate in at least 2 comm. health service projects and achieve 90% or higher
	6b) Overall class performance will be at or above 61% or the Nat'l Group Mean for KSP: Health Promotion and Maintenance
	6c) 80% of students will achieve 90% or higher on Cultural presentation assgnmnt		

7) Demonstrate effecgtive ⁄ communication methods to manage client needs and interact with other healthcare team members 7a) Met 2016-19 7b) Met - 2016-18; Not Met 2019	7a) Overall class performance will be at or aboe 61% or the Nat'l Group Mean for KSP: Management of Care 7b) 90% of nrsg students will effectively comm. pt care needs in eff. safe manner 100% of the time in MH clinical setting		
		☐	☐
		☐	☐
		☐	☐

Interviews conducted during the site visit:

Administration:

Brad Bennett, SCCC President (as of 10/20/20)

Luke Dowell, VP of Academic Affairs (new role as of Fall 2020; has 23 yrs w/ SCCC)

Dr. Suzanne Campbell, Dean of Allied Health

Susan Ingland, MSN, RN, Director of Nursing Program

Support Personnel:

Alaina Rice - Registrar

Amy Bridenstine - Financial Aid

Annette Hackbarth-Onson - Dean of Student Success and Enrollment

Eric Volden - Director of Admissions

Casandra Norin - Director of Library Services

Clinical Facility: Southwest Medical Center (SWMC)

Robin Allaman, BSN, RN, C-EFM - VP of Patient Care Services

Brie Greeson, BSN, RN - medical/surgical unit

Elizabeth Irby - Education Coordinator

Jessie Ruiz, BSN, RN - Skilled unit

Tracey Johnson, BSN, RN - Medical floor manager

Jandi Head, BSN, RN - ER Manager

Raquel Bryant, BSN, RN - ICU Manager

Leanna Horner, BSN, RN - Director, Surgical Services

Students:

10 Level II nursing students

Classroom Observation:

Simulation - blood transfusion; Faculty- Judy Lathen

Advisory Council members:

Robin Allaman, RN - VP, Patient Care Services, SWMC

Elizabeth Irby, RN - Education Coordinator, SWMC

Martha Brown, RN - Director of Nursing, Seward County Health Dept.

Cassie Davis, MSN, APRN-C - SCCC alum, preceptor

Nursing Faculty:

Judy Lathen, MSN/Ed, RN - FT ADN - start 8/20/15

Amanda Coffey, RN - FT ADN - start 8/6/2020; BSN degree plan to complete Dec. 2020

Shayla McElvania, BSN, RN - FT ADN - start 8/24/16; on Degree plan for DNP-PMHNP (June 2022) and working on CNE certification

Kate Mulligan, BSN, RN - Adj ADN - start 1/8/18 (was FT until this year) - on Degree plan for DNP-FNP (May 2023)

Chynessa Myers, MSN, RN - FT PN level - start 8/9/17

Strengths identified:

1) New Colvin Family Center for Allied Health - new classrooms, faculty offices, computer lab, and simulation center with high-fidelity simulators, observation rooms, video capability, debriefing space and space to run multiple sims simultaneously

2) Classroom and clinical assignments are being adjusted and improved to increase clinical judgement skills of students

3) Professional development is being focused on needed areas of improvement (simulation, test item writing, clinical judgement tools and implementation in curriculum, nurse educator role/skills)

4) Faculty dedicated and engaged - continually looking for opportunities to improve teaching skills and curriculum focus; students find them a good resource and very approachable

5) Healthcare community support is strong with clinical sites primarily only SCCC nursing students

6) Administrative team - there is a Dean for Allied Health and DON has responsibility for nursing only (change in 2016 with hire of current DON); other 2 team members new but are knowledgable about the nursing program and what is needed. Good communication between DON and Dean for Allied Health.

7) Solid leadership for nursing program and faculty - faculty feel supported and are very team-focused which the students recognize and is evident in the work that is being done on curriculum and student outcomes.

8) Started using ExamSoft in 2019 which has been good for test security and also very helpful in the test analysis process

9) Moving away from Kaplan and will implement ATI resources starting Fall 2020 - decision to change based on lack of response and "dated" resources offered by Kalan. ATI more on target with SCCC goals for nursing program and have more resources.

10) Perkins funding - has been used primarily for faculty develepment, simulation development, and also was instrumental in helping with virtual sim resources with the COVID-19 pandemic.

11) Kansas Nurse Initiative grant funding for 2020-21 AY includes funding for a Simulation Facilitator for the nursing program (50% match by SCCC in first year with 100% by SCCC in subsequent years)

Opportunities for improvement:

1) Syllabi - make sure syllabi (college template) and specific nursing program policies on nursing document are consistent for each nursing course and detail the clinical hours by type, grading policy, how assessment for grades are done (assignments, quizzes, exams); class specific policies

2) Systematic Plan of Evaluation (SPE) - KAR 60-2-104 (f) states that each nursing edcuation programs should develop and implement a written plan that provides evidence of program evaluation and effectiveness; and is used for ongoing improvement. Current plan address EPSLOs specifically but does not include other types of evaluation such as leadership, faculty, curriculum, program philosphy and framework - refer to SEP document on KSBN website under Program Administrator Resources. Also, make sure assessment of met or not met are congruent with the ELA statement.

3) Testing policy - continue to work on test blueprints; add documentation for test analysis and create retrievable doucment for reviews; need to do exams from all courses

4) Simulations - until full capability for the new sim lab is available, might consider "voicing the patient/mannequin" for teaching with the Level II students (run complete simulations with debrief rather than stop-start sims (basic level)

5) Clinical experiences for level II students - look for opportunities to "level up" the objectives and encourage more experiences that require clinical judgement in the objectives

Recommendations:

1) Systematic Plan of Evaluation (SPE) - update plan for all areas of needed evaluation and send to KSBN Education Compliance Officer by 9/30/21.

2) Review and revise Pass Rate Improvement Plan to bring NCLEX first time pass rates consistently above current standard of 75% and submit Progress Reports every 6 months to KSBN Education Compliance Officer - submit first report by 9/30/21.

3) Follow-up site visit in 1 year with accreditation visit (Fall 2021)

4) Place program on Conditional Approval if final 2020 NCLEX first time pass rates are not above regulatory standard of 75%.

Focused Site Visit Report Based on NCLEX First Time Pass Rates

Program: Colby Community College - ADN program

Site Visit Date: October 27-28, 2020 (rescheduled from April 2020)

Site Visitors: Janelle B Martin, MHSA, RN, KSBN Education Compliance Officer; Patsy Zeller, KSBN Board member

Accreditation Agency & Status: ACEN, Continuing Accreditation (removed warning for good cause July 2017); Last visit - Feb. 2017. New visit planned for Feb. 2021.

Last KSBN visit: Feb. 2019 (Focus visit); Placed on Conditional Approval status March 2019

First time NCLEX pass rates for past five years:

Year	NCLEX pass rate
2020 (to date)	76.47
2019	83.33
2018	72.73
2017	62.16
2016	72.97
2015	66.67

Date action plan report submitted by nursing program to KSBN: Most recent update: 9/30/2020; report will focus on 2019 recommendations which were based on the improvement plan submitted.

Factor Identified	Action Plan	Findings During Site Visit
Faculty meetings/minutes Recommendation: Faculty minutes need to include discussin of meetings, student representation (note if written report vs. live presentation by student) and attach documents discussed.	Improve process of communication and action steps outlined during faculty meetings Include discussion of PEP at faculty meetings Document student attendance Keep accurate records of documents discussed/ reviewed	Have improved the documentation process for faculty minutes. All minutes are kept electronically in a electronic "Faculty Notebook". Minutes now have attachments of documents discussed at the meeting with more robust outline of issues and resolution.
Faculty turnover and open positions Recommendation:	New Faculty orientation policy -DON does orientation and assigns a mentor. Orientation is documented in faculty file - signed and dated	Policy reviwed. Policythat new orientation plan assigns a mentor from CCC and from the nursing program for add'l teaching support. Orientation

Education 35

Develop a plan to address faculty turn over and open positions.		plans include a completion date and signature of new faculty. Does not include a time frame for when needs to be completed and how long mentors will be assigned to work w/ faculty person.
Use of simulation and student response Recommendation: Include in progress reports the use of simulation and student response	1) In 2019-20, simulation was less than 10% of planned clinical hours - COVID caused some changes and program utilized SwiftRiver Virtual clinical simulations. Also chose Shadow Health Online Virtual clinical for use in 20-21 program. 2) Also stated that "COVID19 caused changed in delivery of clinical" with use of virtual sim when clinical site closed…and that "faculty strive to ensure clinical is F2F and continue, as much as possible, to meet KSBN regulations."	1) Report stated what they were using for simulation and virtual simulation and that they would continue to utilize through the 2020-21 program year. No report on student response or feedback. 2) Need to meet regulations period (not "if possible"). If school not able to do required F2F clinical (recommended at least 50% of each course) in the semester taught, may have to complete at a later date. 3) Students said they had a "sim day" for burns but they really didn't do simulation. They had a guest lecturer/faculty from CMCI (who they stated was really good and they learned a lot).
Extensive use of ATI Recommendation: Develop a plan for reviewing the extensive use of ATI in the program	In faculty discussions, felt that issue was newness of the full ATI program and the appropriateness and familiarity by faculty. new policy put in place for use of ATI and have been some updates to student policies on grading and use of Comprehensive Predictor exams for course progression.	1) reviewed ATI Comprehensive Exams policy- policy not clear if there is a grade attached to this exam that is part of the course grade. It does state they must pass at a Level I to stay in the program. 2) Reviewed ATI Nursing Education programs policy - states that in each course a designated % of the course grade MAY be dependent on

		completion of ATI assignments? Instructors are left to decide for their course. Could be a "consistency" point for students.
Clinical sites: *Acute and OB nearer home *Number of clinical hours that are "hands on" experience *process to review clinical each semester to ensure students are completing all hours and completing all course objectives /learning outcomes Recommendations: 1) Explore use of clinical sites with acute and OB experiences that are closer to CCC 2) Explore increasing the amount of hands-on clinical time per course for student learning	Improvement plan 2019-20: 1) Position faculty and guest speakers in appropriate areas - CMCI has staff providing current education to ADN students for mental health crisis intervention, intrapartum care, intraosseous catheter insertion, integumentary wound care and GI ostomy care. 2) More clinical at CMCI for preceptor experiences (NS220, NS225 and NS235) to provide more consistent learning experiences. 3) More clinical hours at CMCI for acute care rather than at CAH's 4) CMCI has funds for nurses when functioning as faculty/preceptors. Clock in differently when in the role of faculty.	- Regular meetings with liaison at CMCI for setting clinical schedule and managing preceptors -Schedules show more clinical time at CMCI this year -Spoke with CMCI liaison to validate ongoing communication - still needs some work for consistency and would help to include faculty in the communication with CMCI - or maybe set up regular meetings that include faculty as well. Faculty did feel that communication has improved in 20-21 over 2019-20 school year. -One thing on "wishlist" is that students would feel welcome at the facility. -Students felt clinical experience was better this year than previous year. CMCI staff have been helpful (except specialty clinic,"not always glad to see students"). -some concern with the feedback from CMCI that "all nurses at CMCI are preceptors and do the preceptor orientation." It appears that students are calling into the hospital to schedule preceptor time when it works for the student and

		they need a preceptor available. Not clear if this truly matches preceptor regulations and policy.
Student Services / Tutoring - need for nursing specific tutors and services Recommendation: Explore the use of the college Student Services and Tutoring for nursing students who are having academic difficulty		- Fall 2020 - Nursing faculty (new faculty Tara, NP) holding weekly open tutoring sessions (scheduled) and are just really getting going with this process. Some students are required by a remediation plan to attend. Other faculty did open tutoring sessions in 2019-20 and had very little response. CCC already has ThinkingStorm Online which can help with tutoring on basics like A&P, math, etc and does have nursing specific tutors as well! Peer tutoring in the nursing program was instituted
Strengthen remediation policy /plan for student with academic difficulty	1) Nursing Student Handbook reorganized 2) Newly revised Student Success Policy 3) Exam documentation 4) ATI Comprehensive exams throughout curriculum to assess for continuation in the program - must pass at a Level I to continue (2 attempts)	- 1) NSH reorganized to help with Admission process and policies to be clearer for students. It also combined PN and ADN handbooks (which had been separate) to provide consistency with policies and added appendicies for all the forms utilized in the program so they would be readily accessible. NSH is online for ease of use and transparency of the program. 2) New SS Policy in fal 2019 that identify add'l measures that can be initiated with students on a SDP -outlines college and nursing program resources that can be utilized

		at any time by the student and may be added to a SDP as required. New policy still includes the "CCC Early Alert System" that is used by all faculty when students are having academic issues. 3) New Exam Documentation policy - those who are on academic SDP may be required to "document" each unit exam - may be per course or coud be for rest of program if repeated issues with academics. The policy outlines when this policy applies (any student scoring below 78% on a unit exam) and what must be done (find correct answer to every question missed and find and document the rationale supporting the correct answer). All info regarding the exam may not be transcribed by the student for test security purposes. All documentation, exam and other materials must be returned to the faculty or proctor being leaving exam room.

Additional factors identified during site visit:

Factor Identified	Action Plan	Findings During Site Visit
Program placed on conditional approval with progress reports on the improvement plan due every	Send progress reports every 6 months on improvement plan:	Rec'd reports: 9/30/19 3/31/20 9/30/20

6 months - review, revise and strengthen the 2017 improvement plan to increase NCLEX first time pass rates to greater than 75% for three consecutive years		Pass rates for 2019 and 2020 are above the 75% regulatory standard.

Low NCLEX pass rates	1) Admission and Readmission processes evaluated and changes made.
	
	Streamline and simply Admission criteria and documentation process.
	
	Restructure Readmission criteria - statistical data shows that about 50% of students readmitted to the nursing program do not pass NCLEX on the first attempt.
	
	2) New course added for AY 2020-21: NS245 - NCLEX-RN Exam Review - 1 cr hr
	   -mandatory ATI live review
	   -ATI Comp predictor score of 80% or more and successful virtual ATI ("green light")
		- Admission process for 2019-20 changed significantly. Two forms, Admission checklist and Admission criteria were merged into one document with a step-by-step guide to the requirements. This was to help students have completed requirements on time!
		- Readmission - new policy:
		1) all students readmitted put on a Student Development plan and required to meet with faculty mentor weekly regarding remediation plan. If student is put on a new SDP due to academic performance, a new remediation plan is developed and additional success measures initiated (see policy).

Not starting with a full ADN class when students who were admitted did not advised they were going elsewhere	Added 4 alternates to list for "Road Ahead" orientation. This allows an alternate to step into a spot up to the start date with orientation done. -	Done in May 2020 -Letter of intent signed at that time -have until 5 days after course starts to show or their spot is given to an alternate
Students voiced great dissatisfaction w/ Financial Aid process	Change in Director for FA dept.	New Director has 16 years experience. No nursing complaints in 2019-20 or so far this year

Outcomes on Program Evaluation Plan and ELA met/not met

Outcome	ELA	Met	Not Met
6.1 Program demonstrates evidence of students' achievement of each EOPSLO	1) 80% of graduating students will received a 65% on the ATI RN Comprehensive Predictor on the 1st attempt (met this year for first time in 3 years)	☒	☐
	2) 100% of students will complete the clinical skills checklist with at least 80% of the skills completed (new 2019)	☒	☐
	3)Overall Pulse score on ATI for the ADN students will be above 80% chance of passing boards (new 2019)	☐	☒
6.2 The program demonstrates evidence of graduates achievement in the licensure exam. The programs' most recent licensure exam pass rate will be at least 80% for all first-time test takers during the same 12 mo. period.	1) 80% or higher of all first-time test takers will pass the NCLEX-RN during the same 12-month period. (met for first time in last 5 years) 2020 - 77.78% (new since Oct. 2020 visit - Not Met) 2019 - 83.33%	☒	☐
6.3 The program demonstrates evidence of students' achievement in completing the nursing program.	1) 75% of students who begin the first nursing course will graduate from the ADN program within 150% of the time frame allotted for the	☒	☐

	program. (Met last 3 years)		
6.4 the program demonstrates evidence of graduates' achievement in job placement.	1) 90% of responding students will be employed within one year of graduation (Met last 3 years)	☒	☐
		☐	☐

Interviews conducted during the site visit:

Administration:

-Dr. Seth Carter, President (since 2015)

-Nikol Nolan, VP of Student Affairs - new to the VP role in last few weeks - has been Dean, Student Affairs just prior

Support Staff: (5)

-Linda Nelson - Director, Center for Advising - 3 yrs in this role but w/ CCC for 21 yrs - has been improvement this past year - Rikki sends information to advising for when they talk w/ nursing students. New checklist for students to help streamline their process

-Kathy Ramsey (new 5/2020) - Financial Aid Director

-Brooke Jones -Counseling - 5th year in this role

-Megan Kistler - Library Services / Test proctoring - also works w/ peer tutoring for nursing through the Library

-Lisa Stithem - Director, Student Support Services - w/ CCC for 27 yrs - budgeted for a tutor for nursing so student doesn't have to "qualify" through SS to get this

Advisory Council: meets 2 times / year - things brought to AC this past year - student handbook revisions, class sequencing changes, input on Admissions process and helped w/ grading essays (and picking topics for essays); feel that CMCI is tepping up to help w/ quality clinical instruction for students and are more invested in teaching than in the past; like that there is a student on AC as it helps with communication

- Ashley Lambert (Chair) - CMCI

-Jennifer Wildeman - Norton

-Chris Ellison - Controller for CCC, also does Perkins funds

-Deanna S. - DON, CMCI

-Hannah Schoendaler - CON Sheridan

ADN Nursing faculty (2 FT faculty):

-Marilyn Sidebottom, MSN, RN

-Michaelle Bliss, MSN, RN

Students: met w/ 20 ADN students - felt that faculty very available; have been flexible w/ COVID19 issues; financial aid very helpful and get quick responses; don't like being read to from PPs during lecture but really like the case studies and the guest speakers;

Clinical Visit - Citizen's Health (CMCI) - virtual

-Liaison for CMCI - Ashley Lambert (Acute Care Manager at aCMCI)

- Michaelle Bliss, clinical faculty

- 3 Students

Classroom Observation (Zoom): Mental Health - Marilyn Sidebottom, faculty

Strengths identified:

1. Major amount of teamwork was apparent in how CCC worked through how recommendations would be addressed and how much improvement there has been from the last Focus Visit in 2019

2. Involvement at all levels of CCC with the nursing program and with faculty

3. Faculty commitment to curriculum improvement, strengthening policies and planning for student success

4. Continued support and championing of program by Administration

5. Improved relationship with local hospital with increased communication and more use for clinicals

Opportunities for improvement:

1. Continue to strengthen clinical opportunities for direct clinical hours

2. Continue to work on relationship w/ CMCI (2 main areas) - 1) Communication between staff liaison and CCC - include clinical faculty, and 2) meeting clinical objectives for student learning outcomes "drive the clinical, don't let clinical site drive you."

3. Simulation - development of true simulation expereinces (not just for skilss check off) with scenarios that will create opportunity for students to engage in critial thinking and clinical judgement; develop debriefing process w/ simluation to increase learning opportunites and engagement w/ students; faculty development w/ simulation teaching /learning.

Recommendations:

1. Recommendations from last focus visit have all been met (1, 3-11) or are in process (2).

2. 2019 NCLEX First Time pass rate was 83.33% which is above standard. Continue to assess and revise improvement plan as needed to see pass rate above regulatory standard (75%) for three consecutive years. Progress reports on improvement plan every six months until expectation for pass rates met. Next progress report due to Education Compliance Officer by 9/30/21.

3. Schedule next site visit on schedule with National Accreditation for reapproval and re-evaluation of program status at that time.

Documentation for Re-Approval of Practical Nursing Programs in Kansas
60-2-102 through 60-2-107

Program: ___Johnson County Community College – PN Program___ **Date(s):** ___January 26-27, 2021___

Last KSBN Visit: ___Oct. 2015___ **Accrediting Agency& Date of Last Visit:** ___KSBN Approval only___

Visitors: Rebecca Sander, MSN, RN – KSBN Board member; Janelle Martin, MHSA, RN – KSBN Education Compliance Officer

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Home Institution & Nursing Program 60-2-102					
Description of legal body responsible for policy and support of the program and/or home institution	Address of the institution	Self-Study	X		12345 College Blvd, OP, KS 66210
	Names of primary administrative officials	Self-Study	X		Dr. Andrew Bowne, President (started 7/1/20 L. Michael McCloud, Ex.VP / CAO Lenora Cook, Dean, HC, Public Safety & Wellness
	Organizational chart for the institution	Self-Study	X		Self-study (SS) pg. 4
	Current contact information	Self-Study	X		SS pg. 4
	An audited fiscal report covering the previous two years, including a statement of income and expenditures	On Site	X		SS pg. 4 – website link to past five years of audited fiscal reports

Reviewed last 2 years – no sig. issues noted except for COVID19 impacts in 2020 |
	Copy of school's current catalog	Online	X		Online resources provided in Virtual Resource Room (VRR) and in SS Appendix
Description of nursing program	Organizational chart for nursing program	Self-Study	X		SS, App. B
	Number of faculty	Self-Study	X		6 FT, 12 Adjunct faculty to cover both the FT Day and the Eve/Wknd programs

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	Number of non-teaching staff	Self-Study	X		1 FT AA; 2 PT AA's for HPSW Dept.
	Number of students admitted per year	Self-Study	X		Program approved for 80 / yr; currently admitting 56 per year (32 to FT and 24 to Eve/Wknd). Plan to increase to the 80 in Spr22 if able to hire more faculty.

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Nursing Program Administrator, Faculty & Preceptors 60-2-102 & 60-2-103					
Nursing Program Administrator	Name and credentials	Self-Study	X		Christina Rudacille, MSN, RN (2015)
	Qualifications	Self-Study	X		SS pg. 6
	Responsibilities	Self-Study	X		SS, App. C
Faculty selection and input into program	Faculty organizational by-laws	Self-Study	X		SS pg. 6 – web link to By-laws used by Faculty Assembly (opt for faculty to join) No nursing faculty part of this org.
	Faculty job description	Self-Study	X		SS pg. 6-7 – Careers website has the generic job descriptions every dept. required to use; must also have an HLC addendum that is specific to nursing and contains KSBN requirements
	Faculty selection process	Self-Study	X		SS pg. 7
	Faculty orientation plan	Self-Study	X		SS pg. 7; App D – in 2018 began a more detailed nursing orientation w/ Adj. faculty. FT have 3 yr. college orientation process w/ mentoring but nursing has added to the process, esp. for Adjunct faculty. Feedback from faculty led to a more robust 2019 orientation process w/ a clinical coord. who made regular visits w/ adjuncts
	Faculty handbook	VRR	X		website
	General faculty meeting minutes for last 3 years	VRR	X		Reviewed in Canvas
Faculty qualifications (Enclose a table that displays the following information):	Name of faculty	Self-Study	X		Canvas files / faculty table in SS, App E
	FT or PT (use FTE)	Self-Study	X		
	Academic Credentials	Self-Study	X		
	Institution granting degree	Self-Study	X		
	Area of clinical expertise	Self-Study	X		
	Area(s) of assignment	Self-Study	X		

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				Not	
	Licensure	Self-Study	X		
	Indicate degree plan and progress towards degree if applicable	Self-Study	X		
	List all faculty hire exceptions including course hired to teach	Self-Study	X		
	Faculty file review	On-site	X		Done w/ HR by Zoom – orientation process defined and can be articulated by faculty but not well documented in FT faculty files.
Preceptor qualifications and information (for current semester)	Preceptor criteria & selection	Self-Study	n/a		No preceptors utilized in program
	Preceptor job description	Self-Study			
	Identified roles of preceptors, faculty, and students	Self-Study			
	Preceptor orientation materials	Self-Study			
	Preceptor signatures showing date orientation completed	Self-Study/On-site			
	Name of preceptor and course with Prefix& number (NURS 1011)	Self-Study			
	Preceptor State of license &License number	Self-Study			
	Methods of contact between faculty & preceptor	Self-Study			

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Students 60-2-102 & 60-2-107					
Student policies: Provide written evidence of the following	Admission of generic, transfer, and articulation students	Self-Study	X		SS pg. 8; website catalog GPA 2.0 or better, active CNA cert., pre-reqs done (A&P, psych, med term), enrolled in or completed G&D
	Degree plan for each degree being granted	Self-Study	X		SS pg. 8
	Oral and written English proficiency	Self-Study	X		SS pg. 8; catalog
	Readmission	Self-Study	X		SS pg. 11-12; SHB pg. 40 If comb. Clin/theory course, must pass both or re-take both
	Progression	Self-Study	X		SS pg. 8, App. F; NSHB pg. 10 / policy pg. 33 No rounding of test scores or final grade if below 76; no extra credit to get to passing grade
	Counseling &guidance	Self-Study	X		SS pg. 5, 13 Catalog – Melanie Roberts does academic counseling for nursing (PN); personal counseling part of Student

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			Met	Not Met	
					Resources (can see therapist 5 times at no cost)
	Student role versus employee role	Self-Study	X		SHB pg. 20
	Representation on faculty governance	Self-Study	X		SHB pg. 12
	Graduation	Self-Study	X		SS pg.15; NSHB pg. 10, App F Website under Student Resources
	Refund policies governing all fees and tuition paid by students	Self-Study	X		SS pg. 15; Catalog – Tuition policy
	Ethical practices including recruitment, admission, and advertising	Self-Study	X		SS pg. 16; catalog; website @ jccc.edu/about/leadership&governance / policies/ nondiscrimination
	Information to any student who may be subject to licensure denial under K.S.A. 65-1120. (Must be provided prior to program admission)	Self-Study	X		1) in NSHB pg. 30 - available on the website prior to admissions @ catalog /academics/nursing/ 2) on application (website) 3) Nursing info session is recorded and online – can be accessed prior to admission
	Student Handbook	VRR	X		Online – both regular SHB and Nursing SHB
Student support services	Description of student safety measures	Self-Study	X		NSHB pg. 7; website under Student Resources
	Description of student health services (available on-site or students have knowledge of available health services)	Self-Study		X	SS pg. 7, App G Website – Student Wellness/ Student Basic Needs Center No health clinic but website has community resources pages with listings
Student records	Review student files	Canvas	X		Reviewed
Student documentation submitted to meet course objectives	Samples of completed student work for both theory and clinical courses (include observational and preceptor experiences)	Canvas	X		Clinical evals, presentations

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Curriculum 60-2-102, 60-2-104, & 60-2-105					
Curriculum Requirements: Copy of current curriculum with date of last revision. Include:	Required non-nursing courses	Self-Study	X		SS pg. 17 – updated 2019 and took effect Fall 2020 -must have A&P (5), G&D (3), psych (3), and med term (3)
	Required Nursing courses that includes course description, objectives, content outline and method of evaluation	Self-Study	X		SS pg. 18-19 Viewed all courses in Canvas 28 nursing cr hrs 42 total program hrs w/ prereqs

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Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
	(include list of clinical facilities if applicable)				Using PN Core Curriculum w. IV therapy inclusion beg. Spr 2021
	Credit hours for each non-nursing course	Self-Study	X		SS pg. 18-19 Online in catalog
	Credit and clock hours for each nursing course (must equal or exceed 30 credit hours for RN programs and 15 credit hours for PN Programs)	Self-Study	X		Online in catalog 28 cr hrs in nursing – 630 contact hours/ 315 clinical hrs
	Identify clinical hours for combined nursing didactic and clinical courses	Self-Study	X		Catalog – KSPN 136 Safe Med Administration 25 lecture/5 lab hrs
	List all clinical observation hours for each relevant course (cannot exceed 15% of total clinical hours/course) and objectives for clinical observation experiences (reflect observation rather than participation in nursing activities)	Self-Study	X		None this semester – rarely used
	List all preceptor hours for each relevant course. (cannot exceed 20% excluding capstone of total clinical hours/nursing program – does not apply to capstone course)	Self-Study	n/a		No preceptors used
	Testing process with test analysis and the written test procedure	Self-Study		X	Test policy for students but no written process for test planning and analysis
	Number of students per class	Self-Study	X		Didactic varies – large classroom holds 40 (not social distanced) but have alternatives to keep social distancing in place. Clinical – never more than 10 per 1 faculty
	Clinical rotation schedules with responsible faculty listed – (evidence of 1:10 clinical faculty/student ratio – includes observational sites)	Self-Study	X		SS, Appendix J (Spr19, Spr 20, Spr 21)
Curriculum includes the following:	Content in biological, physical, social, and behavioral sciences that provides a foundation for safe and effective nursing practice	Self-Study	X		Curriculum table in Canvas
	Art and science of nursing	Self-Study	X		
	Didactic content and clinical experiences to meet the objectives in curriculum table that follows	Self-Study	X		

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Curriculum Table:	Aspects of a safe, effective care	Self-Study	X		

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	environment, including coordination of care, safety, and infection control				
Identify the nursing and non-nursing courses that contribute to the students' learning for these outcomes: For Practical Nurse Program	Health promotion and maintenance, including growth and development through the life span and prevention and early detection of disease	Self-Study	X		
	Psychosocial integrity, including coping, adaptation and psychosocial adaptation	Self-Study	X		
	Physiological integrity, including basic care and comfort, pharmacology, parenteral therapies, reduction of risk potential, physiological adaptation	Self-Study	X		
Curriculum changes	List current changes not requiring board approval that have occurred since last annual report submitted	Self-Study	n/a		

Educational Facilities 60-2-106

Description of facilities and tour	Classrooms, laboratories and conference rooms adequate in size, number, and type to accomplish student learning.	Self-Study & Zoom tour (live)	X		SS pg. 19 – dedicated classrooms (40); Sim lab w/ recording capability; Skills lab – 8 beds w/ nurses station. Rec'd grant to build 2 LTC sim rooms
	Faculty offices are adequate in size, number, and type to provide the facility with privacy in counseling students	Self-Study & On-Site	X		SS pg. 19-20; all FT faculty have private offices; most Adj have a private space when on campus; conference rooms available for privacy
	Secure space for student records	Self-Study & On-Site	X		SS pg. 20 Archived records – secure warehouse on Main JCCC campus; current students – PN Admin access online (Sharepoint and Castlebranch)
	Technological resources are of sufficient quality and quantity to meet student learning needs and there is support available to student when accessing	Self-Study & On-Site	X		SS pg. 20-21 Students can check out Chromebooks / laptops to use remotely if they don't have one
	Satellite program facilities		n/a		
	Other points of interest		n/a		
Library resources and tour	Library materials are of sufficient quality and quantity to meet student learning needs	Self-Study & Virtual tour	X		SS pg. 21 Virtual resources and library Academic Resource Center (housed at PN campus) – have research basics

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Clinical Resources 60-2-105					
Written contractual agreements between the nursing education program and affiliating agencies	View current contracts with affiliating agencies for signatures. Ensure they are current and kept in nursing education program office	VRR	X		Contracts handled by AVP of AA (Dr. Singh) – all contracts visible to PN program through Sharepoint. All current sites have UTD, signed contracts
Clinical learning experiences and site are adequate	The number of affiliation agencies and types of patients are adequate to meeting curriculum objectives	Self-Study & VRR	X		PN program director does ongoing outreach w/ facilities to keep options open – made some changes due to COVID19 but have still been able to maintain students at clinical sites
	If more than one nursing program uses the same affiliating agency, the nursing program documents availability of appropriate learning experiences for all students	Self-Study & VRR	X		Use MO-KAN for some sites but mostly separate contracts Strong relationship w/ Olathe MC and they provide many sites. Have not had to share many sites w/ other programs at the times they go. JCCC-PN schedules add'l days each semester to prepare for snow days, make-up days, etc.
	Each affiliating agency used for clinical instruction shall be staffed independently of student assignments	Self-study & VRR	X		In contract language
	Tour selected clinical agencies to determine adequacy of facility to meet expected program and course objectives	Zoom	X		"Visited" two clinical sites via Zoom (Brookdale, Village Shalom) – spoke w/ students onsite, faculty and staff working w/ students
Administrative Policies & Procedures 60-2-102, 60-2-103, &60-2-104					
Program NCLEX pass rates	NCLEX RN or PN Pass rates for the last 5 years (first time candidates)	Self-Study	X		2019 95.83 2018 97.62 2017 93.88 2016 89.58 2015 91.67
Advisory Committee	Review Advisory Committee minutes	VRR	X		SS pg. 22, App L Meets 2X/year; Director emails updates to members throughout the year
Financial support for nursing program	Audited nursing program fiscal report for the previous two (2) years including income and expenditures	Self-Study	X		SS pg. 4 reviewed

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	Budget procedures		X		SS pg. 22 Director meets w/ budget committee 2x/year and works with Dean on program and division needs
Meet with the following members of the educational institution to determine adequate support for nursing program	Administration	Zoom	X		See list below
	General education and required support course faculty	Zoom	n/a		
	Support services	Zoom	X		
	Students	Zoom	X		Met w/ 22 PN students (mixed day and evening cohorts)
Meet with the following members of selected affiliating clinical agencies to determine adequacy of facility to meet expected program outcomes	Chief Nursing Officer	Zoom	X		Village Shalom Brookdale Sr. Living – visited with students, faculty and DON or ADON at each facility
	Staff RN's	Zoom	X		Not available
	Preceptors	On-Site	n/a		n/a
	Individuals conducting observational experiences	On-Site	n/a		n/a
Program Evaluation	Program Evaluation Plan developed with faculty along with evidence of data (collected, aggregated, trended and analyzed) and actions taken	Self-study/ VRR	X		SS pg. 23, App N Revised recently (only 3 faculty present when the original was made)
	Use of program evaluation data for ongoing program improvement	Self-study/ VRR	X		Faculty minutes Advisory

Interviews done via Zoom:

Administration:

Dr. Andy Bowne, President /CEO
Dr. Lenora Cook, Dean Healthcare, Public Safety & Wellness
Dr. Gurbhushan Singh, Assoc. VP Academic Affairs
Dr. Michael McCloud, VP / Chief Academic Officer

PN Support Personnel:
Stephanie Belford, Administrative Assistant, PN program
Jackie Price, AA, PN & Health Occupations
Megan Bukat- AA, Health Occupations

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JCCC Student Support Services:
Melanie Roberts, Academic Counselor for Healthcare Programs
Farrell Jenab, Director Faculty Development
Cindy Kleinsorge, Coordinator Financial Aid
Teresa Leland, Coordinator Admissions Processing
Karen Martley, VP of Continuing Education * Organizational Development
Lisa Gartland, Manager Employment Services
Rachel Haynes, Technical Training Coordinator, Staff & Org'l Development
Susan Hoffman, Coordinator Staff & Org'l Development
Judith Guzzy, Subject Librarian for Nursing

Class Observation (Zoom):
Course: Nursing Care of Adult I
Faculty, Tammy Greathouse and Helina Kebede

Clinical Sites: (Zoom conference w/ participants during the clinical day)
1) Village Shalom – Ashlye Speer, ADON – excited to work w/ students – JCCC ADN grad – also does wound care and works w/ students on rounds
Amy, JCCC PN student – have set up folder for clinical – know objectives for the day and what unit working on; staff very welcoming
Tammy G, JCCC faculty – went the week ahead of clinical starting to talk with DON and ADON about expectations for PN students; 200 bed facility; staff very open and welcomed students

2) Brookdale - Andralie Davison, DON - skilled unit holds 70 (w/ COVID they stopped shared rooms); masks and face shields provided by the facility for the students; 3rd year w/ PN students and each semester faculty reaches out prior to the start of clinical to engage facility and staff and finalize schedule
Helina K, JCCC faculty – made appts. 2 weeks prior to clinical start and gave facility a list of the skills students could do independently, with a nurse, and those that required the instructor; 1 week prior to start of clinical did tour w/ students; Post-conference done each clinical day – have specific assignments, objectives, topics – today SBAR is the topic
Mia, JCCC student – 5 students in clinical group; came for orientation and had a skills day prior to starting clinical (this is first day here); verbalized objectives for the day and have same list of skills that was given to the staff; charting done outside of facility system

Advisory Council:
Patty Palmietto – DON, Donnelly College (PN, ADN)
Colleen Duggan – JCCC Nursing Professor, ADN
Max Zimmerman – graduate of PN program (2013)
Nick Chansaviang - DON, Aberdeen Village
Kim Bond – ADON Aberdeen Village
April Harper – Human Resources Manager, Brookdale Senior Living

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Nursing Faculty:

David Luoma, Assoc. Professor – primary role with Evening/Wknd cohort – 9 years w/ JCCC
Debby Pockrandt, Assoc. Professor – FT in 2018 after working as Adjunct for program
Tammy Greathouse, Assoc. Professor – 5th year w/ JCCC program – has been teaching since 2002
Tammy Shults, Assoc. Professor – 2018 as FT faculty after working as Adjunct – primary w/ Simulation
Helina Kebede, Asst. Professor
Rhonda Rettig, Asst. Professor – started as Adj in 2016 and just moved to FT in 2020 – assists w/ simulation
Nicole Staley, FT Temp faculty – started as Adjunct in 2017 and moved to FT temp position Spring 2021

Strengths:

1. Resources for the PN program
2. Program Director is organized, forward-thinking, a good communicator and works well with faculty and administration
3. Student support services strong and numerous
4. Number of clinical sites and relationship with clinical sites
5. Dedicated simulation lab with recording and debriefing capabilities; skills lab facilities
6. Well-resourced for faculty development
7. Dedicated, full-time faculty with great teamwork and experience
8. Advisory Committee is very involved and diverse
9. Program has high regard from the community
10. Students speak highly of the program and the faculty – like the option for Eve/Weekend program. Feel that faculty is compassionate and supportive.
11. Program director does informal surveying/ gets feedback continually from clinical sites to improve program
12. PN program working with ESL staff to create more opportunities for ESL students to be successful in the nursing program in order to meet community needs for healthcare workers with diverse backgrounds

Opportunities:

1. Testing policy for faculty to include test planning, item writing and test analysis
2. Faculty handbook for nursing needs updating – has old policies and needs to include other pertinent topics like the Exam Test Policy
3. Formalize more of the feedback loops that relate to program outcomes – need clear process for how and when measures are measured, analyzed and reported and how reported measures are used in program improvement
4. Nursing faculty orientation – document and put in a checklist and keep in faculty files to show completion dates.

<u>Recommendations</u>:

1. Document process for nursing faculty orientation for full-time and Adjunct faculty. Develop and keep checklist document with dates of completion and keep completed documents in faculty files. Submit process to Education Compliance Officer by 6/30/21.
2. Develop a test plan/testing process policy that outlines process for faculty to follow for testing, item writing and test analysis. Submit policy / plan to Education Compliance Officer by 9/30/21.
3. Recommend reapproval of the program for five years with next scheduled visit in Spring 2026.

Documentation for Re-Approval of RN Nursing
Programs in Kansas
60-2-102 through 60-2-107

Program: Baker University, School of Nursing - BSN Program (w/ CCNE)   **Date(s):**   Feb 17-19, 2021 (Virtual)

Last KSBN Visit: 2011   **Accrediting Agency& Date of Last Visit:** CCNE 2011

Visitors: Karen Kidder, DNP, RN, CNE – KSBN Education Committee Board member; Janelle Martin, MHSA, RN – KSBN Nursing Education Compliance Officer

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Home Institution & Nursing Program 60-2-102					
Description of legal body responsible for policy and support of the program and/or home institution	Address of the institution	Self-Study	x		1500 SW 10th St., Topeka, KS 66604
	Names of primary administrative officials	Self-Study	x		Dr. Lynne Murray, Pres. Baker Univ Dr. Mary Hobus, Chief Nrsg Admin.
	Organizational chart for the institution	Self-Study	x		VRR
	Current contact information	Self-Study	x		www.bakeru.edu mary.hobus@stormontvail.org
	An audited fiscal report covering the previous two years, including a statement of income and expenditures	On Site	x		VRR, ST II, additional resources and information
	Copy of school's current catalog	Self-Study	x		Baker.edu/academics/resources Contains full course lists, full program lists, etc. https://www.bakeru.edu/registrar/baldwin-city-campus/baldwin-city-course-catalogs/
Description of nursing program	Organizational chart for nursing program	Self-Study	x		VRR KSBN info App D
	Number of faculty	Self-Study	x		Dean, 2 ass't deans, 1 program mgr 20 FTF, 12 Adjunct clinical faculty
	Number of non-teaching staff	Self-Study	x		2 Staff (A&P coord, Admin Asst)
	Number of students admitted per year	Self-Study	x		VRR, ST II, additional resources and info, KSBN app letter and

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Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
					rosters; approved for 60 students each spring and fall (120 annually) Currently 163 enrolled in program.

Nursing Program Administrator, Faculty & Preceptors
60-2-102 & 60-2-103

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Nursing Program Administrator	Name and credentials	Self-Study	x		Dr. Mary Hobus, PhD, MS, RN
	Qualifications	Self-Study	x		CV
	Responsibilities	Self-Study	x		CV, Job descr. VRR, CCNE St I
Faculty selection and input into program	Faculty organizational by-laws	Self-Study	x		VRR, CCNE manuals, by-laws
	Faculty job description	Self-Study	x		VRR, ST I
	Faculty selection process	Self-Study	x		VRR, CCNE St ID faculty handbook
	Faculty orientation plan	Self-Study	x		Policy & sample VRR KSBN
	Faculty handbook	On-site	x		VRR CCNE manuals faculty
	General faculty meeting minutes for last 3 years	On-site	x		VRR SON Committee Meeting Minutes Faculty Senate
Faculty qualifications (Enclose a table that displays the following information):	Name of faculty	Self-Study	x		VRR, KSBN
	FT or PT(use FTE)	Self-Study	x		" All FT
	Academic Credentials	Self-Study	x		"
	Institution granting degree	Self-Study	x		"
	Area of clinical expertise	Self-Study	x		"
	Area(s) of assignment	Self-Study	x		"
	Licensure	Self-Study	x		"
	Indicate degree plan and progress towards degree if applicable	Self-Study	x		Currently have 4 Degree plans: 1 FT faculty and 3 Adjunct faculty; also have 3 w/ doctoral degrees in progress and 4 more who will be starting later in 2021.
	List all faculty hire exceptions including course hired to teach	Self-Study	x		" none
	Faculty file review	Onsite	X		Complete – orientation verification present for all faculty after 2012
Preceptor qualifications and information (for current semester)	Preceptor criteria & selection	Self-Study	x		VRR KSBN, ST IIF; SS pg. 34
	Preceptor job description	Self-Study	x		VRR Standard IIF.1
	Identified roles of preceptors, faculty, and students	Self-Study	x		"

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	Preceptor orientation materials	Self-Study	x		Orientation is online for preceptor (rev Spr20) and acknowledgment forms/ Signed completion forms
	Preceptor signatures showing date orientation completed	Self-Study/On-site	x		"
	Name of preceptor and course with Prefix& number (NURS 1011)	Self-Study	x		Preceptor tracking sheet VRR Standard IIF.1
	Preceptor State of license &License number	Self-Study	x		"
	Methods of contact between faculty & preceptor	Self-Study	x		" in policy and numbers on orientation forms

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Students 60-2-102 & 60-2-107					
Student policies: Provide written evidence of the following	Admission of generic, transfer, and articulation students	Self-Study	x		NSHB, p 27
	Degree plan for each degree being granted	Self-Study	x		VRR, KSBN, BSN Program of study, SH pre-reqs, p 19, BSN, p 19-20
	Oral and written English proficiency	Self-Study	x		SH, p 28
	Readmission	Self-Study	x		SH, several areas
	Progression	Self-Study	x		SH, p 40
	Counseling &guidance	Self-Study	x		SH p 54, advising, orientation, ADA, student health, counseling, career development
	Student role versus employee role	Self-Study	x		SH pg. 57 - Consider clarifying policy RE: students not performing student tasks while working in another role.
	Representation on faculty governance	Self-Study	x		SH, p 53. Student Affairs Cmte, p 65
	Graduation	Self-Study	x		SH, p 31
	Refund policies governing all fees and tuition paid by students	Self-Study	x		SH p 33
	Ethical practices including recruitment, admission, and advertising	Self-Study	x		SH, p 5

	Information to any student who may be subject to licensure denial under K.S.A. 65-1120. (Must be provided prior to program admission)	Self-Study	x		On website under accreditation-outcomes SH, p 58
	Student Handbook	On-site	x		VRR
Student support services	Description of student safety measures	Self-Study	x		SH, p 63
	Description of student health services (available on-site or students have knowledge of available health services)	Self-Study	x		SH p 54, advising, orientation, ADA, student health, counseling, career development
Student records	Review student files	On-site			complete
Student documentation submitted to meet course objectives	Samples of completed student work for both theory and clinical courses (include observational and preceptor experiences)	On-Site	x		VRR Standard IV Additional Resources and Information VRR KSBN

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Curriculum **60-2-102, 60-2-104, & 60-2-105**					
Curriculum Requirements: Copy of current curriculum with date of last revision. Include:	Required non-nursing courses	Self-Study	x		SH/catalog, p 19
	Required Nursing courses that includes course description, objectives, content outline and method of evaluation (include list of clinical facilities if applicable)	Self-Study	x		SH/C, p 21 and syllabi
	Credit hours for each non-nursing course	Self-Study	x		SH/C p 19
	Credit and clock hours for each nursing course (must equal or exceed 30 credit hours for RN programs and 15 credit hours for PN Programs)	Self-Study	x		"
	Identify clinical hours for combined nursing didactic and clinical courses	Self-Study	x		"
	List all clinical observation hours for each relevant course (cannot exceed 15% of total clinical hours/course) and objectives for clinical observation experiences (reflect observation rather than participation in nursing activities)	Self-Study	x		VRR Course Syllabi – Face Sheet Sample of observation objectives and assignment, which are available to the student on course Moodle page.

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	List all preceptor hours for each relevant course. (cannot exceed 20% excluding capstone of total clinical hours/nursing program – does not apply to capstone course)	Self-Study	X		VRR Course Syllabi – Face Sheet
	Testing process with test analysis and the written test procedure	Self-Study	X		Testing process VRR, KSBN Self-study p 68. Test policy for both faculty and students.. Opportunity – place policy in faculty handbook.
	Number of students per class	Self-Study	X		VRR, student rosters
	Clinical rotation schedules with responsible faculty listed – (evidence of 1:10 clinical faculty/student ratio – includes observational sites)	Self-Study	X		Self Study IIIH p.65
Curriculum includes the following:	Content in biological, physical, social, and behavioral sciences that provides a foundation for safe and effective nursing practice	Self-Study	X		ST III B p 50
	Art and science of nursing	Self-Study	X		ST III B p 50
	Didactic content and clinical experiences to meet the objectives in curriculum table that follows	Self-Study	X		

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Curriculum Table: Identify the nursing and non-nursing courses that contribute to the students' learning for these outcomes: For Registered Nurse (professional) Program:	Aspects of a safe, effective care environment, including management of care, safety, and infection control	Self-Study	X		Standard IIIF .1 BSN Concepts/Content Grid Across Curriculum File IC – 322, 305, 375, 382, 381, 414, 455 Safety – 322, 330, 375, 414, 486 Manage care – 375, 382, 393, 414, 476
	Health promotion and maintenance, including growth and development through the life span and prevention and early detection of disease	Self-Study	X		Standard IIIF .1 BSN Concepts/Content Grid Across Curriculum File G&D – 330, 375, 382, 393, 413, 414, 425 HP&M- 322, 305,375, 414, 425 Prom0tion & Prevention-322, 375, 382, 393, 413, 414 Geriatrics – 322, 305, 375, 382, 393, 413, 414
	Psychosocial integrity, including coping, adaptation and psychosocial adaptation	Self-Study	X		Standard IIIF .1 BSN Concepts/Content Grid Across Curriculum File 330, 414

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	Physiological integrity, including basic care and comfort, pharmacology, parenteral therapies, reduction of risk potential, physiological adaptation	Self-Study	x		<u>Standard IIIF .1 BSN Concepts/Content Grid Across Curriculum File</u> Hygiene -322, 375, 382, 414 RRP – 322, 375, 382, 393, 485 PhyAd – 322, 305, 375, 382, 381, 393, 425, 414, 413, 425, 485 Pharm – 322, 375, 382, 414, 413, 425, 485
KSBN ADN Alignment	KSBN ADN alignment program outcomes included in curriculum, if applicable	Self-Study	NA		
Curriculum changes	List current changes not requiring board approval that have occurred since last annual report submitted	Self-Study	x		

Educational Facilities 60-2-106

Description of facilities and tour	Classrooms, laboratories and conference rooms adequate in size, number, and type to accomplish student learning.	Self-Study & On-Site	X Video in VRR		Computer lab, 1 classroom with stadium style seating, with tables and 2 white boards; lab tops with ELMO, Sim lab with Hi Fi manikin, monitors, Omnicell, EHR, control room, and debriefing room. 2 Labs with beds and static manikins. Murphy conf room for studying, interviews, meetings. Testing lab for accommodation testing. Blankenship conf room. Also share hospital sim lab.
	Faculty offices are adequate in size, number, and type to provide the facility with privacy in counseling students	Self-Study & On-Site	x		Private with locked doors. Faculty lounge with printer and kitchen, also storage.
	Secure space for student records	Self-Study & On-Site	x		Locked cabinets in SON office.
	Technological resources are of sufficient quality and quantity to meet student learning needs and there is support available to student when accessing	Self-Study & On-Site	x		Workroom with copier, scanner, Tech cabinet with video cameras, DVD players, portable projectors. Computer lab with tie into hospital for electronic charting
	Satellite program facilities		NA		
	Other points of interest		x		Virtual tour, student study areas, MW, copier chairs Conference rooms for students. Bonding room for pumping moms.

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Library resources and tour	Library materials are of sufficient quality and quantity to meet student learning needs	Self-Study & On-Site	X		Self Study - Standard IIB p. 30

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments

Clinical Resources 60-2-105

Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
Written contractual agreements between the nursing education program and affiliating agencies	View current contracts with affiliating agencies for signatures. Ensure they are current and kept in nursing education program office	On-site	X		VRR Standard IIB.1 Clinical Facilities Grid All current clinical sites have signed and dated contract with appropriate language.
Clinical learning experiences and site are adequate	The number of affiliation agencies and types of patients are adequate to meeting curriculum objectives	Self-Study & VRR	X		VRR Standard IIB.1 Clinical Facilities Grid Self-Study Standard IIB p 29
	If more than one nursing program uses the same affiliating agency, the nursing program documents availability of appropriate learning experiences for all students	Self-Study & On-Site	X		Program manager handles this with Stormont Vail. Students divided by day of assignment or by unit, and may work with lower degree student as management.
	Each affiliating agency used for clinical instruction shall be staffed independently of student assignments	Self-study & On-Site	X		Self-Study Standard IIIH p.65
	Tour selected clinical agencies to determine adequacy of facility to meet expected program and course objectives	Virtual Tours	X		**Stormont Vail Health** (Magnet, Level 2 trauma). ER, leadership, MS, OB, peds, CC, OP clinics(CA Center, single day surgery clinic, Ped Care clinic, KS Rehab Hospital Topeka and Lawrence schools Aldersgate Village (LTCF, rehab, memory) Brewster Place Health Center (healthcare in planned community) Lawrence Mem Hosp Topeka VAMC (psych, substance abuse) Marian Dental (assessment of this high risk population) Breakthrough House (MH) Holton Community Hosp (Critical Access), Childrens, Shawnee Mission, KU Prairie Band Health Center Topeka Correctional Facility

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Topic & Regulation	Supporting Information	Location	Met	Not Met	Comments
					(women's health) Adventure Time (childcare center) Topeka Rescue Mission (homeless shelter) Children's Palace in Rescue Mission
Administrative Policies & Procedures 60-2-102, 60-2-103, &60-2-104					
Program NCLEX pass rates	NCLEX RN or PN Pass rates for the last 5 years (first time candidates)	Self-Study	X		Self Study Standard IVC Table IV.3 p.77 2020 annual NCLEX report (sent from KSBN on 1/10/21) showing 92% 2019 – 97.4 2016 – 96.92 2018 – 97.14 2015 – 94.94 2017 – 93%
Financial support for nursing program	Audited nursing program fiscal report for the previous two (2) years including income and expenditures	Self-Study	x		VRR, CCNE, KSBN, Admin Policies
	Budget procedures		x		Self Study Standard IIA p.25 Dean of nursing program very involved in budget process and faculty has means to give input and request resources
Advisory Committee	Review Advisory Committee minutes	VRR	x		VRR Standard IC.1 COI Summary, last meeting was Nov 2020.
Meet with the following members of the educational institution to determine adequate support for nursing program	Administration	Zoom	x		
	General education and required support course faculty	Zoom	x		
	Support services	Zoom	x		
	Students	Zoom	x		
Topic & Regulation	**Supporting Information**	**Location**	**Met**	**Not Met**	**Comments**
	Chief Nursing Officer	Zoom	x		

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			X		
Meet with the following members of selected affiliating clinical agencies to determine adequacy of facility to meet expected program outcomes	Staff RN's	Zoom	X		
	Preceptors	Zoom	X		
	Individuals conducting observational experiences	Zoom	X		
Program Evaluation	Program Evaluation Plan developed with faculty along with evidence of data (collected, aggregated, trended and analyzed) and actions taken	Self-study/ VRR	X		SS ST IIIB p 50, IIIJ, p 70, IVA, p 74
	Use of program evaluation data for ongoing program improvement	Self-study/ VRR	X		SS ST IIIB p 50, IIIJ, p 70, IVA, p 74

Interviews (all were done remotely through GoToMeeting):

Administration:
Dr. Lynne Murray – President Baker University
Dr. Marc Childress – VPAA Baker
Carol Perry – VP & CNO Stormont Vail Hospital (SVH)
Dr. Mary Hobus, Dean, Baker SON
Dr. Bernadette Fetterolf- previous Dean, SON; consultant
Michael Kongs, Sr VP, CFO, SVH
Shelley Kneuvean, VP Finance & Admin, SVH
Dr. Jeanne Mann, MSN Ass't Dean
Denise Johnson, BSN Interim Ass't Dean
Danielle Jones Rease, VP of Advancement & Enrollment Management

Support Services:
Cara Bonfiglio, SON Admissions Coordinator
Molly Anderson, Ass't Prof of Laboratory Instruction (member Liaison Cmte)
Jason Hannah, Executive Director of Marketing
Michelle Thomas, Director of Enrollment Management
Ray Walling, Director of Library Services
Ruth Miller, Registrar
Jana Parks, Financial Aid Director
Megan Gosser, Financial Aid Counselor – Nursing
Toby Ebel, LMS System Administrator

Gen Ed Faculty:
Molly Anderson, Ass't Prof of Laboratory Instruction

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Nursing Faculty (all FT faculty except where listed):
Christina Barker, Technology director
Elena Bomberger (Adj)
Diane Bottorff
Elizabeth Deng
Jolene Dunham
Marlene Eicher
Ashton Hampel
Jeri Harvey
Tammy Heine, Program Manager, Chair of Liaison Cmte
Denise Johnson, Interim BSN Ass't Dean
Dr. Lori Link (adj)
Brandi Rosen (adj)
Dr. Libby Rosen
Amanda Schuster
Ranee Seastrom
Ashley Seematter
Jessica Shippee McDaniel
Barb Sollner

Clinical Staff:
Jennifer Smith - Nurse Manager, 6 North
Annie Ceniza RN, 6 North
Florissa Hummel RN, 6 North
Lindsey Miller RN, 6 North
Laura Stegman RN, 6 North

Preceptors:
Kassie Breshears – RN, SICU, Stormont Vail Health, BSN students
Paige Cooper – RN, Pavilion, Stormont Vail Health
Marlene Eicher – BSON faculty, mentor MSN educator students
Angela Gamber - Administrative Director of Emergency, Trauma & Surgical Services, Stormont Vail, mentor MSN admin students
Carlee Meier – RN, SICU, Stormont Vail Health, BSN students

Students:
Met virtually with about 18 students from all 4 levels of BSN program
Four students in Transitions NU 491L

Advisory Committee/Community of Interest:

Dana Blindt – Director, Care Transformation, Stormont Vail Health
Carol Cleek – Director, Emergency Room, Stormont Vail Health
Tracy Duran – Director of MedSurg, SVH
Kim Dhority – Dean of Instructional Services/IDC Director, Flint Hills Technical College
Krista Eylar – Director of Nursing, Holton Community Hospital
Angela Gamber – Administrative Director of Emergency, Trauma & Surgical Services, Stormont Vail
Salena Gillam – Admin Director of MS and Critical Care,SVH
Krista Hahn – Executive Director, Marian Dental Clinic
Emily Hartzell – RN, Emergency Department, Stormont Vail Health
Lanaya Henry – RN, Emergency Department, Stormont Vail Health
Sue Iverson – Director Clinical Nursing Excellence, Stormont Vail Health
Amy Kincade –   Vice President-Administration, Population Health Management
Jacqueline Koch – Charge RN, 3rd Floor Pavilion, Magnet Program Manager
Shelly McMaster – Administrative Director, Care Transformation, Stormont Vail Health
Mackenzie Morrison – RN, Critical Care Pavilion, Stormont Vail Health
Mindy Olberding – CNO, Community Healthcare System NE Kansas & Onaga Community Hospital
Patricia Parks – Interim Director of Nursing, Flint Hills Technical College
Ken Sarber – Director Education, Lawrence Memorial Hospital
Tiffany Smoot – Education Specialist, Colmery-O'Neil VA Medical Center
Terri Woodbury – Health & Nutrition Advisor Early Head Start, Community Action

Alumni:
Alanna Dierking
Jolene Dunham
Gabby Frank
Sarah Lueger
Jessica Shippee McDaniel
Anne Mills (Regan)
Aidan Moreland (Allen)
Lexi Morse
Jenn Ng
Anna Risinger
Nadine Robertson (Jaffal)
Charles Schmiedeler
Toni Wendling

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Strengths:

- Amazing effort putting together the Virtual Resource Room and organized approach to this virtual visit.
- Strong support of nursing program from university and hospital system – unique and strong partnership. SVH has allowed nursing students to work on units with COVID patients and work/learn along with the nursing staff!
- Nurses at SVH very appreciative of the Baker nursing faculty and mention them "going above and beyond" for their students.
- Students chose Baker because of the rigor and high pass rates, and knowledge that they would know how to be good nurses on graduation.
- Students feel they have input into decisions and coursework and would highly recommend this program
- Innovative clinical opportunities (Marian Dental Clinic, Escape Room, and Streams of Hope International trip to Kenya).
- Students presenting research at Stormont during Research Day.
- Faculty very engaged and knowledgeable
- Association of SON with SVH allows for competitive faculty salary, support of nursing faculty, benefits of the Magnet designation, varied and rich clinical experiences, and opportunities for employment of graduates
- Alumni (2020) commented on their thanks to their faculty and Stormont Vail Health for ensuring they could have clinical experiences during the pandemic, as they are aware that this has not necessarily been true for other programs' graduates.
- Community of interest /Advisory group are engaged and very complimentary of the program and its impact on the community and the nursing students who graduate from this program
- Faculty-led Student Success program (started in 2015) – well defined parameters and collaborative support and follow up for the student

Opportunities:

- Student vs employee role clarified regarding scope of practice.

Recommendations:

Recommend reapproval for time period of national accreditation (10 years).

Major Curriculum Change Request
Kansas State Board of Nursing
60-2-104 (g) (1) (2) (3) - Prelicensure
Must be received by KSBN at least 30 days before the board meeting

Date: _____1/20/2021_____

Name of Program: _____FHTC Practical Nursing_____

Program Administrator
including credentials: _____Patricia Parks, MSN, RN_____

Parent Institution: _____Flint Hills Technical College_____

Address of Institution: _____3301 W. 18th Ave._____

_____Emporia, Ks 66801_____

Level of the Program
for which the change
Is being requested _____First and Second Semester_____

Briefly describe the
Change being requested: _____Include IV therapy in Practical Nursing_____

_____curriculum starting Fall of 2021_____

Action Taken

Education Committee Review _____
                                    Date

Action Taken: ☐ Approved ☐ Not Approved ☐ Deferred

Board of Nursing Review _____
                                    Date

Action Taken: ☐ Approved ☐ Not Approved ☐ Deferred

_____   _____
Nursing Education Compliance Officer   Date

Prelicensure Major Curriculum Change Request
60-2-104 (g) (1) (2) (3)

☒ **(1)** Any change in the plan of nursing curriculum organization involving:

    ☐ Philosophy

    ☐ Number of semesters of study

    ☐ Delivery method of nursing courses

(This includes things such as sequencing, learning methods, content areas, and resources.)

Provide:
- Written documentation that includes a comparison of old to new, this may be in the form of a table
- Address any changes needed in resources and the adequacy of resources, if resources are involved in the change

☐ **(2)** Any change in content requiring a change of clock–hours or credit hours in nursing courses

Provide:
- Rationale for the change
- Show faculty involvement in process –may use statements of support from faculty and/or evidence of understanding of the change
- A table that shows the differences between the old and new curriculum.
- Include single page course descriptions. **Do Not submit entire course syllabus**

☐ **(3)** Any change in the number of students to be admitted to the nursing education program

Provide:
- Statements of explanation from the program
- Facility letters which must include that they are aware of changes and the effect if any the change will have on the facility and the patients/clients and facility staff
- Reaffirm 1:10 clinical ratio by providing a working model of the clinical schedule
- Information that resources such as library, AV materials and equipment, laboratory, faculty, and support services are adequate

In making decisions concerning curriculum change requests, the Board of Nursing asks if the changes made are consistent with sound educational principles.

Education Committee Members:

FHTC Practical Nursing Program is seeking approval for a major curriculum change that would incorporate IV therapy into the curriculum. We request approval for this change for implementation in the Fall of 2021.

Faculty support the change in the curriculum. If approved, students will be able to utilize their IV therapy skills following graduation instead of waiting to take a separate IV therapy course. Students will go through skills teaching and check-offs prior to using the IV skills at clinical. Because or institution also offers an IV certification course, we have all the supplies and resources needed to implement the IV therapy into the curriculum.

I have attached a course syllabi and content unit objectives for IV therapy portion of the curriculum.

When approved faculty agree to follow the K.S.A. 65-1136 rules and regulations as well as any further mandates made by KSBN related to the IV therapy course.

If you have any further questions please contact me at 620.341.1327 or email pparks@fhtc.edu.

Sincerely,

Patricia Parks, RN

Patricia Parks, MSN, RN
Interim Director of Nursing

620.343.4600 | 800.711.6947   www.fhtc.edu   3301 West 18ᵗʰ Avenue | Emporia, Kansas

Instructors: Kim McNeese, MSN, RN; Kayla Luder, BSN, RN
3301 West 18ᵗʰ Ave.
Emporia, Kansas 66801

Phone (KM): 620-343-0869   Office: 620-341-1328
Phone (KL): 620-481-6017   Office: 620-341-1368

E-mail: kmcneese@fhtc.edu; kluder@fhtc.edu; kflott@fhtc.edu;
tsoyez@fhtc.edu

Office Hours: Email for appointment

Section A   10/14/2020 - 12/17/2020

PREREQUISITE
Admission to the nursing program. The student must successfully complete NSG 121 KSPN Foundations of Nursing; NSG 122 KSPN foundations of Nursing Clinical.

CO-REQUISITE
The student must also be enrolled in NSG 125 Nursing Care of Adults I.

COURSE DESCRIPTION
This course focuses on the care of adult clients with common medical/surgical health alterations. The clinical laboratory experience provides the student an opportunity to apply the theoretical concepts from Nursing Care of Adults I and implement safe client care in selected settings.

STUDENT REQUIRED RESOURCES
TEXTS:
Ackley, B.J., Ladwig, G.B., Makic, M.B., Martinez-Kratz, M., & Zanotti, M. (2020).
       Nursing diagnosis handbook: An evidence based guide to planning care.
       (12th ed.). St. Louis: Elsevier.

Dewitt, S.C., Stromberg, H.K. & Vreeland Dallred, Carol. (2017). *Medical-surgical*
       nursing,
       concepts & practice. (3rd ed.). St. Louis: Saunders.

Vallerand, April Hazard, Sanoski, Cynthia A., and Deglin, Judith Hopfer. (2017). Davis's Drug
    Guide for Nurses (15th ed.). Philadelphia, PA: FA Davis.

COURSE LEARNING OUTCOMES (COMPETENCIES)

1. Describe how to perform a focused assessment on adult clients with common alterations in health related to selected body systems.

2. Develop a relationship-centered plan of care that incorporates current evidence and includes cultural, spiritual, and developmentally appropriate interventions for clients with commonly occurring health alterations that have predictable outcomes.

3. Describe the role of members of the health care team in regard to caring for clients with commonly occurring health alterations that have predictable outcomes.

4. Apply a basic level of knowledge of pathophysiology, pharmacology, and nutrition as it relates to adult clients with commonly occurring health alterations that have predictable outcomes.

5. Articulate verbal and nonverbal communication strategies that are used to promote caring, therapeutic relationships with clients and their families.

6. Describe how information technology is used to communicate with members of the health care team by accurately documenting client care in a secure and timely manner.

7. Describe the health education needs experienced by clients with commonly occurring health alterations that have predictable outcomes.

8. Describe strategies that provide quality care in a safe environment for clients, self, and others.

9. Discuss how organizational and time management skills are used when providing care to adult clients.

10. Describe the role of the practical nurse in maintaining personal and professional accountability for the delivery of standard-based, ethical and legal care to clients.

Course Information:
Course Number and Title: KSPN 006 - KSPN Nursing Care of Adults I Clinical
Total Credit/Contact Hours: 1- 3
         Clinical Credit/Contact Hours: 1- 3

Course Description:
This course focuses on the care of adult clients with common medical/surgical health alterations. The clinical laboratory experience gives students the opportunity to apply theoretical concepts from Nursing Care of Adults I and implement safe client care in selected settings.

Course Objectives:
1. Perform a focused assessment on adult clients differentiating between expected and unexpected findings.

2. Assist in developing an evidence-based plan of care that includes cultural, spiritual, and developmentally appropriate interventions related to health promotion and commonly occurring health alterations of adult clients who have predictable outcomes.

3. Participate as a member of the health care team and client advocate while providing quality care that promotes client safety for adults.

4. Apply a basic level of knowledge of pathophysiology, pharmacology, and nutrition, as well as evidence based practice, to the care of adult clients with commonly occurring health alterations who have predictable outcomes.

Use verbal and nonverbal communication that promotes therapeutic relationships with adult clients and their families, as well as professional relationships with members of the health care team.

6. Use information technology to access evidence based literature as well as communicate with members of the health care team, accurately documenting client care in a secure and timely manner.

7. Participate in identifying the educational needs of adult clients and their families, as well as reinforcing education provided by members of the health care team.

8. Participate in quality improvement practices while reflecting on individual action to improve client outcomes.

9. Provide an environment that is safe and reduces risk of harm for clients, self, and others.

10. Use organizational, time management, and priority-setting skills when providing care to adult clients.

11. Adhere to ethical, legal and professional standards while maintaining accountability and responsibility for the care provided to adult clients and their families.

Content Units:
IV Therapy

     Unit Objectives:

     1. Demonstrate proper techniques for medication administration, maintenance, and monitoring of peripheral intravenous fluid therapy.

     2 Demonstrate documentation related to intravenous fluid therapy

Content Topics:

Clinical Objectives:

A. Provide nursing care that is relationship-centered, caring, culturally sensitive and based on the physiological, psychosocial and spiritual needs of clients with commonly occurring health problems that have predictable outcomes.

A.1. Perform a focused assessment on adult clients differentiating between expected and unexpected findings. A.2. Contribute to the development of an individualized relationship-centered plan of care for adult client(s). A.3. Provide culturally sensitive care to adults from diverse backgrounds. A.4. Identify opportunities for client advocacy. A.5. Use verbal and nonverbal communication that promotes caring, therapeutic relationships with adult clients. A.6. Reinforce health-related education provided to adult clients.

B. Collaborate with the client and members of the interprofessional health care team to promote continuity of care and shared decision-making.

B.1. Participate as a member of the interprofessional health care team. B.2. Communicate client-related information to designated members of the healthcare team in a timely manner. B.3. Collaborate with the healthcare team when a situation requires knowledge/actions beyond the expertise and scope of LPN practice.

C. Use current evidence as a basis for nursing practice.

C.1. Access evidence from credible resources. C.2. Utilize current evidence as a basis for nursing practice.

D. Use information and client care technology to support the delivery of safe, quality client care.

D.1. Use information technology to communicate with other members of the health care team. D.2. Use information technology to securely and accurately document nursing care while monitoring client response. D.3. Use client care technology in a way that supports quality and safe processes of care.

E. Participate in quality improvement practices evaluating their effect on client outcomes.

E.1. Report concerns related to the quality of client care. E.2. Reflect on individual action necessary to provide quality care.

F. Provide an environment that is safe and reduces risk of harm for clients, self, and others.

F.1. Report actual and potential safety risks to clients, self, and others in the health care environment. F.2. Implement actions that promote safe practice and a safe environment for clients, self, and others. F.3. Implement interventions consistent with the National Patient Safety Goals in selected settings.

G. Demonstrate accountability for client care that incorporates legal and ethical principles, regulatory guidelines, and standards of nursing practice.

G.1. Practice nursing in accordance with the Kansas PN scope of practice as dictated by state's practical nursing regulations and statutes G.2. Use the Client Bill of Rights, and the Self Determination Act along with an established nursing code of ethics as a personal framework for practice. G.3. Maintain personal and professional accountability in the delivery of client care. G.4. Practice in accordance with institutional policies and procedures.

H. Use leadership skills that support the provision and coordination of client care.

H.1. Use organizational and time management when providing client care. H.2. Support assistive personnel with client care tasks. H.3. Supervise assistive personnel to whom tasks have been assigned.

Major Curriculum Change Request
Kansas State Board of Nursing
60-2-104 (g) (1) (2) (3) - Prelicensure
Must be received by KSBN at least 30 days before the board meeting

Date: 01/26/2021

Name of Program: Traditional BSN (TBSN)

Program Administrator
 including credentials: Sarah Miller EdD, MSN, RN Chief Nursing Administrator

Parent Institution: MidAmerica Nazarene University

Address of Institution: 2030 E. College Way

Olathe, KS 66062

Level of the Program
for which the change
Is being requested 1st Semester/Junior TBSN

Briefly describe the
Change being requested: In an effort to more closely align TBSN and Accelerated BSN courses with each other, we propose adding an additional credit hour

to the TBSN Fundamentals course. We are also proposing a credit hour deduction from another course so that the overal program hours remain the same.

Action Taken

Education Committee Review _____
                                              Date

Action Taken: ☐ Approved ☐ Not Approved ☐ Deferred

Board of Nursing Review _____
                                          Date

Action Taken: ☐ Approved ☐ Not Approved ☐ Deferred

_____   _____
Nursing Education Compliance Officer   Date

Prelicensure Major Curriculum Change Request
60-2-104 (g) (1) (2) (3)

☐ **(1)** Any change in the plan of nursing curriculum organization involving:

    ☐ Philosophy

    ☐ Number of semesters of study

    ☐ Delivery method of nursing courses

(This includes things such as sequencing, learning methods, content areas, and resources.)

Provide:
- Written documentation that includes a comparison of old to new, this may be in the form of a table
- Address any changes needed in resources and the adequacy of resources, if resources are involved in the change

☑ **(2)** Any change in content requiring a change of clock–hours or credit hours in nursing courses

Provide:
- Rationale for the change
- Show faculty involvement in process –may use statements of support from faculty and/or evidence of understanding of the change
- A table that shows the differences between the old and new curriculum.
- Include single page course descriptions. **Do Not submit entire course syllabus**

☐ **(3)** Any change in the number of students to be admitted to the nursing education program

Provide:
- Statements of explanation from the program
- Facility letters which must include that they are aware of changes and the effect if any the change will have on the facility and the patients/clients and facility staff
- Reaffirm 1:10 clinical ratio by providing a working model of the clinical schedule
- Information that resources such as library, AV materials and equipment, laboratory, faculty, and support services are adequate

In making decisions concerning curriculum change requests, the Board of Nursing asks if the changes made are consistent with sound educational principles.

Rationale

We currently have 3 courses (1 TBSN and 2 ABSN) that were originally designed to teach our students the basics of nursing, including nursing skills. The TBSN program currently has 1-4 credit hour course (Fundamentals of Nursing Care); the ABSN program has 1-3 credit hour course (Concepts of Nursing Care I) taught in Module 1, and 1-2 credit hour course (Concepts of Nursing Care II) taught in Module 2. In an effort to align the TBSN course and the ABSN courses, we would like to add 1 credit hour to the TBSN Fundamentals in Nursing Course (with 0.5 credit added to theory and 0.5 added to lab/clinical). This additional 1 credit hour will allow TBSN students the opportunity to have more hands-on learning time to practice and perfect essential nursing skills. The additional credit hour will not add an overall credit hour change to the TBSN nursing program, as we are also proposing to remove 1 credit hour from another TBSN nursing course (see separate proposal). The change in credit hour will necessitate a change in course number to follow university course numbering protocol.

Faculty Involvement

The proposal was brought forth to our PreLicensure Faculty Assembly Committee (comprised of all pre-licensure faculty and staff) by the Curriculum Committee. The Curriculum Committee is comprised of four full time pre-licensure faculty members and one full time post-licensure (RN-BSN program) faculty member. Please see the attached PLFA Meeting Minutes from 11/05/20 in attached document. After approval at the PLFA level, the proposal was taken to the School of Nursing (SON) Meeting, which is comprised of all faculty and staff in the SON). Following approval at the SON level, the proposal was taken to the Academic Affairs Committee and then Faculty Congress (comprised of all full-time faculty at MNU).

Comparison Table

Current Curriculum		Proposed Curriculum	
NURS 2184 Fundamentals of Nursing Care	4 credits	NURS 2285 Fundamentals of Nursing Care	5 credits
NURS 2002 Health Assessment	2 credits	NURS 2002 Health Assessment	2 credits
NURS 2032 Gerontological Nursing	2 credits	NURS 2032 Gerontological Nursing	2 credits
NURS 2013 Pathophysiology	3 credits	NURS 2013 Pathophysiology	3 credits
NURS1003 Nursing Perspectives	3 credits	NURS1003 Nursing Perspectives	3 credits
NURS 3513 Pharmacotherapy	3 credits	NURS 3513 Pharmacotherapy	3 credits
NURS 3068 Health Restoration I & Clinical	8 credits	NURS 3068 Health Restoration I & Clinical	8 credits
NURS 4282 Mental Health Nursing	2 credits	NURS 4282 Mental Health Nursing	2 credits
NURS 3523 Ethics, Quality & Safety in Nsg	3 credits	NURS 3522 Ethics, Quality & Safety in Nsg	2 credits
NURS 3188 Health Restoration II & Clinical	8 credits	NURS 3188 Health Restoration II & Clinical	8 credits
NURS 4083 Maternal & Women's Health	3 credits	NURS 4083 Maternal & Women's Health	3 credits
NURS 4383 Community Health Nursing	3 credits	NURS 4383 Community Health Nursing	3 credits
NURS 4103 Nursing Research/EBP	3 credits	NURS 4103 Nursing Research/EBP	3 credits
NURS 4403 Role Development	3 credits	NURS 4403 Role Development	3 credits
NURS 4584 Nursing Internship	4 credits	NURS 4584 Nursing Internship	4 credits

NURS 4211 Senior Seminar	1 credit	NURS 4211 Senior Seminar	1 credit
NURS 4912 Acute-Complex Nursing Care	2 credits	NURS 4912 Acute-Complex Nursing Care	2 credits
NURS 3783 Pediatric Nursing & Clinical	3 credits	NURS 3783 Pediatric Nursing & Clinical	3 credits
Total Program Hours = 60		Total Program Hours = 60	

Course Description (no change)

A study of evidence-based nursing practice regarding fundamental nursing interventions and the professional nursing role. The knowledge, skills, and attitudes necessary to perform procedures and assess healthcare outcomes related to therapeutic interventions are presented, and students demonstrate their understanding through testing and graded return demonstrations. Special emphasis is given to the delivery of relationship centered care within a holistic framework as it applies to proficient psychomotor skills and nursing practice. Clinical experiences expose students to a range of technologies that facilitate health promotion, maintenance, and restoration, including patient monitoring systems, medication administration systems, and other technologies to support patient care. Competency with drug calculation and safe medication administration are also required proficiencies. The overreaching goal for this course is the delivery of safe and effective "relationship-centered care' to a diverse patient population. Learning experiences occur through lecture/discussion, assignments (including online learning), the simulated laboratory setting as well as clinical healthcare facilities.

Major Curriculum Change Request
Kansas State Board of Nursing
60-2-104 (g) (1) (2) (3) - Prelicensure
Must be received by KSBN at least 30 days before the board meeting

Date: 01/26/2021

Name of Program: Traditional BSN (TBSN)

Program Administrator
including credentials: Sarah Miller EdD, MSN, RN Chief Nursing Administrator

Parent Institution: MidAmerica Nazarene University

Address of Institution: 2030 E. College Way

Olathe, KS 66062

Level of the Program
for which the change
Is being requested: 2nd Semester/Junior TBSN

Briefly describe the
Change being requested: In an effort to more closely align TBSN and Accelerated BSN courses with each other, we propose deducting one credit hour from the TBSN

Ethics, Qualitiy, & Safety in Nursing course. We are also proposing a credit hour addition from another course so that the overal program hours remain the same.

Action Taken

Education Committee Review _____
                                            Date

Action Taken: ☐ Approved   ☐ Not Approved   ☐ Deferred

Board of Nursing Review _____
                                          Date

Action Taken: ☐ Approved   ☐ Not Approved   ☐ Deferred

_____   _____
Nursing Education Compliance Officer   Date

Prelicensure Major Curriculum Change Request
60-2-104 (g) (1) (2) (3)

☐ **(1)** Any change in the plan of nursing curriculum organization involving:

    ☐ Philosophy

    ☐ Number of semesters of study

    ☐ Delivery method of nursing courses

(This includes things such as sequencing, learning methods, content areas, and resources.)

Provide:
- Written documentation that includes a comparison of old to new, this may be in the form of a table
- Address any changes needed in resources and the adequacy of resources, if resources are involved in the change

☑ **(2)** Any change in content requiring a change of clock–hours or credit hours in nursing courses

Provide:
- Rationale for the change
- Show faculty involvement in process –may use statements of support from faculty and/or evidence of understanding of the change
- A table that shows the differences between the old and new curriculum.
- Include single page course descriptions. **Do Not submit entire course syllabus**

☐ **(3)** Any change in the number of students to be admitted to the nursing education program

Provide:
- Statements of explanation from the program
- Facility letters which must include that they are aware of changes and the effect if any the change will have on the facility and the patients/clients and facility staff
- Reaffirm 1:10 clinical ratio by providing a working model of the clinical schedule
- Information that resources such as library, AV materials and equipment, laboratory, faculty, and support services are adequate

In making decisions concerning curriculum change requests, the Board of Nursing asks if the changes made are consistent with sound educational principles.

11/04; Rev. 5/28/2009, 3/11, 6/16, 8/17, 10/17

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Rationale

We currently have 2 courses (1 ABSN-NURS 3402 and 1 TBSN-NURS 3523) that were originally designed separately, but both courses were designed around quality, safety, and ethics; both were taught similarly even though they had different names and course descriptions/objectives. In an effort to align the 2 courses with each other (which will add more consistency between ABSN and TBSN) and align them with current nursing practice, we would like to make minor changes to the course descriptions and course objectives. In addition, we would like to remove one credit hour from NURS 3523 to make it align in credit hours with NURS 3402 (Culture of Safety and Quality in Nursing Practice). We would like both courses to have the same name. The change in credit hour will necessitate a change in course number to follow university course numbering protocol. The additional credit hour will not deduct an overall credit hour change to the TBSN nursing program, as we are also proposing to add 1 credit hour to another TBSN nursing course (see separate proposal).

Faculty Involvement

The proposal was brought forth to our PreLicensure Faculty Assembly Committee (comprised of all pre-licensure faculty and staff) by the Curriculum Committee. The Curriculum Committee is comprised of four full time pre-licensure faculty members and one full time post-licensure (RN-BSN program) faculty member. Please see the attached PLFA Meeting Minutes from 11/05/20 in attached document. After approval at the PLFA level, the proposal was taken to the School of Nursing (SON) Meeting, which is comprised of all faculty and staff in the SON). Following approval at the SON level, the proposal was taken to the Academic Affairs Committee and then Faculty Congress (comprised of all full-time faculty at MNU).

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NURS 3783 Pediatric Nursing & Clinical	3 credits	NURS 3783 Pediatric Nursing & Clinical	3 credits
Total Program Hours = 60		Total Program Hours = 60	

Current Course Description:

This course offers advanced study in the area of patient safety and quality. The importance of human interaction as the foundation of any therapeutic or healing activity is explored. Emphasized is the model of "just culture" as a conceptual framework that leads to improvement of patient safety outcomes through managing human behavior and system design. Emphasis will be given to look at safety and quality through the principles of moral decision-making, and ethical theories derived from the Christian faith. "Quality and Safety Education for Nurses" (QSEN) and the "Institute of Medicine" (IOM) reports will be utilized. The application of informatics is explored as an avenue to enhance healthcare outcomes.

Proposed Course Description:

This course offers insight into the ethical practice of nursing, as well as safe and quality patient care. Using the model of "just culture" as a conceptual framework, this course will explore how managing human behavior and system design leads to improvement of patient safety outcomes. Principles of moral decision-making and ethical theories derived from the Christian faith will be utilized to examine patient safety and quality of nursing care.

Current Course Objectives:

By conclusion of the course, the student will:

1. Understand the professional nurse's role in promoting safe and quality outcomes of care for diverse populations.
2. Recognize quality and patient safety as complex system issues that involve patients and members of the healthcare team.
3. Examine how the safety, quality and cost effectiveness of health care can be improved through the active involvement of patients and families.
4. Examine common barriers to safety and quality care practices in healthcare facilities.
5. Value the impact of effective and factual communication in the improvement of quality, safe patient care and conflict resolution.
6. Understand how relationship-centered care can impact safety and quality of patient outcomes and the professional's safety.
7. Clarify the roles and accountabilities of all members of the health care team.
8. Discuss how to integrate ethics and best current evidence, with clinical expertise to deliver optimal care.
9. Appreciate the need for continuous improvement in clinical and professional practice based on new knowledge.

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10. Explain the importance of variation and measurement in assessing quality care.
11. Describe approaches for changing processes of care and improving safety and quality.
12. Discusses mechanisms to minimize risk of harm to patients and providers through both system effectiveness and individual performance.
13. Describe factors that create a culture of safety.
14. Discuss potential and actual impact of national safety resources, initiatives and regulations.
15. Use information and technology to communicate, manage knowledge, mitigate error, and support decision making.
16. Understand the importance of protecting the confidentiality of protected health information of electronic health records.
17. Explain the standards of professional behavior for nurses and the principles of knowing right from a wrong.
18. Define nursing duties and responsibilities towards clients, co-workers, profession and community.
19. Explain the philosophical and theological study of morality, moral judgments and moral problems.
20. Define three types of ethics.

Proposed Course Objectives:

Upon conclusion of the course, the student will:

1. Understand how nursing ethics is essential in providing competent care and supporting the patient, nurse, and profession.
2. Explain the use of ethical theories and principles to guide nursing care.
3. Recognize causes and responses to moral distress in nursing practice.
4. Understand the professional nurse's role in promoting positive safety outcomes and quality care of diverse populations.
5. Explain how collaboration from the interprofessional team impacts patient safety outcomes.
6. Identify barriers that can impact the safety and quality of care practices in healthcare settings.
7. Implement effective communication and conflict resolution strategies to resolve ethical issues.
8. Understand how eliciting the preferences, values, and needs of the patient helps achieve quality in healthcare.
9. Discuss the professional nurse's role in using ethical decision making and current evidence-based research.
10. Understand nurse's responsibility to seek lifelong learning to provide optimal patient care.
11. Use healthcare informatics to communicate, manage knowledge, mitigate error, support decision making, and protect patient confidentiality.
12. Understand the process of identifying potential problems and developing strategies to improve care.

MIDAMERICA
NAZARENE UNIVERSITY

SCHOOL OF NURSING

PRELICENSURE FACULTY ASSEMBY MEETING MINUTES

Date & Time	Thursday, November 5, 2020
Call to Order	3:30 pm
Adjourned	5:15 pm (Students were asked to leave at 4: 30 pm due to confidential information faculty needed to discuss)
Members Present	Crysti Danahy, Anne Mercer, Stacy Smith, Ashley Hurt, Courtney Roseberry, Amanda Addis, Jennifer Ferguson, Karen Wiegman, Teresa Lamaster, Nancy Zehr, Vanessa Schott, Tammy Sluyter Students: TBSN Class of 2022 / Lucy Knapp, Rachel Jolly, Majesta Dixon; ABSN Spring 2020 / Leah Peterson, Samantha Campbell, Rebecca Ellington; ABSN Fall 2020 / Anna Daly, Courtney Latham, Mikhaelle Heald
Members Absent	
Approval of Minutes	October 1, 2020
Next Meeting	
Minutes Taken & Submitted	Tammy Sluyter

Topic	Discussion	Follow-Up and Person Responsible	Date
Call to Order and Prayer	Dr. Crysti Danahy opened in prayer.		
Review and Approve Minutes	Dr. Karen Wiegman motioned to accept minutes from 10-1-2020. Prof. Courtney Roseberry 2nds the motion. Unanimous vote to accept minutes as written.		
Student Representative Reports	Dr. Danahy spoke about the TBSN Seniors could not be at the meeting because they are in clinicals. Dr. Danahy told the students that were present, "if you are not able to attend a meeting and have something to report, please email your report to either Nancy Zehr or Tammy Sluyter."		

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Topic	Discussion	Follow-Up and Person Responsible	Date
	Student introductions. There was talk about Enneagram. Most of the students and faculty know their numbers and enjoyed discussing their numbers.		
ABSN Spring 2020	Officers: Leah Peterson, Samantha Campbell, Rebecca Ellington Leah Peterson said they don't have a lot to report. They feel there are not enough power strips at the Embassy Suites. Dr. Danahy asked Prof. Anne Mercer to keep her informed about this issue. Prof. Mercer said more have been put up front, but not in the back. Dr. Danahy said she will look into this. The cohort is excited for clinical placements and capstone. They thanked Prof. Amanda Addis. There was a struggle with proctor free.		
ABSN Fall 2020	Officers: Anna Daly, Courtney Latham, Mikhaelle Heald Anna Daly sent out a survey to her classmates. Please see the attachment for the details. Some concerns about group projects. They asked why they have assigned seating, but then are paired with people not near their seating? They really don't have a COVID concern, they just wondered why. There was discussion regarding maybe doing group projects online, because they cannot find a place to meet all together. It was mentioned they could possibly zoom for study or group projects – it would be more comfortable, not having to wear a mask. Faculty reiterated that if they meet in person for group projects or studying – wear your mask. Dr. Karen Wiegman stated that "life is basically a group project." Rebecca Ellington (from the ABSN Spring cohort) asked if faculty looks at who is the group leader in a project? Prof. Ashley Hurt said she requires everyone to makes a comment – because we really don't know who leads all the time. Prof. Courtney Roseberry said she does a group contract. Prof. Hurt said it might be		

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Topic	Discussion	Follow-Up and Person Responsible	Date
	good to have everyone do contracts. Mikhaelle Heald remarked that "as nurses, we will all be a leader at sometime." Rachel Jolly (from the TBSN 2022 cohort) stated that she like when no leader is chosen – let a natural leader lead. Other concerns were after Thanksgiving. It was asked why they can be in labs, Sim, and clinical, but not in class. Faculty responded – because of the value of being hands on. Dr. Danahy stated the university would prefer no one be on campus after Thanksgiving, but we have learned from the past – we need the hands on piece. This will be for both ABSN and TBSN. The students present stated how much they enjoy lab. Samantha Campbell (from the ABSN Spring cohort) asked if there is a risk for capstone? Prof. Addis stated she feels MNU will be fine for capstone. Dr. Danahy stated that in clinical you will always wear proper PPE. As long as you do, even if you are exposed to a positive COVID case, you won't have to quarantine. Courtney Latham asked when clinical orientation will be. Dr. Danahy said it will be the first day of clinical. Mikhaelle Heald asked about the rotations. She wanted to know if everyone will get to be in a morning and an afternoon rotation. She was concerned about the handoff. Prof. Addis said everyone will get to be in each shift. Anna Daly asked about why they learn about IV's at the end of Module 2 don't use them until after the break? She was concerned about forgetting. Dr. Danahy stated it is not uncommon for a nursing student to never start an IV during clinicals. She said to focus on talking to the patients, vital signs, and assessment. There was a lot of discussion regarding IV's – faculty tried to reassure the students and calm nerves.		

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Topic	Discussion	Follow-Up and Person Responsible	Date
	Students had several concerns regarding going into clinicals – Dr. Danahy told them to utilize their clinical instructors, if you have questions. Dr. Danahy stated there will be open lab in the Spring. It is a good option for students to help them feel more confident. Prof. Addis stated that the more you are in clinical, the more confident you will become. Dr. Danahy stated that uncertainty is normal. Rachel Jolly (from the TBSN 2022 cohort) asked if there could be a pep talk. Dr. Danahy said she could do that.		
TBSN Class of 2021	No class officers in attendance. Students in clinicals.		
TBSN Class of 2022	Officers: Lucy Knapp, Rachel Jolly, Majesta Dixon Lucy Knapp stated that she did not prepare a report. Dr. Danahy asked if they have any concerns? They all felt like everything was good.		
Standing Reports:			
Mission & Governance	Anne Mercer, chair Nothing to report.		
Curriculum Committee	Amanda Addis, chair Voting Item: NURS 2184 Fundamentals (adding one credit hour, Course description and objective changes). NURS 3183 & 3182 Concepts of Nursing 1 & 2 (change in course description and objectives). *See attachments*		

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Topic	Discussion	Follow-Up and Person Responsible	Date
	Curriculum Committee brings the above motion to the table. Stacy Smith 2nd the motion. Motion approved. Voting Item: NURS 3523 Ethics, Quality, and Safety in Nursing (decreasing by 1 credit hour and course objective changes). NURS 3402 Culture of Safety and Quality in Nursing practice (name, course description, and course objective changes). *See attachments* Curriculum Committee brings the above motion to the table. Anne Mercer 2nd the motion. Motion approved. Dr. Danahy stated the course # and name will need to change for Discipline & Practice and Nursing Perspectives. Dr. Damron spoke with Pat Walsh regarding these changes. It will go to KSBN in March 2021. These changes won't happen until August 2021. This this information was not on the agenda, Dr. Danahy will send out an email vote. Results will be added to the December meeting. Textbook Adoption *See attachment* Academic Adjustments for English Language Learners Policy *See attachment* Dr. Vanessa Schott said she is impressed with the support MNU has for ELL students. There was a lot of discussion regarding the ELL policy. Questions about if the students can pick and choose when they use the resources? Will someone be available to the students to test early? Where will the students test? Dr. Danahy said Dr. Damron suggested having Jill Gonzales-Bravo come speak to the faculty. Prof. Addis suggested maybe a lunch and learn. Faculty would like to schedule this for before Christmas Break. Dr. Danahy talked about a tutoring program at UMKC. She stated it is expensive, but we could possibly refer students.	Dr. Danahy will send out an email to vote on a new name.	

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Topic	Discussion	Follow-Up and Person Responsible	Date
	Curriculum Committee brings the above motion to the table. Courtney Roseberry 2nd the motion. Motion was approved.		
ABSN Committee	Jennifer Ferguson, chair At the 10/16/2020 ABSN meeting 19 applicants were offered acceptance. Of those 19, 15 have accepted their offer. The ABSN Spring 2021 cohort currently has 23 students. Prof. Ferguson stated, we should not have a problem filling this cohort. Prof. Ferguson stated there are great applicants. Prof. Ferguson spoke about future orientations. The plan is to be finished by noon. We will not need to provide lunch.		
TBSN Committee	Anne Mercer, chair They have met and will be meeting again next week. They have discussed plans for orientation. Prof. Mercer feels they are doing good.		
Teaching & Learning Committee	Stacy Smith, chair Adjunct Attendance Policy *See attachment* Teaching & Learning Committee brings the above motion to the table. Jennifer Ferguson 2nd the motion. Motion was approved.		
Clinical Education Coordinator	Amanda Addis		

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Topic	Discussion	Follow-Up and Person Responsible	Date
	Prof. Addis spoke about the personality survey. Dr. Schott asked if she would have much input into the survey? Prof. Ferguson said she will in the future.		
TBSN Academic Advising & Student Recruitment	Anne Mercer Prof. Mercer talked about a learning process with student files. Prof. Mercer met with 5 prospective students in October. Prof. Mercer stated that quite a few freshmen have not come in yet. Prof. Mercer talked about the Virtual Open House for Nursing. It will be November 19, 2020. Dr. Danahy and Prof. Ferguson will be in attendance. Dr. Danahy suggested to send out the flyer to all Pre-Licensure nursing students.		
Continuing/New Business			
VPC Director	Vanessa Schott *Please see Dr. Schott's attached report*		
Early Move in for Nursing Students Update	Dr. Danahy spoke with Daniel Rincones and Dr. Damron. They have approved the nursing students moving in early. The School of Nursing will be responsible for the cost of meals for the 2 days the students move in early.		
Scholarship Challenge	Prof. Addis talked about the Scholarship Challenge. It will be November 21, 2020 via zoom. Prof. Addis said it is a lot of fun. If you are interested, please contact Mark Hayse.		
ABSN Student	An ABSN Student reached out to Prof. Mercer about not returning to campus after Thanksgiving. The student lives several states away from Kansas and was hoping to not have to return after Thanksgiving. Prof. Mercer told the student		

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Topic	Discussion	Follow-Up and Person Responsible	Date
	they will need to be hands on for labs and clinicals. The student understands and will return.		
Lippincott	Dr. Danahy spoke with the Lippincott rep regarding billing. There is a possibility to move more materials to Lippincott. It would all be E-access, but students can request a hard copy if they want one. Price-wise – the more we purchase from Lippincott – the lower our cost would be. Mental Health, Pharm, and Research may be interested in using Lippincott for their resources.		
Moodle Upgrade	Dr. Danahy emailed faculty 11/5/2020 reminding them of the Moodle upgrade. See attachment.		
Moving forward	If everything goes as planned for course changes (voted on in Oct and Nov), proposals will go to AAC in Jan. 2021, FC in Jan. 2021 and KSBN in March 2021.		
Thank you	Dr. Danahy is very thankful to Nancy Zehr for all her hard work with enrollment. Dr. Wiegman is thankful to Prof. Anne Mercer for all the support she has provided.		
Motion to adjourn	Dr. Crysti Danahy made the motion Amanda Addis 2nd the motion Meeting adjourned at 5:15 p.m.		

The meeting was adjourned.

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Major Curriculum Change Request
Kansas State Board of Nursing
60-2-104 (g) (1) (2) (3) - Prelicensure
Must be received by KSBN at least 30 days before the board meeting

Date: _2/4/2021_

Name of Program: _KCKCC-PN Program_

Program Administrator
including credentials: _Susan Andersen, MSN, RN, CNE_

Parent Institution: _Kansas City Kansas Community College_

Address of Institution: _7250 State Ave_

Kansas City, Kansas, 66112

Level of the Program
for which the change
Is being requested   _PN_

Briefly describe the
Change being requested: _Eliminate NUPN 0134, 3 cr, add Medical Terminology pre-req 1cr,_

Applic of Assessment, 1 cr, Clinical Judgment 1 cr

Action Taken

Education Committee Review   _____
                                          Date

Action Taken: ☐   Approved   ☐   Not Approved   ☐   Deferred

Board of Nursing Review   _____
                                      Date

Action Taken: ☐   Approved   ☐   Not Approved   ☐   Deferred

_____   _____
Nursing Education Compliance Officer   Date

Prelicensure Major Curriculum Change Request
60-2-104 (g) (1) (2) (3)

☑ **(1)** Any change in the plan of nursing curriculum organization involving:

    ☑ Philosophy

    ☐ Number of semesters of study

    ☐ Delivery method of nursing courses

(This includes things such as sequencing, learning methods, content areas, and resources.)

Provide:
- Written documentation that includes a comparison of old to new, this may be in the form of a table
- Address any changes needed in resources and the adequacy of resources, if resources are involved in the change

☐ **(2)** Any change in content requiring a change of clock–hours or credit hours in nursing courses

Provide:
- Rationale for the change
- Show faculty involvement in process –may use statements of support from faculty and/or evidence of understanding of the change
- A table that shows the differences between the old and new curriculum.
- Include single page course descriptions. **Do Not submit entire course syllabus**

☐ **(3)** Any change in the number of students to be admitted to the nursing education program

Provide:
- Statements of explanation from the program
- Facility letters which must include that they are aware of changes and the effect if any the change will have on the facility and the patients/clients and facility staff
- Reaffirm 1:10 clinical ratio by providing a working model of the clinical schedule
- Information that resources such as library, AV materials and equipment, laboratory, faculty, and support services are adequate

In making decisions concerning curriculum change requests, the Board of Nursing asks if the changes made are consistent with sound educational principles.

KCKCC Major Curricular Change Request- PN Program Curriculum Spring 2021

Susan Andersen, Director of Nursing Education

Summary Statement:

Upon implementation of the new KS Core Curriculum for one year, faculty have determined that they would like to make some revisions to the non-core courses in the program to better enhance student learning experience. Faculty would like to eliminate the course NUPN 134 Theory Application of Assessment and Simulation, 3 credits that is currently in the first semester of the program. Faculty would like to replace this course with three, one-credit courses: BIOL -0120 Medical Terminology, 1 credit as a pre-requisite to the program, NUPN 0100 Application of Health Assessment for the Practical Nurse, 1 credit in the first semester, and finally NUPN 0200 Clinical Judgment for the Practical Nurse, 1 credit in the second semester. Additionally, faculty would like to restructure the curriculum to put Nursing Care of Adults 1 1 into the first semester. After one year of implementation of the new core curriculum for Kansas, faculty feel this would better enhance student chance for success in this course and in the program.

There will be no additional resources or clinical resources needed to implement these changes. There will no change in overall total clock or credit hours with these changes.

Rationale for change:

1) Removal of NUPN 134-Theory Application of Assessment and Simulation
Last year, the KCKCC Practical Nursing Program adopted the Core Curriculum mandated by the State of Kansas. KCKCC also elected to continue to teach an additional course from the old curriculum, a three credit assessment course. After further research, and teaching this new curriculum for one year, faculty feel it may be redundant and unnecessary to require students to take this extra 3 credit course on assessment along with the Kansas Core Curriculum.

Faculty have researched other Practical Nursing Programs in Kansas to determine whether they also have an assessment course in their Practical Nursing Curriculum. Faculty found no other programs have such a course.

Our first semester students are currently required to be enrolled in 18 credits with this course. This is a large number of credits for a new nursing student. Removing this course and restructuring of the curricular sequence will allow for a better balance of credits over the time of the program.

Finally, faculty have reviewed the Core Curriculum course outcomes and have found that physical and health assessment skills/techniques are already embedded throughout the core curriculum. No additional course is needed as this material is already being taught throughout the core.

2) Addition of BIOL-0120 Medical Terminology, 1 credit as a pre-requisite to the program, NUPN 0100 Application of Health Assessment for the Practical Nurse, 1 credit in the first semester, and finally NUPN 0200 Clinical Judgment for the Practical Nurse, 1 credit in the second semester.

According to KBOR guidelines, when faculty remove a course, faculty must replace those credit hours with relevant coursework to maintain a 45 hour minimum for Certification C. Faculty would like to replace this course with three-one credit courses that could be spread out over the time.

The first course faculty would like to require is a one credit Medical Terminology course prior to entering the program. Many of our students are English Language Learners (ELL) and this would give them a background in medical terminology which can be a bit like learning an altogether different language for students. Faculty feel this will help them be better prepared for their first nursing courses.

Secondly, faculty would add a 1 credit Clinical course to each semester they are in the Practical Nursing Program to aid in application and understanding of material learned in core courses. During Application of Health Assessment, the focus would be on helping them to apply their health assessment data to the care of the patient. During Application of Clinical Judgment in the second semester, faculty would use discussion and case studies to aid students in the development of clinical judgment and application of core curricular material. The next version of the NCLEX is going to be largely focused on assessing student clinical judgment and faculty feel these courses will be vital in developing that judgment needed not only for the NCLEX, but mainly for the safe care of clients.

Faculty feel this would be a better balance of credits for a more reasonable student course load and will help students have time with faculty to "put all the pieces together" while developing clinical judgment skills.

Our Nursing Advisory Board was surveyed as to whether they would support these curricular changes and the results indicated they overwhelmingly supported the faculty's recommendation for these course changes.

3) Resequencing of Coursework

Additionally, faculty would like to restructure our courses in a slightly different sequence than before. Faculty feel that the first half of second semester is extremely difficult for students. Faculty feel that the gap between Foundations and Nursing Care of Adults 1 1 negatively impacts student performance in this class. Faculty feel strongly that Nursing Care of Adults 1 1 is better placed in first semester. Important nursing skills, including IV certification are learned in this class and faculty feel that having this course earlier will provide the students increased opportunity for practice of these skills throughout the remainder of the program during clinical. Currently this course experiences a higher attrition rate than the others in the program despite varying attempts to support students with remediation and success sessions. Faculty feel placing this course directly after Foundations and allowing for more clinical practice of these skills will help students gain better understanding of this difficult material.

In order to move this course sooner in the program, faculty determined to move the specialty courses, KSPN 124/26 Maternal Child and KSPN 130 Mental Health, to the end of the program prior to graduation alongside KSPN 132 Leadership. Faculty state that this is how the curriculum had been structured in the past and students experienced much success with this structure. Faculty feel that students progressing directly from Foundations to Nursing Care of Adults 1 1 and then to Nursing Care of Adults 1 2 will give students a strong clinical background for application of concepts to the specialty areas. For example students will have a strong understanding of respiratory concepts prior to being asked to apply this knowledge to a pediatric patient.

Course Descriptions:

BIOL 0272- Medical Terminology

COURSE DESCRIPTION: This course will study the use of prefixes, suffixes and root words to build a vocabulary for medical personnel. The student begins by identifying roots, suffixes and prefixes of medical terminology, and then progresses by studying related medical terms of the body system (skin, skeleton, muscle, blood & lymph, cardiovascular, respiratory, digestive, and urinary systems). The student will explore how these terms relate to the general anatomy of the body..

NUPN 0100-Application of Health Assessment for the PN
COURSE DESCRIPTION:
This course will give practical nursing students the opportunity to apply their knowledge of assessment skills to providing care for clients of all ages and cultures. Students will

recognize and interpret normal findings of the client across the lifespan to lay the foundation for recognizing abnormal client presentation.

NUPN 0200-Clinical Judgement for the PN
COURSE DESCRIPTION:
Students will apply a selected clinical judgment model (ex: NCSBN Clinical Judgment Measurement Model) to various patient scenarios in order to develop clinical judgment skills necessary for practice. Students will also learn how clinical judgment can improve their ability to answer questions on the NCLEX-PN®.

Comparison of Old and New Curriculum Sequencing

Pre-Requisites

Old Pre-Requisite Coursework	Credits	New Pre Requisite Coursework	Credits
BIOL-0143 Anatomy and Physiology	5	BIOL-0143 Anatomy and Physiology	5
PSYC-0101-Psychology	3	PSYC-0101-Psychology	3
SPYC-0203-Human Development	3	SPYC-0203-Human Development	3
		BIOL 0272-Medical Terminology	1
Total Credits	**11**		**12**

First Semester

Old First Semester	Credits	New First Semester	Credits
1st 8 weeks		**1st 8 weeks**	
KSPN 0102 Foundations of Nursing	4	KSPN 0102 Foundations of Nursing	4
KSPN 0104 Foundations of Nursing Clinical	2	KSPN 0104 Foundations of Nursing Clinical	2
		KSPN 0115 Safe Medication Administration	2
2nd 8 weeks		**2nd 8 weeks**	
KSPN 124 Maternal Child Nursing	2	KSPN 0107 Nursing Care of Adults 1	5
KSPN 126 Maternal Child Nursing Clinical	1	KSPN Nursing Care of Adults 1 Clinical	2
KSPN 0130 Mental Health Nursing	2		
Full Semester Courses		**Full Semester Courses**	
KSPN 0115 Safe Medication Administration	2	NUPN 0100 Application of Health Assessment for the Practical Nurse	1
KSPN0128 Gerontology Nursing	2		
KSPN 0134 Theory Application through Assessment and Simulation	3		
Total Credits	**18**		**16**

Second Semester

Old Second Semester	Credits	New Second Semester	Credits
1st 8 weeks			
KSPN 0107 Nursing Care of Adults 1	5	KSPN 0121 Nursing Care of Adults 2	5
KSPN 0108 Nursing Care of Adults 1 Clinical	2	KSPN 0123 Nursing Care of Adults 2 Clinical	2
2nd 8 weeks		**2nd 8 weeks**	
KSPN 0121 Nursing Care of Adults 2	5	KSPN 124 Maternal Child Nursing	2
KSPN 0123 Nursing Care of Adults 2 Clinical	2	KSPN 126 Maternal Child Nursing Clinical	1
KSPN 0132 Leadership, Roles & Issues	2	KSPN 0130 Mental Health Nursing	2
		KSPN 0132 Leadership, Roles & Issues	2
Full Semester Courses			
		NUPN 0200 Clinical Judgment for the Practical Nurse	1
		KSPN 0128 Gerontology Nursing	2
Total Credits	**16**		**17**

New Coursework Title, Objectives, Sequence, Outline, Evaluation

Course Title	Course Objectives	Sequence of Course	Major Content Outline	Course Evaluation
BIOL 0272-Medical Terminology	1. The student will be able to define the three basic categories of word parts utilized in building medical terms. 2. The student will be able to identify the root, prefix in any medical term. 3. The student will be able to define and spell appropriately the medical terms associated with the systems of the body. 4. The student will be able to formulate the appropriate medical term from reading a medical description. 5. The student will be able to relate medical terms to the general anatomy of the body. 6. The student will be able to utilize internet and demonstrate computer skills.	Pre-Requisite to program	**COURSE OUTLINE:** A. Chapter I. Introduction to Word Parts: Word 1. word root 2. suffix 3. prefix 4. combining vowel, combining form 5. analyzing and defining medical terms B. Chapter II. Body Structure, Color and Oncology C. Radiology D. Integumentary System E. Respiratory System F. Urinary System 6. Common abbreviations G. Cardiovascular and Lymphatic System H. Digestive System	Methods include: Class participation, spelling and using terms, pre-post examination, and self-corrected exercises.

-100-

			I. Musculoskeletal System J. Nervous System K. Skeletal System L. Endocrine System M. Male and Female Reproductive Systems N. Pregnancy, Human Development, and Child Health O. Oncology P. Pharmacology Q. Mental Health R. Articulations	

Course Title	Course Objectives	Sequence of Course	Major Content Outline	Course Evaluation

NUPN 100- Application of Health Assessment for the PN	**A.** Identify assessment techniques appropriate for a simulated client scenario.
	B. Apply knowledge of assessment findings to identify potential nursing interventions for a simulated client scenario.
	C. Practice use of informatics to accurately communicate assessment findings.
		Semester 1 of program	I.Review of health assessment techniques
			  A. Interview/ health history
			  B. Observation
			  C. Palpation & auscultation
			
			II.Recognizing normal findings
			  A. Integumentary system – skin
			  B. Respiratory system – lungs
			  C. Circulatory system – apical and radial pulses, basic heart sounds
			  D. Gastrointestinal system – intake/diet and bowel movements
			  E. Renal system – urinary patterns
			  F. Lab values – CBC, glucose, HgA1c
			
			III.Communication of findings/Informatics
				Student progress is evaluated by means that include, but are not limited to, exams, written assignments, and class participation.

Course Title	Course Objectives	Sequence of Course	Major Content Outline	Course Evaluation

NUPN 0200- Clinical Judgement for the PN	A. Discuss the role of clinical judgment in the delivery of safe, quality, relationship-centered care. B. Demonstrate appropriate clinical judgement in simulated patient scenarios. C. Apply clinical judgement to successfully answer practice NCLEX-PN® questions.	Second Semester of Program	I. Clinical judgment and the practical nurse
			
			II. Application of the clinical judgment model
			    A. Performing appropriate patient assessments
			    B. Selecting appropriate interventions
			    C. Identifying situations requiring referral to other care providers
			
			III. Clinical judgment and the NCLEX-PN®
				Student progress is evaluated by means that include, but are not limited to, exams, written assignments, and class participation.

Course to Be Eliminated

Course Title	Course Objectives	Sequence of Course	Major Content Outline	Course Evaluation
NUPN 0134- Theory Application through Assessment & Simulation	A. The student will be able to describe the purpose of physical assessment as the foundation to meet client needs. (EPSLO #3) B. The student will be able to provide a safe environment while conducting a basic physical assessment. (EPSLO #6) C. The student will be able to use effective communication and accurate	1st Semester of Program	I. Purpose of Physical Assessment as the Foundation for Client Needs II. Development of a Safe Environment III. Effective Communication and Accurate Documentation IV. Physical Assessment	Assessment methods include, but may not be limited to written tests, laboratory practicals, homework assignments and observation

	documentation techniques to complete health history and documentation form on a given client. (EPSLO #1, 5) D. The student will be able to demonstrate a basic physical assessment. (EPSLO #1) E. The student will be able to identify adaptations required for age, gender, or culturally diverse clients when completing a basic physical assessment. (EPSLO #1, 3) F. The student will be able to demonstrate professional accountability and ethical behaviors while conducting a basic physical assessment. (EPSLO #7)		V. Adaptation required for age, gender and culture VI. Professional accountability and ethical behaviors while performing physical exams	of professional behavior. A student is required to earn a grade of 'C' or better in all required courses. For clinical courses

THE UNIVERSITY OF
KANSAS
School of Nursing

February 10, 2021

Janelle Martin
Nursing Education Compliance Officer
Kansas State Board of Nursing
900 SW Jackson St., Suite 1051
Topeka, KS 66612

Ms. Martin,

Enclosed please find copies of a graduate program change at the University of Kansas School of Nursing.

Major Curriculum Changes

Number	Title	Change
NRSG 888	Clinical Specialty Practicum for Nurse Educators	New required Master of Science, Nurse Educator course with an emphasis on clinical practicum hours. Course replaces previous NRSG 892: Independent Study in Nursing Practicum course. Total credit hours in the Nurse Educator specialty remain the same.

We would like to have this item reviewed during the KSBN Board Meeting in March 2021. Please feel free to contact me with any questions.

Sincerely,

Cynthia Teel, PhD, RN, FAAN

Professor and Associate Dean, Academic Affairs

University of Kansas School of Nursing

Mail-Stop 4043 | 3901 Rainbow Blvd. | Kansas City, KS 66160 | (913) 588-1640 | Fax (913) 588-1660 | www2.kumc.edu/son/

Education 105

Graduate Program Major Curriculum Change Request
Kansas State Board of Nursing
60-17-105 (d) (2) (A) (B) – Graduate
Must be received by KSBN at least 30 days before the board meeting

Date: _ February 10, 2021_____

Name of Program: _KU School of Nursing_____

Program Administrator including credentials: _Sally L. Maliski, PhD, RN, FAAN; Cynthia Teel, PhD, RN, FAAN_

Parent Institution: _University of Kansas_____

Address of Institution: _3901 Rainbow Blvd. MS 4043_____

_Kansas City, Kansas 66160_____

Level of the Program for which the change Is being requested _Graduate Program_____

Briefly describe the Change being requested: NRSG 888: Clinical Specialty Practicum for Nurse Educators – New required Master of Science, Nurse Educator course with an emphasis on clinical practicum hours. Course replaces previous NRSG 892: Independent Study in Nursing Practicum course. Total credit hours in the Nurse Educator specialty remain the same.

Action Taken

Education Committee Review _____
Date

Action Taken: ☐ Approved ☐ Not Approved ☐ Deferred

Board of Nursing Review _____
Date

Action Taken: ☐ Approved ☐ Not Approved ☐ Deferred

Nursing Education Compliance Officer _____   Date _____

11/04, Rev 3/11, 6/16, 10/17

Education 106

THE UNIVERSITY OF KANSAS
School of Nursing

COURSE NAME: NRSG 888: Clinical Specialty Practicum for Nurse Educators

SEMESTER:

CREDIT HOURS: 1-3

PREREQUISITES: NRSG 755, NRSG 801, NRSG 812, NRSG 813, NRSG 870, and NRSG 880 or consent of instructor

COREQUISITES: NA

FACULTY:

COURSE DESCRIPTION:
The Master of Science, Nursing Education Specialty prepares educators with direct care expertise in a specific clinical area of practice. Students will identify a practice area and complete a practicum with sustained clinical experiences designed to strengthen patient care delivery skills at the master's level. Direct care is defined as nursing care provided to individuals or families that is intended to achieve specific health goals or health outcomes. The course is collaboratively designed by the student and a faculty facilitator who has expertise in the clinical practice area desired by the student. The practicum may be completed in a wide range of settings such as acute and critical care, long term care, home health, community-based settings, etc. and prepares the student for advanced nursing practice care.

COURSE OBJECTIVES:
Upon completion of this course, students will be able to:

1. Demonstrate proficiency in a specific specialty area of clinical practice.
2. Integrate knowledge and a deeper understanding of clinical practice through the completion of one or a series of practice-related projects, as agreed upon with the clinical preceptor and faculty facilitator.
3. Model advanced clinical expertise and leadership in the specialty area of practice, as embodied by the clinical preceptor.

METHODOLOGY:
The clinical practicum will consist of a minimum of 64 clock hours per credit hour. The practicum is individually planned and arranged to build on the student's clinical specialty area to advance their knowledge, skills, and ability in the specified area of nursing practice. The practicum will include a focused project such development of a clinical practice guideline or protocol, professional development presentation, or other clinical deliverable.

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EVALUATION OF LEARNING OUTCOMES:

Evaluation of learning outcomes will be assessed by student performance on written assignments and practicum project(s), practicum activities, and achievement of practicum objectives. "A" grades are earned and not given for less than "A" *outcomes* (not necessarily correlated with effort) and *subject mastery*.

Grading Criteria:
Grading criteria will include:

1. Establishment of measurable written practicum objectives
2. Comprehensive discussions with preceptor and faculty facilitator
3. Documentation of the completed practicum project(s)
4. Final summary reflection describing the practicum experience, activities, project(s) and lessons learned
5. Achievement of practicum objectives

Grading Scale:

Final grades will be computed according to the following scale:
90-100%   = A
80-89.99% = B
70-79.99% = C
60-69.99% = D
59.99% and below = F

REQUIRED/RECOMMENDED TEXT/READINGS:
Individually determined based on course objective and student practice specialty area.

BRIEF CONTENT OUTLINE:
Individually determined based on course objective and student practice specialty area.

ADA STATEMENT:
Students who believe they may need accommodations in this class are encouraged to contact Cynthia Ukoko, cukoko@kumc.edu, in the Academic Accommodations Services Office (G020 Dykes), 913-945-7035, as soon as possible to better ensure that such accommodations can be implemented in a timely fashion. Online appointments can be made here.

Click here for online information about academic accommodations.

EQUAL OPPORTUNITY STATEMENT:
KU Medical Center is committed to the elimination and prevention of discrimination or harassment based on race, religion, color, ethnicity, sex, disability, national origin, ancestry, age, status as a veteran, sexual orientation, marital status, parental status, gender identity, gender expression, genetic information or retaliation. KU Medical Center and the KUMC Title IX Policy also prohibit all forms of sexual violence,

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including domestic violence, relationship violence, stalking and assault. Allegations of violations of the University's Nondiscrimination Policy are investigated in accordance with the Discrimination Complaint Resolution Process. Additionally, KU Medical Center prohibits retaliation against anyone who files a complaint or otherwise participates in the complaint process. Equal Opportunity policies and procedure are available here. If you believe that you are being discriminated against or harassed, contact Natalie Holick, Director, Equal Opportunity and Academic Compliance at (913) 588-8011 or noholick@kumc.edu to discuss your rights and options for filing a complaint or taking other steps to help stop the behavior.

PROFITS STATEMENT:
On April 28, 1995, the School of Nursing at the University of Kansas Medical Center adopted the Professional Integrity System (PROFITS) that guides student and faculty academic behavior. PROFITS upholds behaviors reflective of individual responsibility, mutual trust, professional values and standards. PROFITS values an academic environment free of academic misconduct or abuse of academic resources. When in doubt, the student must clarify with the instructor the appropriateness of behaviors that may violate PROFITS.

According to the policy, all students are required to sign the following Profits pledge once during their academic tenure. Currently, students sign the Pledge as part of their program admission requirements:

"I pledge that I will not give, receive, nor tolerate unauthorized aid, nor will I abuse academic resources while I am a member of this academic community."

Occurrences of suspected misconduct will be addressed according to the procedures of the PROFITS guidelines.

KUMC DIVERSITY CORE VALUE STATEMENT:
The University of Kansas Medical Center is committed to creating and maintaining a diverse and inclusive learning and working environment that nurtures the growth and development of our students, faculty, staff and patients.

KUMC defines diversity as a state of being in which the variety of cultures, experiences, expertise and viewpoints are valued and incorporated into the fabric of our community. Diversity encompasses age, education level, ethnicity and race, gender expression and identity, nationality, national origin, physical and mental ability, political and religious perspectives, sex, sexual orientation, socioeconomic status, veteran status and other human difference.

By embracing diversity our University will attract and retain skilled and talented employees and students dedicated to excellence in education, research, patient care, community and global initiatives. A diverse and inclusive community that fosters mutual respect requires the engagement of the University at all levels.

Our strategic initiatives to integrate diversity, cultural competence and inclusion across the medical center campus are facilitated by the EVC's Diversity and Inclusion Cabinet. The Cabinet, its subcommittees and related workgroups, is comprised of dedicated and passionate faculty, staff, students, residents and community members. The Cabinet works closely with the School of Medicine Office of Diversity and Inclusion. Cabinet and sub-committee meetings are open to all faculty, staff and students.

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More information is available on SharePoint and myKUMC.

RELIGIOUS ACCOMMODATIONS:
KU Medical Center is committed to providing an academic and work environment that is respectful of the religious diversity of its students and employees. In furtherance of that commitment, the University will make good faith efforts to provide reasonable religious accommodations to those whose sincerely held religious beliefs, practices or observances conflict with University policies, procedures or other employment or academic requirements. Such accommodations must not fundamentally alter the integrity of the University's mission, affect the University's commitment to patient care, or otherwise create an undue hardship. If you wish to submit a request for religious accommodations, please complete this online form. More information is available in the Religious Accommodations Policy.

CONCEAL CARRY:
KUMC prohibits faculty, staff, students, and visitors from carrying weapons of any type on its Kansas City and Salina Kansas campuses. For additional information, please see the KUMC Procedures for Implementing University-Wide Weapons Policy. Students who conceal carry on the Lawrence or Edwards campuses are responsible for making alternative arrangements when attending classes in Kansas City. Students can transfer a handgun from their person, backpack or purse to a secure location such as the trunk of their locked vehicle. Individuals who violate the weapons policy or procedures may be asked to leave campus with the weapon and may face disciplinary action under the appropriate university code of conduct

WRITING CENTER:
The KUMC Writing Center offers students and residents a welcoming place for discussing writing. Staffed by Graduate Writing Specialist Dr. Andrés Rodríguez, the Center offers free tutoring on writing assignments, workshops and presentations, resources, writing groups, and more. The goal is to make students more effective, confident writers by providing feedback on their work and advice on their writing process. Appointments can be made online (or writing@kumc.edu), by phone (913-945-8477), or by visiting us at Dykes Library G011 during hours of operation.

PLAGIARISM:
Plagiarizing, the presentation of the words or ideas of another person without proper citation or attribution is never acceptable and is considered academic misconduct, as is submitting a paper that you did not write yourself and submitting the same paper that has been turned in to fulfill the requirements for another course. Students who consider writing a paper on a topic they have addressed to fulfill the requirements of another course should first talk to the course professor. Plagiarism is one form of PROFITS violation. For more information, please click here.

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BLACKBOARD:
KUMC uses Blackboard to deliver course content, learning, activities and provides access to Power Points, gradebook, and discussions for both online and face-to-face programs in a convenient and effective learning environment, anytime and anywhere.

To learn how to navigate in Blackboard, please visit these tutorials.

To learn how to check your grades in Blackboard, please visit this tutorial.

BLACKBOARD COLLABORATE:
Blackboard Collaborate is our web conferencing tool where faculty and students may interact in an online environment in real time with audio, video, text chat, white board, slideshows, and screen sharing features.

To learn more about Collaborate and its features, please visit Blackboard's tutorial.

INTERACTIVE TELEVISION (ITV):
Interactive Television (ITV) classes are similar to traditional classrooms with one exception: the classroom consists of individuals/groups attending from different geographical locations. The instructor and students are able to see and talk to one another as if they were actually in the same space. This interaction is possible through a two-way broadcast, providing live, interactive communication among the instructor and students regardless of location. Each site has a specially equipped classroom that can accommodate this type of broadcast.

PANOPTO:
Panopto is KUMC's lecture capture and video content management system where it allows instructors to record a wide array of content and track student participation. When viewing Panopto recordings, students will have powerful tools that will allow them to search and find specific content, take notes, and participate in discussions. Panopto can be integrated with Blackboard, allowing students and instructors to watch/access videos without leaving Blackboard. The Panopto mobile applications also allow users to watch videos on the go.

For more information on Panopto, please visit this help guide.

TECHNICAL SUPPORT:
Should you experience login issues to Blackboard or other KUMC resources, please contact the Jayhawk Tech Clinic at (913) 945-9999 then press 2, or open a ticket online. The Service Desk is available for walk-up IT support in Taylor 3021. Further information about hours of operation and services provided may be found at their web page.

LIBRARY SERVICES:
Dykes Library provides KUMC nursing students with access to a premier collection of biomedical and health sciences information not freely available online. Dykes Library offers students research assistance and remote access to course readings, databases, and eBooks.

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Please contact your nursing librarian Brenda Linares at blinares@kumc.edu or by phone at (913-588-0120).

STUDENT AND ACADEMIC SUPPORT SERVICES:
Please refer to the Resources tab in Blackboard (found on the upper right hand of the screen) to learn more about our student and academic support services. This area lists the different resources you have access to, their websites, and contact information should you need their services.

COUNSELING AND EDUCATIONAL SUPPORT SERVICES:
Confidential psychological counseling and psychiatry services, learning assistance and academic performance enhancement services at KUMC are free for students. You may find out more by calling Counseling & Educational Support Services, 913-588-6580 or visiting G116 Student Center. To schedule online, please go to the MedConsult webpage.

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Education 112

Major Curriculum Change Request
Kansas State Board of Nursing
60-2-104 (g) (1) (2) (3) - Prelicensure
Must be received by KSBN at least 30 days before the board meeting

Date: 2/15/2021

Name of Program: Donnelly College LPN Program

Program Administrator including credentials: Patty Palmietto, MSN, RN

Parent Institution: Donnelly College

Address of Institution: 608 N. 18th St.

Kansas City, KS 66102

Level of the Program for which the change Is being requested: LPN

Briefly describe the Change being requested: Donnelly College would like to add a daytime cohort of 25 starting in August of 2021. We currently have evening cohorts that start in January and August. The curriculum would not change in hours or sequence.

Action Taken

Education Committee Review _____
                                          Date

Action Taken: ☐ Approved   ☐ Not Approved   ☐ Deferred

Board of Nursing Review _____
                                          Date

Action Taken: ☐ Approved   ☐ Not Approved   ☐ Deferred

Nursing Education Compliance Officer _____   Date _____

11/04; Rev. 5/28/2009, 3/11, 6/16, 8/17, 10/17

Education 113

Prelicensure Major Curriculum Change Request
60-2-104 (g) (1) (2) (3)

☐ **(1)** Any change in the plan of nursing curriculum organization involving:

    ☐ Philosophy

    ☐ Number of semesters of study

    ☐ Delivery method of nursing courses

(This includes things such as sequencing, learning methods, content areas, and resources.)

Provide:
- Written documentation that includes a comparison of old to new, this may be in the form of a table
- Address any changes needed in resources and the adequacy of resources, if resources are involved in the change

☐   **(2)** Any change in content requiring a change of clock–hours or credit hours in nursing courses

Provide:
- Rationale for the change
- Show faculty involvement in process –may use statements of support from faculty and/or evidence of understanding of the change
- A table that shows the differences between the old and new curriculum.
- Include single page course descriptions. **Do Not submit entire course syllabus**

X(3) Any change in the number of students to be admitted to the nursing education program

Provide:
- Statements of explanation from the program
- Facility letters which must include that they are aware of changes and the effect if any the change will have on the facility and the patients/clients and facility staff
- Reaffirm 1:10 clinical ratio by providing a working model of the clinical schedule
- Information that resources such as library, AV materials and equipment, laboratory, faculty, and support services are adequate

In making decisions concerning curriculum change requests, the Board of Nursing asks if the changes made are consistent with sound educational principles.

DONNELLY COLLEGE

February 15, 2021

Janelle Martin, MHSA,RN
Nursing Education Compliance Officer
Kansas State Board of Nursing
900 SW Jackson, Suite 1051
Topeka, KS 66612

Dear Janelle,

Please find attached a Major Curriculum Change where Donnelly College LPN Program is asking to add a daytime cohort of 25, starting in August of 2021. Donnelly has been and is currently experiencing a very large number of qualified students that are applying for the program. Currently we have 2 cohorts of 25 that are admitted in January and August for the evening session. We are finding from questioning applicants that many work nights and would benefit from a daytime cohort. We also have a great deal of applicants that are only looking for a daytime cohort.

Donnelly successfully has been face to face since last fall, benefitting from large classrooms that allow spacing out seating, using cameras and smart boards to simulcast classes between the rooms and still allowing all 25 in the class to come in. Because of our 5 simulation and skills labs we are able to accommodate multiple lab simulation and skills practices in order to make sure that everyone is getting to use the space. With a daytime cohort, they would have the labs and practice completely to themselves and allow enough time to clean and disinfect before the evening starts. We have partnered with Rashida Merritt who is the HR and Recruiting Director for Merriam Gardens, Shawnee Gardens and Meadowbrook Rehab (letter is attached as well from Rashida), and we are able to get space at all three facilities for the daytime cohort as well. Currently our clinical sites that are hospitals are still not allowing students, so we are using these three. Because of the size of the facilities and the fact that the daytime cohort would do clinicals in the day while our evening cohorts do every other weekend, they have more than ample space for the clinical.

With the approval of an additional cohort of 25 for the daytime (August admit only) we will also be hiring another full time faculty (bringing us to 5) who will take on didactic and clinical duties.

Thank you and the board for your consideration.

Sincerely,

Patty Palmietto, MSN, RN
Director of Nursing
Donnelly College Nursing Programs

Education 115

Clinical Rotations per cohort at Donnelly College Nursing Program-Evening Cohorts

Group A-Merriam Gardens 8 stu	Group B-Shawnee 8 stu	Group C-Meadowbrook 9 stu
2 wknds (24 hr ea wknd) 48 hrs	2 wknds (24 hrs ea wknd) 48 hrs	2 wknds (24 hrs ea wknd) 48 hrs
Group A Shawnee Gardens – 8 stu	Group B-Meadowbrook 8 stu	Group C-Merriam Gardens) 9 stu
2 wknds (24 hr ea wknd) 48 hr	2 wknds (24 hrs ea wknd) 48 hrs	2 wknds (24 hrs ea wknd) 48 hrs
Group A Meadowbrook 8 stu	Group B-Merriam Gardens 8 stu	Group C-Shawnee Gardens 9 stu
2 wknds (24 hr ea wknd) 48 hr	2 wknds (24 hrs ea wknd) 48 hrs	2 wknds (24 hrs ea wknd) 48 hrs
Group A-Sim Lab sign up 2 stu/session	Group B Sim Lab sign up 2 stu/session	Group C Sim Lab sign up 2 stu/session
2 days 16 hours total	2 days 16 hours total	2 days 16 hrs total

Proposed Clinical Rotations for cohort at Donnelly College Nursing Program-Day Cohort

Group A-Merriam Gardens 8 stu	Group B-Shawnee 8 stu	Group C-Meadowbrook 9 stu
4 days 48 hrs	4 days 48 hrs	2 days 48 hrs
Group A Shawnee Gardens – 8 stu	Group B-Meadowbrook 8 stu	Group C-Merriam Gardens) 9 stu
4 days 48 hrs	4 days 48 hrs	2 days 48 hrs
Group A Meadowbrook 8 stu	Group B-Merriam Gardens 8 stu	Group C-Shawnee Gardens 9 stu
4 days 48 hrs	4 days 48 hrs	2 days 48 hrs
Group A-Sim Lab sign up 2 stu/session	Group B Sim Lab sign up 2 stu/session	Group C Sim Lab sign up 2 stu/session
2 days 16 hours total	2 days 16 hours total	2 days 16 hrs total

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Resources for Donnelly College Nursing Program

Donnelly College recently moved into their new building (see photo below)
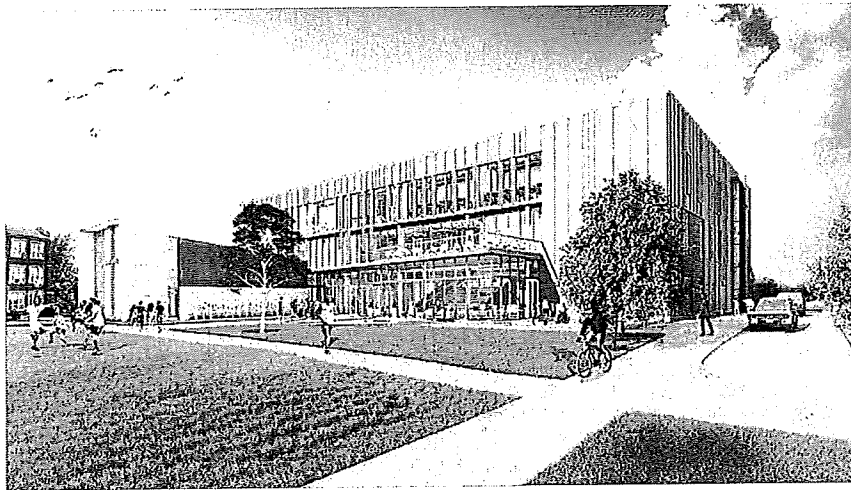
Our Library and Student Support Center space tripled from the old space with student support on the top of the library. (see photo below)
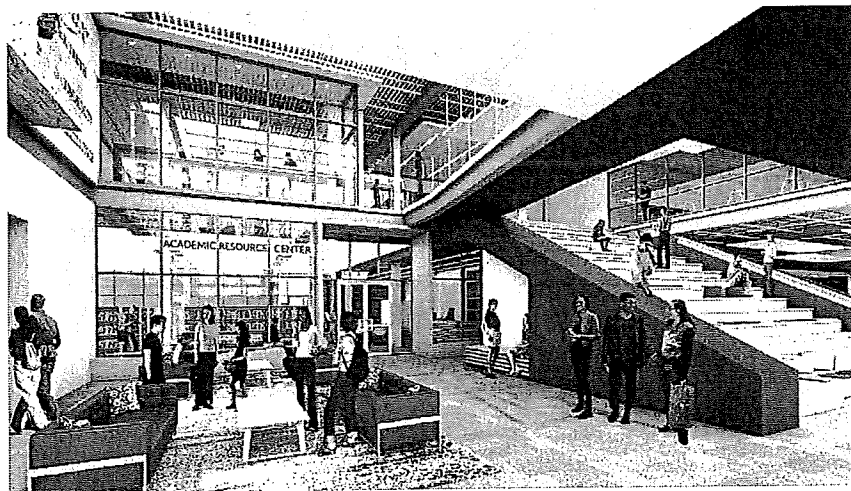
The complete building of Marian Hall (4 stories of office, computer lab, simulation labs and classrooms) is now the sole home of Nursing and Allied Health. In addition to the resources in the new building, Marian Hall has 5 different simulation and skills labs, 3 computer labs, a study resource lab and a practice resource lab for students. Our rooms (in non-COVID mode) hold between 30-35 students. In social distancing during classes, we use 2-3 classrooms and simulcast between the classrooms with the teacher live in one room and rotating to another one the next week. With our primary cohorts for LPN being at night, we have the space and bandwidth for a daytime program which can be taught and cleared before the night students come in. The only other classes in the building are our CNA and RN classes. Our classrooms have smart boards and projectors. We also have segregated study areas for the students on each floor. Tutoring is available for nursing students either by appointment, or if

Education 117

mandated by the instructors by nursing faculty and paid nursing tutors. We have been afforded a grant which allows us to hire paid tutors for the students.

Feb. 8, 2021

Kansas State Board of Nursing
900 SW Jackson St. #1051
Topeka, KS 66612

To whom it may concern,

As a member of the nurse faculty at Donnelly College, I have been privileged to see our students overcome many challenges to successfully complete the PN program. But one of the biggest challenges I see currently and in the future is the limited opportunity we have in admitting more students into our program. The nursing profession has carried the burden of a shortage of new nurses entering the field. With the current pandemic, the shortage appears to be worsening as current nurses cannot meet the demand of increasing patient census and acuity. The addition of a day PN program will not only impact the nursing force, but will also provide many in our community a chance to attend college, but to also fulfill lifelong dreams to "become a nurse".

Under the leadership of our Director of Nursing, Patricia Palmietto, the nurse faculty at Donnelly College has developed the tools, passion, and dedication to educate more students. With a consistent waiting list of at least 75 or more, the need for admission growth is there. It is my hope that Donnelly College will be given the opportunity to have a Daytime PN program.

Sincerely,

Cecilia Kroen, MSHA, BSN, RN
Assistant Director of Nursing

Cecilia Kroen, MSHA, BSN, RN | Assistant Director of Nursing | office (913) 621-8736 | fax (913) 621-8719 |
DONNELLY COLLEGE | (913) 621-8700 | 608 N. 18th Street | Kansas City, KS 66102 | donnelly.edu

February 8, 2021

Whom it may concern:

As a full-time instructor at Donnelly College, I have witnessed the development and growth of our students in the nursing department. I fully support the idea of expanding our program and we will continue to pursue the mission of not only our institution but the body of nursing as a whole! Our student capacity is limited to the number of seats available and we are continually turning qualified applicants away. Donnelly College has the ability to model nursing students into competent, safe, purpose led nurses. Under the leadership of our director, Patty Palmeitto, we look forward to better serve students who have a strong passion to serve our underserved communities. The college is expanding, and we look forward to educating and grooming an additional cohort here at Donnelly College!

Russell Robinson

Nursing Instructor

2/8/2021

Dear Sir or Madam:

The intention of this letter is to convey my support for a daytime practical nursing program at Donnelly college. As nursing faculty, we have discussed the proposed addition in our faculty meetings in the past year. Our discussion has included our potential challenges and the benefits to our college and community. I believe it is greatly needed for our community. This addition will allow more nursing program seats and accommodate our future student's needs. This will increase our future nursing graduate numbers. Which will assist our community to care for our aging adult population. Thank you in advance for your consideration.

Sincerely,

Gabriella Villalpando, RN/BSN
Full time nursing faculty
gvillalpando@donnelly.edu
(913) 558-6429

To the Kansas State Board of Nursing

I am writing on behalf of Donnelly College School of Nursing Program. As a faculty member I am in support of the daytime LPN Cohort.

The daytime LPN Cohort will open up more spots and opportunities for those applications on the wait list for admission.

It will also allow students who work nights to continue their current work schedule and to complete school during the day.

I looked forward to the expansion of the nursing program here at Donnelly.

Ebony Kurtz, MSN, CPNP

February 8, 2021

To Whom It May Concern:

I am writing this letter in support of the addition of a daytime cohort of practical nursing students at Donnelly College. Under the direction of Patricia Palmietto, the nursing program here at Donnelly has undergone many changes with great results and success. A daytime program will allow people to achieve their dreams of becoming nurses if they are unable to attend during our current evening curriculum. Adding another group of nurses to the program will only ensure that there will be more great nurses working to take care of those in need.

Thank you,

Amy Blunt MSN, RN
Adjunct Nursing Instructor
Donnelly College

Education 122

Graduate Program Major Curriculum Change Request
Kansas State Board of Nursing
60-17-105 (d) (2) (A) (B) – Graduate
Must be received by KSBN at least 30 days before the board meeting

Date: 2/15/21

Program Administrator   Jane Carpenter, PhD, MSN, RN
                          Dean, School of Nursing

Parent Institution: Washburn University
                          1700 SW College Avenue
                          Topeka, KS 66621

Level of the Program
for which the change
Is being requested   Graduate: DNP Program

Briefly describe the change being requested:
A major curriculum revision is requested for *NU 803 Doctoral Leadership: Transforming Self,* to change it from a one credit-hour to a two credit-hour course; and for *NU 906 Leadership in Global Health,* to change it from a three-credit hour to a two-credit hour course. Updates in course numbers, titles, descriptions, outcomes, and content are proposed to match the revised credit-hour allocation plan. Total credit hours for the previously approved DNP program tracks will not change.

Action Taken

Education Committee Review   _____
                                         Date

Action Taken: ☐   Approved   ☐   Not Approved   ☐   Deferred

Board of Nursing Review   _____
                                         Date

Action Taken: ☐   Approved   ☐   Not Approved   ☐   Deferred

_____   _____
Nursing Education Compliance Officer   Date

11/04, Rev 3/11, 6/16, 10/17

Education 123

Graduate Program Major Curriculum Change Request
60-17-105 (d)(2) (A)(B)

The following shall be considered major revisions to the curriculum:

X   Any significant change in the plan of curriculum organization

Provide:
- Written documentation that includes a comparison of old to new, this may be in the form of a table
- Address any changes needed in resources and the adequacy of resources, if resources are involved in the change

X   Any change in content

Provide:
- Rationale for the change
- Show faculty involvement in process –may use statements of support from faculty and/or evidence of understanding of the change
- A table that shows the differences between the old and new curriculum.
- Include single page course descriptions. **Do Not submit entire course syllabus**

Instructions:

1. Submit any major revision to the curriculum of advanced nursing courses for board approval at least 30 days before a board meeting.
2. **Submit 1 paper copy of the request form and all addenda on white paper, loose leaf and single-sided pages.**
3. Major curriculum change requests are reviewed by the Education Committee and Board of Nursing at their scheduled meetings. The request will be approved/not approved/deferred.
4. Following the Education Committee and Board Review and action, a copy of the form will be returned to you indicating Board action.
5. The program must receive board approval before implementation
6. Notify Education Specialist to request Word document version of this form to complete electronically, print and mail to KSBN with requested information, if desired.

11/04, Rev 3/11, 6/16, 10/17

Education 124

Washburn University School of Nursing
Major Curriculum Revision

Rationale:
The primary purpose for the proposed curriculum revision is to align *NU 803 Doctoral Leadership: Transforming Self* and *NU 906 Leadership in Global Health* with more appropriate credit-hour values. Washburn SON uses a credit-hour analysis process to determine that equitable balance exists between courses. Recommendations have been made by faculty, and through student feedback, to augment the doctoral leadership course by one credit-hour and to reduce the global leadership course by one credit-hour to balance the content of these courses. Faculty have determined that it is possible to do this for all program plans (FNP and PMHNP DNP) with no disruption to current course sequencing and with minor adjustments to existing student program projections.

Resources: Current resources are adequate for the proposed curriculum change

Process: A task force of faculty with experience teaching *NU 803 Doctoral Leadership: Transforming Self* and *NU 906 Leadership in Global Health* was convened on 1/29/21, 2/5/21, and 2/12/21. Members included Dr. Lori Edwards, Dr. Jody Toerber-Clark, Dr. Michele Reisinger, Dr. Amanda Hartman, and Dr. Bobbe Mansfield. The task force used this opportunity to also re-envision the courses, and to integrate Level 2 competencies proposed in the *AACN Essentials: Core Competencies for Professional Nursing Education* (11.5.2020 draft). The task force reviewed the course titles, course descriptions, course outcomes, and content outlines of the two current courses under consideration, and proposed changes as outlined below. Pending approval, *NU 809 Doctoral Leadership* will be offered for two credit hours Fall 2021, and *NU 903 Perspectives for the Advancement of Global Health* will be offered for two credit hours during Summer Session 2022.

Current: NU 803 Doctoral Leadership: Transforming Self	Proposed: NU 809 Doctoral Leadership
Current Course Description: This course will explore the role of doctoral nurse graduates as healthcare leaders. Students will develop awareness of self as leader and identify and build upon leadership strengths. Using knowledge of complex systems and leadership theory, the student will develop strategies and skills to improve patient and population-based health outcomes. Prerequisite: Admission to DNP Program	**Proposed Course Description:** Emphasizes the role of doctoral nurse graduates as healthcare leaders in complex systems. Builds upon understanding personal values and vocational goals in relation to self-leadership strengths. Examines methodologies for expanding leadership competencies to promote innovation, collaborative problem-solving, and improved health outcomes.

| 1 Credit Hour | Prerequisite: Admission to DNP Program. |
	2 Credit Hours
Current Course Outcomes*:	**Proposed Course Outcomes*:**
- C1. Determine how DNP-prepared nurses can impact patient outcomes through organizational, population and global leadership. (DNP Essential II, V, VI, VII) - C2. Develop a plan for expanding leadership mastery by integrating self-evaluation and professional growth capacity. (DNP Essential V, VI) - C3. Differentiate between selected organizational and leadership theories to develop a personal framework for leadership. (DNP Essential V, VI) - C4. Evaluate factors that influence change within complex organizations and the healthcare system. (DNP Essential II, V, VI, VII) - C5. Create a case study that illustrates how the DNP-prepared nurse effectively leads the care management team. (DNP Essential II, III, V, VI, VII, VIII) *DNP – AACN Essentials of Doctoral Education for Advanced Practice	- C1. Examine opportunities for DNP-prepared nurses to provide effective leadership in complex systems. - C2. Integrate personal values, vocational goals, and self-leadership strengths for the advancement of the profession and advocacy for those it serves. (derived from AACN 10.3 Draft Essentials) - C3. Demonstrate skills to influence intentional change guided by leadership principles and theories (derived from AACN 10.3i Draft Essentials) - C4. Formulate strategies to promote innovation and team-based approaches for improving the quality and value of health care services. (combined wording AACN 5.1j, 5.1m) - C5. Demonstrate socially responsible leadership by employing ethical decision-making in all professional interactions. (a combination of wording from AACN DRAFT Essentials) - C6. Incorporate the use of current and emerging strategies to support leadership self-care. *Course outcomes will be matched with corresponding competencies in the new AACN Essentials when approved
Current Content Outline:	**Proposed Content Outline:**
- Leadership of self and systems - Leadership, management, followership - Leadership theories, frameworks, and myths - Using and applying principles of complexity - Leadership skill building: StrengthFinders 2.0 - Leadership skill building: Self-reflective practices - Purpose as a source of power - Social network theory - Team-based strategies	- Leadership of self and systems - Leadership, management, followership - Classic leadership principles and theories - Identifying and applying principles of complexity - Leadership skill building: StrengthFinders 2.0 - Leadership skill building: Self-care practices - Power and vulnerability - Social network theory and socially responsible leadership - Team-based communication: TeamSTEPPS

10. Organizational change 11. Leading coherently	10. Leadership for quality improvement 11. Organizational dynamics 12. Managing conflict and transforming error 13. Leadership for innovation and value in healthcare 14. Integrative leadership: Putting it all together
Current: NU 906 Leadership in Global Health	**Proposed: NU 903 Perspectives for the Advancement of Global Health**
Current Course Description: To create effective change, global leaders must develop a high level of cultural intelligence, understand the impact of public policy on health, and identify competing perspectives at the micro – macro level. This course focuses on the complexities of global health issues within the context of social, economic, political, and environmental factors. It builds upon the previous leadership of self course to analyze and evaluate effective leadership strategies within local/global settings with an emphasis on social justice and advocacy. Prerequisites: NU 805 Health Policy (BSN-DNP) and/or NU 902 Healthcare Economics (MSN-DNP) *3 Credit Hours*	**Proposed Course Description:** NU 903: Perspectives for the Advancement of Global Health (2 credit Focuses on the complexities of contemporary global health issues within the context of social, cultural, economic, political, and environmental factors. Incorporates concepts of doctoral leadership to analyze, evaluate and promote collaborative strategies to advance health equity across cultures. Prerequisite: NU 809 Doctoral Leadership or permission of instructor *2 Credit Hours*
Current Course Outcomes*: • C1. Appraise leadership skills necessary to innovate global health care DNP II). • C2. Interpret one's own cultural intelligence and global leadership style through self-assessment (DNP V). • C3. Examine the complex tapestry of social, economic, political, cultural, and environmental factors that affect global health care (DNP V, VI). • C4. Analyze global health disparities through a social justice and human rights lens (DNP V). • C5. Compare and contrast the links between global and local health issues, problems, and solutions (DNP VI).	**Proposed Course Outcomes*:** • C1. Examine social, cultural, economic, political, and environmental factors that impact global health. • C2. Explain the complex challenges facing populations in low-resource settings across the world. • C3. Compare and contrast selected local and global health issues, resources, and solutions. • C4. Examine ethical dilemmas related to achieving equitable health. • C5. Develop strategies for self-regulation of implicit biases and the advancement of health equity across cultures.

* DNP – AACN Essentials of Doctoral Education for Advanced Practice	*Course outcomes will be matched with corresponding competencies in the new AACN Essentials when approved

Current Content Outline:
1. Global health: Setting context
   a. Global health
   b. Complex adaptive systems and global health
   c. Global health policy in action
2. Leading globally
   a. Global leadership competencies
   b. Global leadership and ethics
   c. Generative leadership
3. Hot topics in global health
   a. Bugs and drugs
   b. The human side of global health
   c. Global environmental health
	Proposed Content Outline:
	1. Global health
	   a. Principles and goals
	   b. Health status assessment tools
	   c. Factors impacting global health
	   d. Global leadership competencies for advanced practice nurses
	2. Practicing global health
	   a. Addressing health concerns in variable-resource settings
	   b. Ethical considerations in global health
	   c. Strategies to regulate implicit bias
	   d. Advancing health equity in diverse societies
	3. Hot topics in global health
	   a. Evidence-based global health promotion
	   b. Contemporary global health problems

Approved by GCCC 2/15/21
Approved by Graduate Education Committee 2/18/21

Proposed: NU 809 Doctoral Leadership

Proposed Course Description:

Emphasizes the role of doctoral nurse graduates as healthcare leaders in complex systems. Builds upon understanding personal values and vocational goals in relation to self-leadership strengths. Examines methodologies for expanding leadership competencies to promote innovation, collaborative problem-solving, and improved health outcomes.

Prerequisite: Admission to DNP Program.

2 Credit Hours

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Proposed: NU 903 Perspectives for the Advancement of Global Health
Proposed Course Description: NU 903: Perspectives for the Advancement of Global Health (2 credit Focuses on the complexities of contemporary global health issues within the context of social, cultural, economic, political, and environmental factors. Incorporates concepts of doctoral leadership to analyze, evaluate and promote collaborative strategies to advance health equity across cultures. Prerequisite: NU 809 Doctoral Leadership or permission of instructor *2 Credit Hours*

Education 130

Graduate Program Major Curriculum Change Request
Kansas State Board of Nursing
60-17-105 (d) (2) (A) (B) – Graduate

Must be received by KSBN at least 30 days before the board meeting

Date: _____2/19/2021_____

Name of Program: _____Newman University Nurse Anesthesia Program_____

Program Administrator _____Megan Cook, DNAP, CRNA_____
 including credentials:

Parent Institution: _____Newman University_____

Address of Institution: _____3100 McCormick_____

_____Wichita, KS 67213_____

_____

Level of the Program
for which the change
Is being requested   ____Doctoral (DNAP) from Masters (MSNA)_____

Briefly describe the
Change being requested: ____Newman University Nurse Anesthesia Program is
 requesting KSBON approval to transition from entry-level masters program to
 entry-level doctoral program. Conditional approval by the Council on
 Accreditation of Nurse Anesthesia Educational Programs has been obtained.

Action Taken

Education Committee Review   _____
                                                        Date

Action Taken: ☐ Approved   ☐ Not Approved   ☐ Deferred

Board of Nursing Review   _____
                                                        Date

Action Taken: ☐ Approved   ☐ Not Approved   ☐ Deferred

_____   _____
Education Specialist   Date

11/04, Rev 3/11, 6/16

Education 131

Graduate Program Major Curriculum Change Request
60-17-105 (d)(2) (A)(B)

The following shall be considered major revisions to the curriculum:

☐ Any significant change in the plan of curriculum organization

Provide:
- Written documentation that includes a comparison of old to new, this may be in the form of a table
- Address any changes needed in resources and the adequacy of resources, if resources are involved in the change

☐ Any change in content

Provide:
- Rationale for the change
- Show faculty involvement in process –may use statements of support from faculty and/or evidence of understanding of the change
- A table that shows the differences between the old and new curriculum.
- Include single page course descriptions. **Do Not submit entire course syllabus**

Instructions:

1. Submit any major revision to the curriculum of advanced nursing courses for board approval at least 30 days before a board meeting.
2. **Submit 1 paper copy of the request form and all addenda on white paper, loose leaf and single-sided pages**.
3. Major curriculum change requests are reviewed by the Education Committee and Board of Nursing at their scheduled meetings. The request will be approved/not approved/deferred.
4. Following the Education Committee and Board Review and action, a copy of the form will be returned to you indicating Board action.
5. The program must receive board approval before implementation
6. Notify the Education Specialist to request Word document version of this form to complete electronically, print and mail to KSBN with requested information, if desired.

11/04, Rev 3/11, 6/16

Education 132

PROPOSAL FOR PROGRAM CHANGE IN NURSE ANESTHESIA TO DOCTORATE OF NURSE ANESTHESIA PRACTICE

Proposal:

To change the earned degree for nurse anesthesia from the Master of Science in Nurse Anesthesia to the Doctor of Nurse Anesthesia Practice (DNAP).

Purpose and Rationale for Change:

The nurse anesthesia program prepares licensed registered nurses to become advanced practice nurses who provide anesthetics in a variety of practice settings. According to the American Association of Nurse Anesthetists (AANA), certified registered nurse anesthetists (CRNAs) practice in every setting where anesthesia is delivered. Educational programs for entry into the CRNA profession support the development of the knowledge and skills necessary to be proficient in providing safe, competent, and ethical anesthesia and anesthesia-related care to patients.

The Council on Accreditation of Nurse Anesthesia Educational Programs (COA) has directed that all students accepted into an accredited nurse anesthesia program after January 1, 2022 will graduate with a doctoral degree. This proposal is for a Practice Doctorate that will meet the requirements of the COA directive.

Process:

Nurse Anesthesia faculty oversaw and were responsible for the entire process of programmatic development through careful examination of the AACN Doctoral Essentials, the Council on Accreditation Doctoral Standards, and the Kansas Nurse Practice Act. The current MSNA program will be phased out, and the new DNAP program replaces as the entry-level degree for Nurse Anesthetists. Newman University Nurse Anesthesia faculty developed content and curriculum in accordance with COA, AACN, and Kansas standards.

The approval of the DNAP program was achieved from the Newman University Graduate Academic Council on 3/21/2019 (Meeting of 2/12/2019 minutes, email with Graduate Academic Council approval attached). The Newman University Board of Trustees approved the program on 2/22/2019. The Council on Accreditation of Nurse Anesthesia Education Programs gave conditional approval (Newman University is currently awaiting approval to grant doctoral degrees from the Higher Learning Commission) of the DNAP program at the October 2020 Board meeting (COA letters attached).

Curriculum:

The DNAP course schedule was carefully designed in such a way that each course taught builds knowledge and skills necessary for the courses to come directly after. Each course description and course outcome was carefully evaluated to ensure that the Council on Accreditation (COA) Doctoral Standards were met as well as the American Association of Colleges of Nursing (AACN) Essentials of Doctoral Education for Advanced Nursing Practice. COA and AACN standards were compared, and each COA standard was referenced back to the 8 AACN Doctoral Pillars of Education.

The 5 Clinical Practicum courses were reviewed, and course objectives were carefully and thoughtfully created to meet and be reflective of the Doctoral Standards.

The DNAP degree at Newman University consists of 88 credit hours, while the current MSNA program consists of 60 hours. Additional classes added to the curriculum include DNAP8007 Personal Leadership Development, DNAP8009 Learning Technologies and Informatics for the Practice Doctorate, DNAP8011 Healthcare Economics, DNAP8013 Ethics in Health Care Administration, DNAP8023 Advanced Health Assessment, DNAP8027 Anesthesia Simulation I, DNAP8029 Introduction to Clinical Practicum, DNAP8031 Professional Issues I, DNAP8033 Advanced Principles of Anesthesia I, DNAP8035 Advanced Topics in Pharmacology, DNAP8037 Anesthesia Simulation II, DNAP8039 Advanced Principles of Anesthesia II, DNAP8047 Advanced Principles of Anesthesia III, DNAP8049 Biomedical Statistics, DNAP8051 Professional Issues II, DNAP8053 Populations, Wellness, and Epidemiology, DNAP8057 EBP I, DNAP8063 Anesthesia Simulation III, DNAP8065 EBP II, DNAP8067 Senior Seminar II, DNAP8071 Anesthesia Simulation IV, DNAP8073 EBP III, DNAP8075 Senior Seminar III.

8 courses offered in the MSNA program that will carry over to the DNAP have been carefully and thoroughly examined to ensure that elevation of each course meets Doctoral Standards. This is essential not only for COA approval of the program, but also for the approval of the Higher Learning Commission (HLC) to award a doctoral degree. Each of the 8 courses is presented in a table form comparing MSNA objectives to DNAP objectives, with detailed examples of course elevation provided (Table attached)

Resources for Faculty and Students:

A faculty matrix table is attached to demonstrate adequacy of faculty resources in the transition to the DNAP from MSNA. One additional FTE Nurse Anesthesia Faculty will be hired at the start of the DNAP program (proposed implementation is May 2022).

The Newman University Nurse Anesthesia Program is supported by the University in mission and philosophy, and also financially. The needs of the program are met from a budgetary aspect, and tuition costs of the program are reflective of those needs. All physical and financial needs of the program are met and paid for with tuition. In transition from MSNA to DNAP, there will be an addition of 1 FTE Nurse Anesthesia Faculty. This brings the total number of nurse anesthesia faculty from 2 to 3. The program does draw from the school of Mathematics and Science as well as the School of Business for faculty. In doing so, students are given excellent qualified faculty as course directors. The budget is reflective of the needs for contract overload for those faculty members from other schools within the University as well as adjunct faculty who may serve as course directors.

Resources from the university are adequate to support the scope and size of the doctoral program. The Dugan Library is available online to any student 24 hours a day. The Librarian has compiled a lib guide specific to the Nurse Anesthesia Program which includes links to articles, links to jobs, links to UpToDate (all students have access to UpToDate on university computers as well as personal devices at no additional charge to the student), links to previous master's projects, databases, AMA formatting, etc.

Student services are available to each student in the program from the University. Study support, including math and writing, is available. Any faculty member may refer a student to Project

Care, which is the University's student support program. A student may also self-refer at any time, and student have the option to make a confidential referral of another student at any time. Disability Services assists students requesting accommodations through the Americans with Disabilities Act (ADA/Section 504). Students experiencing personal problems may be referred for up to 6 free counseling sessions per year from Personal Counseling services.

Clinical sites are adequate at this time to support the size and scope of the Doctor of Nurse Anesthesia Practice program. Newman University graduates average just over 1000 cases during their time in the program. The Program Director is continuously seeking additional clinical sites to enrich the clinical education of the SRNA. Case numbers are expected to remain steady, including specialty cases such as cardiovascular, regional, and obstetrical. At this time, there is no plan to increase student numbers above 25 even in future years. Evaluation of student clinical numbers and experiences is a continuous and ongoing process.

Classroom size and availability is adequate for the scope and size of the DNAP program. Classroom needs will increase by 1-2 classrooms. During the teach-out plan of the MSNA program, at some points there would be an increase of 4-5 needed classrooms. There are adequate classrooms available to accommodate this need. Newman University Nurse Anesthesia Program has 2 high-fidelity simulation ORs, which easily accommodates the size of the classes in this program. In addition to the 2 high-fidelity simulation ORs, the program has increased the number of task trainers in our lab such as spinal/epidural trainers, ultrasound-guided central lab trainers, suturing trainers, arterial line trainers, and airway mannequins.

Newman University has a dedicated staff member who provides faculty training for Canvas, including online course design, curriculum and instruction. This staff member-who is trained in online educational offerings-also reviews each online class to ensure that each online course meets ADA requirements, and that distance education courses are designed and formatted to achieve the same outcomes as traditional educational offerings. All faculty members have Canvas courses available that offer training on various components of using Canvas. Newman faculty also have multiple opportunities to receive additional Canvas and online course training throughout the academic year in person at the University. Canvas offers 24/7 IT support for any technical issues or questions that may arise.

Students will be required to provide their own laptop computers, or other devices which would allow them to have access to Canvas and the internet. Newman University has a dedicated IT helpline which is staffed 24/7, and Canvas has available online or telephone support for IT issues 24/7. The IT department of Newman University is responsible for maintenance and updates of the Learning Management System as well as maintenance, support, and updates of the University server.

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November 4, 2020   *VIA EMAIL*

Megan Cook, DNAP, CRNA
Program Director
Newman University
Nurse Anesthesia Program
3100 McCormick Avenue, Suite 210 ECK
Wichita, KS 67213-2097

Subject: Degree Approval - Doctoral Degree for Entry into Nurse Anesthesia Practice –
         Contingent upon Approval of Additional Documentation

Dear Dr. Cook:

During its October 7-9, 2020 meeting, the Council on Accreditation of Nurse Anesthesia
Educational Programs (COA) reviewed the additional information and documentation completed
by the program to measure program compliance with the COA's policy and procedure, "Doctoral
Degree Approval (for entry into nurse anesthesia practice)," as described in the COA's
Accreditation Policies and Procedures manual. The additional information and documentation
was submitted in response to the COA's deferral of the doctoral degree for entry into practice
application during its June 3-5, 2020 meeting.

The COA is pleased to inform the Newman University Nurse Anesthesia Program of the
approval of the doctoral degree program for entry into practice, contingent upon the receipt and
approval of documentation evidencing the approval of Newman University to award doctoral
degrees by the Higher Learning Commission (HLC). COA directors found the program's
response to be in compliance with the Standards and requirements contained in the COA's policy
and procedure for evaluating nurse anesthesia programs as authorized in its recognized scope of
accreditation authority. The decision recognizes the program for providing a graduate level
curriculum leading to the award of a Doctor of Nurse Anesthesia Practice (DNAP) degree. The
proposed date of implementation of this degree offering is May 2022. The COA will consider
the implementation date firm unless we receive written notification otherwise.

Please note this approval is contingent upon the receipt and approval of documentation
evidencing the approval of Newman University to award doctoral degrees by the HLC. This
documentation should be submitted as soon as practicable. In the event that the submission of
this documentation is delayed beyond 30 days from the date of this letter, the program should
provide periodic updates of its status.

Council on Accreditation of Nurse Anesthesia Educational Programs
222 S. Prospect Ave., Park Ridge, IL 60068
Phone: (847) 655-1160 Fax: (847) 728-8128

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November 4, 2020
Megan Cook, DNAP, CRNA
Newman University
Nurse Anesthesia Program
Page 2

Please contact your specialist or me with any questions.

Sincerely,

Francis Gerbasi

Francis Gerbasi, PhD, CRNA
Chief Executive Officer

c: Sarah Kelly, DNAP, CRNA
        Michael Caughlin, MD
        Kathleen Jagger, PhD
        Kimberly McDowall-Long, PhD

FG/sm
L:\ACCRED\Programs\Newman University\SA&DLTR\2020\d110420_Doctoral entry degree approved_pending addl doc.docx

From:	Denise Cooley
Sent:	Thursday, March 21, 2019 10:37 AM
To:	Brett Andrews; Cameron Carlson; Fr. Joseph Gile; Lori Gibbon; Morgan Gilbert; Terrie Cox Pauly; Megan Cook
Subject:	RE: DNAP Proposal

I am pleased to announce that the DNAP proposal was passed unanimously. Father Gile will let the Provost know this afternoon.

Denise Cooley
Administrative Assistant
Dean of Catholic Studies
Division of Arts & Letters and Humanities
Office: MN318
316-942-4291, ext. 2483
A Degree of Difference

newmanu.edu

From: Denise Cooley
Sent: Wednesday, March 20, 2019 1:54 PM
To: Brett Andrews <andrewsb@newmanu.edu>; Cameron Carlson <carlsonc@newmanu.edu>; Fr. Joseph Gile <gilej@newmanu.edu>; Lori Gibbon <gibbonl@newmanu.edu>; Morgan Gilbert <Gilbertm@newmanu.edu>; Terrie Cox Pauly <paulyt@newmanu.edu>; Megan Cook <cookm@newmanu.edu>
Subject: DNAP Proposal

Father Gile has asked that I send out Megan's amended proposal and ask that we take a vote.

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A Degree of Difference

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Graduate Academic Council

Meeting Minutes 02/12/2019

In attendance: Fr. Joe Gile, Brett Andrews, Lori Gibbon, Denise Cooley, Megan Cook and Kathryn Nelson

I.   Fr. Gile opened the meeting with a prayer at 2:01pm.
II.   Minutes from the November 13 meeting (Denise will re-send out via e-mail for approval)
III. Old Business
   a. Master in Curriculum & Instruction (Kathryn Nelson)
       i.   Assessment added to core curriculum
       ii. Org. Leadership moving to BSAD

Lori had two questions:
   1) When will these courses go into effect?
   2) If courses are cross-listed at the undergrad level, will a student be able to re-take at the graduate level?
Once answered by Cameron, ok to approve

   b. Graduate Course Renumbering (Lori Gibbon)
       i.   Last digit in ID no longer represents credit hours
            1. Will make note in catalog of this change

Megan advised that when move to DNAP (May 2020) no longer have a need for 799- courses
Everyone approved of the new numbering

IV.   New Business
   a. Proposal for transition from MSNA to DNAP for Nurse Anesthesia (Megan Cook)
       i.   Megan will do re-work and resend for GAC to look over and for possible approval by March meeting
       ii. Next Steps:
            1. Board of Trustees meeting (February)
            2. Revisions (March)
            3. Show proposal to full faculty for informational purposes only (?)
V.   Other
   a. Tentative date for Fall 2019 registration is March 18 (Lori)
   b. Looking at the feasibility of creating a doctorial in business administration (DBA)
       i.   No real time line – team working on vision document

VI.   Next Time – March 19th (?)

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Trustees Present: Teresa Hall Bartels *(Chair),* Noreen Carrocci *(President),* Betty Adams, ASC, Donette Alonzo *(via conference call),* Brian Black, David Borho, Michael Bukaty, John Carney, Mary Catherine Clark, ASC, Reverend Frank Coady, Tyson Denton, Elaine Freund, ASC, J.T. Klaus, Patricia Koehler, Jennifer Magaña, Ron Rabe, Jan Renz, ASC, Gabrielle Rowe, ASC, Jason Searl, Reverend Michael Simone, Jenifer Stone, Jackie Vietti, Reverend Thomas Welk, Susan Welsby, ASC, Alice Wiggins, Stephen Williamson, and Brad Yaeger.

Trustees Absent: Patrick Do and Joseph Galichia.

President's Cabinet: Jennifer Gantz, J.V. Johnston, Norm Jones, Kimberly McDowall Long, and Victor Trilli.

Other Representatives Present: Barbara Sponsel *(Faculty Senate Vice-President),* Morgan Calvert *(Staff Assembly Vice-President),* and Marisa-Nicole Zayat *(Student Government Association President).*

Secretary: Tracy McGarey.

Chair Teresa Hall Bartels called the Board of Trustees of Newman University to order for Executive Session I at 8:00 a.m.

Topic	Discussion	Action/Follow-up
Executive Session I (refer to Tabs 6, 7, and 8)	Chair Teresa Hall Bartels called the Board of Trustees and the President's Cabinet to order at 8:00 a.m. for Executive Session I to discuss enrollment, finance, and strategic planning for 2019-2022. Executive Session I adjourned at 9:50 a.m.	A summary of discussion was prepared and posted to the Board of Trustees secure website.
Meeting Overview (Tab 1)	Chair Bartels called the general Business meeting to order at 10:00 a.m. Mary Catherine Clark, ASC was welcomed to returning service on the Board of Trustees. [She previously served two terms as ASC Designee on the Board, from 2006-2012.] Sister Mary Catherine provided the opening prayer. Chair Bartels reviewed the information in Tab 1 of the Board Book. • The evaluation form for this meeting should be completed and returned to the Secretary. • The summary of responses to the evaluation for the September 20-21, 2018 Board meetings. Consent Agenda items were presented for approval as follows: • The agenda for the February 22, 2019 Board of Trustees meeting; • The minutes for the September 21, 2018 Board of Trustees meeting; • The minutes for the November 9, 2018 Special Board of Trustees meeting, and	<u>Consent Agenda</u> A motion was presented (Jan Renz, ASC/ Betty Adams, ASC) to approve Consent Agenda items as presented, pending the

Topic	Discussion	Action/Follow-up
Academic and Student Affairs Committee Report (cont.)	<u>Recommendation to Approve New Majors and Programs (Tab 4)</u> Chair Vietti appreciated the rich and thoughtful discussion at the Academic and Student Affairs Committee meeting yesterday (February 21) concerning the proposed new majors and programs being presented today for approval. Provost Long presented the proposed programs and majors in the order as published in the Board Book. [large redacted area] 5) Doctor of Nurse Anesthesia Practice (DNAP) –The Council on Accreditation of Nurse Anesthesia Educational Programs issued a directive in 2015 that requires all CRNA programs to be at doctoral level by January 1, 2022. A proposal for Newman University to meet this requirement was never presented to the Board of Trustees. The move to a doctoral-level program.	<u>New Majors and Programs</u> A motion was presented (Jackie Vietti/ Father Michael Simone) to approve the slate of new majors and programs as presented and recommended by the Academic and Student Affairs Committee. **Motion carried.** [The slate of new majors and programs that were approved included: A.S. in Health Science, OTA; A.A. in Catholic Studies and Minor in Catholic Studies; Business Data Analytics Major; MSED in Curriculum and Instruction (new concentration); and the Doctor of Nurse Anesthesia Practice (DNAP).]

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Topic	Discussion	Action/Follow-up
Academic and Student Affairs Report (cont.)	requires the hire of one additional FTE as well as a health sciences librarian. On behalf of the Academic and Student Affairs Committee, Chair Vietti offered a motion for the Board of Trustees to approve the slate of proposed majors and programs as presented.	

Newman University Nurse Anesthesia Program MSNA Course Schedule

Year 1		
Fall #1		
NAN6014	Basic Principles of Nurse Anesthesia	4 credit hours
NAN6023	Pharmacology for Anesthesia	3 credit hours
NAN6004	Applied Anatomy	4 credit hours
NAN6024	Chemistry & Physics for Anesthesia	4 credit hours
NAN6042	Professional Issues	2 credit hours
		Total 17 hours
Spring #1		
NAN6013	Advanced Physical Assessment	3 credit hours
NAN6033	Advanced Pharmacology	3 credit hours
NAN6034	Advanced Physiology	3 credit hours
NAN6022	Regional Anesthesia	2 credit hours
NAN6053	Clinical Practicum #1	3 credit hours
		Total 14 hours
Summer #1		
NAN6062	Pathophysiology of Anesthesia #1	2 credit hours
NAN6073	Clinical Practicum #2	3 credit hours
		Total 5 hours
Year 2		
Fall #2		
NAN6143	Research Methods	3 credit hours
NAN6034	Advanced Pathophysiology	4 credit hours
NAN6083	Clinical Practicum #3	3 credit hours
		Total 10 hours
Spring #2		
NAN6141	Senior Seminar #1	2 credit hour
NAN7591	Thesis/Research	3 credit hours
NAN6102	Pathophysiology of Anesthesia 2	2 credit hours
NAN6113	Clinical Practicum #4	3 credit hours
		Total 10 hours
Summer #2		
NAN6141	Senior Seminar #2	1 credit hour
NAN6123	Clinical Practicum #5	3 credit hours
		Total 4 hours
Total Curriculum hours MSNA		60 credit hours

Newman University Nurse Anesthesia Program DNAP Course Schedule

Year 1		
Summer		
DNAP8005	Chemistry and Physics for the Nurse Anesthetist*	4 credit hours
DNAP8007	Personal Leadership Development*	3 credit hours
DNAP8009	Learning Technologies and Informatics for the Practice Doctorate*	2 credit hours
		Total 9 hours
Fall		
DNAP8011	Health Care Economics*	3 credit hours
DNAP8013	Ethics in HealthCare Administration*	3 credit hours
DNAP8015	Advanced Anatomy for the Nurse Anesthetist	4 credit hours
DNAP8017	Advanced Pharmacology	3 credit hours
		Total 13 hours
Spring		
DNAP8019	Basic Principles of Anesthesia	3 credit hours
DNAP8021	Advanced Physiology	4 credit hours
DNAP8023	Advanced Health Assessment	3 credit hours
DNAP8025	Pharmacology of Anesthesia	3 credit hours
DNAP8027	Anesthesia Simulation I	1 credit hour
		Total 14 hours
Year 2		
Summer		
DNAP8029	Introduction to Clinical Practicum	1 credit hour
DNAP8031	Professional Issues I	2 credit hours
DNAP8033	Advanced Principles of Anesthesia I	3 credit hours
DNAP8035	Advanced Topics in Pharmacology	2 credit hours
DNAP8037	Anesthesia Simulation II	1 credit hour
		Total 9 hours
Fall		
DNAP8039	Advanced Principles of Anesthesia II	3 credit hours
DNAP8041	Advanced Pathophysiology	4 credit hours
DNAP8043	Regional Anesthesia	2 credit hours
DNAP8045	Clinical Practicum I	2 credit hours
		Total 11 hours
Spring		
DNAP8047	Advanced Principles of Anesthesia III	3 credit hours
DNAP8049	Biomedical Statistics	3 credit hours
DNAP8051	Professional Issues II	2 credit hours
DNAP8053	Populations, Wellness, and Epidemiology	2 credit hours
DNAP8055	Clinical Practicum II	2 credit hours
		Total 12 hours
Year 3		
Summer		
DNAP8057	Evidence-Based Practice I*	2 credit hours
DNAP8059	Senior Seminar I*	1 credit hour

DNAP8061	Clinical Practicum III	2 credit hours
DNAP8063	Anesthesia Simulation III	1 credit hour
		Total 6 hours
Fall		
DNAP8065	Evidence-Based Practice II*	2 credit hours
DNAP8067	Senior Seminar II*	2 credit hours
DNAP8069	Clinical Practicum IV	2 credit hours
DNAP8071	Anesthesia Simulation IV	1 credit hour
		Total 7 hours
Spring		
DNAP8073	Evidence-Based Practice III*	3 credit hours
DNAP8075	Senior Seminar III*	2 credit hours
DNAP8077	Clinical Practicum V	2 credit hours
		Total 7 hours
Total Curriculum hours DNAP		**88 credit hours**

* Denotes online or hybrid (online/face-to-face) courses

Course Name	MSNA Objectives	DNAP Objectives	Examples of Course Elevation	Comments
DNAP8005 Chemistry and Physics for the Nurse Anesthetist	1. Review the basic principles of chemistry, especially atomic theory; 2. Describe the behavior of gases in terms of the empirical gas laws, the kinetic molecular theory, and modern structural theories; 3. Explore the concepts of work, energy, and thermodynamics, especially as they apply to gases; 4. Learn about acids, bases, and buffers; 5. Learn about the basic laws of electricity; 6. Learn about the behaviors of fluids; 7. Learn about the basis classes of organic and biochemical compounds; 8. Learn about the fundamental aspects of electricity and radioactivity.	1. Apply mathematical skills to the practice of anesthesia through unit conversion and graphical analysis; 2. Apply the concepts of work, energy, and thermodynamics to gases and breathing; 3. Analyze the behavior of fluids under both static and dynamic conditions; 4. Analyze the behavior of gases in terms of the empirical gas laws, the kinetic molecular theory and modern structural theories; 5. Apply the atomic theory and intermolecular forces to applications in medications and physiological phenomena; 6. Apply the concepts of acids, bases and buffers to physiology and homeostasis; 7. Apply the concepts of solutions (concentration, diffusion/osmosis, solubility) to medical and physiological phenomena; 8. Explore classes of organic and biochemical compounds and they relate to medicines and living systems; 9. Describe the laws of electricity and how they relate to electrical safety in a clinical setting; 10. Synthesize the principles of chemistry and physics as they relate to the practice of anesthesia and to medications administered by anesthesia providers.	1. Reviewing video lectures on Canvas and respond to threaded discussions; 2. Participate in small group discussions on Canvas; 3. Complete on-line examinations; 4. Analysis paper. Student will select an article from any refereed journal related to anesthesia. Student will discuss the underlying chemical/physical principles on which the research is based.	The addition of case scenarios directly related to the practice of nurse anesthesia and how it relates to chemistry and/or physics is a new addition and elevation of this course. The addition of an analysis review of a peer-reviewed journal article related to chemistry/physics and nurse anesthesiology is a new addition and elevation of this course. Course objectives are significantly elevated to reflect Bloom's Taxonomy higher order of learning and mastery.

DNAP8015 Advanced Anatomy for the Nurse Anesthetist	Upon successful completion of this course, students will be able to: 1. Identify and discuss normal anatomy of the central and peripheral nervous systems; 2. Respiratory system; 3. Cardiovascular system; 4. Renal system; 5. Identify the anatomy involved in regional anesthesia.	Upon successful completion of this course students shall demonstrate competency in anatomy as related to the practice of nurse anesthesia by the ability to: 1. Identify and discuss normal anatomy of the: a. Central and peripheral nervous systems; b. Respiratory system; c. Cardiovascular system; d. Renal system; e. Biliary system 2. Identify the anatomy involved in regional anesthesia of the: a. Upper extremity; b. Lower extremity; c. Brachial plexus; d. Trunk; e. Thorax; f. Spine and epidural space. 3. Participate in cadaver dissection and identification. 4. Identify airway-related structures. 5. Identify head and neck structures. 6. Dissect and present the anatomy of selected regional and peripheral nerve blocks.	1. Students will be assigned a regional block from a pre-approved, selected list of peripheral nerve blocks. They will be responsible for the dissection of the anatomy related to that specific block. The students will work in pairs or in groups of 3, depending on the extent of the dissection needed. Students will present their block (including some background information on the block itself…CRNA faculty will act as advisor for the course in this capacity) to the class and potentially to other CRNAs. 2. Students will be asked to take part in more extensive dissection of the cadaver(s)	Course objectives significantly updated and many added. Course objectives elevated to reflect Bloom's Taxonomy higher order of learning and mastery. New and additional content added to the class. Expanded course requirements and assignments.
DNAP8017 Advanced Pharmacology	Students will learn: 1. Sympathetic and Parasympathetic medications; 2. Antiarrhythmic agents; 3. Agents to treat myocardial ischemia; 4. CV pharmacology; 5. Vasodilators; 6. Diuretics; 7. Drugs affecting lipid metabolism;	Upon completion of this course, the participant shall demonstrate competence by the ability to: 1. Describe the use of specific medications used in the management and treatment of: a. Endocrine disorders i. Insulin ii. Oral Hypoglycemics iii. Corticosteroids b. Rheumatic disorders c. Inflammatory disorders	1. Students will be given case studies, and be asked to prescribe an acceptable medication regiment for given comorbidies. 2. This class will be taken in same semester as Advanced Health Assessment, much content will correlate.	Course objectives elevated to reflect Bloom's Taxonomy higher order of learning and mastery. Additional course content added. Additional learning activities, including

8. Drugs affecting coagulation and platelet function;
9. Bronchodilators;
10. Corticosteroids;
11. Anti-inflammatory agents;
12. Pulmonary vasodilators;
13. Pharmacologic agents of the CNS;
    a. Antipsychotics;
    b. Antidepressants;
    c. Anticonvulsants;
    d. Antiparkinsonian agents;
14. Antimotility and Antisecretory agents;
15. Insulin;
16. Antimicrobial therapy;
17. Chemotherapeutic agents.

    d. Central nervous system disorders
      i. Antipsychotic agents
      ii. Antidepressant agents
      iii. Antiepileptic agents
      iv. Antiparkinsonian agents
    e. Cardiovascular disorders
      i. Antidysrhythmics
      ii. Phosphodiasterase Inhibitors
      iii. Inotropes
      iv. Calcium channel blockers
      v. Antihypertensive agents
        1. Sympatholytics
        2. Centrally acting alpha2-adrenergic agonists
        3. ACE inhibitors
        4. Angiotensin II receptor inhibitors
        5. Nitrovasodilators
        6. Nitric oxide
      vi. Digitalis and related drugs
      vii. Alpha and Beta receptor antagonists
      viii. Lipid-lowering agents
    f. Hemostatic disorders
      i. Heparin and low-molecular-weight heparins
      ii. Heparin reversal
      iii. Antiplatelet medications
      iv. Oral anticoagulants
      v. Oral anticoagulant reversal
      vi. Thrombolytics
      vii. Thrombin inhibitors
2. Understand and apply the role of the advanced practice nurse in prescriptive authority.

3. Students will recognize disease states and the appropriate pharmacologic treatment as well as prescriptive knowledge and acumen.

prescriptive case studies are added.

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DNAP8019 Basic Principles of Anesthesia	At the conclusion of this course, the nurse anesthesia student will be able to discuss, describe, define or illustrate the following:	At the conclusion of this course, the participant shall be able to demonstrate competence by the ability to discuss or demonstrate:	1. Additional content added to this course.	Course objectives elevated to reflect Bloom's Taxonomy higher order of learning and mastery.

	A. Compressed gas containers
	 B. Medical gas piping systems
	 C. The anesthesia machine
	 D. Vaporizers
	 E. Volatile anesthetic gases
	 F. Breathing systems
	 G. Trace gas levels
	 H. Hazards of anesthesia machines
	 I. Standard airway equipment
	 J. Equipment check and maintenance
	 K. Standard anesthesia monitors
	 L. Basic airway assessment and management
	 M. Selected topics including:
	   a. pre-anesthesia patient physical assessment and medications;
	   b. ASA Patient Status classifications;
	   c. charting;
	   d. post-operative assessment and management;
	   e. complications of anesthesia;
	   f. intraoperative fluid management and blood replacement;
	   g. respiratory physiology and perioperative respiratory complications;
	   h. coagulation;
	   i. malignant hyperthermia;
	   j. patient positioning to prevent injury;
		1. Compressed gas containers
		 2. Medical gas piping systems
		 3. The anesthesia machine
		 4. Vaporizers
		 5. Breathing systems
		 6. Standard and advanced patient monitoring
		   a. Selection of appropriate monitors based upon patient comorbidities, anesthetic technique, and surgical needs;
		   b. Techniques for placement of arterial lines, including ultrasound-guided;
		   c. Techniques for placement of central venous lines, including ultrasound-guided;
		 7. Trace gas levels
		 8. Hazards of anesthesia machines
		 9. Face masks and airways
		 10. Laryngoscopes
		 11. Equipment check and maintenance
		 12. Selected topics including:
		   a. pre-anesthesia patient physical assessment and medications;
		   b. ASA Patient Status classifications;
		   c. Appropriate patient and procedural charting;
		   d. Overdose management and treatment;
		   e. anaphylaxis pathophysiology and management;
			1. Additional content added to this course.
			
			 2. Lab component of the MSNA class is moved to the Simulation I class, leaving additional classroom time for coverage of information in greater detail.
			 3. Advanced patient monitoring is added to this class.
			
			 4. Students will participate in online Canvas discussion boards regarding specific anesthesia-related topics and/or case studies.
			
			 5. Taking this class concurrent with DNAP8035 Pharmacology of Anesthesia, so topics will align.
				Course objectives elevated to reflect Bloom's Taxonomy higher order of learning and mastery.
				
				 Course covers greater amount of information than MSNA class due to additional time spent in lecture by moving laboratory component to the Simulation Course(s).

	k. radiation safety in the OR; l. basics of case management.	f. post-operative assessment; g. patient positioning to prevent injury; h. basic anesthetic case management; i. acute postoperative pain management; j. care of patients in the post anesthesia care unit; k. oxygen therapy; l. fluid needs and calculations; m. blood replacement management; n. ventilatory management of the anesthetized patient; o. Basic and advanced airway management; p. Personal and professional integrity and the ability to interact on a professional level.		
DNAP8021 Advanced Physiology	1. Review the physiology of the cell, emphasizing genetics and membrane transport; 2. Review the basis of bioelectricity, signal transmission and processing in the human nervous system, and somatic sensory perception; 3. Review the mechanisms of muscle excitation-contraction and the roles of the spinal cord, brainstem, basal ganglia, cerebellum and cerebral cortex in the control of motor activity; 4. Review the autonomic nervous system and cerebrovascular dynamics;	At the conclusion of this course, the student shall demonstrate competency by the ability to describe and discuss: 1. Physiology of the cell, emphasizing genetics and membrane transport; 2. The basis of bioelectricity, signal transmission and processing in the human nervous system, and somatic sensory perception; 3. Mechanisms of muscle excitation-contraction and the roles of the spinal cord, brainstem, basal ganglia, cerebellum and cerebral cortex in the control of motor activity; 4. The autonomic nervous system and cerebrovascular dynamics;	1. Students will form groups of 2-3, and will be assigned a topic on human physiology of the faculty member's choosing. They will be tasked with development of a 50 minute PowerPoint lecture with video, which will be uploaded to Canvas and watched by all members of the class. 2. Students will take a pre and post exam related to student presentation to assess	Course objectives elevated to reflect Bloom's Taxonomy higher order of learning and mastery. Increased course requirements. Online group presentations facilitate the ability to work professionally with peers.

	5. Review the control of body temperature, body fluid compartments and their regulation, urinary filtration, renal tubular processing of body fluid, acid-base regulation and renal disease;
	
	6. Review the functions of the respiratory system—ventilation and gas exchange, blood gas transport, respiratory control systems and diseases, the functions of red and white blood cells, transfusions, transplants, and hemostasis;
	
	7. Review the electric and mechanical activities of the heart, the dynamics of the circulation, and the regulation of blood pressure;
	
	8. Review cardiac output and venous return during rest and exercise, coronary circulation and heart disease, heart defects and circulatory shock;
	
	9. Review various aspects of the function of the endocrine system.
		5. The control of body temperature, body fluid compartments and their regulation, urinary filtration, renal tubular processing of body fluid, acid-base regulation and renal disease;
		
		6. The functions of the respiratory system
		  a. ventilation and gas exchange;
		  b. blood gas transport;
		  c. respiratory control systems and diseases;
		  d. the functions of red and white blood cells;
		  e. transfusions, transplants and hemostasis;
		
		7. The electric and mechanical activities of the heart, the dynamics of the circulation and the regulation of blood pressure;
		
		8. Cardiac output and venous return during rest and exercise
		
		9. Coronary circulation and heart disease;
		
		10. Heart defects;
		11. Circulatory shock;
		12. Endocrine system physiology
			presentation effectiveness by increased subject knowledge.

DNAP8025 Pharmacology of Anesthesia	Students will learn:
	1. IV Anesthetics;
	2. Sedatives, Anxiolytics, and Amnestics;
	3. Analgesics;
	4. Antiemetics/PONV;
	5. Neuromuscular Blocking Agents and their reversal agents;
	6. Volatile Anesthetics;
	7. Antiarrhythmics;
		The student shall demonstrate competency in the understanding of pharmacology as it relates to drugs commonly used in the administration of general anesthesia by the ability to describe, discuss, or develop:
		1. Intravenous anesthetics
		  a. Barbiturates
		  b. Sedative/hypnotics
		  c. Opioid agonists
			1. Students will formulate an anesthetic care plan for the induction of general anesthesia.
			
			2. This course will run concurrent with Basic Principles of Anesthesia, so content will correlate.
				Course objectives elevated to reflect Bloom's Taxonomy higher order of learning and mastery.
				
				Additional course requirements and content added.

	8. Sympathomimetics/ Sympatholytics
	9. Parasympathomimetics/ Parasympatholytics
	10. Drugs of Abuse
		d. Opioid agonist-antagonists
		e. Opioid antagonists
		f. Benzodiazepines
		g. Benzodiazepine antagonist
		2. Muscle relaxants
		3. Local anesthetics
		4. Anticholinesterase agents
		5. Anticholinergics
		6. Selective relaxant binding agents
		7. Emergency drugs
		  a. Atropine
		  b. Lidocaine
		  c. Epinephrine
		  d. Ephedrine
		  e. Phenylephrine
		  f. Vasopressin
		8. Adjunct anesthesia drugs
		  a. Ketamine
		  b. Precedex
		  c. Other agents
		9. An appropriate pharmacologic plan for the induction of general anesthesia based on the body habitus, age, physiology, concurrent medications, pathophysiology, and surgical procedure.
			3. Students will be required to critically analyze and present an article to their peers relative to anesthetic pharmacology.	

DNAP8041 Advanced Pathophysiology	A student in this course will learn about the pathophysiology and anesthesia implications of: 1. cardiovascular diseases including dysrhythmias, ischemic disease, hypertension, heart failure, valvular disease, blood vessel disease, and inflammatory diseases of the heart,	A student in this course shall demonstrate competency by the ability to discuss the pathophysiology of: 1. Cardiovascular diseases including dysrhythmias, ischemic disease, hypertension, heart failure, valvular disease, blood vessel disease, and inflammatory diseases of the heart; 2. Respiratory diseases such as restrictive and obstructive diseases, infectious diseases of the	1. Students will form groups of 2-3, and will be assigned a topic on pathophysiology of the faculty member's choosing. They will be tasked with development of a 50 minute PowerPoint lecture with video, which will be uploaded to Canvas and watched by all members	Course objectives elevated to reflect Bloom's Taxonomy higher order of learning and mastery. Additional credit hour allow for much increased content coverage.

2. respiratory diseases such as restrictive and obstructive diseases, infectious diseases of the respiratory tract, respiratory distress syndromes, and effects of respiratory diseases on acid/base balance,
3. central and peripheral nervous system diseases, including seizures, Parkinson's and Alzheimer's diseases, cerebrovascular disease, myasthenia gravis, demyelinating diseases, autonomic neuropathies, and cerebral palsy,
4. musculoskeletal disorders such as muscular dystrophies, rheumatoid arthritis, lupus erythematosus, and scoliosis,
5. endocrine diseases including diabetes mellitus and insipidus, thyroid disorders, Cushing's and Addison's diseases, pheochromocytoma, acromegaly, and hyper/hypo-thyroid and – aldosteronism,
6. hepatic diseases such as hepatitis, cirrhosis, and porphyria,
7. renal diseases including calculi, acute and chronic

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respiratory tract, respiratory distress syndromes, and effects of respiratory diseases on acid/base balance;
3. Central and peripheral nervous system diseases, including seizures, Parkinson's and Alzheimer's diseases, cerebrovascular disease, myasthenia gravis, demyelinating diseases, autonomic neuropathies, and cerebral palsy;
4. Musculoskeletal disorders such as muscular dystrophies, rheumatoid arthritis, and scoliosis;
5. Endocrine diseases including diabetes mellitus and insipidus, thyroid disorders, Cushing's and Addison's diseases, pheochromocytoma, acromegaly, and hyper/hypo-thyroid, and aldosteronism;
6. Hepatic diseases such as hepatitis, cirrhosis, and porphyria;
7. Renal diseases including calculi, acute and chronic renal failure, uremia, and nephritis;
8. Blood diseases such as leukemias, anemias and other red blood cell disorders, thrombocytic disease, and clotting disorders;
9. Gastrointestinal diseases such as peptic ulcer disease, ulcerative colitis and inflammatory bowel disease, pancreatitis, gallbladder disease, and carcinoid syndrome;
10. Immune system disorders including hypersensitivity and angioedema, Sjögren's syndrome, HIV/AIDS, immunosuppression,

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of the class. This presentation will also include any specific anesthetic implications to the disease process. As such, a CRNA faculty will serve as reviewer and/or consultant to lead faculty on this project.

2. This course has been completely redesigned. Previous MSNA class was team-taught with CRNA faculty to include the anesthetic implications of disease processes. Anesthetic implications for disease processes and anesthetic management for the surgical cases related to pathophysiologic conditions will now be covered in Advanced Principles I, II, and III.

3. This course moves from 3 credit hours at MSNA level to 4 credit hours at DNAP level.

Online group presentations facilitate the ability to work professionally with peers. CRNA faculty consultation encourages professional collaboration.

Content of previous MSNA course moved to other DNAP courses to allow for more thorough discussion and mastery of Anesthesia for Surgical Procedures and Special Populations.

	renal failure, uremia, and nephritis, 8. blood diseases such as leukemias, anemias and other red blood cell disorders, thrombocytic disease, and clotting disorders, 9. gastrointestinal diseases such as peptic diseases, ulcerative colitis and inflammatory bowel disease, pancreatitis, gallbladder disease, and carcinoid syndrome, 10. immune disorders including hypersensitivity and angioedema, Sjögren's syndrome, HIV/AIDS, immunosuppression, and sepsis, 11. neoplasia, 12. glaucoma, and 13. the perception of pain which accompanies many diseases.	and sepsis, and systemic lupus erythematosus; 11. Neoplasias; 12. Glaucoma; 13. The perception of pain that accompanies many acute and chronic disease processes.		

DNAP8043 Regional Anesthesia	The student shall be able to discuss:
	1. principles of pain management;
	2. anatomy particular to various regional anesthesia;
	3. pharmacology of local anesthetics;
	4. administration of regional anesthetics, including:
	  A. spinal anesthesia;
	  B. epidural anesthesia;
	  C. interscalene blocks;
	  D. axillary blocks;
		At the completion of this course, the student shall demonstrate competency in the ability to discuss or describe:
		1. Principles of pain management;
		2. Neurologic anatomy and physiology as it relates to the perception of pain;
		3. Pain terminology, the anatomy and physiology of pain, pain pathways, and pain modulation;
		4. Differences between acute and chronic pain;
		5. Anesthesia interventions related to pain management;
			1. Significant addition in content, including POCUS, to the curriculum.
			
			2. Objectives are more clearly defined, and have broader mastery implications.
			
			3. Students will be asked to give a short 15-20 minute presentation to the class after critical
				Course objectives elevated to reflect Bloom's Taxonomy higher order of learning and mastery.
				
				Addition of content and course requirements.
				
				Promotes EBP by review of current peer-reviewed journals with presentation of

	E. Bier blocks;
	F. ankle blocks;
	G. eye blocks;
	H. other blocks deemed appropriate.
	5. Basics of Ultrasound Guided blocks.
	6. maintenance of regional anesthesia;
	7. legal aspects of regional anesthesia.
		6. Anatomy particular to various regional anesthesia;
		7. Pharmacology of local anesthetics;
		8. Administration of regional anesthetics, including:
		  a. Spinal anesthesia;
		  b. Epidural anesthesia;
		  c. Brachial Plexus blocks;
		  d. Bier blocks;
		  e. Ankle blocks;
		  f. Upper extremity nerve blocks;
		  g. Lower extremity nerve blocks;
		  h. Other blocks deemed appropriate.
		9. Fundamentals of ultrasonography, including POCUS, and its application in anesthesia care;
		10. Fundamentals of ultrasound-guided peripheral nerve blocks;
		11. Maintenance of regional anesthesia;
		12. Legal aspects of regional anesthesia.
			appraisal of a peer-reviewed journal article related to the administration, management, or safety of regional anesthesia.	information to fellow students.

Course Descriptions: Objectives

DNAP8005 Chemistry and Physics for the Nurse Anesthetist (4)

This course is designed to review and reinforce the concepts of chemistry and physics specifically as they relate to anesthesia. Clinical concepts and application are emphasized and reinforced within an in-depth study.

COURSE OBJECTIVES: Upon completion of this course, the participant shall demonstrate competence of the following chemistry/ physics principles:

1. Apply mathematical skills to the practice of anesthesia through unit conversion and graphical analysis;
2. Apply the concepts of work, energy, and thermodynamics to gases and breathing;
3. Analyze the behavior of fluids under both static and dynamic conditions;
4. Analyze the behavior of gases in terms of the empirical gas laws, the kinetic molecular theory and modern structural theories;
5. Apply the atomic theory and intermolecular forces to applications in medications and physiological phenomena;
6. Apply the concepts of acids, bases and buffers to physiology and homeostasis;
7. Apply the concepts of solutions (concentration, diffusion/osmosis, solubility) to medical and physiological phenomena;
8. Explore classes of organic and biochemical compounds and they relate to medicines and living systems;
9. Describe the laws of electricity and how they relate to electrical safety in a clinical setting;
10. Synthesize the principles of chemistry and physics as they relate to the practice of anesthesia and to medications administered by anesthesia providers.

COURSE REQUIREMENTS:

1. Review video lectures on Canvas and respond to threaded discussions;
2. Participate in small group discussions on Canvas;
3. Complete on-line examinations;
4. Analysis paper. You will select an article from any refereed journal related to anesthesia. You will discuss the underlying chemical/physical principles on which the research is based.Specific information for this paper is available on Canvas.

DNAP8007 Personal Leadership Development (3)

This course was designed to present the theoretical and practical framework for developing and enhancing personal leadership. Course emphasis will be on leadership development through the use of validated leadership assessments, the creation of a personal leadership strategic plan, a fundamental understanding of leadership, as well as prerequisites for leadership effectiveness. Focus will include understanding the practices, experiences and resources that will foster leadership growth and enhance leadership skills. Particular emphasis is given to the discovery of individual strengths and opportunity areas.

Course Objectives: Upon completion of this course, the participant shall demonstrate competence of the following areas of leadership development:

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1. Assess and apply personal leadership styles through standard leadership assessment tools and identify areas of growth and strength.
2. Understand and evaluate the predominant research-based leadership theories within the context of leadership and personal development.
3. Discuss and apply tangible leadership theoretical applications to a student's personal leadership development and career.
4. Identify a personal leadership development strategic plan.
5. Understand the characteristics that differentiate effective leadership from average or mediocre leadership.
6. Apply the foundational characteristics of effective leaders.

DNAP8009 Learning Technologies and Informatics for the Practice Doctorate (2)

This informatics course focuses on the collection, organization, analysis, and dissemination of information in nurse anesthesia and healthcare. Coursework emphasizes the integration of evidence-based research into clinical decision-making and the influence of information systems on health outcomes. Students will be expected to find and evaluate information using a variety of information retrieval tools.

Course Objectives: Upon completion of this course, the participant shall demonstrate competence in the ability to:

1. Use information systems/technology to support and improve patient care.
2. Develop and execute a search, and extract data from health care databases.
3. Describe how the public health information infrastructure is used to collect, process, maintain, and disseminate data.
4. Critique the design, analysis, and findings of epidemiologic studies, various study designs, and explain how they can inform professional practice.
5. Recognize the information retrieval tools that are available through the University and the Internet.
6. Create search strategies, and adapt as needed.
7. Utilization of information retrieval tools for accessing current research.

DNAP8011 Healthcare Economics (3)

This course explores how microeconomic principles apply to health care delivery and its policies. Coverage includes the changing nature of health care, the social and political sides of issues, and the future of health care delivery and finance under the Affordable Care Act.

Course Objectives: Upon completion of this course, the student shall demonstrate competence in the principles of healthcare economics in the ability to:

1. Describe key economic terms and their health care application;
2. Identify the effect of economics in the current health care environment;
3. Describe the historical context of health care services in the United States;
4. Describe current health care delivery structures including the role of government regulation of insurance such as Medicare and Medicaid services;
5. Describe the effects of health care policy and the implementation of the Affordable Care Act;
6. Compare and contrast the cost, quality, and access of health care in various nations;
7. Compare and contrast arguments that predict future physician/nursing oversupply versus physician/nursing shortages;

8. Explain how the individual insurance market works, how insurance premiums are determined, and common reasons why insurance markets fail;
9. Recognize types of health care rationing and explain where and how they are utilized;
10. Explain the relationship between patents, profits, price discrimination, and innovation in the pharmaceutical industry;
11. Compare and contrast various methods of cost constraint such as managed care, restricted networks, capitation, and price controls.

DNAP8013 Ethics in Health Care Administration (3)

Topics covered in this course include principles and models for the recognition, analysis, and resolution of ethical dilemmas in health occupations, legal responsibility, workplace safety, and the health care facility's obligation to provide protection from injury for patients, their families, and staff.

Course Objectives:

Upon completion of this course, the student shall demonstrate competency in the principles of ethics in healthcare by the ability to:

1. Evaluate complex ethical issues facing healthcare professionals today.
2. Understand the development and sources of laws.
3. Determine liability in patient care.
4. Analyze documentation and regulatory compliance.
5. Identify employment laws and regulations.
6. Identify a process for resolving ethical dilemmas.
7. Analyze a current ethical dilemma in healthcare through opposing arguments.
8. Facilitate an online discussion of an ethical dilemma in healthcare.

DNAP8015 Advanced Anatomy for the Nurse Anesthetist (4)

This course is designed to provide the student with an extensive background in the fundamentals of human anatomy through lecture, laboratory, and independent study formats. Structures of the upper and lower extremities, cardiovascular and pulmonary systems, anatomic structures of the head and neck are illustrated in lecture followed by laboratory experiential learning to include location and identification as well as relationship of structures using cadavers, prosections, and static models.

Course Objectives: Upon successful completion of this course students shall demonstrate competency in anatomy as related to the practice of nurse anesthesia by the ability to:

1. Identify and discuss normal anatomy of the:
   a. Central and peripheral nervous systems;
   b. Respiratory system;
   c. Cardiovascular system;
   d. Renal system;
   e. Biliary system
2. Identify the anatomy involved in regional anesthesia of the:
   a. Upper extremity;
   b. Lower extremity;
   c. Brachial plexus;
   d. Trunk;

  e. Thorax;

  f. Spine and epidural space.

3. Participate in cadaver dissection and identification.

4. Identify airway-related structures.

5. Identify head and neck structures.

6. Dissect and present the anatomy of selected regional and peripheral nerve blocks.

DNAP8017 Advanced Pharmacology (3)

This course will provide an in-depth study of the pharmacology of drugs currently used in human medicine. The student should gain an understanding of the uptake, distribution, biotransformation, and elimination of drugs that are currently prescribed for specific human conditions such as endocrine disorders, hypertension, rheumatic and inflammatory disorders, central nervous system disorders, cardiovascular conditions, and hemostatic derangements.

Course Objectives: Upon completion of this course, the participant shall demonstrate competence by the ability to:

1. Describe the use of specific medications used in the management and treatment of:

  a. Endocrine disorders

    i. Insulin

    ii. Oral Hypoglycemics

    iii. Corticosteroids

  b. Rheumatic disorders

  c. Inflammatory disorders

  d. Central nervous system disorders

    i. Antipsychotic agents

    ii. Antidepressant agents

    iii. Antiepileptic agents

    iv. Antiparkinsonian agents

  e. Cardiovascular disorders

    i. Antidysrhythmics

    ii. Phosphodiasterase Inhibitors

    iii. Inotropes

    iv. Calcium channel blockers

    v. Antihypertensive agents

      1. Sympatholytics

      2. Centrally acting alpha2-adrenergic agonists

      3. ACE inhibitors

      4. Angiotensin II receptor inhibitors

      5. Nitrovasodilators

      6. Nitric oxide

    vi. Digitalis and related drugs

    vii. Alpha and Beta receptor antagonists

    viii. Lipid-lowering agents

  f. Hemostatic disorders

    i. Heparin and low-molecular-weight heparins

    ii. Heparin reversal

    iii. Antiplatelet medications

    iv. Oral anticoagulants

    v. Oral anticoagulant reversal

    vi. Thrombolytics

vii.   Thrombin inhibitors
2. Understand and apply the role of the advanced practice nurse in prescriptive authority.

DNAP8019 Basic Principles of Anesthesia (3)

The foundation of nurse anesthesia is explored through the presentation of basic principles and concepts of anesthetic management, anesthesia equipment and monitoring, fluid and body management. This course will include principles related to mechanical ventilation, volatile anesthetic gas management and gas monitoring devices. Standard and advanced patient monitors, including cardiac and neuromuscular, will be covered. Quality of care, anesthesia patient safety, and peri-anesthetic management for patients with various co-morbidities will be discussed.

Course Objectives: At the conclusion of this course, the participant shall be able to demonstrate competence by the ability to discuss or demonstrate:

1. Compressed gas containers
2. Medical gas piping systems
3. The anesthesia machine
4. Vaporizers
5. Breathing systems
6. Standard and advanced patient monitoring
    a. Selection of appropriate monitors based upon patient comorbidities, anesthetic technique, and surgical needs;
    b. Techniques for placement of arterial lines, including ultrasound-guided;
    c. Techniques for placement of central venous lines, including ultrasound-guided;
7. Trace gas levels
8. Hazards of anesthesia machines
9. Face masks and airways
10. Laryngoscopes
11. Equipment check and maintenance
12. Selected topics including:
    a. pre-anesthesia patient physical assessment and medications;
    b. ASA Patient Status classifications;
    c. Appropriate patient and procedural charting;
    d. Overdose management and treatment;
    e. anaphylaxis pathophysiology and management;
    f. post-operative assessment;
    g. patient positioning to prevent injury;
    h. basic anesthetic case management;
    i. acute postoperative pain management;
    j. care of patients in the post anesthesia care unit;
    k. oxygen therapy;
    l. fluid needs and calculations;
    m. blood replacement management;
    n. ventilatory management of the anesthetized patient;
    o. Basic and advanced airway management;
    p. Personal and professional integrity and the ability to interact on a professional level.

DNAP8021 Advanced Physiology (4)

This course will provide an in-depth study of the physiologic principles of body systems and their physiologic relationships. Functional systems of the cell, cell metabolism, cell membrane transport, membrane potentials, action potentials, cell receptors, cell markers, nervous system foundational concepts, cardiovascular and respiratory system concepts, and endocrine system physiology will be explored.

Course Objectives: At the conclusion of this course, the student shall demonstrate competency by the ability to describe and discuss:

1. Physiology of the cell, emphasizing genetics and membrane transport;
2. The basis of bioelectricity, signal transmission and processing in the human nervous system, and somatic sensory perception;
3. Mechanisms of muscle excitation-contraction and the roles of the spinal cord, brainstem, basal ganglia, cerebellum and cerebral cortex in the control of motor activity;
4. The autonomic nervous system and cerebrovascular dynamics;
5. The control of body temperature, body fluid compartments and their regulation, urinary filtration, renal tubular processing of body fluid, acid-base regulation and renal disease;
6. The functions of the respiratory system
   a. ventilation and gas exchange;
   b. blood gas transport;
   c. respiratory control systems and diseases;
   d. the functions of red and white blood cells;
   e. transfusions, transplants and hemostasis;
7. The electric and mechanical activities of the heart, the dynamics of the circulation and the regulation of blood pressure;
8. Cardiac output and venous return during rest and exercise
9. Coronary circulation and heart disease;
10. Heart defects;
11. Circulatory shock;
12. Endocrine system physiology

DNAP8023 Advanced Health Assessment (3)

This course builds upon basic health assessment skills developed in the undergraduate nursing program of study. The clinical basis for a comprehensive history and physical assessment in advanced practice nursing will be developed and specifically related to anesthesia care. This course will include the identification of diagnostic testing that may be appropriate for a patient, cultural and developmental variations and needs of the patient, establishing a differential diagnosis based upon assessment data, and developing and effective and appropriate plan of care for the patient. 12-lead ECG and arrhythmia interpretation will be included. Critical thinking, diagnostic reasoning, and communication skill development will be developed through individual and group interaction, as well as case-guided learning experiences and simulation.

Course Objectives:
Upon the completion of this course, the participant shall demonstrate competency by the ability to:

1. Explain physiology/pathophysiology in relation to selected laboratory and imaging procedures, including electrophysiology, hematology, renal/urine, and blood chemistries;
2. Utilize knowledge of peri-anesthesia care to identify indications for specific laboratory and imaging procedures;
3. Interpret selected laboratory tests;

4. Perform a preoperative and perioperative physical examination with diagnosis of the surgical patient;
5. Describe fundamentals of radiologic principles and various techniques, topographic anatomy, contrast agents, radiation safety, and proper techniques of safe fluoroscopic equipment use;
6. Evaluate normal and abnormal radiographs of the chest, including proper positioning of various tubes (e.g., endotracheal tubes, chest tubes) and lines (e.g., central venous catheters);
7. Summarize genetics as it relates to anesthesia care.

DNAP8025 Pharmacology of Anesthesia (3)

Drugs specific to the administration of anesthesia are studied and the effects of these drugs on body systems are addressed. Drug interactions and variations of metabolism are considered through the important context of pharmacogenomics as they relate to the efficacy, safety, and personalized anesthetic drug administration.

Course Objectives: The student shall demonstrate competency in the understanding of pharmacology as it relates to drugs commonly used in the administration of general anesthesia by the ability to describe, discuss, or develop:

1. Intravenous anesthetics
    a. Barbiturates
    b. Sedative/hypnotics
    c. Opioid agonists
    d. Opioid agonist-antagonists
    e. Opioid antagonists
    f. Benzodiazepines
    g. Benzodiazepine antagonists
2. Muscle relaxants
3. Local anesthetics
4. Anticholinesterase agents
5. Anticholinergics
6. Selective relaxant binding agents
7. Emergency drugs
    a. Atropine
    b. Lidocaine
    c. Epinephrine
    d. Ephedrine
    e. Phenylephrine
    f. Vasopressin
8. Adjunct anesthesia drugs
    a. Ketamine
    b. Precedex
    c. Other agents
9. An appropriate pharmacologic plan for the induction of general anesthesia based on the body habitus, age, physiology, concurrent medications, pathophysiology, and surgical procedure.

DNAP8027 Anesthesia Simulation 1 (1)

The student will be exposed to anesthesia delivery systems, their components, proper machine checkout, and set up. Students will progress through this introductory simulation course to include moderate fidelity simulation of airway management. By the end of this 16-week course, students will perform the induction sequence for a general anesthetic in an uncomplicated patient.

Course Objectives: The student shall demonstrate competence in the ability to perform a/an:

1. Anesthesia machine checkout;
2. OR room set-up;
3. Basic induction of general anesthetic for the healthy patient;
4. Basic airway management;
5. Immediate post-induction stabilization of surgical patient.

DNAP8029 Introduction to Clinical Practicum (1)

The student will be introduced to the clinical practicum through a semester-long orientation to the operating rooms at primary clinical sites. Students will be oriented to the clinical sites, including facility policies and procedures.

Course Objectives: Upon completion of this course, the participant shall demonstrate competency in the ability to:

1. Describe orientation procedures and policies at specified clinical sites;
2. Locate specified items of importance at specified clinical sites;
   a. Anesthesia stock room;
   b. Pharmacy;
   c. Difficult airway cart;
   d. Malignant hyperthermia cart;
   e. Oxygen shut-off valves;
   f. Fire extinguishers;
3. Obtain student clinical assignments and develop a basic anesthetic care plan related to the specific procedure.

DNAP8031 Professional Issues I (2)

This course includes exploration of nurse anesthesia practice. Topics will include the history of nurse anesthesia and its importance in society and healthcare, the impact of nurse anesthesia in healthcare past and present, and healthcare advances that have impact on the profession of nurse anesthesia. Scholarship within the discipline will be examined. The *Code of Ethics for CRNAs* will be discussed and studied.

Course Objectives: At the conclusion of the course, the student shall demonstrate competency by the ability to:

1. Compare nurse practice acts and their impact on professional practice;
2. Differentiate between advanced practice roles of nurse practitioner, clinical nurse specialist, nurse anesthetist, and nurse mid-wife, with particular reference to scope of practice issues;
3. Describe the process of certification and recertification to include the role(s) of applicable boards;
4. Identify events which could lead to the revocation, suspension, or denial of licensure;
5. Discuss the legislation of anesthesia practice at the federal, state, and local levels;
6. Identify accrediting agencies and illustrate their control on anesthesia practice;
7. Identify the components of a quality assurance and risk management plan;
8. Differentiate between institutional licensure and practice privileges;
9. delineate the components of management and relate these functions to the management of an anesthesia department;
10. Identify the key elements of a medical record;

11. Recognize the components of delivering culturally competent healthcare to a variety of patient populations;
12. Analyze major legal and ethical issues related to the nurse anesthesia profession;
13. Discuss cultural and diversity issues related to advanced practice nursing;
14. Discuss the importance of an ethical code of conduct to the profession of nurse anesthesia;
15. Relate the *Code of Ethics for CRNAs* to professional practice and roles within the healthcare system;
16. Adhere to the *Code of Ethics for CRNAs*;
17. Describe various practice settings and options available to nurse anesthetists;
18. Discuss OSHA safety requirements and their effects on practice in the operating rooms;
19. Interact on a professional level with integrity;
20. Evaluation of wellness issues, including:
    a. Drugs of abuse;
    b. Signs of abuse;
    c. Legal implications of the impaired provider;
    d. Interventions of a colleague potentially affected by abuse;
    e. Reentry into practice;
    f. Physiological and pathophysiological changes associated with substance use disorder (SUD);
21. Other wellness initiatives, including:
    a. Self-care;
    b. Stress relief;
    c. Physical activity;
    d. Mental and emotional concerns.

DNAP8033 Advanced Principles of Anesthesia I (3)

This course builds upon basic concepts and information obtained in Basic Principles of Anesthesia. Anesthesia care for advanced principles of management and techniques in the delivery of anesthesia for special populations will be explored. Patient populations to be explored include pediatrics, geriatrics, the obese patient, and the patient with selected physiologic disturbances. Anesthetic management for a variety of procedures is explored through lecture, discussion, and independent learning activities, including the development of an appropriate anesthetic plan of care for special populations with increased complexity.

Course Objectives: At the completion of this course, the student shall demonstrate competency by the ability to describe or discuss or formulate:

1. Anesthetic management of the pediatric patient;
    a. Anatomy, physiology, pathophysiology;
    b. Pharmacology;
    c. Anesthesia techniques/procedures;
    d. Management of complications;
2. A comprehensive plan of anesthesia care for the pediatric patient;
3. Anesthetic management of the geriatric patient;
    a. Anatomy, physiology, pathophysiology;
    b. Pharmacology;
    c. Anesthesia techniques/procedures;
    d. Management of complications;
4. A comprehensive and physiologically sound anesthetic care plan for the geriatric patient;
5. Anesthetic management of the obese patient;
    a. Anatomy, physiology, pathophysiology;

b. Pharmacology;
    c. Anesthesia techniques/procedures;
    d. Management of complications;
6. A comprehensive and physiologically sound anesthetic care plan for the obese patient;
7. Anesthetic management of the trauma patient;
8. Anesthetic management of patients with liver and biliary tract disease;
9. Anesthetic management of patients with respiratory disease;
10. Anesthetic management of patients with renal disease;
11. Anesthetic management of patients with endocrine disease;
12. Anesthetic management of patients with hematologic disorders;
13. Anesthetic management of patients with skin and musculoskeletal disease;
14. A comprehensive and physiologically sound anesthetic care plan for the patient with selected physiologic needs or derangements.

DNAP8035 Advanced Topics in Pharmacology (2)

This course focuses on the in-depth study of the pharmaceutic, pharmacokinetic, and pharmacodynamics phases of drug therapy examined within the application to the clinical setting. Pharmacogenetic disorders with specific clinical implications will be examined.

Course Objectives: At the completion of this course, the participant shall demonstrate competence of subject matter by the ability to discuss:

1. Basic principles of pharmacology as they relate to pharmacokinetics and pharmacodynamics;
2. Interactions of classifications of medications;
3. The principles of pharmacogenetics;
4. The principles of pharmacogenomics;
5. Changes in pharmacokinetics and pharmacodynamics of selected anesthetic-related medications as it relates to pharmacogenetics and/or pharmacogenomics.

DNAP8037 Anesthesia Simulation II (1)

Students will build upon prior simulation experience, including anesthetic management of the patient with coexisting medical conditions or comorbidities. Students will learn using moderate and high fidelity simulation opportunities.

Course Objectives: Upon completion of this course, the participant shall demonstrate competence by the ability to:

1. Recognize, diagnose, and treat appropriately simulation patients with increasing complexity of co-morbidities and surgical procedures;
2. Participate as a member of an inter-professional team in caring for the simulated patient with increasing co-morbidities;
3. Demonstrate critical thinking skills;
4. Debrief and integrate implications of the patient with co-morbidities and challenging surgical cases.

DNAP8039 Advanced Principles of Anesthesia II (3)

Anesthesia care for advanced principles of management and techniques in the delivery of anesthesia for special populations will be explored. Patient populations to be explored include the obstetric, neonatal,

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and neurosurgical patients. Physiologic changes related to pregnancy, as well as pathophysiologic states seen in the parturient will be discussed. The effect of physiologic changes as well as pathophysiologic states effect upon the neonate, labor and delivery, and anesthetic management are considered. Pathophysiologic changes in the neurosurgical patient will be discussed and reviewed. Anesthetic implications of neurologic conditions, and anesthetic management of the neurosurgical patient will be explored.

Course Objectives: Upon completion of the course, the participant shall demonstrate competency in the ability to discuss, define, or develop:

1. Maternal physiologic changes;
2. Anatomic changes of pregnancy;
3. Maternal pathophysiology;
4. Obstetric pharmacology;
5. Anesthetic management of the healthy parturient;
6. Anesthetic management of the high-risk parturient;
7. Nonobstetric surgery in the parturient;
8. Management of obstetric complications;
9. Management of obstetric emergencies;
10. A comprehensive and physiologically sound anesthetic care plan for the parturient patient for:
    a. non-obstetric surgical procedures;
    b. labor and vaginal delivery;
    c. Cesarean delivery;
    d. emergent obstetrical procedures;
11. Neonatal anatomy, physiology, and pathophysiology;
12. Congenital anomalies of the newborn;
13. A comprehensive and physiologically sound anesthetic care plan for the neonate;
14. Anesthetic management of the newborn with congenital anomalies;
15. Management of anesthetic complications of the newborn;
16. Neurophysiology and pathophysiology;
17. A comprehensive and physiologically sound anesthetic care plan for the neurosurgical patient undergoing:
    a. Decompression;
        i. Burr holes;
        ii. VP shunt placement;
    b. Craniotomy for space-occupying lesion;
    c. Craniotomy for vascular abnormalities;
    d. Transsphenoidal hypophysectomy;
    e. Interventional radiology.

DNAP8041 Advanced Pathophysiology (4)

This course will integrate advanced pathophysiology and clinical implications across the lifespan. Organ systems' dysfunction from the level of the cell through integrated organ levels will be presented, and the genetic basis of disease will be discussed. Recent scientific advances will be discussed with application to new approaches to disease and symptom management. The interrelationships between basic physiology, clinical pathophysiology, and genetics are emphasized through lecture and case studies.

Course Objectives: A student in this course shall demonstrate competency by the ability to discuss the pathophysiology of:

1. Cardiovascular diseases including dysrhythmias, ischemic disease, hypertension, heart failure, valvular disease, blood vessel disease, and inflammatory diseases of the heart;
2. Respiratory diseases such as restrictive and obstructive diseases, infectious diseases of the respiratory tract, respiratory distress syndromes, and effects of respiratory diseases on acid/base balance;
3. Central and peripheral nervous system diseases, including seizures, Parkinson's and Alzheimer's diseases, cerebrovascular disease, myasthenia gravis, demyelinating diseases, autonomic neuropathies, and cerebral palsy;
4. Musculoskeletal disorders such as muscular dystrophies, rheumatoid arthritis, and scoliosis;
5. Endocrine diseases including diabetes mellitus and insipidus, thyroid disorders, Cushing's and Addison's diseases, pheochromocytoma, acromegaly, and hyper/hypo-thyroid, and aldosteronism;
6. Hepatic diseases such as hepatitis, cirrhosis, and porphyria;
7. Renal diseases including calculi, acute and chronic renal failure, uremia, and nephritis;
8. Blood diseases such as leukemias, anemias and other red blood cell disorders, thrombocytic disease, and clotting disorders;
9. Gastrointestinal diseases such as peptic ulcer disease, ulcerative colitis and inflammatory bowel disease, pancreatitis, gallbladder disease, and carcinoid syndrome;
10. Immune system disorders including hypersensitivity and angioedema, Sjögren's syndrome, HIV/AIDS, immunosuppression, and sepsis, and systemic lupus erythematosus;
11. Neoplasias;
12. Glaucoma;
13. The perception of pain that accompanies many acute and chronic disease processes.

DNAP8043 Regional Anesthesia (2)

The structure and function of the peripheral nerves and the spinal cord are studied in relation to the administration and management of selected regional anesthetic techniques. The anatomy and physiology of pain will be explored, including the impact of pain on society and the individual with relationship to the transition from acute to chronic pain. Central neuraxial blockade and peripheral nerve blockade techniques, pharmacology, and ultrasound principles and guidance of the brachial plexus, lumbar and sacral plexus, truncal blocks, and additional selected regional blockade will be explored.

Course Objectives: At the completion of this course, the student shall demonstrate competency in the ability to discuss or describe:

1. Principles of pain management;
2. Neurologic anatomy and physiology as it relates to the perception of pain;
3. Pain terminology, the anatomy and physiology of pain, pain pathways, and pain modulation;
4. Differences between acute and chronic pain;
5. Anesthesia interventions related to pain management;
6. Anatomy particular to various regional anesthesia;
7. Pharmacology of local anesthetics;
8. Administration of regional anesthetics, including:
   a. Spinal anesthesia;
   b. Epidural anesthesia;
   c. Brachial Plexus blocks;

    d. Bier blocks;
    e. Ankle blocks;
    f. Upper extremity nerve blocks;
    g. Lower extremity nerve blocks;
    h. Other blocks deemed appropriate.
9. Fundamentals of ultrasonography, including POCUS, and its application in anesthesia care;
10. Fundamentals of ultrasound-guided peripheral nerve blocks;
11. Maintenance of regional anesthesia;
12. Legal aspects of regional anesthesia.

DNAP8045 Clinical Practicum 1 (2)

Clinical instruction in the administration of general and regional anesthesia under the supervision of experienced certified registered nurse anesthetists and physician anesthesiologists. This initial clinical course is designed to integrate clinical practice with the basic didactic coursework. Students will be assigned to affiliated clinical sites. Students are required to meet or exceed basic competencies to build from simple cases and techniques to more complex cases and procedures.

Course Objectives: Upon the completion of this course, the student shall demonstrate clinical competency by the ability to:

1. Perform a complete preoperative evaluation, integrating the physiologic, pathophysiologic, emotional, and socio-cultural state of the patient;
2. Conduct a comprehensive equipment check of the anesthesia machine and all associated monitors;
3. Prepare a basic anesthetic set-up in the operating room in preparation for a general anesthetic;
4. Analyze pre-anesthetic vital signs, laboratory, x-ray, electrocardiogram, and other tests pertinent to the patient's anesthesia plan;
5. Suggest or write appropriate pre-anesthetic medication orders within medically established guidelines for the ASA PS I patient;
6. Develop an appropriate anesthesia care plan consistent with the overall needs of the ASA PS I patient;
7. Select, apply, interpret, and utilize both non-invasive and invasive monitoring modalities for continuous evaluation of the patient's physiologic status;
8. Perform a physiologically sound anesthesia induction within the confines of the operative, diagnostic, and therapeutic situations and needs of the ASA PS I patient;
9. Safely establish and maintain a patent airway in a non-traumatic manner for all patients;
10. Use a volume and pressure-controlled ventilator intra-operatively, demonstrating knowledge of the scientific principles related to its use;
11. Administer physiologically sound anesthesia maintenance within the confines of the operative, diagnostic, and therapeutic situation, and the specific needs of the ASA PS I patient;
12. Maintain patient safety and protect from iatrogenic complications;
13. Position or supervise the positioning of the patient to assure optimal physiologic function and safety;
14. Manage fluid therapy within the appropriate plan of care for the ASA PS I patient;
15. Recognize and treat intra-operative respiratory dysfunction, such as mechanical obstruction, laryngospasm, bronchospasm, apnea, respiratory depression, and aspiration pneumonitis;
16. Recognize and treat intra-operative cardiovascular dysfunction such as hypertension, hypotension, tachycardia, bradycardia, and other cardiac arrhythmias;
17. Recognize and take appropriate actions to complications occurring during anesthetic management, with knowledge of when to refer to another qualified provider concerning those

areas beyond the anesthetist's ability to manage within practice standards, policies, and responsibilities;
18. Manage a physiologically sound emergence within the confines of the operative, diagnostic and therapeutic situation, and the pathological condition of the ASA PS I patient;
19. Manage a regional anesthetic for appropriate surgical patients;
20. Manage a moderate to deep sedation anesthetic;
21. Within medically established guidelines, demonstrate skill in the induction and administration of anesthesia to the patient with a full stomach;
22. Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions;
23. Transfer patient care to appropriate post anesthesia recovery unit personnel in a safe and informative manner;
24. Utilize vigilance and critical thinking during clinical decision-making, clinical interventions, and evaluation of patients in the perioperative period;
25. Evaluate post-anesthetic recovery of patients by recognizing complications arising from anesthetic management and recommending a course of action for correcting such complications within medically established guidelines;
26. Demonstrate personal and professional integrity and the ability to interact on a professional level with all members of the surgical team;
27. Effectively utilize verbal, nonverbal, and written communication in the delivery of perianesthetic care;
28. Teach patients and health-related personnel in areas of expertise;
29. Complete all necessary and pertinent medical documentation pertaining to the patient's anesthetic care;
30. Function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice.

DNAP8047 Advanced Principles of Anesthesia III (3)

This course presents anesthesia considerations for patients with a variety of cardiovascular derangements, including coronary artery disease, valvular disease, hypertrophic cardiomyopathy, congenital cardiac disease, and additional forms of cardiomyopathy. Anesthetic techniques specifically tailored to each cardiovascular derangement will be considered and discussed. Surgical concerns for coronary artery bypass, valvular repair or replacement, cardiac transplantation, thoracotomy, thoracoscopy, mediastinoscopy, and non-cardiac surgical issues will be addressed through discussion, lecture, and case studies. Considerations for vascular surgical procedures will also be addressed and discussed.

Course Objectives: Upon completion of this course, the student shall demonstrate competency by the ability to discuss, describe, or develop:

1. A comprehensive and physiologically sound anesthetic care plan for the patient undergoing intrathoracic surgical procedures including:
    a. CABG;
    b. Valvular replacement or repair;
    c. Cardiac transplant;
    d. Thoracotomy;
    e. Thoracoscopy;
    f. Mediastinoscopy;
    g. Esophagectomy.
2. A comprehensive and physiologically sound anesthetic care plan for the patient undergoing vascular surgical procedures including:
    a. Carotid endarterectomy;

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     b. Thoracic aorta repair;
     c. Abdominal aorta repair, including open and endovascular;
     d. Extremities
        i. Occlusive disease;
        ii. Vascular access.
3. A comprehensive and physiologically sound anesthetic care plan for the patient undergoing interventional cardiology including:
     a. Cardioversion;
     b. Pacemakers;
     c. Cardiac ablations;
     d. AICD;
4. A comprehensive and physiologically sound anesthesia care plan for the patient with cardiovascular derangements undergoing non-cardiac surgery.

DNAP8049 Biomedical Statistics (3)

This course provides a comprehensive overview of frequently used descriptive and inferential bio statistical methods. The course includes application of the theories of measurement, statistical inference, and decision trees, which all contribute to better clinical decisions and improved patient care outcomes. Conceptual understanding is the primary goal of this course, with computational skill a secondary goal. Critical analysis and evaluation, research design, hypothesis testing, correlation and regression will be explored.

Course Objectives: Upon the completion of this course, the student shall demonstrate competence in the ability to describe or discuss:

1. Common descriptive and inferential biostatistical methods;
2. Fundamentals of sampling;
3. Development of a data set, clean data, and display data;
4. Appropriate statistical tests to analyze data sets;
5. Evaluate the assumptions for statistical inference;
6. Reliability and relativity;
7. Parametric tests of:
     a. Comparison (t-test and ANOVA);
     b. Correlation (including regression);
8. Nonparametric tests;
     a. Chi squares;
     b. Wilcoxon Rank-Sum;
     c. Mann-Whitley;
9. Utilization of at least one statistical software package.

DNAP8051 Professional Issues II (2)

This course will develop the learner's knowledge of business and financial practices in professional and personal situations. It is designed to be a framework for starting a business, as well as managing business and personal financial affairs. Content will include entrepreneurial basics, preparation of a business plan, personal financial planning, legal considerations, and tax considerations.

Course Objectives: Upon completion of this course, the student shall demonstrate competence by the ability to:

1. Identify the history, theory and characteristics of the major types of payment systems in the US;
2. Analyze business practices encountered in nurse anesthesia delivery settings;
3. Read, interpret, and communicate key financial information;
4. Integrate financial analysis into leadership decision-making utilizing key drivers of revenues and cost;
5. Identify key factors that impact the rising health care costs and approaches to controlling those costs;
6. Describe legal issues related to nurse anesthesia;
7. Function within legal and regulatory requirements;
8. Define and discuss legal implication of the terms:
   a. consent;
   b. liable vs. slander;
   c. confidentiality;
   d. deposition.
9. Recognize and evaluate legal issues that may be encountered in anesthesia practice;
10. Understand the impact antitrust laws have on anesthesia practice;
11. Understand the link between various methods of health care payment, including Medicare, Medicaid, and private health care payments and ethical concerns related to insured, underinsured, and uninsured patients;
12. Construct an organizational chart of an anesthesia department which depicts key positions as well as lines of authority and responsibility.

DNAP8053 Populations, Wellness, and Epidemiology (2)

This course prepares the student to use epidemiological strategies to examine patterns of illness or injury in groups of people as well as threats to patient safety. Concepts of health, risk, and disease causality are examined. Quality improvement directed at improving individuals and aggregates receiving anesthesia are discussed, and knowledge is demonstrated by the development of a quality improvement tool designed to improve patient safety in anesthetic practice. Additional topics of consideration will be human error, systems-based approaches to error analysis and investigation, teamwork, and crisis resource management.

Course Objectives: Upon the completion of this course, the student shall demonstrate competence by the ability to:

1. Evaluate consumer health information sources for accuracy, timeliness and appropriateness;
2. Identify patterns of illness or injury in groups of people;
3. Discuss the concepts of health, risk, and disease causality among patient populations;
4. Analyze strategies to improve patient outcomes and quality of care;
5. Analyze health outcomes in a variety of populations;
6. Analyze health outcomes in a variety of clinical settings and systems;
7. Describe the impact of social, behavioral, environmental, and biological factors on health outcomes;
8. Explain the importance of epidemiology for informing scientific, ethical, economic, and political discussion of health issues and health policy;
9. Communicate epidemiologic findings and interpretations to lay and professional audiences;
10. Analyze an existing healthcare policy and ethical implications relevant to a selected population focus;
11. Advocate for health policy change to improve patient care;
12. Advocate for health policy change to advance the specialty of nurse anesthesia.

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DNAP8055 Clinical Practicum II (2)

This course builds upon the prior clinical experiences and more advanced didactic coursework, including specialty case management. Focus should include the continued development with common surgical procedures to more complex surgical procedures with increasing patient acuity and comorbidities. Clinical experiences will be guided by certified registered nurse anesthetists and physician anesthesiologists.

Course Objectives: Upon the completion of this course, the student shall demonstrate clinical competency by the ability to:

1. Perform a complete preoperative evaluation, integrating the physiologic, pathophysiologic, emotional, and socio-cultural state of the patient;
2. Conduct a comprehensive equipment check of the anesthesia machine and all associated monitors;
3. Prepare a basic anesthetic set-up in the operating room in preparation for a regional or general anesthetic;
4. Suggest or write appropriate pre-anesthetic medication orders within medically established guidelines for the ASA PS II and IIE patient;
5. Develop an appropriate anesthesia care plan consistent with the overall needs and comorbidities of the ASA PS II and IIE patient;
6. Select, apply, interpret, and utilize both non-invasive and invasive monitoring modalities for continuous evaluation of the patient's physiologic status;
7. Select and interpret appropriate perioperative laboratory and/or radiology exams;
8. Perform a physiologically sound anesthesia induction within the confines of the operative, diagnostic, and therapeutic situations and comorbidities of the ASA PS II and IIE patient;
9. Safely establish and maintain a patent airway in a non-traumatic manner for all patients;
10. Use of a volume and pressure-controlled ventilator intra-operatively, demonstrating knowledge of the scientific principles related to its use;
11. Administer physiologically sound anesthesia maintenance within the confines of the operative, diagnostic, and therapeutic situation and comorbidities of the ASA PS II and IIE patient;
12. Maintain patient safety and protect from iatrogenic complications;
13. Position or supervise the positioning of the patient to assure optimal physiologic function and safety;
14. Manage fluid therapy within the appropriate plan of care for the ASA PS II and IIE patient;
15. Recognize and treat intra-operative respiratory dysfunction, such as mechanical obstruction, laryngospasm, bronchospasm, apnea, respiratory depression, and aspiration pneumonitis;
16. Recognize and treat intra-operative cardiovascular dysfunction such as hypertension, hypotension, tachycardia, bradycardia, and other cardiac arrhythmias;
17. Recognize and take appropriate actions to complications occurring during anesthetic management, with knowledge of when to refer to another qualified provider concerning those areas beyond the anesthetist's ability to manage within practice standards, policies, and responsibilities;
18. Manage a physiologically sound emergence within the confines of the operative, diagnostic and therapeutic situation, and the pathological condition of the ASA PS II and IIE patient;
19. Manage a regional anesthetic for appropriate surgical patients;
20. Manage a moderate to deep sedation anesthetic;
21. Within medically established guidelines, demonstrate skill in the induction and administration of anesthesia to the patient with a full stomach;
22. Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions;

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23. Transfer patient care to appropriate post anesthesia recovery unit personnel in a safe and informative manner;
24. Utilize vigilance and critical thinking during clinical decision-making, clinical interventions, and evaluation of patients in the perioperative period;
25. Evaluate post-anesthetic recovery of patients by recognizing complications arising from anesthetic management and recommending a course of action for correcting such complications within medically established guidelines;
26. Demonstrate personal and professional integrity and the ability to interact on a professional level with all members of the surgical team;
27. Effectively utilize verbal, nonverbal, and written communication in the delivery of perianesthetic care;
28. Teach patients and health-related personnel in areas of expertise;
29. Complete all necessary and pertinent medical documentation pertaining to the patient's anesthetic care;
30. Function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice.

DNAP8057 Evidence-Based Practice I (2)

This is the first of a three-part sequence beginning with the basic review of evidence-based practice and the components of translation of scholarly information into practice. At the culmination of these three courses, the student will have completed a doctoral scholarly project and created a poster presentation on their work for submission to professional organizations. Students will be encouraged to disseminate their scholarly work through presentations, and submission for publication in peer-reviewed journals. In this beginning course, students will be introduced to the fundamentals of evidence-based practice. The student will work with the course director to identify a problem from the clinical, business, or education area that will serve as a basis for the integrative review.

Course Objectives: Upon the completion of this course, the student shall be able to:

1. Describe the scholarly work and the process of development of the scholarly work as required for the Doctor of Nurse Anesthesia Practice (DNAP) student;
2. Select a team member for the doctoral scholarly project;
3. Identify and develop strategies for facilitating communication within the team;
4. Discuss the fundamentals of evidence-based practice (EBP);
5. Discuss the differences between EBP in primary care and EBP in nurse anesthesia;
6. Critically analyze published works for their style, format, syntax, and flow;
7. Identify appropriate uses of common descriptive and inferential statistics used in healthcare literature;
8. Explain proper methods of protecting human subjects;

DNAP8059 Senior Seminar I (1)

This course will assist the student in preparation for the national certification examination with the integration of clinical and didactic knowledge. Application of information and critical thinking will be emphasized during the review sessions. During the semester, the students will be required to attend three on-campus focused review sessions facilitated by faculty members. Review materials will include the use of APEX Anesthesia Review, assigned readings, and comprehensive examinations.

Course Objectives: The student shall demonstrate an understanding of:

1. The responsibilities of the nurse anesthetist;
2. The process of becoming certified as a nurse anesthetist;
3. The didactic knowledge to safely deliver an anesthetic;
4. The knowledge necessary to prepare for the certification exam.

DNAP8061 Clinical Practicum III (2)

The student will begin specialty rotations, including cardiovascular, neurological, major monitoring, obstetric, and regional cases. Students will care for increasingly complex patients during increasingly complex surgical procedures. Learning will be facilitated by certified registered nurse anesthetists and physician anesthesiologists. Students will be expected to meet or exceed clinical expectations to proceed to more complex patients and anesthetic cases.

Course Objectives: Upon the completion of this course, the student must demonstrate clinical competency by the ability to:

1. Perform a complete preoperative evaluation, integrating the physiologic, pathophysiologic, emotional, and socio-cultural state of the patient;
2. Conduct a comprehensive equipment check of the anesthesia machine and all associated monitors;
3. Suggest or write appropriate pre-anesthetic medication orders within medically established guidelines for the ASA PS III and IIIE patient;
4. Select and interpret appropriate perioperative laboratory and/or radiology exams;
5. Develop an appropriate anesthesia care plan consistent with the overall needs and comorbidities of the ASA PS III and IIIE patient;
6. Select, apply, interpret, and utilize both non-invasive and invasive monitoring modalities for continuous evaluation of the patient's physiologic status;
7. Perform a physiologically sound anesthesia induction within the confines of the operative, diagnostic, and therapeutic situations and comorbidities of the ASA PS III and IIIE patient;
8. Safely establish and maintain a patent airway in a non-traumatic manner for all patients;
9. Administer physiologically sound anesthesia maintenance within the confines of the operative, diagnostic, and therapeutic situation and the pathological condition of the ASA PS III and IIIE patient;
10. Maintain patient safety and protect from iatrogenic complications;
11. Position or supervise the positioning of the patient to assure optimal physiologic function and safety;
12. Manage fluid therapy within the appropriate plan of care for the ASA PS III and IIIE patient;
13. Recognize and treat intra-operative respiratory dysfunction, such as mechanical obstruction, laryngospasm, bronchospasm, apnea, respiratory depression, and aspiration pneumonitis;
14. Recognize and treat intra-operative cardiovascular dysfunction such as hypertension, hypotension, tachycardia, bradycardia, and other cardiac arrhythmias;
15. Recognize and take appropriate actions to complications occurring during anesthetic management, with knowledge of when to refer to another qualified provider concerning those areas beyond the anesthetist's ability to manage within practice standards, policies, and responsibilities;
16. Manage a physiologically sound emergence within the confines of the operative, diagnostic and therapeutic situation, and the pathological condition of the ASA PS III and IIIE patient;
17. Administer and manage a regional anesthetic to appropriate surgical patients;
18. Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions;
19. Transfer patient care to appropriate post anesthesia recovery unit personnel in a safe and informative manner;

20. Utilize vigilance and critical thinking during clinical decision-making, clinical interventions, and evaluation of patients in the perioperative period;
21. Evaluate post-anesthetic recovery of patients by recognizing complications arising from anesthetic management and recommending a course of action for correcting such complications within medically established guidelines;
22. Demonstrate personal and professional integrity and the ability to interact on a professional level with all members of the surgical team;
23. Effectively utilize verbal, nonverbal, and written communication in the delivery of perianesthetic care;
24. Teach patients and health-related personnel in areas of expertise;
25. Complete all necessary and pertinent medical documentation pertaining to the patient's anesthetic care;
26. Function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice.

DNAP8063 Anesthesia Simulation III (1)

This course is designed to allow the student to manage uncommon, critical incidents during anesthetic management. Students will participate in high-fidelity simulation of complex adverse events and responses.

Course Objectives: Upon completion of this course, the participant shall demonstrate competence in the management of simulated patients with uncommon/ rare critical incidents including:

1. Appropriate management and treat uncommon or critical incidents as part of an inter-professional team;
2. Utilization of critical thinking to recognize, diagnose, and appropriately treat the surgical or obstetric patient with an unexpected perioperative or anesthetic event;
3. Debrief and evaluate responses to a critical event.

DNAP8065 Evidence-Based Practice II (2)

This is the second of a three-part sequence beginning with the basic review of evidence-based practice and the components of translation of scholarly information into practice. At the culmination of these three courses, the student will have completed a doctoral scholarly project and created a poster presentation on their work for submission to professional organizations. Students will be encouraged to disseminate their scholarly work through presentations, and submission for publication in peer-reviewed journals. In this course, the student prepares to engage in knowledge application including the translation of research into practice, the evaluation of practice, and improvement of nurse anesthesia practice and outcomes. Skills are presented supporting the integrative review.

Course Objectives: Upon the completion of this course, the student shall be able to:

1. Create a PICO question based on an identified problem;
2. Design and execute a search strategy to identify current literature to address the identified problem;
3. Identify methods for critical appraisal of the literature obtained.
4. Identify methods to appraise the quality of evidence found during the search query;

DNAP8067 Senior Seminar II (2)

This course will build upon Senior Seminar I in preparation for the national certification examination with the integration of clinical and didactic knowledge. Application of information and critical thinking will be emphasized during the review sessions. During the semester, the students will be required to attend 5-6 on-campus focused review sessions facilitated by faculty members. Review materials will include the use of APEX Anesthesia Review, assigned readings, and comprehensive examinations.

Course Objectives: Upon the completion of this course, the student shall demonstrate an understanding of:

1. The responsibilities of the nurse anesthetist;
2. The process of becoming certified as a nurse anesthetist;
3. The didactic knowledge to safely deliver an anesthetic;
4. The knowledge necessary to prepare for the certification exam.

DNAP8069 Clinical Practicum IV (2)

The student will continue specialty rotations, including cardiovascular, neurological, major monitoring, obstetric, and regional cases. Students will care for increasingly complex patients across the lifespan during increasingly complex surgical procedures. Learning will be facilitated by certified registered nurse anesthetists and physician anesthesiologists. Students will be expected to meet or exceed clinical expectations to proceed to more complex patients and anesthetic cases.

Course Objectives: Upon the completion of this course, the student shall demonstrate clinical competency by the ability to:

1. Perform a complete preoperative evaluation, integrating the physiologic, pathophysiologic, emotional, and socio-cultural state of the patient;
2. Conduct a comprehensive equipment check of the anesthesia machine and all associated monitors;
3. Suggest or write appropriate pre-anesthetic medication orders within medically established guidelines for the ASA PS IV and IVE patient;
4. Select and interpret appropriate perioperative laboratory and/or radiology exams;
5. Develop an appropriate anesthesia care plan consistent with the overall needs and comorbidities of the ASA PS IV and IVE patient;
6. Select, apply, interpret, and utilize both non-invasive and invasive monitoring modalities for continuous evaluation of the patient's physiologic status;
7. Perform a physiologically sound anesthesia induction within the confines of the operative, diagnostic, and therapeutic situations and comorbidities of the ASA PS IV and IVE patient;
8. Safely establish and maintain a patent airway in a non-traumatic manner for all patients;
9. Administer physiologically sound anesthesia maintenance within the confines of the operative, diagnostic, and therapeutic situation, and comorbidities of the ASA PS IV and IVE patient;
10. Maintain patient safety and protect from iatrogenic complications;
11. Position or supervise the positioning of the patient to assure optimal physiologic function and safety;
12. Manage fluid therapy within the appropriate plan of care for the ASA PS IV and IVE patient;
13. Recognize and treat intra-operative respiratory dysfunction, such as mechanical obstruction, laryngospasm, bronchospasm, apnea, respiratory depression, and aspiration pneumonitis;
14. Recognize and treat intra-operative cardiovascular dysfunction such as hypertension, hypotension, tachycardia, bradycardia, and other cardiac arrhythmias;
15. Recognize and take appropriate actions to complications occurring during anesthetic management, with knowledge of when to refer to another qualified provider concerning those

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areas beyond the anesthetist's ability to manage within practice standards, policies, and responsibilities;

16. Manage a physiologically sound emergence within the confines of the operative, diagnostic and therapeutic situation, and the pathological condition of the ASA PS IV and IVE patient;
17. Administer and manage a regional anesthetic to appropriate surgical patients;
18. Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions;
19. Transfer patient care to appropriate post anesthesia recovery unit personnel in a safe and informative manner;
20. Utilize vigilance and critical thinking during clinical decision-making, clinical interventions, and evaluation of patients in the perioperative period;
21. Evaluate post-anesthetic recovery of patients by recognizing complications arising from anesthetic management and recommending a course of action for correcting such complications within medically established guidelines;
22. Demonstrate personal and professional integrity and the ability to interact on a professional level with all members of the surgical team;
23. Effectively utilize verbal, nonverbal, and written communication in the delivery of perianesthetic care;
24. Teach patients and health-related personnel in areas of expertise;
25. Complete all necessary and pertinent medical documentation pertaining to the patient's anesthetic care;
26. Function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice.

DNAP8071 Anesthesia Simulation IV (1)

This course is designed to allow the student to manage uncommon, critical incidents during anesthetic management. Students will participate in high-fidelity simulation of complex adverse events and responses.

Course Objectives: Upon completion of this course, the participant shall demonstrate competence in the management of simulated patients with uncommon/ rare critical incidents including:

1. Appropriate management and treat uncommon or critical incidents as part of an inter-professional team;
2. Utilization of critical thinking to recognize, diagnose, and appropriately treat the surgical or obstetric patient with an unexpected perioperative or anesthetic event;
3. Debrief and evaluate responses to a critical event.

DNAP8073 Evidence-Based Practice III (3)

This is the last of a three-part course sequence beginning with the basic review of evidence-based practice and the components of translation of scholarly information into practice. At the completion of these three courses, the student will have completed a doctoral scholarly project and created a poster presentation on their work for submission to professional organizations. Students will be encouraged to disseminate their scholarly work through presentations and submission for publication in peer-reviewed journals. The student will complete the required scholarly work. Specific methods of dissemination will be reviewed and addressed including journal articles, and podium and poster presentations. Students shall prepare a poster presentation for potential submission to the AANA Foundation.

Course Objectives: Upon completion of this course, the participant will demonstrate competency in the ability to:

1. Discuss the findings of the evidence synthesized;
2. Interpret the evidence found, with regards to quality;
3. Make recommendations on the translation of research into practice;
4. Offer suggestions for future research needs related to the identified problem.
5. Complete the scholarly doctoral project;
6. Prepare the doctoral project for final review and gain approval of the scholarly doctoral project by assigned faculty;
7. Explore methods of disseminating findings from evidence-based practice and research to improve healthcare outcomes;
    a. Committee review;
    b. Poster presentation;
    c. Professional meetings;
    d. Manuscript preparation for publication;
    e. Other selected methods.

DNAP8075 Senior Seminar III (2)

This course will assist the student in preparation for the national certification examination with the integration of clinical and didactic knowledge. Application of information and critical thinking will be emphasized during the review sessions. During the semester, the students will be required to attend 5-6 on-campus focused review sessions facilitated by faculty members. Review materials will include the use of APEX Anesthesia Review, assigned readings, and comprehensive examinations.

Course Objectives: Upon the completion of this course, the student shall demonstrate competency by possessing and/or describing:

1. The responsibilities of the nurse anesthetist;
2. The process of becoming certified as a nurse anesthetist;
3. The didactic knowledge to safely deliver an anesthetic;
4. The knowledge necessary to prepare for the National Certification Exam.

DNAP8077 Clinical Practicum V (2)

The student will continue specialty rotations, including cardiovascular, neurological, major monitoring, obstetric, and regional cases. Students will care for increasingly complex patients across the lifespan during increasingly complex surgical procedures. Learning will be facilitated by certified registered nurse anesthetists and physician anesthesiologists. Students will be expected to meet or exceed clinical expectations to proceed to more complex patients and anesthetic cases.

Course Objectives: Upon the completion of this course, the student shall demonstrate clinical competency by the ability to:

1. Perform a complete preoperative evaluation, integrating the physiologic, pathophysiologic, emotional, and socio-cultural state of the patient;
2. Conduct a comprehensive equipment check of the anesthesia machine and all associated monitors;
3. Suggest or write appropriate pre-anesthetic medication orders within medically established guidelines for the ASA PS V and VE patient;

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4. Select and interpret appropriate perioperative laboratory and/or radiology exams;
5. Develop an appropriate anesthesia care plan consistent with the overall needs and comorbidities of the ASA PS V and VE patient;
6. Select, apply, interpret, and utilize both non-invasive and invasive monitoring modalities for continuous evaluation of the patient's physical status;
7. Perform a physiologically sound anesthesia induction within the confines of the operative, diagnostic, and therapeutic situations and comorbidities of the ASA PS V and VE patient;
8. Safely establish and maintain a patent airway in a non-traumatic manner for all patients;
9. Administer physiologically sound anesthesia maintenance within the confines of the operative, diagnostic, and therapeutic situation and the pathological condition of the ASA V and VE patient;
10. Maintain patient safety and protect from iatrogenic complications;
11. Position or supervise the positioning of the patient to assure optimal physiologic function and safety;
12. Manage fluid therapy within the appropriate plan of care for the ASA PS V and VE patient;
13. Recognize and treat intra-operative respiratory dysfunction, such as mechanical obstruction, laryngospasm, bronchospasm, apnea, respiratory depression, and aspiration pneumonitis;
14. Recognize and treat intra-operative cardiovascular dysfunction such as hypertension, hypotension, tachycardia, bradycardia, and other cardiac arrhythmias;
15. Recognize and take appropriate actions to complications occurring during anesthetic management, with knowledge of when to refer to another qualified provider concerning those areas beyond the anesthetist's ability to manage within practice standards, policies, and responsibilities;
16. Manage a physiologically sound emergence within the confines of the operative, diagnostic and therapeutic situation, and the pathological condition of the ASA PS V and VE patient;
17. Administer and manage a regional anesthetic to appropriate surgical patients;
18. Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions;
19. Transfer a patient to appropriate post anesthesia recovery unit personnel in a safe and informative manner;
20. Utilize vigilance and critical thinking during clinical decision-making, clinical interventions, and evaluation of patients in the perioperative period;
21. Evaluate post-anesthetic recovery of patients by recognition of complications arising from anesthetic management and recommending a course of action for correcting such complications within medically established guidelines;
22. Demonstrate personal and professional integrity and the ability to interact on a professional level with all members of the surgical team;
23. Effectively utilize verbal, nonverbal, and written communication in the delivery of perianesthetic care;
24. Teach patients and health-related personnel in areas of expertise;
25. Complete all necessary and pertinent medical documentation pertaining to the patient's anesthetic care;
26. Function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice.

Total **Nurse Anesthesia** FTE Faculty for **Master's** Program: 2

Total **Nurse Anesthesia** FTE Faculty for **Doctoral** Program: 3

List faculty – add rows as needed:

Name	Academic and Professional Credentials (CRNA, RN, MD, etc.), and Area of Specialty.	FTE	Based on conducting institution's definition of "FTE", percentage of time averaged for 1 year allocated to teaching, faculty scholarly activities, service, administrative and clinical responsibilities AND faculty-directed student scholarly activities.	Please indicate the number of courses in which faculty serves as course director (including course name/number); number of hours per year of direct teaching activities (e.g., lecture, online activities, simulation), excluding clinical; and number of final projects/capstones per year, including role (e.g., chair or committee member).
Megan Cook Program Director	DNAP, CRNA; Nurse Anesthesia	1.0	Teaching 40%; faculty scholarly activities 5%; service 5 %; Administrative 25%; Clinical 10%; faculty-directed student scholarly activities 15%	<u>Course director</u> DNAP8019 Basic Principles of Anesthesia (3) (Spring Semester: face-to-face) DNAP8039 Advanced Principles of Anesthesia II (3) (Fall Session: face-to-face) DNAP8057 Evidence Based Practice I (2) (Summer session: online) DNAP8065 Evidence Based practice II (2) (Fall session: online) DNAP8073 Evidence Based Practice III (3) (Spring session: online) DNAP8037 Anesthesia Simulation I (1) (Spring session: face-to-face) DNAP8067 Senior Seminar #1 (1) (Summer Session: Hybrid- Face to face -7; Online -8) DNAP8009 Learning Technology and Informatics for the Practice Doctorate (2) (Summer Session: Online) <u>Number of hours per year of direct teaching activities excluding clinical</u> Face-to-face Contact hours: 112 hours Online contact Hours: 143 hours <u>Student scholarly work (see description of student scholarly work)</u>

NOTE: This form is used to obtain information related to faculty resources in a standardized format and is for informational purposes.

				Primary advisor: 3 groups Reader of student scholarly projects: 12 groups
Sarah Kelly Assistant Program Director	DNAP, CRNA; Nurse Anesthesia	1.0	Teaching 45%; faculty scholarly activities 5%; service 5%; Administrative 25%; Clinical 10%; faculty-directed student scholarly activities 10%	<u>Course director</u> DNAP8031 Professional Issues I (2) (Summer: face-to-face) DNAP8047 Advanced Principles of Anesthesia III (3) (Spring session: face-to-face) DNAP8043 Regional Anesthesia (2) (Fall session: face-to-face) DNAP8051 Professional Issues II (2) (Spring session: face-to-face) DNAP8053 Populations, Wellness and Epidemiology (2) (Spring session: face-to-face) DNAP8037 Anesthesia Simulation II (1) (Summer session: face-to-face) DNAP8063 Anesthesia Simulation III (1) (Summer session: face-to-face) <u>Number of hours per year of direct teaching activities excluding clinical</u> Face–to-face contact time: 195 hours Online contact hours: 0 <u>Student scholarly work (see description of student scholarly work)</u> Primary advisor: 3 groups Reader of student scholarly projects: 2
Added CRNA Faculty Clinical Director	CRNA, DNAP; Nurse Anesthesia	1.0	Teaching 40%; faculty scholarly activities 5%; service 5%; Administrative 30%; Clinical 10%; faculty-directed student scholarly activities 10%	<u>Course director</u> DNAP8021 Advanced Health Assessment (3) (Spring session: face-to-face) DNAP8033 Advanced Principles of Anesthesia I (3) (Summer Session: face-to-face) DNAP8029 Intro Into Clinical Practicum (1) (Summer session: face-to-face) DNAP8045 Clinical Practicum #1 (2) (Fall session: Course Management) DNAP8055 Clinical Practicum #2 (2)

NOTE: This form is used to obtain information related to faculty resources in a standardized format and is for informational purposes.

| | | | | (Spring session: Course Management)
DNAP8061 Clinical Practicum #3 (2)
(Summer session: Course Management)
DNAP8069 Clinical Practicum #4 (2)
(Fall session: Course Management)
DNAP8077 Clinical Practicum #5 (2)
(Spring session: Course Management)
DNAP8075 Senior Seminar #3 (2)
(Spring session: Hybrid- face to face 15; online-15)
DNAP8071 Anesthesia Simulation IV (1)
(Fall session: Face-to-face)
DNAP8067 Senior Seminar #2 (2)
(Fall session: Hybrid- Face-to-face-15; online-15)

Number of hours per year of direct teaching activities excluding clinical
Face-to-face Contact hours: 150
Online Contact hours: 30

Student scholarly work (see description of student scholarly work)
Primary advisor: 3 groups
Reader of student scholarly projects: 2 groups |
| | | | | |

Describe Plans to Add **Nurse Anesthesia** Faculty as Program Grows (if applicable):

Total **Non-Nurse Anesthesia** FTE Faculty for **Master's** Program: 1.2 FTE

Total **Non-Nurse Anesthesia** FTE Faculty for **Doctoral** Program: 2.1 FTE

NOTE: This form is used to obtain information related to faculty resources in a standardized format and is for informational purposes.

Faculty Resources Matrix Newman University 4

List faculty – add rows as needed:

Name	Academic and Professional Credentials (CRNA, RN, MD, etc.), and Area of Specialty.	Please indicate the number of courses in which faculty serves as course director (including course name/number); number of hours per year of direct teaching activities (e.g., lecture, online activities, simulation), excluding clinical; and number of final projects/capstones per year, including role (e.g., chair or committee member).
David Moran	PharmD; pharmacology	Course Director: DNAP8017 Adv. Pharmacology (3) (Fall semester; Face-to-face) DNAP80525 Pharmacology of Anesthesia (3) (Spring semester; face-to-face) DNAP8035 Adv. Topics in Pharmacology (2) (Summer semester; face-to-face) Number of hours per year of direct teaching activities excluding clinical Face-to Face contact: 120 hrs Student Scholarly works: 1 Reader: 2 groups
David Shubert	PhD; Chemistry	Course Director: DNAP8005 Chemistry and Physics for Nurse Anesthesia (4) (Summer semester: on-line) Number of hours per year of direct teaching activities excluding clinical Online: 60 hrs Student Scholarly works: 0
Division of Business-Faculty	PhD or DBA	Course Director: DNAP8007 Personal Leadership Development (3) (Summer session: online) DNAP8011 Health Care Economics (3)

NOTE: This form is used to obtain information related to faculty resources in a standardized format and is for informational purposes.

		(Summer Session: online) DNAP8013 Health Care Ethics (3) (Fall session: on-line) Number of hours per year of direct teaching activities excluding clinical Online: 135 hrs. Student Scholarly works: 0
Adjunct Faculty	PhD; anatomy	Course Director DNAP8015 Advanced Anatomy for the Nurse Anesthetist (3 didactic) (Fall session: face-to-face) Number of hours per year of direct teaching activities excluding clinical Face-to face Contact: 45 hrs. Online: 0 hrs. Student Scholarly works: 0
Susan Orsbon	MS	Lab Director DNAP8015 Adv. Anatomy for Nurse Anesthetist (1 lab) (Fall Session: Face-to-face) Number of hours per year of direct teaching activities excluding clinical Face-to face Contact: 15 hrs. Student Scholarly works: 0
Michael Bradley	PhD; physiology, pathophysiology	Course Director: DNAP8021 Advanced Physiology (4) (Spring Session: Face-to-face) DNAP8041 Advanced Pathophysiology (4) (Fall Session: face-to-face) Number of hours per year of direct teaching activities excluding clinical

NOTE: This form is used to obtain information related to faculty resources in a standardized format and is for informational purposes.

		Face-to-face: 120 hrs. Student Scholarly works: Primary Advisor: 1 Reader: 2 groups
Math & Sciences Division - Faculty	PhD	DNAP8049 Biomedical Statistics (3) (Spring Semester: On-line) Number of hours per year of direct teaching activities excluding clinical On-line: 45 hrs. Student Scholarly works: 0
Nancy Lugo-Baez	DNP, RN	Student Scholarly works: Primary advisor:1 Reader:1

Describe Plans to Add **Non-Nurse Anesthesia** Faculty as Program Grows (if applicable):

At this time, there are no plans to increase the number of students in the Newman University Nurse Anesthesia DNAP Program above 25.

NOTE: This form is used to obtain information related to faculty resources in a standardized format and is for informational purposes.

Resources Available to DNAP Students

Newman University – Academic and Student Support Services Referral Policy

The Newman University community is committed to your academic success. As part of that commitment, you may be referred to an early intervention program, Project Care, if your engagement in this class alters (e.g., absenteeism, falling behind on your assignments, or a drastic change in your work.) The Project Care Coordinator will contact you to determine if assistance is needed. At any time that you feel a need, you may also access any of the following support services directly:

- **Academic Resource Center, 301 SHH, Ext. 2235** provides a space, computers, and other resources (software, calculators, reference manuals, etc.) for study.
  - **Math and Writing** assistance with writing and/or math assignments.
  - **Certified Peer Tutors** provide up to 15 hours of free tutoring per month for most courses. Tutoring is available online in some cases.
  - **Disability Services** assists students requesting accommodations through the Americans with Disabilities Act (ADA/Section 504).
- For career development (career/major exploration, current job opportunities, job shadowing, cooperative education, internships) contact the **Career Services Center, 302 SHH, Ext. 2234.**
- If you know of another student who is having difficulty with their courses, please refer them in confidence to **Project Care, 302 SHH, Ext. 2318**.
- If you are experiencing personal problems, you can get a referral for up to 6 counseling sessions per year from **Personal Counseling, 302 SHH, Ext. 2319.**
- For an appointment to take a make-up exam, contact **Testing Services, 302 SHH, Ext. 2318.**

Library-

- DNAP lib guide for commonly used resources and information
  - Updated and maintained by the Librarian
- Librarian available on line, per phone and in person
- UpToDate resource available to all active students
- Electronic databases:
  - Academic Search Premier
  - CINHAL Complete
  - Dugan Library Catalog
  - Health Source: Nursing/ academic Edition
  - ProQuest Nursing and Allied Health
  - PubMed
  - UpToDate

- Textbooks- all textbooks used in the program are available in Dugan Library either for checkout or online.

Technology Support

- Students Support:
  - 24 access to Help Line to get common questions answered
  - Dedicated phone number for technology support
  - Tech Support Desk during business hours for personal computer issues

- Faculty Support:
  - Dedicated phone number for technology in the classroom
  - Dedicated phone line for faculty support for administrative computers.
  - Faculty support person for online class development and support. (Sara Huter)

Browser tabs: COAccess Portal – Council on A... | June 2020 – All Documents | Assistant Director of Nurse Ane... | Welcome! - Nurse Anesthesia -

← → C ⌂ ① Not secure | newmanu.libguides.com/nurse_anesthesia

Apps ⑤ Medatrax, Inc Newman Blackboard APEX Anesthesia Re... ExamSoft ⑤ ACS SurveyMonkey: The... Log in to Canvas Practice Multiplicati... Home | Ike 3rd Grade »

NU NEWMAN UNIVERSITY

Newman University | LibGuides | Nurse Anesthesia | Welcome!

NURSE ANESTHESIA: WELCOME!

Basic search tips and strategies for nurse anesthesia students

Search this Guide | Search

Welcome! | Finding Books | Finding Journal Articles | UpToDate | AMA Citation Help | NAN Thesis Collection | Literature Reviews | Certification Information

Need Help? ▾

Spring Semester Library Hours

Sunday – 2:00 pm –– 12:00 midnight

Monday-Thursday – 8:00 am –– 12:00 midnight

Friday – 8:00 am – 5:00 pm

Saturday – 11:00 am –– 3:00 pm

Research & Refreshment with Prof. Joe McElory Details coming soon! Alumni Center Dessert & Coffee provided

Nurse Anesthesia & Dugan Library

The library is more than just a place where you can go to study, read books and type papers. Those are key pieces in any student's life. We offer those and so much more. Our staff invites you to connect with our resources and discover how we can help you during your time at Newman University.

Our number one priority is ensuring that you have the research materials you need to succeed!

Nurse Anesthesia Books in Dugan Library

Evidence-Based Practice of Anesthesiology by Lea A. Fleisher
Call Number: RD 81 .E86 2013
ISBN: 9781455727681
Publication Date: 2013

Anesthesiologist's Manual of Surgical Procedures by Richard A. Jaffe (Editor)
Call Number: RD 82.2 A579 2009
ISBN: 9780781766708
Publication Date: 2009

Clinical Anesthesia by Paul G. Barash (Editor); Bruce F. Cullen (Editor); Robert K. Stoelting (Editor); Michael Cahalan (Editor); M. Christine Stock (Editor); BARASH, Barash
Call Number: RD 81 .C58 2009

What do you think?

Is this information helpful to you?

○ Yes
○ No
○ Not sure

Submit

Your Librarian

Jeanette Parker

Email Me

Contact:
3100 McCormick
Wichita, KS 67213-2097
316-942-4291 ext. 2104

newmanu.libguides.com/prf.php?account_id=53946

10:57 AM 3/2/2020

Effective July 1, CRNAs in South Dakota can collaborate with dentists, podiatrists, and other providers, in addition to medical doctors.

- AANA Board of Directors Approve "Scope of Nurse Anesthesia Practice" ⬈   Feb 21, 2020
This document reflects the professional scope of practice of Certified Registered Nurse Anesthetists (CRNAs) including the full range of anesthesia services, and describes CRNAs' professional, educational, clinical, and leadership roles

- State Legislators Push Forward Full Practice Authority for Advanced Practice Nurses ⬈   Feb 5, 2020
At an unprecedented pace, state legislators are voting in favor of lifting restrictions that would enable advanced practice nurses and other nonphysician providers to practice at the full extent of their education and expertise.

Website ⬈ | Feed ⬈

Complications in Anesthesiology by Nikolaus Gravenstein (Editor); Robert R Kirby (Editor); Emilio B. Lobato (Editor)
Call Number: RD 82.5 C737 2008
ISBN: 9780781782630
Publication Date: 2007

How to Survive in Anaesthesia by Neville Robinson; William Fawcett; George M. Hall
Call Number: RD 81 .R655 2012
ISBN: 9780470654620
Publication Date: 2011

Pharmacology and Physiology in Anesthetic Practice by Robert K. Stoelting; Simon C. Hillier
Call Number: RD 82.2 S872p 2006
ISBN: 9780781754699
Publication Date: 2005

Yao and Artusio's Anesthesiology by Fun-Sun F. Yao (Editor-In-Chief); Manuel L. Fontes (Associate Editor); Vinod Malhotra (Associate Editor)
Call Number: RD 82.45 .A54 Y25 2008
ISBN: 9780781765107
Publication Date: 2007

Nurse Anesthesia by John J. Nagelhout; Karen Plaus; Sass Elisha
Call Number: RD 82 .N97 2014
ISBN: 9781455706129
Publication Date: 2013

Surgical Procedures and Anesthetic Implications by Lynn Fitzgerald Macksey
Call Number: RD 82 .M33 2012
ISBN: 9780763780579
Publication Date: 2011

Interesting Nurse Anesthesia Links

- Cochrane Library
The Cochrane Database of Systematic Reviews (CDSR) is the leading resource for systematic reviews in health care. The CDSR includes Cochrane Reviews (the systematic reviews) and protocols for Cochrane Reviews as well as editorials
more

- American Association of Nurse Anesthetists
Founded in 1931, the American Association of Nurse Anesthetists (AANA) is the professional association representing nearly 48,000 Certified Registered Nurse Anesthetists (CRNAs) and student registered nurse anesthetists nationwide. The AANA promulgates education and practice standards and guidelines, and affords consultation to both private and governmental entities regarding nurse anesthetists and their practice.
more

- American Society of Anesthesiologists
News, information, research and more. This society is the publisher of the journal, "Anesthesiology".

- International Anesthesia Research Society
News and research in anesthesiology. This Society publishes "Anesthesia & Analgesia".

Education 189

Major Curriculum Change Request
Kansas State Board of Nursing
60-2-104 (g) (1) (2) (3) - Prelicensure
Must be received by KSBN at least 30 days before the board meeting

Date: 02/11/2021

Name of Program: SCCC Nursing Program

Program Administrator   Susan Ingland, MSN, RN
including credentials:

Parent Institution: Seward County Community College

Address of Institution: 1801 N. Kansas Ave
                                             Liberal, KS 67901

Level of the Program
for which the change
Is being requested   Level I & Level II

Briefly describe the
Change being requested: The faculty of the SCCC Nursing Program submit a motion for KSBN Board
of Nursing approval of an overall curriculum revision of level I and level II
nursing courses. This curriculum revision will provide a structured, "build
upon" education across the lifespan that will provide cohesive active learning
to improve critical thinking, clinical judgement, and clinical reasoning.

Action Taken

Education Committee Review   _____
                                                          Date

Action Taken: ☐ Approved   ☐ Not Approved   ☐ Deferred

Board of Nursing Review   _____
                                                          Date

Action Taken: ☐ Approved   ☐ Not Approved   ☐ Deferred

_____   _____
Nursing Education Compliance Officer   Date

Change Request

60-2-104 (g) (1) (2) (3)

X (1) Any change in the plan of nursing curriculum organization involving:

☐ Philosophy

X Number of semesters of study

X Delivery method of nursing courses

(This includes things such as sequencing, learning methods, content areas, and resources.)

Provide:
- Written documentation that includes a comparison of old to new, this may be in the form of a table
- Address any changes needed in resources and the adequacy of resources, f resources are involved in the change

X (2) Any change in content requiring a change of clock–hours or credit hours in nursing courses

Provide:
- Rationale for the change **(APPENDIX A)**
- Show faculty involvement in process –may use statements of support from faculty and/or evidence of understanding of the change **(APPENDIX B)**
- A table that shows the differences between the old and new curriculum. **(APPENDIX C)**
- Include single page course descriptions. **Do Not submit entire course syllabus (APPENDIX D)**

☐ **(3)** Any change in the number of students to be admitted to the nursing education program

Provide:
- Statements of explanation from the program
- Facility letters which must include that they are aware of changes and the effect if any the change will have on the facility and the patients/clients and facility staff
- Reaffirm 1:10 clinical ratio by providing a working model of the clinical schedule
- Information that resources such as library, AV materials and equipment, laboratory, faculty, and support services are adequate

In making decisions concerning curriculum change requests, the Board of Nursing asks if the changes made are consistent with sound educational principles.

Education 191

SEWARD COUNTY COMMUNITY COLLEGE

1801 N. Kansas Ave., P.O. Box 1137, Liberal, KS 67905-1137 ☏ 620-624-1951 or 1-800-373-9951

Janelle Martin, MHSA, RN
Nursing Education Compliance Officer
900 SW Jackson Street, Suite 1051
Topeka, Kansas 66612-1230

02-12-2021

Greetings:

Enclosed you will find the curriculum revision from the Seward County Community College nursing faculty. Please let me know should you have any questions.

Sincerely

Susan G. Ingland MSN, RN
Director of Nursing
Seward County Community College
620-417-1407

TRUST INTEGRITY VALUING OTHERS STUDENT SUCCESS QUALITY sccc.edu

Appendix A: Rationale for Change

The Seward County Community College (SCCC) nursing program is currently structured for students to be instructed through individual nursing courses. Each of the nursing courses are focused on specific content areas. They include Fundamentals of Nursing, Gerontological Nursing, Medical-Surgical Nursing, Maternal-Child Health, and Role Development for the LPN for the first year (Level I) of the bi-level nursing program. The specific content areas for the second year (Level II) portion of the nursing program include Adult & Child I, Adult and Child II, Maternity Nursing, Mental Health Nursing, Client Care Nursing, and Integration Seminar. The nursing faculty curriculum committee have worked toward a curriculum re-design.

Over the past 6 years, the SCCC nursing program has had a complete turn over in nursing administration and nursing faculty because of retiring faculty. This has brought a fresh perspective to the nursing program. The current nursing faculty have recognized that the current curriculum structure has resulted in silo teaching and silo learning for the students. The current curriculum demonstrates overload in content teaching, reteaching, and lacks a specific pharmacology focus. When considering a curriculum revision, SCCC nursing faculty affirm that a curriculum change is necessary and is a contributing factor to the low RN- NCLEX pass rate.

The faculty at SCCC have ownership in the new curriculum and affirm the new curriculum demonstrates a more team-dynamic approach for leveling the content for the nursing program. The traditional medical model continues to be used throughout the program while utilizing a 'build upon' approach to control content overload and reduce reteaching from course to course. The redesigned curriculum provides more emphasis on clinical judgment while offering more general bedside nursing opportunities for the student in the areas of clinical and simulation. Nursing faculty believe this is essential for the novice graduate nurse to effectively integrate into safe nursing practice.

The nursing students at SCCC benefit from the redesigned curriculum for several reasons. The curriculum contains provisions of a structured learning approach that allows the student the ability to employ critical thinking, clinical reasoning, and clinical judgment, as they prepare to care for clients of various cultures and throughout the lifespan. The new curriculum helps the students to make better connections between content and subject areas as they move through the curriculum. By adding Pharmacology I-III students are prepared for safer practice with a specific structured content for this area. Through the implementation of the new curriculum, these changes assist the student in the pursuit of a higher degree, such as a Bachelor of Science in Nursing (BSN). The curriculum change also assists the students with the possibility for dual enrollment opportunities and future partnerships with universities.

The new curriculum provides more clinical opportunities for general nursing experiences and clinical preparation for the entry level nurse to enter nursing practice. Although there remains an emphasis on the specialized areas of nursing, such as obstetrics, pediatrics and mental health, more opportunities for general bedside nursing and enhanced low to high fidelity simulations are provided to enhance the student's critical thinking and clinical judgment.

The proposed nursing curriculum revision has been approved by the following entities: SCCC Nursing Advisory Board, SCCC Academic Affairs Council, SCCC College Executive Team, SCCC Board of Trustees and the Kansas Board of Regents.

Education 193

Appendix B: Faculty Support

Judy Lathen, MSN, RN
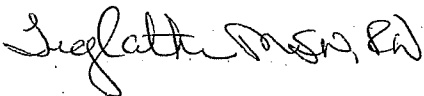
To Whom it may Concern,

This letter is written in support of the proposed curriculum change being presented on behalf of the nursing program at Seward County Community College. The curriculum path that we have developed includes a strong foundation which will allow faculty to teach students in a build upon approach. As a part of the curriculum committee we have realized that our curriculum has not been updated or revised in many years, thus it has not evolved with newer proven teaching concepts, that effectively assist newer generations of students to learn. This is evident by the past two years decline in NCLEX first time pass rates, while our students are leaving here and becoming successful entry level nurses, it is taking some of them often a second attempt at the NCLEX. Lastly, we want our students to leave this program with the necessary critical judgment and critical thinking skills that are required as an entry level nurse to safely provide best practice and evidenced based care for future patients.

With the declining first attempt pass rates; we have been able to correlate it to several areas. We believe our content base is very siloed. With this new curriculum, we would like to combine semester classes into one umbrella and use a life span approach. This creates a better look at development with each body system. It also allows for less learning silos because they are being taught by a team of instructors who are all aware of the content being presented to the students. This will change their ability to be successful with testing. It will change the layout of the clinical schedule and allow for more hours of clinical and simulation to be accrued. Lastly, it will provide fluidity to the course content. What they will learn in a nursing foundations class will truly be built upon in a Pediatric-Adult Medical-Surgical Course and so on. It brings further emphasis to the general courses and highlights the specialties. We also plan to include a corequisite course each semester of pharmacology, we recognize the need for a more intensive learning in this area. The course will begin with basic pharmacology and over the semesters and develop into advance pharmacology. We believe that this will improve our NCLEX pass rates and make our students more successful and readier to enter the nursing workforce.

To develop a strong skill of critical thinking and clinical judgement in the students, each course will be laid out with care to include Didactic, clinical and Simulation teaching that will grow with each course. This plan will allow for the content to be scaffolded across all four semesters, beginning with building a strong Foundations course and building on taught content.

I see a tremendous need for this change to better prepare our students, it will also bring many exciting things to our program and increase the rigor. It will make our program more desirable and increase our reputation for being an excellent nursing program. As a faculty member, I am in full and complete support of the need for change and the proposed curriculum development.

Judy Lathen MSN, RN

Seward County Community College
Nursing faculty

To Whom it May Concern:

This letter is written in support of the curriculum change being presented for the nursing program at Seward County Community College, by the curriculum committee. The developed curriculum is necessary and is laid out with a strong foundation. This strong foundation allows the faculty of this program to teach the students in a way that lets each new topic, concept, and process build on each other. There is ample evidence of need to support this change. First, things have been the same way with very little change for a long time. This is a new generation of millennial students and a new generation of faculty. Change is necessary. Second, the pass rates have been declining because of the lack of change. Third, we want our students to be successful and get a strong education that emphasizes critical thinking and clinical reasoning and judgment as an entry level nurse. We care about the students and the patients they will be caring for.
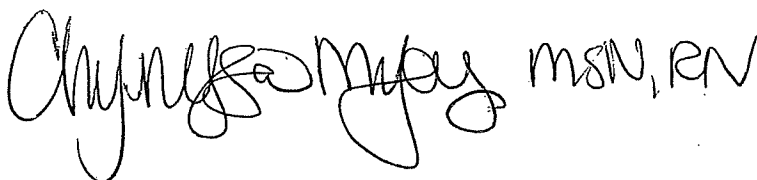
I am an instructor in the Level I portion of this nursing program. What was found in the current curriculum was that I was having to teach the students content about shock and burns that was not even taught in the last semester of critical care nursing. The lectures are all mixed up with content thrown in every which way. There was very little organization and very little rationale for why things were still being taught the way they "had been for 30 years." With the change in this current generation, it is time to change our program to adapt to these learners and their needs. Previously, each instructor was reteaching everything in their classes. This led to some obvious teaching silos and worse, it led to learning silos. Also, the students were getting so much content in the first level, then being retaught everything in the second level, that they were unable to learn what they needed to.

With the declining pass rates, we can correlate it to a few things, but mainly, we attribute it to the way the content has been siloed. With this new curriculum, we would like to combine classes into one and use a life span approach. This creates a better look at development with each body system. It also allows for less learning silos because they are being taught by a team of instructors who are all aware of the content being presented to the students. This will change their ability to take tests. It will change the layout of the clinical schedule and allow for more hours of clinical and simulation to be accrued. Lastly, it will provide fluidity to the course content. What they will learn in a nursing foundations class will truly be built upon in a Pediatric-Adult Medical-Surgical Course. It brings further emphasis to the general courses and highlights the specialties. We believe that this will improve our NCLEX pass rates.

To develop a strong skill of critical thinking and clinical judgement in the students, each course will be laid out with care. Faculty felt that the way the foundation was previously laid out in Fundamentals of Nursing was ineffective in developing these skills in students. I was able to assist in the curriculum development by laying out a potential Foundation of Nursing course that followed what we were trying to accomplish with this new curriculum. It will allow several new lectures to be added. It will allow for increased skills lab, simulation, and clinical time. It will allow for the content to be scaffolded across all four semesters. This course is truly the foundation of what they are learning, and this course needs to demonstrate that and offer them a strong, firm, solid foundation to move forward and connect what they are learning.

I have seen a tremendous need in the students to make a change. I have also seen the work that the curriculum committee is doing to meet that need. It has been a pleasure to be an active part of it. This change will bring many exciting things to our program and increase the rigor. It will make our program more desirable and increase our reputation for being an excellent nursing program. As a faculty member, I am in full and complete support of the need for change and the proposed curriculum development.

Sincerely,

Chynessa Myers, MSN, RN
Nursing Instructor

To Whom it May Concern:

As a current nursing faculty member, I would like to express my support for the curriculum change being presented by the Seward County Community College nursing curriculum committee. The current curriculum has been in place, with very little change, for the last 30 years. There is desperate need for this update due to multiple factors including changes in student demographics and learning styles, advances in nursing educational theory, and faculty changes. Most importantly, the current curriculum lacks meaningful intention which we hope to remedy with these changes.

In my time teaching in the program, I have noticed that instructors often reteach content areas multiple times with a lack of flow from one class to the next. Lecture content has not been organized and intentional, with instructors working in siloes. This has led to students being unable to connect concepts in one class to another and a failure of them being able to see how fundamental nursing concepts are interrelated. Additionally, students receive too much content in the 1st year of the program and then are retaught the same concepts in the 2nd year. Significant classroom time is wasted on reteaching that could be utilized to build stronger foundations in fundamental nursing skills, honing critical thinking, and increasing clinical judgement. A more thoughtful approach to curriculum development is necessary. The new curriculum plan offers a way to streamline content and allows for concepts to be built upon as the students advance through the program.

The new curriculum model seeks to take a life span approach that builds a strong foundation in the nursing process, development of clinical reasoning, and a more refined ability to translate concepts to practice. Furthermore, the curriculum will be laid out in a way that is not siloed and with meaningful intention. Concepts will be laid out in a scaffold that will flow from one semester to the next without reteaching and with better faculty awareness and communication. A greater focus on higher-fidelity simulations and general nursing clinical time is also included within the change.

I fully support the work that the curriculum committee has put forward and believe that it will be successful in improving nursing education. With a declining pass rate, we recognize that it is necessary to make changes to the way that we teach students. We firmly believe that this change is necessary. The changes will improve pass rates, but more importantly, it will improve student learning. Ultimately, our goal is to create a future of nurses that have a strong foundation upon which to build their practice, provide excellent patient care, and become leaders within healthcare.

Sincerely,

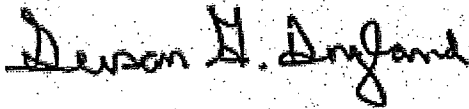Shayla McElvania, BSN RN
Nursing Instructor

To Whom it May Concern:

The Seward County Community College curriculum committee that is comprised of members of the nursing faculty have been working on curriculum changes for the nursing program. The work detailed by members of the committee has encompassed a period over 2 years. The need for curriculum change has been explained and delineated in the formal proposals from the committee.

Meeting the learning needs of the nursing students have been the purpose for the curriculum change. Structural changes in the courses and clinical schedules are necessary for the purposes of meeting the ongoing need of clinical judgment models, enhanced clinical experiences, and courses taught over the lifespan. Simulation opportunities will also be interwoven within the clinical component of the new curriculum.

I am in full support of the work and effort that the curriculum committee and the nursing faculty have worked to achieve. The SCCC nursing program historically has been successful. I look forward to helping the nursing faculty implement the changes needed for continued program success.

Sincerely,

Susan G. Ingland MSN, RN
Director of Nursing
Seward County Community College

From: kspsd-daemon@ksbor.org <kspsd-daemon@ksbor.org>
Sent: Monday, October 12, 2020 1:29:23 PM
To: Teresa L. Wehmeier <teresa.wehmeier@sccc.edu>
Cc: irhelp@ksbor.org <irhelp@ksbor.org>
Subject: (KBOR PI Emailer) Your Program has been approved!

This email is not from SCCC.
- IT

The following Program application has been approved by the Kansas Board of Regents:

INSTITUTION NAME: Seward County Community College

Action: MOD

Academic Year: 2022
Program Code: NR
Program Title: NURSING (ADN)
Award Level: ASSOC
Award: AAS
Award Description: AAS
Required Credit Hours: 66
CIP: 51.3801
Original Program Start Date: 01/01/1901

This email is not from SCCC.
- IT

_____

The following Program application has been approved by the Kansas Board of Regents:

INSTITUTION NAME: Seward County Community College

Action: MOD

Academic Year: 2022
Program Code: NR
Program Title: NURSING (LPN)
Award Level: CERTC
Award: CERT
Award Description: CERT
Required Credit Hours: 48
CIP: 51.3901
Original Program Start Date: 01/01/1901

Revised Program Request Form
CA2
General Information

Institution submitting proposal	Seward County Community College
Name, title, phone, and email of person submitting the application	Susan G. Ingland MSN, RN Director of Nursing 620-417-1407 susan.ingland@sccc.edu
Current program title	Associate Degree Nursing Program
Current CIP code	PN 51.3901, RN 51.3801
Revised program title	Practical Nurse (PN) Program/Associate Degree Nursing (ADN) Program
Revised suggested CIP code	(No Revisions)
Degree/Certificate program description	PN CERTB ADN AAS
Number of credits for the revised degree and/or certificate(s)	PN 48-52 ADN 65-70
Proposed date of initiation	Fall 2021
Specialty accrediting agency	Kansas State Board of Nursing Accreditation Commission for Education in Nursing
Industry certification	NCLEX RN

Signature of College Official _Luke Dowell_ Date 10/7/2020

Signature of KBOR Official_____ Date_____

Application for Revision of Existing Educational Program

Please respond to the following criteria in narrative form. <u>Attach all required documents</u> (CA-2a) and <u>any additional supporting documents to the application as appendices</u>. Provide complete answers to all criteria.

Criterion I: Rationale for Program Revision
- **Provide a detailed rationale for the program change including student and employer demand for the change**

The Seward County Community College (SCCC) nursing program is currently structured for students to be instructed through individual nursing courses. Each of the nursing courses are focused on specific content areas. They include Fundamentals of Nursing, Gerontological Nursing, Medical-Surgical nursing, Maternal-Child and Role Development for the LPN for the first year (Level I) of the bi-level nursing program. The specific content areas for the second year (Level II) portion of the nursing program include Adult & Child I, Adult and Child II, Maternity Nursing, Mental Health Nursing, Client Care Nursing and Integration Seminar. The nursing faculty have recognized the need for curriculum re-design. The nursing faculty over the past two years have formed a curriculum committee and have worked toward a curriculum re-design.

Over the past 6 years the SCCC nursing program has had a complete turn over in nursing administration, and nursing faculty as a result of retiring faculty. This has brought a fresh perspective to the nursing program. The current nursing faculty have recognized that the current curriculum structure has resulted in silo teaching and silo learning for the students. The current curriculum demonstrates overload in content teaching, reteaching and lacks a specific pharmacology focus. When considering a curriculum revision, SCCC nursing faculty affirm that a curriculum change is necessary and is a contributing factor to the low RN- NCLEX pass rate.

The faculty at SCCC will have ownership in the new curriculum and affirm that the new curriculum will demonstrate a more team-dynamic approach for leveling the content for the nursing program. The traditional medical model will continue to be used throughout the program while utilizing a 'build upon' approach to control content overload and reduce reteaching from course to course. The redesigned curriculum will provide more emphasis on clinical judgment while offering more general bedside nursing opportunities for the student in the areas of clinical and simulation. Nursing faculty believe this is essential for the novice graduate nurse to effectively integrate into safe nursing practice.

The nursing students at SCCC will benefit from the redesigned curriculum for several reasons. The curriculum contains provisions of a structured learning approach that allows the student the ability to employ critical thinking, clinical reasoning and clinical judgment, as they prepare to care for clients of various cultures and throughout the lifespan. The new curriculum will help the students to make better connections between content and subject areas as they move through the curriculum. Adding Pharmacology I-III will prepare students for safer practice with a specific structured content for this area. Through the implementation of the new curriculum it will assist the student in the pursuit of a higher degree, such as a Bachelor of Science in Nursing (BSN). Working on a curriculum change will also assist the students with the possibility for dual enrollment opportunities and future partnerships with universities.

Education 201

The new curriculum will provide more clinical opportunities for general nursing experiences and clinical preparation for the entry level nurse to enter nursing practice. Although, there will still be an emphasis on the specialized areas of nursing, such as obstetrics, pediatrics and mental health, more opportunities for general bedside nursing and enhanced low to high fidelity simulations will be provided to enhance the student's critical thinking and clinical judgment.

Further support for a curriculum re-design came during the Kansas State Board of Nursing site visit for the re- approval of the Level I program Fall 2018; it was suggested by the site visitors that the Fundamentals of Nursing course credit hours be increased for the time required for the course. This will provide the student with a new distribution of credit hours. This will further assist students to meet credit hour requirements needed to qualify for financial aid while they are enrolled in the nursing program.

The nursing faculty have presented the curriculum revisions to the Nursing Advisory Board for input. The advisory board is comprised of members of the community and clinical sites. The nursing faculty have been provided with insight and employer needs for the graduate entry level nurse.

- **Provide a letter from the Chair or Dean documenting college support and administrative rationale for the revision**

Criterion II: Curriculum
- **Describe in detail how the revised program differs from the current program**

The current curriculum is spread over 5 semesters; whereas, the new design will be 4 semesters. The newly designed curriculum will eliminate the Role Development of the LPN course, which is currently taught as a summer course. Faculty have identified most of the information provided to students in that course is already taught within the first two semesters of the program, content that is not currently covered, such as basic mental health, can be easily absorbed into the Level I Fall and Spring semesters in the new curriculum. Elimination of the summer course will allow first year students to complete the level I in 2 semesters as opposed to 3. Pre-requisites and co-requisites will remain the same.
Pre-requisite courses of English Composition I, General Psychology and Anatomy & Physiology will be required for the student to have them completed prior to admission to the nursing program. Co-requisite courses of English Composition II or Public Speaking, Microbiology, Nutrition and Developmental Psychology may be taken in conjunction with the required nursing courses following admission to the nursing program.

During the first semester of the nursing program under the current curriculum Fundamentals of Nursing (5) and Gerontological Nursing (2) are 7 credit hours together. Students must successfully complete the Fundamentals of Nursing course prior to beginning Gerontology. Clinical hours are designated for each course, individually. The new curriculum provides an umbrella for the two courses, Foundations of Nursing Care I. The new course will focus on nursing care through a global perspective, blending adult/gerontological nursing along with fundamentals of nursing. In addition to Foundations of Nursing Care I, students will also be required to enroll in Pharmacology I as a co-requisite. The two courses together will provide

Education 202

students with 12 credit hours for the Level I Fall semester. Pharmacology I will cover initial pharmacokinetics, safety and administration of medications, which is an important foundation for the practicing nurse.

As delineated in the curriculum table (refer to form CA2a), the current curriculum requires enrollment in 2 courses each spring, equaling 12 credit hours. These courses are: Medical-Surgical Nursing and Maternal-Child Health. The newly designed curriculum will combine the Medical-Surgical Nursing and Maternal-Child Health courses with the co-requisite of Pharmacology II, equaling 11 credit hours. The new course, Nursing Care II, will provide the student with a medical-surgical nursing approach from pediatrics through adulthood. Students will also be provided specialized content of maternal-newborn and basic mental health nursing. Pharmacology II will focus on basic cardiac, respiratory, endocrine, gastrointestinal, urology and obstetrical medications to coincide with systemic content taught in Nursing Care II.

Outlined within the attached curriculum table (refer to form CA2a), the current curriculum identifies a 5-credit hour Role Development for the LPN course. The course was a review of subject matter from the first 2 semesters of the program, as well as, providing additional content for basic mental health nursing care. The redesigned curriculum is slated to absorb the content of this course into Nursing Care I and Nursing Care II, as well as, within the Pharmacology I & II courses. Therefore, as indicated in the curriculum table, the course will no longer be required for the nursing program.

Fall semester of level II of the nursing program currently consists of students enrolling in 3 courses. Adult and Child Care I, Mental Health Nursing and Maternity Nursing. Currently, the semester is 10 credit hours with each course requiring a specified number of clinical hours. Under the new curriculum design the nursing students will continue building upon the previous learned content from the first 2 semesters, while expanding into more advanced nursing care. Students will enroll in Nursing Care III and Pharmacology III, consisting of 10 credit hours. The focus of Nursing Care III will be on advanced medical-surgical nursing and mental health care for a global population. Pharmacology III will emphasize advanced cardiac, respiratory, fluid and blood administration, as well as, other critical drugs. Because the student has been taught care of the maternal-newborn client within the first year of the program, including high risk complications, the content will not be required in this semester; therefore, as defined in the curriculum table, the Maternity Nursing course will be no longer be offered during the Level II Fall semester. Current LPNs accepted into the program for the Level II Fall semester will still be required to take the LPN-ADN course as indicated in the curriculum table.

For the spring semester the curriculum table demonstrates current required enrollment in Adult and Child Care II, Client Care Nursing and Integration Seminar. The new curriculum will still require students to enroll in Integration Seminar; however, the new course, Nursing Care IV, will emphasize critical care nursing for a global and diverse population, as well as, the leadership and management roles of the registered nurse. As students prepare to enter practice as entry-level nurses, hands-on clinical education will be the priority emphasis for this course. The curriculum changes will align with the Kansas ADN Alignment 1-7.

Complete and submit a CA2-a form listing all courses in the current program and courses in the revised program
- List by prefix, number, title, and description of all courses to be required in the new program

Criterion III: Admission and Graduation Requirements
- Describe the admission <u>and</u> graduation requirements for the revised program and detail how they differ from the current program

There will be no changes in the admission requirements into the nursing program due to the curriculum revision. The graduation requirements for the nursing students will be contingent to successful completion of each course. Upon successful completion the student will progress through the nursing program. There will be no systematic change in the admission, progression, or graduation process.
-

Criterion IV: Facilities
- Describe any changes to current facilities that are necessary due to the program revision

With the curriculum change, there will not be a need for a change in facilities. The Colvin Center for Allied Health will meet the needs for the nursing students with the revisions in the nursing curriculum.

- Describe any new facilities required by the program revision.

There are no new facilities required by the program for this revision.

Criterion V: Resources
- Describe how the funding for the revised program differs from the current program funding

There will not be any funding changes based on the revised program. Student fees will be applicable as well as tuition.
- If existing resources are not adequate to support the revised program, explain the additional resources needed and the source(s) of the funds

There are no additional resources required for the implementation of this revision to the curriculum.

Criterion VI: Faculty
- Describe faculty qualifications and/or certifications required to teach in the revised program and explain how they differ from the current program

The nursing faculty qualifications and or/certifications are approved by the Kansas State Board of Nursing. There will be no required changes made with the implementation of the new curriculum.
- Describe plans for additional faculty to support the revised program

Currently, there is no anticipated need for additional support faculty for the curriculum revision.
- Describe how the revised program impacts the current faculty, i.e. need for training on new equipment, new certifications

Education 204

The current nursing faculty are qualified for the instruction of the newly revised curriculum. The nursing faculty will receive on-going professional development and expected to maintain their current certifications.

- **Describe the plan for updating current faculty qualifications if needed**

The current nursing faculty have the qualifications necessary for the implementation of the revised curriculum.

Criterion VII: Outside accreditation

- **Describe plans for gaining or maintaining outside accreditation including a timeline, cost and funding source**

Approval from the Kansas State Board of Nursing for the new curriculum will be sought. Substantive change and approval of the new curriculum from the Accreditation Commission for Education in Nursing (ACEN) will be obtained. The nursing faculty of Seward County Community College seek implementation and approval of the revised curriculum for Fall 2021. There is not an anticipated cost associated with the implementation of the new curriculum.

Criterion VIII: Approvals

- **Provide minutes that indicate approval of the revision from the following:**
  - o **Program Advisory Committee**
    (including a list of the business and industry members)
  - o **Curriculum Committee**
  - o **Governing Board**
    (including a list of all Board members and indicate those in attendance at the approval meeting)

Submit the completed application and supporting documents to the following:
Director of Workforce Development
Kansas Board of Regents
1000 SW Jackson, Ste. 520
Topeka, KS 66612-1368

CA2a Program Revision Application
Program Comparison Chart
Name of Institution   Seward County Community College

List all courses in Current Program below. *Note the courses to be changed with an * before the course*		List all courses in the Revised Program below. *Note the NEW courses with ** before the course*	
Current Program Title:		Proposed Program Title: .	
Current Program Courses	**Number of Credits**	**Proposed Program Courses**	**Number of Credits**
Pre-Requisite Courses:		**Pre-Requisite Courses:**	
EG 1103 English Comp I	3	EG 1103 English Comp I	3
BH 1303General Psychology	3	BH 1303 General Psychology	3
BI 2115, BI2304, BI2314 Anatomy & Physiology	5-8	BI 2115, BI2304, BI2314Anatomy & Physiology	5-8
Co-Requisite Courses:		**Co-Requisite Courses:**	
EG 1113English Comp II / SP1203Public Speaking	3	EG 1113 English Comp II /SP1203 Public Speaking	3
BI 2705 Microbiology	4-5	BI 2705 Microbiology	4-5
BI 1403 Nutrition	3	BI 1403 Nutrition	3
BH 2303 Developmental Psychology	3	BH 2303 Developmental Psychology	3
Level I		**Level I**	
Fall		**Fall**	
*NR 1115 Fundamentals of Nursing	5	** NR 1110 Foundations of Nursing Care I	10
*Nr 1202 Gerontological Nursing	2	** NR 1102 Pharmacology I	2
Spring		**Spring**	
*NR 1507 Medical Surgical Nursing	7	**NR 1410 Nursing Care II	10
* NR 1605 Maternal Child Nursing	5	** NR 1411 Pharmacology II	1
Summer			
* NR 1705 Role Development of the LPN	5		
	48-52		47-51
	Eligible for NCLEX-PN		
Level II		**Level II**	
Summer		**Summer**	
NR 2101 LPN to ADN(required for new LPNs/LVNs entering the program)	1	NR 2101 LPN to ADN (required for new LPNs/LVNs entering the program)	1
Fall		**Fall**	
*NR 2503 Mental Health Nursing	3	**NR 1809 Nursing Care III	9
* NR 2603 Maternity Nursing	3	** NR 1801 Pharmacology III NR 1801	1
*NR 2404 Adult & Child Care I	4		..
Spring		**Spring**	
*NR 2414 Adult & Child Care II	4	**NR 2705 Nursing Care IV	5
*NR 2703Client Care	3	NR 2103 Integration Seminar	3

Education 206

NR 2103 Integration Seminar NR2103	3		
	Eligible for NCLEX -RN	•	
Total Credits in Current Program	68-73	Total Credits in Revised Program	65-70

Signature of College Official _Luke Dowell_　　　　Date 7/30/2020

Signature of KBOR Official _____　　Date _____

Submit the completed application and supporting documents to the following:

Director of Workforce Development
Kansas Board of Regents
1000 SW Jackson, Ste. 520
Topeka, KS 66612-1368

Seward County Community College
Nursing Advisory Board Meeting
Monday November 25, 2019
12:00 PM – 1:00 PM

Present: Martha Brown, RN and Director of Seward County Health Department; Robin Allaman, Southwest Medical Center; Elizabeth Irby Staff Development and Coordinator in Education at Southwest Medical Center; Dawn Maas, Director Stevens County Hospital; Dr. Joe McCann, Vice President of Academic Affairs at SCCC; Marreta Campbell, Instructor at SCCC; Shayla McElvania, Instructor at SCCC; Dawn Unruh, Instructor at SCCC; Judy Lathen, Instructor at SCCC; Chynessa Myers, Instructor at SCCC; Dr. Suzanne Campbell, Dean of Allied Health at SCCC; Cassie Davis, Family Nurse Practitioner at Sublette Clinic; and Magdalena Rivera, Allied Health Division Secretary.

I.   Call to Order/Introductions 12:00 pm

II.   Approval of the Nursing Advisory Meeting Minutes April 29, 2019 – approved as submitted.

III.   Colvin Family Center for Allied Health Building Update- All programs are now in the new building, but still unpacking. We are looking at open house even though we don't have a firm date. Dr. Campbell is thinking a 2:00-5:00 pm slot with a ribbon cutting with the chamber. Faculty will be available in their areas for anyone that has questions so they can promote the programs.

IV.   Higher Learning Commission Report – Higher Learning Commission team was on campus the end of October the college received a very favorable review. We have criterion that we have to meet. There are a few minor protocols and procedures that we need to change within the institution but, overall all of the criterion have been met. The report has to go to Higher Learning Commission board for final approval for the reaffirmation.

V.   Program updates/Course Reports – See the next two item that will have these reports.

VI.   Nurse Initiative Grant - Susan provided some information. SCCC nursing program was eligible for Nurse Initiative Grant because they have not been meeting the bench mark on the NCLEX pass rate for Level II. It was between $7,000 or $8,000 provided through that grant. We had some faculty travel for that. The simulator training in Florida was part of that package with the simulator bought in 2016. Nursing faculty went for a second round of training. Dawn and Judy went to the Next Generation of NCLEX in Dallas.

VII.   Dallas – Next Generation NCLEX (NGN) Conference & Item Writing
       • NGN will have both current and new item types.
       • Questions will be designed to determine if the candidate can use clinical judgement.
       • Both RN and LPN Next Gen NCLEX will roll out the same year – 2022
            o However, they have not determined yet how it will be scored because the items will be more in depth. Every question will have multiple parts and will take longer for the student to work through.
       • Encouraged us to look at our test plans and create test blueprint.

- o Ensure that we are creating higher level thinking questions and leveling so that by the end of the first semester, the exams are 50/50.
- Discussed ways to increase rigor up clinical – maybe utilize an objective structured clinical exam that the student must pass in order to pass clinical.
  - o We are relying too much on the care plan and it isn't the best tool to use.
- Multiple conferences now have stressed that we need a simulation instructor that will address the clinical judgement piece. Developing high-level simulations to allow students to implement clinical judgement and then be able to debrief, recognize and instruct students to use clinical judgement.
  - o This is a prime time to start doing this now that we have our new simulation center.

VIII. Perkins Report – There is money for travel which is federal fund. As an institution we are around $106,000 this year. 50% can be used for equipment and the other 50% can be used for travel. Typically, all the Allied Health programs will designate the national travel through Perkins founding. We have one nursing faculty who will be attending the Nurse Education Conference and one will attend the ACEN self-study forum since we will have an accreditation visit for ACEN in 2021.

IX. Nursing Program Outcomes- the NCLEX Pass Rates, Completion Rates all of that is in our website. If you go to www.sccc.edu under Academics →Allied Health →Nursing → Nursing Program Outcomes, all of that information is there. We keep a three-year rolling aggregate. The current Level II ADN NCLEX Pass Rate for academic year 2019 is 74.4% and the bench mark is a 75%. The Nursing program increase the test rates. Level I LPN NCLEX Pass Rate for academic year 2019 is 100%.

X. ATI
- As faculty, we feel that Kaplan is no longer meeting the needs of our students and we identify the need to utilize something different with our students
- Many nursing schools are changing to ATI from Kaplan as Kaplan seems to be falling behind and companies like ATI are pushing to the forefront.
  - o Offering better support than what we have been getting from Kaplan
  - o They are more user friendly and have many more tools available to students
- ATI is proactive in preparing for the Next Gen NCLEX
- Will design/implement around our curriculum
  - o Have a nurse educator on staff that will looks specifically at our curriculum and tailor ATI tools to us and will be better integrated into each course than Kaplan has been
- An EHR is built in so that we can utilize with students during class/simulation
- ATI has virtual scenarios – like "choose your own adventure".
  - o A student will be given a patient scenario and they choose their response
    - ▪ ATI will then take them down a pathway based on their response (over 100 different pathways)

Education 209

- If they choose poorly and continue to do so, the program will eventually tell them that they can no longer proceed as they are no longer providing safe care for their patient.
- Provide adaptive testing, like the NCLEX.
- Students will pay for this through course fees.

XI. Curriculum Update-Dawn/Judy – they have been working in this curriculum change for almost a year and a half.

Current Curriculum Need for Change:

- Structured to be taught through individual course, focusing on specific content areas o Med-Surg, Maternal-Child, Geriatrics, etc.
- Results in silo teaching and learning
- Overload of content and reteaching
- Lacks pharmacology focus
- Complete faculty turnover in last 7 years
  - o New faculty bring fresh perspective
- Unsure of last curriculum revision
  - o Became a bi-level program in 2005 with minimal revision.
- Declining NCLEX-RN pass rate over past 3 years
- Changing student demographic
  - o Younger
  - o Different learning style
  - o Diverse

New Curriculum

- Faculty will have ownership and a more team-dynamic approach for leveling the program.
- The new curriculum will utilize a "build-upon" approach to control the content overload/reteaching.
- Provide more emphasis on clinical judgment while offering more general bedside nursing opportunities for the student while still continuing to emphasize specialized areas, such as, obstetrics, pediatrics and mental health.
  - o Essential for the novice graduate nurse to effectively integrate into practice of a higher degree, such as a Bachelor of Science in Nursing (BSN).
- More enhanced low to high fidelity simulations will be provided to enhance the student's critical thinking and clinical judgment.
- A new distribution of credit hours will give students a better opportunity to qualify for financial aid while enrolled throughout most of the nursing program.
- The most significant change to the curriculum is the number of semesters. The current curriculum is spread over 5 semesters
  - o The new design will be 4 semesters.
  - o Will eliminate the Role Development of the LPN course, which was taught as a summer course.

Education 210

- Faculty have identified most of the information provided to students in that course is already taught within the first two semesters of the program.
    - Content that has not been covered, such as basic mental health, can be easily absorbed into the Level I Fall and Spring semesters.
  - o Elimination of the summer course will allow first year students to better prepare for the NCLEX-PN. Pre-requisites and co-requisites will remain the same.

Martha Brown made a motion to approve the proposed Nursing curriculum change. Robin seconded. Motion passed.

XII. Chynessa Myers- Presentation-
Nursing Faculty Orientation and Mentorship: Teaching and Old Dog New Tricks is Chynessa's presentation name. What would a strong faculty orientation would look like? We have a strong orientation policy in place here at SCCC, but where we struggle is the transition of being in the hospital or in a clinic and coming and teaching in a classroom. It is very different and challenging. Transitioning into the classroom nursing faculty can feel very unprepared. Chynessa' s main objective if her project is approved is to create a canvas shell and set specific objectives for each phase of that mentorship. The person that comes in can work on the objectives at their own pace and make sure they are meeting them.

Background and Problem
- Few nursing programs around
- Nationwide faculty shortage
- Lack of faculty preparedness in higher education
- People come to education to die
- Last stop before retirement
- Difficult going from clinical practice to the classroom

XIII. New business- No business from the floor.

XIV. Shayla made a motion to adjourn meeting at 1:20 pm. Martha seconded. Motion passed.

ACADEMIC AFFAIRS COUNCIL | MINUTES

MEETING DATE: 07/27/2020 TIME: 2:00 PM LOCATION: Zoom	
Attendees:	Luke Dowell, Dr. Suzanne Campbell, Casandra Norin, Annette Hackbarth-Onson, Alaina Rice, Chris Hickman, Dan Artamenko, Susan Ingland and Teresa Wehmeier (Guests)
Unable to Attend:	Mike Bailey, Dr. Fe Laguitan, Eric Volden, Hiran Gunasekara, and Deedee Flax
Call to Order:	Annette called the meeting to order at 2:02pm
Approval of Minutes:	Suzanne made a motion to approve the minutes, Dan 2nd. Motion carried.

STANDING REPORTS:		
SCCC Assessment Report:	Dowell	*No report.* *Should be meeting in early August.*
Edukan Report:	Dowell	*No report.* *Should be meeting in early August.*
HLC Open Pathways (OP) Report:	Dowell	*No report.* *Should be meeting in early August.*
Adviser Report:	Hackbarth-Onson	*Still enrolling students. Starting Faculty advisor assignments.*
Distance Learning Report:	*Flax*	*Luke said they are meeting this Wednesday. 42 people requested Canvas training over Summer. Only 5 completed it. Some did just bits and pieces and some are asking for an extension. In their next meeting they will be looking at ways to support Instructors as they start courses this Fall, Professional Development training on Improving Emergency Remote Instruction, learning technology, and a request by Teresa to move attendance tracking to Banner.*

NEW ACTION ITEM – Suzanne Campbell

Discussion & Action:	Policy Review
Discussion: Approve changes to AAC Policy 10.1.	*Hold on approving chair rotation since we currently have no Dean of Instruction. Today only approve change in language regarding business submissions for agenda. Suzanne made a motion to accept proposed changes to policy 10.1, item 3. Alaina 2nd, motion carried. Do the Division Chairs need to be back on the Academic Affairs Council? If so, they will need to be included in the chair rotation. Suzanne made a motion to table the approval of the updated chair rotation until the August meeting, Alaina 2nd. Motion carried.*

NEW ACTION ITEM – Suzanne Campbell

Discussion & Action:	Nursing Curriculum change
Discussion: Review and approve changes to the Nursing Curriculum.	*We currently have a bi-level nursing program. They earn a certificate at level 1 and then stay and complete level 2 for AAS. Time for a curriculum change. Suzanne has reviewed the changes on the revised program forms. This will allow more opportunities to improve clinical experiences. Will eliminate redundancies currently in the program now. Not changing what we are teaching, just level it more. Suzanne made a motion to approve Nursing curriculum changes as presented, Chris 2nd. Motion carried.*

NEW ACTION ITEM – Luke Dowell/Teresa Wehmeier

Discussion & Action:	Attendance and Grade Book options
Discussion: Look at options for attendance and grade book integration.	*Teresa pulled together a landing page for Faculty. Not maintaining timely attendance and grade posting in Canvas. Have to put final grades into Banner anyway, so putting attendance in Banner would be a better option. Luke asked if would be ok if the Distance Learning committee looked into this on Wednesday. If we did this, Jacy would know the information she was pulling was accurate. Online attendance is not daily but in-person should be taken daily for financial aid and dual credit/concurrent purposes. Tech has daily sign in sheets, so it won't be feasible for them to do every day or even weekly attendance. They give the sign in sheets to Teresa T. and she records the attendance. If it can be done in an easier way, then can potentially bring to Instructional Team. Need to sit down with Tech instructors to make sure on the same page as far as high school attendance reporting.*

Education 213

NEW ACTION ITEM – Annette Hackbarth-Onson	
Discussion & Action:	Changes to the Dropping and Adding Process
	Starting Fall 2020, we are suggesting changes of practice within student enrollment processes. Following are the changes being suggested: 1) Enrollment activities are happening online *We are having all enrollment activities online that we can. No hard cards.* 2) Adding and dropping courses after the posted add date *Drop and add first week in school. Difference is no longer add after that but can drop on their own until the end date. Electronic drop submission instead of student getting signatures in person.* 3) Enrollment limits We are not increasing enrollment limits.
Discussion: Discuss changes to the dropping and adding process.	Allied Health can't withdraw without advisor and program director conversation. Some courses would be ok to add late (example: activity or low enrollment classes) with instructor approval. OK to take out of policy, but we have to be open to allow it. If we allow students to drop classes on their own, they would be unable to completely withdraw without speaking to an advisor (can't drop the last class). More accountability to the student – puts the responsibility on them. Change process to have them talk to their instructor and advisor in advance before dropping. Teresa said there can be a notification email to advisor/instructor when drop is initiated. Could also be sent to financial aid or anyone we want. Teresa will draft a request and send out to everyone. Annette will revise the wording to the above processes. Not changing policy necessarily, just the practice of policy. These will be the enrollment practices for Fall.

Education 214

OTHER – Chris Hickman	
Discussion & Action:	ABE/CTE Grants
Discussion: Discuss baseline testing for ABE/CTE grants.	*Establish baselines for ABE/CTE grants. Does this council think that TABE is the best option? Should we use Accuplacer instead? Luke said we don't want to go to another option that costs us. Suzanne said Nursing program has most points for admission. Were using TABE and had to turn away students that didn't score 617 on TABE but had enough points otherwise so wanted to do away with TABE. These students must be reading on 9th grade level and minimum TABE is what is advertised so left TABE in place. TABE gets federal funding. Continue to use TABE but look into how we can help students get the remediation needed to gain entry. Need to have at least a 6th grade reading score.*

ADJOURNMENT & PROPOSED NEXT MEETING	
Next Meeting Date:	August 24, 2020
Time:	2:00-4:00 p.m.
Room:	AA130 (Zoom if necessary)

Education 215

SEWARD COUNTY
COMMUNITY COLLEGE
sccc.edu

Agenda Item Details

Meeting   Oct 05, 2020 - Regular Meeting of the Board of Trustees

Category   1. Opening Items

Subject   B. Approval of Minutes

Access   Public

Type   Action, Minutes

Recommended Action That the Board approve the minutes of the September 8, 2020, Regular Meeting of the
                    Board of Trustees as presented.

Public Content

Minutes are not considered official until after Board approval.

SCCC BOT Regular Meeting Minutes September 8, 2020.pdf (222 KB)

Motion & Voting

That the Board approve the minutes of the September 8, 2020, Regular Meeting of the Board of Trustees as
presented.

Motion by Sharon Hobble, second by Marvin Chance.

Education 216

Regular Meeting of the Board of Trustees
Tuesday, September 8, 2020

Members present
Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

1. Opening Items
   Procedural: A. Call to Order

Chairperson Oliver called the meeting to order at 7:30 PM

   Action: B. Approval of Minutes

That the Board approve the minutes of the August 3, 2020, Regular Meeting of the Board of Trustees, and the August 11, 17, 19, 24, 25, and 27, 2020 minutes of the Special Meetings of the Board of Trustees, as presented.

Motion by Kay Burtzloff, second by Dustin Ormiston.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

2. Visitor Reports (Additional information is available on BoardDocs.)
   Information: A. Introductions to Board (none)
   Reports: B. Chief Movers Updates (none)
   Reports: C. Athletics Update
   - A full round of COVID-19 testing has been done for athletes. There was a less than 4% positive rate, and none were symptomatic. There has been no known spread in the dorms.
   - Full team, quarantined practices are being allowed at this time.
   - The Head Coach, Volleyball position has been filled.
   - The search for the Head Coach, Tennis position has been narrowed down to the final two candidates.

   Reports: D. Development Office Update
   - Kyle Woodrow, Chief Development Officer, provided an update regarding financial aid funds and the annual fundraising auction.

   Information: E. Board of Trustee Comments

   - Chairperson Oliver thanked President Trzaska for his 5 years of service to the College.

3. Old Business
> Chairperson Oliver called for a motion to approve the contract negotiated with Mr. Brad Bennett, incoming President.

That the Board ratify and accept the signed contract for the new president, Brad Bennet.

Motion by Sharon Hobble, second by Kay Burtzloff.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

4. Hearings/Petitions
5. New Business

> Action: A. Personnel Report
> President Trzaska presented the Personnel Report and noted that there are still several position searches in progress. The full Personnel Report is available on BoardDocs.

That the Board accept the Personnel Report as presented.

Motion by Marvin Chance, second by John Engel.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

> Action: B. Payroll Tax Deferment
> Vice President Sander provided information regarding President Trump's payroll tax deferment plan.

That the Board approve Administration's decision against the adoption of the payroll tax deferment and to allow the deduction of taxes from employee paychecks, as normal.

Motion by Dustin Ormiston, second by Kay Burtzloff.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

> Action: C. January 2021 Regular Board of Trustees Meeting Date
> The January 2021 Regular Meeting of the Board of Trustees would fall on January 4, 2020, which is the first day that campus is open after the break. Administration requested that the meeting be held after January 6, 2020, to provide additional preparation time.

That the Board hold its regular January meeting on January 6, 2021.

Motion by Marvin Chance, second by Sharon Hobble.
Final Resolution: Motion Carries

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Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

Action: D. Program Changes - Nursing Program
Vice President of Academic Affairs, Luke Dowell, presented information regarding requested changes to the Nursing Program. The full report, including Advisory Board minutes and forms for KBOR, is available on BoardDocs.

That the Board approve the program changes to the Nursing Program, as presented.

Motion by Kay Burtzloff, second by John Engel.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

6. Bids and Quotes
Action: A. Bid - Security Operations Center (SOC) and Network Operations Center (NOC)
Louie Lemert, Chief Information Officer, provided information regarding the purpose and function of the proposed contract with an external source to manage the College's Security Operations Center and Network Operations Center. He recommended entering into a 3-year contract with Oculus IT as the best option for the College.

That the Board approve the bid from Oculus IT and authorize Administration to enter in to a 3-year contract with Oculus IT, pending review by legal counsel, as presented.

Motion by Dustin Ormiston, second by Sharon Hobble.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

Action: B. Bid - Laptops
Due to the cost and the number of devices, CIO Lemert did not feel it appropriate to act with the previous purchase authority given. He presented the costs of purchasing surfaces or laptops for faculty, which would allow them to teach from home should it become necessary. Funds previously set aside for this will be used to meet this requirement.

That the Board approve the purchase of up to 89,500 dollars' worth of equipment as presented.

Motion by Kay Burtzloff, second by Sharon Hobble.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

That the purchase of laptop computers not include the purchase of the 3-year warranty.

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Motion by Dustin Ormiston, second by Marvin Chance.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

7. College Reports - The following presented departmental reports to the Board. Those reports are available on BoardDocs.
  Reports: A. Chief Information Officer
  Reports: B. Vice President of Student Services
  Reports: C. Vice President of Academic Affairs
  Reports: D. Vice President of Finance and Operations
  Reports: E. President

8. Bills Pending
  Action: A. Payment of Bills Pending

That the regular monthly bills be approved for payment as presented.

Motion by Marvin Chance, second by Sharon Hobble.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

9. Other
  President Trzaska requested that the Board provide authority to bypass the normal bidding procedure to complete the College's sidewalk project. He noted that external funds were committed to finish this project with the stipulation that the sidewalks were completed by mid-October. Due to the receipt of donated and grant funds, the cost to the College should not be more than $4,000. He requested authorization to use Monarrez Concrete of Liberal, KS, as they have completed several sections of the sidewalk project.

That the Board provide Administration the authority to request and take bids, and approve the lowest acceptable and complete bid, not to exceed $24,000.

Motion by Dustin Ormiston, seconded by Kay Burtzloff.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

10. Executive Session

  Action: A. Executive Session - Personnel Performance Issues
  Chairperson Oliver requested that Kerry McQueen, legal counsel, be included in the Executive Session to provide legal advice relative to the performance issues being discussed.

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That the Board recess the meeting at _8:40___ p.m. to go into an Executive Session to discuss confidential personnel matters related to personnel performance issues pursuant to the non-elected personnel exception under KOMA; and the time and place at which the open meeting will resume are __9:10__ p.m. of this same day, in Room S214 East/West of Seward County Community College. Kerry McQueen was requested to stay to provide legal counsel.

Motion by Dustin Ormiston, second by Sharon Hobble.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

> The Board convened to open session at 9:10 p.m. No action was taken as a result of this Executive Session.

> Action: B. Executive Session - Interim/Acting President Discussion

That the Board recess the meeting at _910___ p.m. to go into an Executive Session to discuss confidential personnel matters related to establishing an interim/acting President pursuant to the non-elected personnel exception under KOMA; and the time and place at which the open meeting will resume are _915___ p.m. of this same day, in Room S214 East/West of Seward County Community College.

Motion by Marvin Chance, second by Dustin Ormiston.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

> The Board convened to open session at 9:15 p.m. Action taken as result of this Executive Session:

That the Board approve the appointment of Dennis Sander as Interim President from September 19, 2020 through October 11, 2020, to include a payment of $1500 for additional duties performed.

Motion by Kay Burtzloff, second by Sharon Hobble.
Final Resolution: Motion Carries
Yea: Casey Mein, Dustin Ormiston, John Engel, Kay Burtzloff, Marvin Chance, Sharon Hobble, Ron Oliver

11. Adjourn
        Chairperson Oliver declared the meeting adjourned at 9:15 p.m.

Board Chair_____   Board Clerk_____

Appendix C: Curriculum Changes

The current curriculum is spread over 5 semesters, whereas, the new design will be 4 semesters. The newly designed curriculum will eliminate the Role Development of the LPN course, which is currently taught as a summer course. Faculty have identified most of the information provided to students in that course is already taught within the first two semesters of the program. Content that is not currently covered, such as basic mental health, can be easily absorbed into the Level I Fall and Spring semesters in the new curriculum. Elimination of the summer course will allow first year students to complete the level I in 2 semesters as opposed to 3 semesters. Pre-requisites and co-requisites will remain the same.

Completion of the pre-requisite courses of English Composition I, General Psychology, and Anatomy & Physiology are required for the student prior to admission to the nursing program. Co-requisite courses of English Composition II or Public Speaking, Microbiology, Nutrition, and Developmental Psychology may be taken in conjunction with the required nursing courses following admission to the nursing program.

During the first semester of the nursing program under the current curriculum Fundamentals of Nursing (5) and Gerontological Nursing (2) are 7 credit hours together. Students must successfully complete the Fundamentals of Nursing course prior to beginning Gerontology. Clinical hours are designated individually for each course. The new curriculum provides an umbrella for the two courses, Foundations of Nursing Care I. The new course will focus on nursing care through a global perspective, blending adult/gerontological nursing along with fundamentals of nursing. In addition to Foundations of Nursing Care I, students will also be required to enroll in Pharmacology I as a co-requisite. The two courses together will provide students with 12 credit hours for the Level I Fall semeste Pharmacology I will cover initial pharmacokinetics, safety, and administration of medications which is an important foundation for the practicing nurse.

As delineated in the curriculum table **(refer to form CA2a)**, the current curriculum requires enrollment in 2 courses each spring, equaling 12 credit hours. These courses are: Medical-Surgical Nursing and Maternal-Child Health. The newly designed curriculum will combine the Medical-Surgical Nursing and Maternal-Child Health courses with the co-requisite of Pharmacology II, equaling 11 credit hours. The new course, Nursing Care II, will provide the student with a medical-surgical nursing approach from pediatrics through adulthood. Students will also be provided specialized content of maternal-newborn and basic mental health nursing. Pharmacology II will focus on basic cardiac, respiratory, endocrine, gastrointestinal, urology, and obstetrical medications to coincide with systemic content taught in Nursing Care II.

Outlined within the attached curriculum table **(refer to form CA2a)**, the current curriculum identifies a 5-credit hour Role Development for the LPN course. The course was a review of subject matter from the first 2 semesters of the program, as well as, providing additional content for basic mental health nursing care. The redesigned curriculum is slated to absorb the content of this course into Nursing Care I and Nursing Care II, as well as, within the Pharmacology I & II courses. Therefore, as indicated in the curriculum table, the course will no longer be required for the nursing program.

Fall semester of level II of the nursing program currently consists of students enrolling in 3 courses. Adult and Child Care I, Mental Health Nursing, and Maternity Nursing. Currently, the semester is 10 credit hours with each course requiring a specified number of clinical hours. Under the new curriculum design, the nursing students wil¹ continue building upon the previous learned content from the first 2 semesters, while expanding into more advanced nursing care. Students will enroll in Nursing Care III and Pharmacology III, consisting of 10 credit

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hours. The focus of Nursing Care III will be on advanced medical-surgical nursing and mental health care for a global population. Pharmacology III will emphasize advanced cardiac, respiratory, fluid and blood administration, as well as other critical drugs. The maternal-newborn content will be taught in the Level I portion of the program. Therefore, as defined in the curriculum table, the Maternity Nursing course will be no longer be offered during the Level II Fall semester. Current LPNs accepted into the program for the Level II Fall semester will still be required to take the course From LPN to ADN Student as indicated in the curriculum table.

For the spring semester, the curriculum table demonstrates current required enrollment in Adult and Child Care II, Client Care Nursing, and Integration Seminar. The new curriculum will still require students to enroll in Integration Seminar. The new course, Nursing Care IV, will emphasize critical care nursing for a global and diverse population, as well as the leadership and management roles of the registered nurse. As students prepare to enter practice as entry-level nurses, hands-on clinical education will be the priority emphasis for this course. The curriculum changes will align with the Kansas I Alignment 1-7.

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Seward County Community College
Nursing Program
Major Curriculum Change

CURRENT CURRICULUM			NEW CURRICULUM	
Pre-Requisite Courses:			**Pre-Requisite Courses:**	
English Comp I	3		English Comp I	3
General Psychology	3		General Psychology	3
Anatomy & Physiology	5-8		Anatomy & Physiology	5-8
Co-Requisite Courses:			**Co-Requisite Courses:**	
English Comp II/Public Speaking	3		English Comp II/Public Speaking	3
Microbiology	4-5		Microbiology	4-5
Nutrition	3		Nutrition	3
Developmental Psychology	3		Developmental Psychology	3
Level I			**Level I**	
Fall Semester			**Fall Semester**	
Fundamentals of Nursing	5		Foundations of Nursing Care I	10
Gerontological Nursing	2		Pharmacology for Nursing I	2
Spring Semester			**Spring Semester**	
Maternal Child Health	5		Nursing Care II	10
Medical Surgical Nursing	7		Pharmacology for Nursing II	
Summer Semester			**Summer Semester**	
Role Development of the Practical Nurse	5			
Total Certificate Degree Requirements	48-52	Eligible for NCLEX-PN	Total Certificate Degree Requirements	47-51
Level II			**Level II**	
Summer Semester			**Summer Semester**	
From LPN to ADN Student	1		From LPN to ADN Student	1
Fall Semester			**Fall Semester**	
Mental Health Nursing	3		Nursing Care III	9
Maternity Nursing	3		Pharmacology for Nursing III	1
Adult & Child Care I	4			
Spring Semester			**Spring Semester**	
Adult & Child Care II	4		Nursing Care IV	5
Client Care Nursing	3		Integration Seminar	3
Integration Seminar	3			
Total Certificate Degree Requirements	69-73	Eligible for NCLEX-RN	Total Certificate Degree Requirements	66-70

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SEWARD COUNTY COMMUNITY COLLEGE
NURSING PROGRAM

Proposed Nursing Curriculum for Implementation Fall 2021

TITLE OF COURSE: NR1110- Foundations of Nursing Care I

COURSE DESCRIPTION: 10 credit hours
6 credit hours of lecture and 4 credit hours of lab per week.

The Foundations of Nursing I course is designed to provide the student with a foundation of nursing practice and holistic care for the client throughout the lifespan with an emphasis on the older adult. Foundations of Nursing I is an introduction to the nursing process, assessment skills, client teaching/learning and use of techniques of interpersonal communication threaded throughout the course. The nursing process will be utilized as the framework to introduce students to the actual or potential health problems, human responses, and the nurse's role as provider of care and member within the healthcare team. Introductory information concerning nursing skills, ethical/legal aspects of nursing, and development of critical thinking will be included. The clinical component of this course requires the student to care for clients across the lifespan in both acute and gerontological care settings.

For each unit of credit, a minimum of three hours per week with one of the hours for class and two hours for studying/preparation outside of class is expected.

Pre-requisite: Admission to the Nursing Program.
Co-requisite: Pharmacology for Nursing I
Course Format: Hybrid

TITLE OF COURSE: NR1102- Pharmacology for Nursing I

COURSE DESCRIPTION: 2 credit hours
2 credit hours of lecture and 0 credit hours of lab per week.

This course will introduce the student to core concepts in pharmacology and the terms, principles, and pharmacological concepts related to providing nursing care. It will provide an overview of the major categories of pharmacological agents and emphasize safe medication administration. A review of contemporary issues in pharmacology is also included.

For each unit of credit, a minimum of three hours per week with one of the hours for class and two hours for studying/preparation outside of class is expected.

Pre-requisite: Admission to the Nursing Program.
Co-requisite: Foundations of Nursing Care I
Course Format: Seward Online

TITLE OF COURSE: NR1410- Nursing Care II

COURSE DESCRIPTION: 10 credit hours
6 credit hours of lecture and 4 credit hours of lab per week.

Ten (10) credit hours. A six (6) credit hour theory and four (4) credit hour clinical course. Builds upon the concepts, processes and competencies developed in Foundations of Nursing Care I. Through classroom and clinical experience, the student is provided with knowledge and skills for applying appropriate physical and psychosocial nursing care for adults, childbearing/childrearing families and children (from infancy through adolescence). Nursing care is delivered through the application of the nursing process, including teaching/learning, critical thinking, and concepts of communication. The nurse's role as provider of care and member within the healthcare team is emphasized throughout the course. Included are common diagnostic, therapeutic and psychosocial nursing care measures relevant to clients in medical-surgical, perioperative, maternity, and pediatric settings.

For each unit of credit, a minimum of three hours per week with one of the hours for class and two hours for studying/preparation outside of class is expected.

Pre-requisite: Pre-requisite: Admission to the Nursing program and completion of Foundations of Nursing I & Pharmacology I with a grade of 'C' or higher. Co-requisite: Pharmacology II
Course Format: Hybrid

TITLE OF COURSE: NR1411- Pharmacology for Nursing II

COURSE DESCRIPTION: 1 credit hours
1 credit hours of lecture and 0 credit hours of lab per week.

One (1) Credit hour
This course builds upon the concepts presented in Nursing Pharmacology I, including all major categories of pharmacological agents across the life span and will focus on specific therapeutic regimens that are related to the peri-operative experience, maternal/newborn and pediatric experiences.

For each unit of credit, a minimum of three hours per week with one of the hours for class and two hours for studying/preparation outside of class is expected.

Pre-requisite: Pharm I and Nursing Foundations I
Course Format: Seward Online

TITLE OF COURSE: NR2101- From L.P.N. to A.D.N. Student

COURSE DESCRIPTION: 1 credit hours
1 credit hours of lecture and 0 credit hours of lab per week.

The content of this theory course is to orient the practical nurse (LPN, LVN) who is returning to school for an associate degree in nursing to the curriculum. Content will be individualized based on student experiences and needs. Role changes from LPN to RN are discussed in relation to SCCC's nursing philosophy and conceptual framework. Emphasis will be placed on use of critical thinking, communication, medication calculations, and the nursing process as integral tools of nursing practice. The student will have an opportunity to socialize into the student role before integrating into a classroom of Level II nursing students. For each unit of credit, a minimum of three hours per week with one of the hours for class and two hours for studying/preparation outside of class is expected.

For each unit of credit, a minimum of three hours per week with one of the hours for class and two hours for studying/preparation outside of class is expected.

Pre-requisite: Graduate from LPN/LVN program.
Course Format: Hybrid

TITLE OF COURSE: NR1809- Nursing Care III

COURSE DESCRIPTION: 9 credit hours
5 credit hours of lecture and 4 credit hours of lab per week.

Nine credit hours (9). Five (5) credit hour theory and four (4) credit hour clinical course. Builds upon the concepts, processes and competencies developed in Foundations of Nursing Care I and Nursing Care II, while expanding critical thinking and developing clinical judgment and clinical reasoning. Physical and psychosocial assessment skills are expanded while applying the nursing process to provide and manage care for clients and families in the mental health and acute care settings. The role of the nurse is enhanced as both a provider and manager of care as the student learns to recognize actual/potential health and behavior patterns in adults, children (pediatrics), and families. Clinical experience will provide an opportunity to increase skills and knowledge of communication, client teaching, and function as a member of the healthcare team.

For each unit of credit, a minimum of three hours per week with one of the hours for class and two hours for studying/preparation outside of class is expected.

Pre-requisite: Prerequisite: Completion of Nursing Care II and Pharmacology II with a grade of 'C' or higher OR a Licensed Practical Nurse admitted to the second year (Level II) of the nursing program and has successfully completed the LPN/ADN course.
Co-requisite: Pharmacology III
Course Format: Hybrid

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TITLE OF COURSE: NR1801- Pharmacology for Nursing III

COURSE DESCRIPTION: 1 credit hours
1 credit hours of lecture and 0 credit hours of lab per week.

: One (1) Credit hour course
This course builds upon the concepts presented in Nursing Pharmacology I & II.   It focuses on specific therapeutic regimens related to the clients experiencing alterations in oxygenation (cardiovascular & respiratory), metabolism, motion, and mental and emotional health.

For each unit of credit, a minimum of three hours per week with one of the hours for class and two hours for studying/preparation outside of class is expected.

Pre-requisite: Successful completion of Pharmacology II and Nursing Care II with a C or above.
Course Format: Seward Online

TITLE OF COURSE: NR2705- Nursing Care IV

COURSE DESCRIPTION: 5 credit hours
2 credit hours of lecture and 3 credit hours of lab per week.

Five credit hours (5). Two (2) credit hour theory and three (3) credit hour clinical course. Builds upon the concepts, processes and competencies developed in Foundations of Nursing Care I through Nursing Care III, while expanding critical thinking, clinical judgment, and clinical reasoning. This course focuses upon nursing care for clients throughout the lifespan in acute and critical care settings. Physical and psychosocial assessment skills are expanded while applying the nursing process to provide and manage care for clients and families. The role of the nurse is enhanced as both a provider, leader, and manager of care. Clinical experience will provide an opportunity to increase skills and knowledge of communication, client teaching, nursing leadership and integrate as a member of the healthcare team.

For each unit of credit, a minimum of three hours per week with one of the hours for class and two hours for studying/preparation outside of class is expected.

Pre-requisite: Pre-requisite: Completion of Nursing Care III and Pharmacology III with a grade of 'C' or higher.
Course Format: Hybrid

TITLE OF COURSE: NR2103- Integration Seminar

COURSE DESCRIPTION: 3 credit hours
3 credit hours of lecture and 0 credit hours of lab per week.

This required theory seminar course provides an opportunity for students to integrate their nursing educational experiences, applying concepts, principles, and critical thinking to solve problems and make decisions in simulated client care situations which include communication, pharmacology, client teaching, prioritization and delegation. This course is designed to facilitate successful entry into nursing practice and is required.

For each unit of credit, a minimum of three hours per week with one of the hours for class and two hours for studying/preparation outside of class is expected.

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Pre-requisite: Admission to the ADN program or previously completed a professional nursing program.
Course Format: Hybrid

Appendix E: Course Content

Name of Course: **NR 1110-Foundations of Nursing Care I**
Sequence: **Fall-Level I**

Course Objectives:

1. Identify legal/ethical responsibilities of the practical nurse within the health care system.
2. Adhere to accepted safety standards of medication administration while providing nursing care across the life span.
3. Utilize therapeutic communication techniques to facilitate the promotion, maintenance, and restoration of health in clients with diverse cultural population.
4. Collaborate as a member of the interdisciplinary health care team by providing safe and skillful therapeutic care.
5. Recall biological, cultural, spiritual, and psycho-social principals when applying each step of the nursing process to the basic needs of the client experiencing actual or potential health problems.
6. Demonstrate competency of basic age-specific physiological, psychosocial, and emotional changes, affecting nursing care for the geriatric population.
7. Evaluate attitudinal responses to the aging process in diverse settings.

Foundations of Nursing Care: Major Content Outline

1. **Unit 1: Foundational Principles**
  a. Introduction to Nursing
  b. Vital Signs (Skills)

2. **Unit 2: Nursing Processional Skills & Concepts**
  a. Professional Communication
  b. Head-To-Toe Assessment (Skills)
  c. Person-Centered Care

3. **Unit 3: Physical & Mental Changes**
  a. Care of the Aging Adult
  b. Activity & Ambulation (Skills)
  c. Cognition

4. **Unit 4: Legal & Ethical Considerations**
  a. Quality Improvement & Informatics (Skills)
  b. Legal & Ethical Principles

5. **Unit 5: Safety**
  a. Patient Abuse & Protection
  b. Infection Control (Skills)
  c. Physical Safety

6. **Unit 6: Oxygenation & Perfusion**
  a. Oxygenation & Perfusion
  b. Oxygenation Devices (Skills)
  c. Living with a Chronic Respiratory Illness

7. **Unit 7: Skin Integrity**

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	a. Care of the Skin
	b. Impaired Skin and Wounds (Skills)
	c. Healthy Skin
8.	**Unit 8: Patient Care in the Health Care Setting**
	a. Health Care Delivery & Collaboration
	b. Orientation to the Clinical Setting (Skills)
9.	**Unit 9: Nutrition and Elimination**
	a. Intake
	b. Intake & Elimination (Skills)
	c. Elimination
10.	**Unit 10: Application of Patient Care Principles:**
	a. Practical Skills Exams
	b. Clinical Experiences
	c. Peri-Operative Nursing
11.	**Unit 11: Sensory System**
	a. Alterations to the Sensory System
	b. Clinical Experiences
	c. Metabolic Changes and the Effect on the Elderly
12.	**Unit 12: Healthy Psychosocial Responses**
	a. Family Dynamics
	b. Clinical Experiences
	c. Sexuality & Self-Concept
13.	**Unit 13: Spirituality in Nursing Care**
	a. Spirituality
	b. Clinical Experiences
	c. Loss, Grief, & Dying
	d. Cultural Sensitivity
14.	**Unit 14: Patient Comfort**
	a. Rest & Sleep
	b. Clinical Experiences
	c. Comfort & Pain
15.	**Unit 15: Physiological Responses**
	a. Introduction to Fluid & Electrolytes
	b. Clinical Experiences
	c. Final Exams & ATI Tests
16.	**Unit 16: COMPREHENSIVE FINALS**

Education 230

Course: <u>NR1102-Pharmacology for Nursing I</u>
Sequence: <u>Fall-Level I</u>

Course Objectives:

1. Apply understanding of foundational principles for medication therapy (drug categories, mechanism of action, half-life, etc.)
2. Adhere to accepted safety standards of medication administration while providing nursing care across the life span.
3. Utilize therapeutic communication techniques to facilitate the promotion, maintenance, and restoration of health in clients with diverse cultural population.
4. Collaborate as a member of the interdisciplinary health care team by providing safe and skillful therapeutic care.
5. Demonstrate competency for calculating and administering medication administration.

Pharmacology for Nursing I: Major Content Outline

1. **Unit 1: Introduction to Pharmacology**
     a. History
     b. Classification
     c. Drug Names

2. **Unit 2: Drug Approval & Regulation**
     a. Role of the FDA
     b. Controlled Substances
     c. Nursing Responsibilities

3. **Unit 3: Movement of Medication**
     a. Pharmacokinetics
     b. Pharmacodynamics
     c. Therapeutic vs. Non-Therapeutic Response

4. **Unit 4: Principles of Medication Administration**
     a. The Nursing Process in Pharmacology
     b. Nursing Responsibilities and Considerations
     c. Rights of Medication Administration
     d. Reading Medication Orders

5. **Unit 5: Medication Administration**
     a. Oral Medication Administration
     b. Topical Medication Administration
     c. Inhaled Medication Administration
     d. Afternoon Skills Check Off

6. **Unit 6: Medication Administration**
     a. Subcutaneous Medication Administration
     b. Intramuscular/Intradermal Medication Administration
     c. Insulin Administration
     d. Afternoon Skills Check Off

7. **Unit 7: Medication Administration**
     a. Dose Calculation
     b. Dimensional Analysis
     c. Math Competency Exam

8. **Unit 8: Patient Teaching about Medications**
     a. Medication Reconciliation
     b. Patient Education

c. Nursing Role & Responsibility

9. **Unit 9: Medication Administration**
    a. Administering meds through Gastric Tubes
    b. Administering Tube Feedings
    c. Nursing Responsibilities & Considerations

10. **Unit 10: Risk Reduction**
    a. Medication Errors
    b. Safety Devices & Scanning
    c. Individual Variations in Drug Response
    d. Monitoring Side Effects & Contraindications

11. **Unit 11: Medication Administration**
    a. Medications for Eyes, Ears, & Nose
    b. Administration of Ear Drops
    c. Administration of Eye Drops
    d. Administration of Nasal Sprays

12. **Unit 12: Medication Considerations Across the Lifespan**
    a. Introduction to Pediatric Doses
    b. Considerations for Older Adults
    c. Polypharmacy

13. **Unit 13: Alternative Treatments**
    a. Complementary & Alternative Therapies
    b. Role of the Nurse Providing CAM
    c. Experimental Treatments and Medications

14. **Unit 14: Medications to Promote Comfort**
    a. Introduction to Sleep Aids
    b. Opioid Pain Medications
    c. Non-Opioid Pain Medications
    d. Responsibility of the Nurse

15. **Unit 15: Introduction to Intravenous Fluids**
    a. IV Fluids: Hypotonic, Isotonic, & Hypertonic
    b. Medications used for Electrolyte Imbalance
    c. Medications used for Fluid Overload
    d. IV Insertion and Fluid Maintenance-SKILLS

16. **Unit 16: Comprehensive EXAM & ATI**

Education 232

Course: **NR 1410-Nursing Care II**
Sequence: **Spring-Level I**

Course Objectives:
1. Develop a professional image while applying the nursing process in providing wholistic nursing care for a diverse population of medical/surgical client(s) experiencing an actual or potential health problem.
2. Incorporate critical thinking and evidence-based data in gathering patient information to determine and implement priorities of care.
3. Identify nursing implications associated with the safe administration of medications by various routes.
4. Demonstrate knowledge of diseases/surgical procedures, while providing safe and caring interventions to promote, maintain, and restore health of the client(s) experiencing an actual or potential health problem.
5. Employ therapeutic communication skills and reinforce teaching, while facilitating the client/family process to promote, maintain, and restore health.
6. Implement nursing measures for end of life care for clients and their families in collaboration with the healthcare team.
7. Apply the nursing process to the pediatric client and/or the expanding family utilizing caring behaviors to promote, maintain, and/or restore health.
8. Utilize principles from support courses in nursing care of the pediatric, newborn, and maternity client.
9. Practice safety measures, environmental control, and evidence-based practice regarding the pediatric, newborn, and maternity client.
10. Identify normal growth and developmental stages from infancy to adolescence incorporating cultural diversity concepts to promote optimal growth and development of pediatric clients and families.
11. Demonstrate knowledge and skill in administering pharmacologic agents and reinforcing teaching to the pediatric, newborn, and/or maternity client experiencing human responses to actual or potential health problems.
12. Using critical thinking, apply the nursing process in providing safe and skillful nursing care to a small group of diverse clients throughout the life span experiencing actual or potential health problems.
13. Recognize the role of a practical nurse as a member of the interdisciplinary health care team while providing wholistic care to clients and their families within the community.
14. Demonstrate effective therapeutic communication skills in developing interpersonal relationships with clients and their families to aid in the promotion, maintenance, and restoration of health.
15. Safely administer medications to a small group of clients while incorporating nursing implications related to medication administration.
16. Discuss various ethical and legal issues that influence the scope of the entry level practical nurse.
17. Reinforce client teaching as a member of the health care team.

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Nursing Care II: Major Content Outline

1. **Unit 1: Introduction to Nursing Care II**
    a. Introduction to Pediatrics and Adult Care
    b. Pediatric Simulation
    c. Fetal Conception & Development

2. **Unit 2: The Laboring Patient**
    a. Fetal Heart Monitoring
    b. Care of the Laboring Patient/Labor & Delivery Simulation
    c. The Post-Partum Period

3. **Unit 3: Adult Sexual Health**
    a. Women's Health
    b. Male Reproductive System
    c. Adult Sexual Health Concerns
    d. Introduction to the Clinical Setting/OB Simulation

4. **Unit 4: The Cardiovascular System**
    a. Common Cardiac Concerns
    b. Cardiac Diseases Across the Lifespan
    c. Comprehensive Cardiac Assessment

5. **Unit 5: The Respiratory System**
    a. Oxygen Therapy & Respiratory Care
    b. Respiratory Diseases Across the Lifespan
    c. Comprehensive Respiratory Assessment

6. **Unit 6: Health Complications**
    a. High Risk Obstetrics
    b. Communicable Diseases
    c. Autoimmune Diseases

7. **Unit 7: Fluid & Electrolyte Imbalances**
    a. Fluid & Electrolyte Imbalances
    b. Intravenous Access and IV Certification Skills Labs

8. **Unit 8: Genitourinary System**
    a. Common Genitourinary Concerns
    b. Genitourinary Diseases Across the Lifespan
    c. Comprehensive Genitourinary Assessment

9. **Unit 9: Hematological System**
    a. Common Hematological Concerns
    b. Hematological Concerns Across the Lifespan
    c. The Hematological System and Pregnancy

10. **Unit 10: Neurological System**
    a. Common Neurological Concerns
    b. Neurological Concerns Across the Lifespan
    c. Comprehensive Neurological Assessment

11. **Unit 11: Endocrine System**
    a. Common Endocrine Concerns
    b. Endocrine Concerns Across the Lifespan
    c. Diabetes

12. **Unit 12: Gastrointestinal System**
    a. Common Gastrointestinal Concerns
    b. Gastrointestinal Concerns Across the Lifespan
    c. Alterations to Nutrition

13. **Unit 13: Musculoskeletal & Integumentary Systems**

Education 234

	a. Focused Musculoskeletal & Integumentary Assessments
	b. Musculoskeletal & Integumentary Concerns Across the Lifespan
	c. Alterations to the Musculoskeletal & Integumentary Systems
14. Unit 14: Role Development of the LPN	
	a. Introduction to Psychiatric Nursing Concepts
	b. Role Development of the LPN
	c. Preparing for the NCLEX-PN
15. Unit 15: COMPREHENSIVE FINALS & ATI EXAM	

Education 235

Course: **NR 1411-Pharmacology for Nursing II**
Sequence: **Spring-Level I**

Course Objectives:

1. Demonstrate the knowledge of medications in specific patient populations.
2. Recognize pertinent nursing considerations and actions for specific pharmacological agents and categories.
3. Participate in creating a teaching project focused on target populations.
4. Assess, plan, intervene, and evaluate the effects of medications on specific client populations.
5. Identify current issues that influence medication use today.

Pharmacology for Nursing Care II: Major Content Outline

1. **Unit 1: Medications for Pediatric Populations**
     a. Common Pediatric Medications
     b. Pediatric Dosing
     c. Techniques of Pediatric Medication Administration

2. **Unit 2: Medications for Labor and Delivery**
     a. Pain Management during L&D
     b. Protocols for Induction of Labor
     c. Intra-Partum Management

3. **Unit 3: Medications for Women's Health**
     a. Medications to Promote Fertility
     b. Birth control
     c. Medications for Gynecological Dysfunction
     d. Medications for Sexual Dysfunction

4. **Unit 4: Medications for the Cardiac System**
     a. Medications for Common Cardiac Concerns
     b. Cardiac Disease Management
     c. Medications for Angina and Coronary Syndromes

5. **Unit 5: Medications for the Respiratory System**
     a. Medications for Common Respiratory Concerns
     b. Medications for Infectious Respiratory Conditions
     c. Medications for Chronic Respiratory Conditions

6. **Unit 6: Medications for Infections and Immunity**
     a. Medications for Infections
     b. Medications for Inflammation and Immunity
     c. Immune and Antibody Treatments

7. **Unit 7: Medications for Fluid & Electrolyte Imbalances**
     a. Medications for Electrolyte Imbalance
     b. Common Intravenous Medications

8. **Unit 8: Medications for the Genitourinary System**
     a. Medications for Common Genitourinary Concerns
     b. Medications to Promote Elimination
     c. Medications to Promote Kidney Function

9. **Unit 9: Medications for the Hematological System**
     a. Medications for anemia
     b. Treatment for acute hematological concerns
     c. Chronic hematological condition management

Education 236

10. <u>Unit 10: Medications for the Neurological System</u>
  a. Medications for Common Neurological Conditions
  b. Treatment for Acute Neurological Conditions
  c. Management of Chronic Neurological Conditions

11. <u>Unit 11: Medications for the Endocrine System</u>
  a. Hormone Replacement Therapies
  b. Treatment of Chronic Endocrine Conditions
  c. Treatment for Diabetes

12. <u>Unit 12: Medications for the Gastrointestinal System</u>
  a. Medications for Common Gastrointestinal Conditions
  b. Treatment for Exacerbation of GI Conditions
  c. Chronic GI Condition Management

13. <u>Unit 13: Medications for Muscles, Bones, & Skin</u>
  a. Medications for Common Musculoskeletal & Integumentary Conditions
  b. Treatment for Exacerbation of Common Musculoskeletal & Integumentary Conditions
  c. Medications to Promote Skin Integrity

14. <u>Unit 14: LPN Role with Medication Administration</u>
  a. Introduction to Psychiatric Medications
  b. Psychiatric medications Side Effects and Long-Term Use
  c. Role of the LPN in Medication Administration

15. <u>Unit 15: COMPREHENSIVE FINALS & ATI EXAM</u>

Education 237

Course: **NR 1809-Nursing Care III**
Sequence: **Fall Level II**

Course Objectives:

1. Identify stressors and dynamics in the client's life which may have contributed to the development of psychological factors, considering the cultural and psychosocial background.
2. Identify the client's characteristic coping style and defense mechanisms.
3. Apply critical thinking while utilizing the nursing process to plan a therapeutic approach to the client with psychiatric health care problems.
4. Utilize general principles of communication techniques with clients, family, and members of the mental health care team in providing safe and effective care.
5. Demonstrate knowledge of psychotherapeutic medications, identifying safety concerns, side effects, toxic reactions, and therapeutic responses.
6. Implement opportunities to teach the client and client's families while providing wholistic care in the mental health care setting.
7. Implement professional standards and scope of practice within legal, ethical and regulatory framework.
8. Prioritize nursing care in relation to responses to actual or potential health problems of the client related to selected medical surgical conditions in children and adults.
9. Demonstrate acquisition of pharmacological knowledge when providing safe and effective care for the adult and pediatric client.
10. Implement professional standards, scope of practice, and the nursing process in the care of the client with acute or chronic alterations in health.
11. Implement client teaching utilizing clinical judgment to promote physical, mental, and spiritual health.
12. Incorporate therapeutic communication and critical thinking in providing nursing care across the lifespan.
13. Utilize evidenced-based practice to interrelate the impact of disease, the body's systems, growth and development, culture, mental and spiritual health, family, medications, and lab values for diverse population of clients.

Nursing Care III: Major Content Outline
1: Foundations for Psychiatric/Mental Health Nursing
A. Mental health First Aid.
B. Assessment of the Psychiatric Client.
C. Relationship Development & Therapeutic Communication
D. Ethical & legal issues in psychiatric/mental health nursing
E. Therapeutic approaches in psychiatric nursing care.
2. Responses to Altered Cardiac Function – one
A. Assessment of clients with cardiac disorders
B. Nursing care of the client with cardiac dysfunctions
C. Nursing care of the client with Myocardial Infarction
D. Critical Thinking.
3. Responses to Altered Cardiac Function – two
A. Nursing Care of the client with Hypertension and Cerebral Vascular Accident.
B. Assessment & Nursing Care of the client with Peripheral Vascular Disease and

    Education 238

Lymphatic Disease.

4. Mental Health Disorders
    A. Substance Related & Addictive Disorders.
    B. Anxiety & Personality Disorders
    C. Mood Disorders.
    D. Schizophrenia & Psychotic Disorders.

5. Responses to Altered Respiratory Function
    A. Assessment of the Client with Respiratory Disorders.
    B. Nursing Care of the Client with Infection of the Respiratory Tract.
    C. Nursing Care of the Client with Emergent Respiratory Disorders.
    D. Nursing Care of the client with Cancer & Chest Surgery.
    E. Nursing Care of the Client with Chest Trauma.
    F. Nursing Care of the client with Respiratory Failure

6. Psychiatric/Mental Health Nursing of Special Populations
    A. Issues Related to Human Sexuality & Gender Dysphoria.
    B. Care pf the Client in Crisis.
    C. Survivors of Abuse & Neglect.
    D. Children & Adolescent Disorders
    E. Eating Disorders.
    F. Delirium & Dementia

7. Responses of Altered Immune System & Hematology Disorders
    A. Assessment of the Client with Hematologic Disorders.
    B. Nursing Care of the Client with HIV Infection & Aids.
    C. Nursing Care of Clients with Organ/Tissues Transplants/Donations

8. Responses of Altered Fluid and Electrolytes.
    A. Assessment of the Client with Acute Fluid & Electrolyte imbalances
    B. Nursing Care of the Client with Fluid & Electrolyte Imbalances

9. Responses of Altered Endocrine Function
    A. Nursing Assessment of the client with Endocrine Disorders.
    B. Nursing Care of the client with Diabetic Ketoacidosis and HHNS
    C. Nursing Care of Clients with critical disorders of the Pituitary, Thyroid, Parathyroid and
       adrenal glands.

Education 239

Course: **NR 1801-Pharmacology for Nursing Care III**
Sequence: **Fall Level II**

Course Objectives:

1. Demonstrate knowledge of medications in specific patient populations.
2. Recognize pertinent nursing considerations and actions for specific pharmacological agents and categories.
3. Participate in comprehensive case studies focused on target populations.
4. Assess, plan, intervene and evaluate the effects of medications on clients experiencing alterations in oxygenation (cardiovascular & respiratory), metabolism, motion, and mental and emotional health.
5. Identify current issues that influence medication use today, including drugs of abuse and medication research.

Pharmacology for Nursing Care III: Major Content Outline
1. **Medications for the Cardiac System**   a. Advanced Cardiac Health Concerns   b. Acute Myocardial Conditions   c. Acute Cardiac Disease Management   d. Emergent Cardiac treatments
2. **Medications for the Respiratory System**   a. Advanced Respiratory Health Concerns   b. Acute Respiratory Conditions   c. Acute Respiratory Disease Management   d. Emergent Respiratory treatments
3. **Medications for the Neurovascular system**   a. Advanced Neurological health concerns   b. Emergent Neurological treatments
4. **Medications for Immunologic disorders**   a. Treatments for Human immunodeficiency virus (HIV)   b. Preventative treatments associated with HIV   c. Treatment for Acquired Immunodeficiency syndrome (AIDS)   d. Acute HIV complications
5. **Medications for Fluid & Electrolyte Imbalances**   a. Treatment of Acute Imbalances   b. Care and Maintenance of Intravenous Access; Central/Peripheral   c. Emergent Fluid & Electrolyte treatments
6. **Medications for the Genitourinary/Renal System**   a. Promotion of Fluid Elimination   b. Management of acute conditions   c. Dialysis   d. Emergent Genitourinary/renal treatments
7. **Medications for the Gastrointestinal System**   a. Acute Gastrointestinal Conditions   b. Acute GI Condition Management   c. Emergent Gastrointestinal treatments
8. **Medications for Hematological Conditions**   a. Treatment for Acute Hematological Conditions   b. Emergent Hematological Condition Management

Education 240

9. **Medications for the Endocrine System**
   a. Treatment for Acute Endocrine Conditions
   b. Management of Acute Complications

Course: **NR 2705-Nursing Care IV**
Sequence: **Spring Level II**

Course Objectives:

1: Read with comprehension, be critical of what they read, and apply knowledge gained to real life
2: Communicate ideas clearly and proficiently in writing, appropriately adjusting content and arrangement for varying audiences, purposes, and situations.
3: Communicate their ideas clearly and proficiently in speaking, appropriately adjusting content and arrangement for varying audiences, purposes, and situations.
4: Demonstrate mathematical skills using a variety of techniques and technologies.
5: Demonstrate the ability to think critically by gathering facts, generating insights, analyzing data, and evaluating information
6: Understand each other, moving beyond simple acceptance to embracing and celebrating the rich dimensions of diversity by working as a team to learn, engaging with community, exhibiting cultural awareness, and creating equity.
7: Exhibit workplace skills that include respect for others, teamwork competence, attendance/punctuality, decision making, conflict resolution, truthfulness/honesty, positive attitude, judgment, and responsibility.

Nursing Care IV: Major Content Outline

1. **Human responses to actual or potential health problems related to the Neurological System of the adult and pediatric client**
    a. Assessment
    b. Common
    c. Therapeutic measures
    d. Emergency selected disorders

2. **Leadership/Management**
    a. Preceptorship
    b. Teamwork
    c. Delegation/Supervision
    d. Communication
    e. Evaluation/Peer Review
    f. Nurse/Physician Relationships

3. **Human responses to actual or potential health problems related to the Musculoskeletal System of the adult and pediatric client**
    a. Assessment
    b. Selected disorders
    c. Emergency nursing

4. **Human responses to actual or potential health problems related to the Musculoskeletal System of the adult and pediatric client**
    a. Assessment
    b. Selected disorders
    c. Emergency nursing

5. **Time Management**
    a. Prioritization
    b. Answering prioritization/delegation questions
    c. Staffing/scheduling
    d. Nurse patient/ratios

Education 242

	e. Overtime
	f. Floating
6.	**Human responses to actual or potential health problems related to the management of the adult and pediatric client with organ/tissue transplants.** a. Transplantation criteria for recipient and donor b. Immunology and transplantation c. Advance directives d. Assessment, early detection, and prevention of post-transplant complications
7.	**Human responses to actual or potential health problems related to the Otic and Ophthalmic Disorders of the adult and pediatric client** a. Assessment b. Emergency Specified disorders c. Critical thinking applications
8.	**Quality/Performance Improvement** a. Risk Management b. Change c. Workplace violence d. Conflict resolution e. Cost Containment
9.	**Human responses to actual or potential health problems related to Cancer of the adult and pediatric client** a. Basic concepts b. Detection & Screening c. Treatment modalities d. Emergency, Selected disorders
10.	**Human responses to actual or potential health problems related to the Gastrointestinal System of the adult and pediatric client** a. Assessment b. Emergency Gastrointestinal disorders. c. Critical thinking applications
11.	**Legal /Ethical Issues** a. Evidenced Based Practice b. Chemical Impairment c. Patient Advocacy/Safety d. Whistleblowing e. Workplace safety f. Professional Liability Insurance g. NCLEX
12.	**Human responses to actual or potential health problems related to the Hepatic and Biliary System of the adult and pediatric client** a. Assessment b. Emergency Specified Disorders c. Critical thinking applications
13.	**Human responses to actual or potential health problems related to the Integumentary System of the adult and pediatric client Dermatologic Disorders:** a. Assessment b. Treatment modalities c. Emergency Selected disorders d. Burns: e. Initial treatment f. Medical/surgical interventions: g. Acute Care

Education 243

	h. Rehabilitation
14.	**Role of the Professional Nurse**
	a. Work Ethic
	b. Commitment to patient, employer
	c. Boundaries
	d. Job Search
	e. Resume
	f. Interviews
	g. Reality Shock
	h. Burnout
	i. Retention

SCCC Nursing Program
Clinical Facilities by Semester

Level I-Fall Semester
1. Southwest Medical Center, Liberal KS
   a. Medical Surgical 3 & 4
   b. Skilled Nursing Unit
2. Lone Tree Retirement Center, Meade, KS
   a. Gerontological Care
3. Pioneer Manor, Hugoton, KS
   a. Gerontological Care
   b. Alzheimer's & Dementia Care
4. Wheatridge Manor, Liberal, KS
   a. Gerontological Care
5. Bethel Home, Montezuma, KS
   a. Assisted Living
   b. Cultural Care

Level I-Spring Semester
1. Southwest Medical Center, Liberal, KS
   a. Medical Surgical 3 & 4
   b. Skilled Nursing Unit
   c. Labor and Delivery Unit
   d. Post-Partum
   e. Operating Room & Post Anesthesia Care Unit
   f. Wound Care Clinic
2. Women's Health Center, Liberal, KS
   a. Women's Health Clinic
3. OBGYN Associates of Southwest Kansas, Liberal, KS
   a. Women's Health Clinic
4. 15th Street Clinic, Liberal, KS
   a. Family Practice
   b. Pediatrics
5. Sublette Clinic, Sublette, KS
   a. Family Practice
   b. Pediatrics
6. Seward County Health Department, Liberal, KS
   a. Women's Health
   b. Sexual Health and Family Planning
   c. Women, Infant's Children (WIC)
   d. Immunization Clinics
7. Mays Home Health Care, Liberal, KS
   a. Home Health
   b. Hospice

Education 245

8. St. Catherine's Hospice, Liberal, KS
    a. Hospice
    b. Spiritual Care
9. Southwest Family Medicine
    a. Family Practice
    b. Pediatrics

Level II-Fall Semester
1. Southwest medical Center, Liberal KS
    a. Medical surgical 3 & 4
    b. Intensive care
    c. Skilled nursing
    d. Imaging Department
    e. OR/PACU/Holding
    f. SWMC clinics (Surgical/Ortho, Family practice, Urology
    g. Informatics
    h. ER
2. Meade District Hospital, Meade Ks
    a. General nursing unit
    b. Clinic (Meade site)
    c. Holding/OR/PACU
3. Prairie View mental health facility, Newton Ks
    a. Facility Tour
    b. Skills adventure course (team building, Stress coping)
4. Southwest Guidance Center, Liberal Ks
    a. Mental Health First Aide course
5. Steppingstone shelter, Liberal Ks
    a. Community project
6. Larned State Hospital, Larned Ks
    a. Adult Treatment Center (South, East, West)
    b. Secure Forensic Evaluation and Treatment Center (Isaac Ray, East 1,2,3)
    c. Sexual Predator Unit (Dillon Building)

Education 246

Level II-Spring Semester
1. Southwest medical Center, Liberal KS
    a. Medical surgical 3 & 4
    b. Intensive care
    c. Skilled nursing
    d. OR/PACU/Holding
    e. ER
    f. SWMC clinics (Surgical/Ortho, Family practice, Urology
2. Western Plains Medical Complex
    a. Emergency room
    b. Intensive Care
    c. Holding/OR/PACU
    d. OB
    e. Medical/Surgical Units
3. St. Catherine's, Garden City Ks
    a. Emergency room
    b. Intensive Care
    c. Holding/OR/PACU
    d. OB
    e. Medical/Surgical Units
    f. Pediatrics
    g. Mental Health
4. Via Christi, Saint Francis, Wichita Ks
    a. Critical Intensive Care Unit
    b. Burn Intensive Care Unit
    c. Cardiothoracic Intensive Care Unit
    d. ER
    e. Medical Intensive Care Unit
    f. Neuro Intensive Care Unit
    g. Surgical Intensive Care Unit
5. Via Christi, Saint Joseph
    a. Critical Intensive care Unit
    b. Medical Intensive care Unit
    c. Psychiatric immediate Care Unit
    d. ER
6. The Lords Diner, Wichita Ks
    a. Meal services (Professionalism project)

Seward County Community College
Course Evaluation Survey Fall 2020

Level: Nursing

Response Rate: 152/191 (79.58 %)

1 - I received the course syllabus and course policies on the first day of class.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Yes	(1)	152	100.00%		
No	(2)	0	0.00%		

Response Rate
152/191 (79.58%)

2 - The course outcomes are clearly stated and defines what is expected for the class.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Yes	(1)	152	100.00%		
No	(2)	0	0.00%		

Response Rate
152/191 (79.58%)

3 - I felt safe attending class on campus due to the appropriate safety protocols put in place due to COVID.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	314	69.01%		4.63
Agree	(4)	115	25.27%		
Neutral	(3)	14	3.08%		
Disagree	(2)	8	1.76%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	4	0.88%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.63	0.63	5.00

4 - I actively participated in student engagement activities to increase my level of knowledge/understanding in this course.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	320	70.33%		4.67
Agree	(4)	124	27.25%		
Neutral	(3)	10	2.20%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	1	0.22%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.67	0.54	5.00

5 - I have access to the required technology devices to successfully complete this course. Example: laptop, webcam, printer.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	307	67.47%		4.63
Agree	(4)	133	29.23%		
Neutral	(3)	10	2.20%		
Disagree	(2)	4	0.88%		
Strongly Disagree	(1)	1	0.22%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.63	0.60	5.00

Seward County Community College
Course Evaluation Survey Fall 2020

Level: Nursing

Response Rate: 152/191 (79.58 %)

6 - I have access to a reliable internet service provider to successfully complete this course.

Response Option	Weight	Frequency	Percent
Strongly Agree	(5)	307	67.47%
Agree	(4)	132	29.01%
Neutral	(3)	12	2.64%
Disagree	(2)	4	0.88%
Strongly Disagree	(1)	0	0.00%

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.63	0.58	5.00

7 - In this course, I had a positive attitude toward techniques used for instruction due to COVID.

Response Option	Weight	Frequency	Percent
Strongly Agree	(5)	309	67.91%
Agree	(4)	136	29.89%
Neutral	(3)	9	1.98%
Disagree	(2)	1	0.22%
Strongly Disagree	(1)	0	0.00%

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.65	0.53	5.00

8 - The instructor of this course, Instructor(s), is accessible to students outside of class (email, office visits, phone, etc.). -

Response Option	Weight	Frequency	Percent
Strongly Agree	(5)	306	67.25%
Agree	(4)	123	27.03%
Neutral	(3)	10	2.20%
Disagree	(2)	5	1.10%
Strongly Disagree	(1)	0	0.00%
N/A	(0)	11	2.42%

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.64	0.59	5.00

9 - The instructor of this course, Instructor(s), provides opportunities for students to apply the information presented in this class to real life situations. -

Response Option	Weight	Frequency	Percent
Strongly Agree	(5)	303	66.59%
Agree	(4)	131	28.79%
Neutral	(3)	7	1.54%
Disagree	(2)	0	0.00%
Strongly Disagree	(1)	0	0.00%
N/A	(0)	14	3.08%

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.67	0.50	5.00

Education 249

Level:	Nursing
Response Rate:	152/191 (79.58 %)

10 - The instructor of this course, Instructor(s), is prepared for class, follows the course outline, and is readily available to clarify difficult concepts. -

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	303	66.59%		4.67
Agree	(4)	130	28.57%		
Neutral	(3)	7	1.54%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	15	3.30%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.67	0.50	5.00

11 - The instructor of this course, Instructor(s), starts class on time and holds class for the full amount of time. -

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	308	67.69%		4.68
Agree	(4)	122	26.81%		
Neutral	(3)	8	1.76%		
Disagree	(2)	1	0.22%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	16	3.52%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.68	0.52	5.00

12 - The instructor of this course, Instructor(s), interacts with students in a positive and encouraging manner. -

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	307	67.47%		4.69
Agree	(4)	128	28.13%		
Neutral	(3)	5	1.10%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	15	3.30%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.69	0.49	5.00

13 - The instructor of this course, Instructor(s), provides opportunities for decision making (critical thinking and problem solving). -

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	302	66.37%		4.67
Agree	(4)	131	28.79%		
Neutral	(3)	6	1.32%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	16	3.52%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.67	0.50	5.00

Education 250

Seward County Community College
Course Evaluation Survey Fall 2020

Level: Nursing

Response Rate: 152/191 (79.58 %)

14 - The instructor of this course, Instructor(s), has appropriate methods in place to determine that grades are fair and justifiable. -

Response Option	Weight	Frequency	Percent
Strongly Agree	(5)	302	66.37%
Agree	(4)	130	28.57%
Neutral	(3)	6	1.32%
Disagree	(2)	0	0.00%
Strongly Disagree	(1)	1	0.22%
N/A	(0)	16	3.52%

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.67	0.53	5.00

15 - The instructor of this class, Instructor(s), encourages students to use multiple resources (e.g. textbooks, data banks, library resources, outside experts) to improve understanding. -

Response Option	Weight	Frequency	Percent
Strongly Agree	(5)	307	67.47%
Agree	(4)	126	27.69%
Neutral	(3)	5	1.10%
Disagree	(2)	1	0.22%
Strongly Disagree	(1)	0	0.00%
N/A	(0)	16	3.52%

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.68	0.50	5.00

16 - The instructor of this course, Instructor(s), provides timely and frequent feedback on tests, reports, projects, etc. to help students improve. -

Response Option	Weight	Frequency	Percent
Strongly Agree	(5)	295	64.84%
Agree	(4)	123	27.03%
Neutral	(3)	14	3.08%
Disagree	(2)	7	1.54%
Strongly Disagree	(1)	0	0.00%
N/A	(0)	16	3.52%

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.61	0.63	5.00

17 - The instructor of this course, Instructor(s), uses educational technology (e.g. internet, e-mail, computer exercises, multi-media presentations) to promote learning. -

Response Option	Weight	Frequency	Percent
Strongly Agree	(5)	302	66.37%
Agree	(4)	131	28.79%
Neutral	(3)	7	1.54%
Disagree	(2)	0	0.00%
Strongly Disagree	(1)	0	0.00%
N/A	(0)	15	3.30%

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.67	0.50	5.00

Education 251

Level: Nursing
Response Rate: 152/191 (79.58 %)

18 - Resources utilized in the course contribute to my learning.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	103	67.76%		4.64
Agree	(4)	46	30.26%		
Neutral	(3)	2	1.32%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	1	0.66%		
N/A	(0)	0	0.00%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.64	0.58	5.00

19 - Course outcomes are being achieved.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	103	67.76%		4.66
Agree	(4)	47	30.92%		
Neutral	(3)	2	1.32%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	0	0.00%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.66	0.50	5.00

20 - Information presented during lectures contribute to my understanding of the subject.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	103	67.76%		4.66
Agree	(4)	46	30.26%		
Neutral	(3)	3	1.97%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	0	0.00%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.66	0.52	5.00

21 - Examinations are challenging and cover material emphasized in class and/or out of class assignments.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	296	65.05%		4.62
Agree	(4)	126	27.69%		
Neutral	(3)	14	3.08%		
Disagree	(2)	5	1.10%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	14	3.08%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.62	0.61	5.00

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Seward County Community College
Course Evaluation Survey Fall 2020

Level: Nursing

Response Rate: 152/191 (79.58 %)

22 - Exams accurately reflect outcomes.

Response Option	Weight	Frequency	Percent
Strongly Agree	(5)	98	64.47%
Agree	(4)	48	31.58%
Neutral	(3)	5	3.29%
Disagree	(2)	1	0.66%
Strongly Disagree	(1)	0	0.00%
N/A	(0)	0	0.00%

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.60	0.59	5.00

23 - Exams are learning experiences as well as grading tools.

Response Option	Weight	Frequency	Percent
Strongly Agree	(5)	100	65.79%
Agree	(4)	46	30.26%
Neutral	(3)	4	2.63%
Disagree	(2)	2	1.32%
Strongly Disagree	(1)	0	0.00%
N/A	(0)	0	0.00%

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.61	0.61	5.00

24 - Exams concentrate on topics in the subject matter.

Response Option	Weight	Frequency	Percent
Strongly Agree	(5)	95	62.50%
Agree	(4)	48	31.58%
Neutral	(3)	7	4.61%
Disagree	(2)	2	1.32%
Strongly Disagree	(1)	0	0.00%
N/A	(0)	0	0.00%

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.55	0.65	5.00

25 - Laboratory exercises and assignments, if applicable, meet course outcomes and contribute to my understanding of difficult concepts.

Response Option	Weight	Frequency	Percent
Strongly Agree	(5)	103	67.76%
Agree	(4)	46	30.26%
Neutral	(3)	3	1.97%
Disagree	(2)	0	0.00%
Strongly Disagree	(1)	0	0.00%
N/A	(0)	0	0.00%

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.66	0.52	5.00

Education 253

Seward County Community College
Course Evaluation Survey Fall 2020

Level: Nursing

Response Rate: 152/191 (79.58 %)

26 - The laboratory is available for independent study and remediation of skills.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	98	64.47%		4.63
Agree	(4)	51	33.55%		
Neutral	(3)	3	1.97%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	0	0.00%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.63	0.53	5.00

27 - Select the appropriate option concerning the physical resources available for this course.

The Classroom size is adequate.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	111	73.03%		4.65
Agree	(4)	33	21.71%		
Neutral	(3)	4	2.63%		
Disagree	(2)	4	2.63%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	0	0.00%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.65	0.66	5.00

27 - Select the appropriate option concerning the physical resources available for this course.

The Classroom environment, i.e. temperature, lights is comfortable.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	112	73.68%		4.70
Agree	(4)	34	22.37%		
Neutral	(3)	6	3.95%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	0	0.00%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.70	0.54	5.00

27 - Select the appropriate option concerning the physical resources available for this course.

Student Desk/chair is comfortable

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	107	70.39%		4.58
Agree	(4)	32	21.05%		
Neutral	(3)	9	5.92%		
Disagree	(2)	2	1.32%		
Strongly Disagree	(1)	2	1.32%		
N/A	(0)	0	0.00%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.58	0.78	5.00

Seward County Community College
Course Evaluation Survey Fall 2020

Level: Nursing

Response Rate: 152/191 (79.58 %)

27 - Select the appropriate option concerning the physical resources available for this course.

Laboratory work space is appropriate for the assigned lab activities.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	116	76.32%		4.73
Agree	(4)	31	20.39%		
Neutral	(3)	5	3.29%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	0	0.00%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.73	0.51	5.00

27 - Select the appropriate option concerning the physical resources available for this course.

Laboratory equipment and supplies are in working order and sufficient for the number of students and activities in lab.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	113	74.34%		4.71
Agree	(4)	34	22.37%		
Neutral	(3)	5	3.29%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	0	0.00%		
N/A	(0)	0	0.00%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.71	0.52	5.00

28 - Overall, this course is an excellent course.

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	105	69.08%		4.67
Agree	(4)	44	28.95%		
Neutral	(3)	3	1.97%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	0	0.00%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.67	0.51	5.00

29 - Overall, this instructor, Instructor(s), is an excellent instructor. -

Response Option	Weight	Frequency	Percent	Percent Responses	Means
Strongly Agree	(5)	338	74.29%		4.71
Agree	(4)	102	22.42%		
Neutral	(3)	15	3.30%		
Disagree	(2)	0	0.00%		
Strongly Disagree	(1)	0	0.00%		

Response Rate	Mean	STD	Median
152/191 (79.58%)	4.71	0.52	5.00

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National Council Licensure Examination for Registered Nurses
Program Summary - All First Time Registered Nurse Candidates Educated in Kansas
through December 31, 2020

Program	Program Type	2016 % Pass	2017 % Pass	2018 % Pass	2019 % Pass	2020 % Pass
Baker University	BSN	96.92	93.15	97.14	97.40	92.22
Barton County Community College	ADN	44.44	88.89	80.77	92.31	**100.00**
Benedictine College	BSN	68.18	100.00	88.00	100.00	93.33
Bethel College	BSN	84.44	80.00	85.71	89.66	86.36
Brown Mackie College – Kansas City	ADN	38.10	43.33	closed	closed	closed
Brown Mackie College - Salina	ADN	46.67	37.04	closed	100.00	closed
Butler Community College	ADN	89.57	88.98	92.66	87.30	87.40
Cloud County Community College	ADN	82.76	83.87	100.00	82.14	87.10
Coffeyville Community College	ADN	72.73	91.67	100.00	90.00	85.00
Colby Community College	ADN	72.97	62.16	72.73	83.33	77.78
Dodge City Community College	ADN	88.89	95.83	88.89	92.31	93.33
Donnelly College	ADN			New	60.00	77.78
Emporia State University	BSN	93.94	96.15	89.13	97.44	93.02
Fort Hays State University	BSN	95.00	89.13	83.72	82.35	89.19
Fort Scott Community College	ADN	88.00	78.95	100.00	70.00	77.78
Garden City Community College	ADN	79.19	87.50	91.30	74.19	84.21
Hesston College	ADN	86.00	86.49	closed	closed	closed
Hesston College	BSN	no data	88.24	80.85	74.36	90.91
Highland Comm College Technical Center	ADN	97.74	100.00	100.00	66.67	75.00
Hutchinson Community College	ADN	70.42	85.33	88.75	83.08	85.00
Johnson County Community College	ADN	98.41	78.57	84.38	98.00	94.23
Kansas City Kansas Community College	ADN	73.27	73.75	77.50	79.79	85.07
Kansas Wesleyan University	BSN	57.14	0.00	75.00	100.00	**100.00**
Labette Community College	ADN	82.35	92.59	100.00	100.00	89.66
Manhattan Area Technical College	ADN	87.50	100.00	100.00	90.24	93.33
Mid America Nazarene University	BSN	87.83	92.62	95.68	93.33	88.00
National American University (OP)	BSN	69.57	75.00	73.33	81.48	Closed
National American University (Wichita)	BSN	66.67	75.00	71.43	2019 grads combined w/ OP campus	Closed Nov. 2019
Neosho County Community College	ADN	77.88	77.78	74.80	68.00	82.83
Newman University	BSN	94.12	100.00	86.00	86.84	78.38
North Central Kansas Technical College - Hays	ADN	88.46	79.31	84.62	96.43	81.48
Pittsburg State University	BSN	89.19	94.29	98.68	91.03	92.94
Pratt Community College	ADN	31.25	83.33	no data	70.83	64.71
Rasmussen College	ADN	81.25	90.63	100.00	76.83	73.77
Rasmussen College	BSN		New	no data	93.75	77.78
Salina Area Technical College	ADN				New	84.62

Program		% Pass	% Pass	% Pass	% Pass	% Pass
Seward County Community College	ADN	88.89	73.33	73.33	74.07	52.63
University of Kansas Medical Center	BSN	87.76	93.14	97.00	83.74	88.03
University of St. Mary	BSN	83.05	91.80	95.65	92.98	96.67
Washburn University	BSN	80.74	85.38	90.70	89.78	86.89
Wichita State University	BSN	85.50	86.73	94.29	87.77	86.43
Kansas Pass Rate (RN)	-----------	78.56	82.10	**88.90**	86.6^	86.18^
National Pass Rate (U.S. Educated)	-----------	**84.57**	**87.11**	88.29	**88.18**	**86.57****

* Passing Standard increased April 2020 (last increase was 2013)

Pass Rates obtained from NCS Pearson, Inc. & National Council of State Boards of Nursing 1/6/2021

^ADN pass rate - 83.16; BSN pass rate - 88.79   **ADN pass rate - 82.80; BSN pass rate - 90.29

Denotes above Nat'l Average   Programs at 100%

National Council Licensure Examination for Practical Nurses
Program Summary - All First Time Practical Nurse Candidates Educated in Kansas
through December 31, 2020

	Program Type	2016	2017	2018	2019	2020
Barton County Community College	PN	87.50	100.00	100.00	100.00	100.00
Brown Mackie College – Kansas City (closed)	PN	58.70	30.77	66.67	closed	closed
Brown Mackie College - Salina (closed)	PN	64.15	58.33	50.00	100.00	closed
Butler Community College	PN	100.00	100.00	95.38	100.00	95.83
Coffeyville Community College	PN	80.00	100.00	100.00	100.00	92.86
Colby Community College	PN	79.49	81.82	90.91	96.43	89.19
Dodge City Community College	PN	100.00	100.00	no data	no data	100.00
Donnelly College	PN	75.00	52.00	75.00	87.50	77.50
Flint Hills Area Technical College	PN	88.37	78.95	70.27	86.11	84.62
Garden City Community College	PN	95.65	100.00	100.00	96.67	100.00
Highland Community College Technical Center	PN	97.30	100.00	88.89	94.12	94.12
Hutchinson Community College	PN	77.27	84.48	82.26	90.91	83.67
Johnson County Community College	PN	89.58	93.88	97.62	95.83	88.89
Kansas City Kansas Community College	PN	84.31	92.00	90.38	91.49	82.46
Labette Community College	PN	100.00	100.00	100.00	100.00	78.95
Manhattan Area Technical College	PN	94.74	87.50	100.00	100.00	86.21
Neosho County Community College	PN	94.81	92.86	87.21	93.42	94.12
North Central Kansas Technical College –	PN	96.43	100.00	100.00	100.00	93.33
North Central Kansas Technical College -	PN	100.00	96.88	94.44	92.31	96.97
Pratt Community College	PN	83.33	90.91	85.00	90.00	90.91
Salina Area Technical College	PN			New	80.00	74.07
Seward County Community College	PN	95.83	100.00	86.96	100.00	92.86
Washburn Institute of Technology	PN	90.70	94.03	98.28	87.88	93.75
WATC / WSU Tech	PN	83.05	78.69	83.50	80.67	82.26
Kansas Pass Rate (PN)		**87.66**	**87.53**	**88.31**	**93.79**	**87.89**
National Pass Rate (U.S. Educated)		83.73	83.85	85.91	86.18	83.08

Passing Standard Increased April 2014; no change 2017

Passing rates obtained from NCS Pearson, Inc. & National Council of State Boards of Nursing 1/6/2021

Denotes above Nat'l Average   Programs at 100%

Agency 60
Kansas State Board of Nursing
Article 1.—Approval of Schools of Nursing

60-1-103. Discontinuing a school of nursing. Each school terminating its program shall submit for approval to the board the school's plan for its currently enrolled students and the school's plan for disposition of records. (Authorized by K.S.A. 65-1129; implementing K.S.A. 65-1119; effective Jan. 1, 1966; amended, E-74-29, July 1, 1974; amended May 1, 1975; amended April 26, 1993; amended Nov. 7, 2008.)

Agency 60
Kansas State Board of Nursing
Article 17.—Advanced Nursing Education Program

60-17-110. Discontinuing an advanced practice registered nurse program. Each school terminating its program shall submit, for board approval, the school's plan for its currently enrolled students and for disposition of its records. (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended April 20, 2007; amended May 18, 2012.)

60-17-111. Requirements for advanced practice registered nurse refresher course. (a) (1) Each refresher course that prepares advanced practice registered nurses (APRNs) who have not been actively engaged in advanced nursing practice for more than five years shall be accredited by the board.

(2) If a formal refresher course is not available, an individualized course may be designed for a nurse. Each individualized course shall be accredited by the education specialist.

(b) Each refresher course student shall meet both of the following conditions:

(1) Be licensed currently as a Kansas registered professional nurse; and

(2) have been licensed as an advanced practice registered nurse in Kansas or another state or have completed the education required to be licensed as an advanced practice registered nurse in Kansas.

(c) Continuing nursing education contact hours may be awarded for completion of APRN refresher courses. A contact hour shall equal a 50-minute hour of instruction.

(d) The objectives and outcomes of the refresher course shall be stated in behavioral terms and shall describe the expected competencies of the applicant.

(e) Each instructor for an APRN refresher course shall be licensed as an APRN and shall show evidence of recent professional education and competency in teaching.

(f) Each provider that has been accredited by the board to offer an APRN refresher course shall provide the following classroom and clinical experiences, based on the length of time that the student has not been actively engaged in advanced nursing practice:

(1) For students who have not engaged in advanced nursing practice for more than five years, but less than or equal to 10 years, 150 didactic hours and 350 clinical hours; and

(2) for students who have not engaged in advanced nursing practice for more than 10 years, 200 didactic hours and 500 clinical hours.

(g) The content, methods of instruction, and learning experiences shall be consistent with the objectives and outcomes of the course.

(h) Each refresher course for the roles of nurse practitioner, clinical nurse specialist, and nurse-midwife shall contain the following content:

(1) Didactic:

(A) Role alignment related to recent changes in the area of advanced nursing practice;

(B) the ethical and legal implications of advanced nursing practice;

(C) the health care delivery system;

(D) diagnostic procedures for the area of specialization; and

(E) prescribing medications for the area of specialization; and

(2) clinical:

(A) Conducting diagnostic procedures for the area of specialization;

(B) prescribing medications for the area of specialization;

(C) evaluating the physical and psychosocial health status of a client;

(D) obtaining a comprehensive health history;

(E) conducting physical examinations using basic examination techniques, diagnostic instruments, and laboratory procedures;

(F) planning, implementing, and evaluating care;

(G) consulting with clients and members of the health care team;

(H) managing the medical plan of care prescribed based on protocols or guidelines;

(I) initiating and maintaining records, documents, and other reports;

(J) developing teaching plans; and

(K) counseling individuals, families, and groups on the following issues:

(i) Health;

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(ii) illness; and

(iii) the promotion of health maintenance.

(i) Each student in nurse-midwife refresher training shall also have clinical hours in the management of the expanding family throughout pregnancy, labor, delivery, postdelivery care, and gynecological care. .

(j) The provider of each refresher course shall provide official evidence of completion to each individual who successfully completes the refresher course. (Authorized by K.S.A. 65-1129 and K.S.A. 2010 Supp. 74-1106; implementing K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44, and K.S.A. 65-1133, as amended by L. 2011, ch. 114, sec. 47; effective March 31, 2000; amended July 29, 2005; amended May 18, 2012.)

Agency 60
Kansas State Board of Nursing

Article 5.—Approval of Educational Programs for Mental Health Technicians

60-5-103. Discontinuing a program for mental health technicians. A program terminating its course shall submit for approval to the board the plan for students currently enrolled and the disposition of records. (Authorized by K.S.A. 65-4201 *et seq.*, K.S.A. 1974 Supp. 74-1106 *et seq.*; effective May 1, 1975.)

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65-4206.   Approved courses of mental health technology; standards; qualifications; providers of continuing education offerings. (a) An approved course of mental health technology is one which has been approved by the board as meeting the standards of this act and the rules and regulations of the board. The course, at a minimum, shall be of six months duration in which the institution shall provide for 18 weeks of schooling, one-half devoted to classroom instruction and one-half to clinical experience and shall include the study of:

(1)   Basic nursing concepts;

(2)   psychiatric therapeutic treatment; and

(3)   human growth, development and behavioral sciences.

(b)   An institution which intends to offer a course on mental health technology shall apply to the board for approval and submit evidence that the institution is prepared to and will maintain the standards and curriculum as prescribed by this act and the rules and regulations of the board. The application shall be made in writing upon a form prescribed by the board with the application fee fixed by the board by rules and regulations.

(c)   The approval of a school of mental health technology shall expire five years after the granting of such approval by the board. An institution desiring to continue to conduct a course of mental health technology shall apply to the board for the renewal of approval and submit satisfactory proof that the institution will maintain the standards and the basic mental health technology curriculum as prescribed by this act and the rules and regulations of the board. Applications for renewal of approval shall be made in writing on forms supplied by the board. Each institution offering a course of mental health technology shall submit annually to the board an annual fee fixed by the board by rules and regulations to maintain approval status.

(d)   Providers of continuing education. (1) To qualify as an approved provider of continuing education offerings, persons, organizations or institutions proposing to provide such continuing education offerings shall apply to the board for approval and submit evidence that the applicant is prepared to meet the standards and requirements established by the rules and regulations of the board for such continuing education offerings. Initial applications shall be made in writing on forms supplied by the board and shall be submitted to the board together with the application fee fixed by the board.

(2)   A long-term provider means a person, organization or institution that is responsible for the development, administration and evaluation of continuing education programs and offerings. Qualification as a long-term approved provider of continuing education offerings shall expire five years after the granting of such approval by the board. An approved long-term provider of continuing education offerings shall submit annually to the board the annual fee established by rules and regulations, along with an annual report for the previous fiscal year. Applications for renewal as an approved long-term provider of continuing education offerings shall be made in writing on forms supplied by the board.

(3)   Qualification as an approved provider of a single continuing education offering, which may be offered once or multiple times, shall expire two years

after the granting of such approval by the board. Approved single continuing education providers shall not be subject to an annual fee or annual report.

(4) In accordance with rules and regulations adopted by the board, the board may approve individual educational offerings for continuing education which shall not be subject to approval under other subsections of this section.

(5) The board shall accept offerings as approved continuing education presented by: Colleges that are approved by a state or the national department of education and providers approved by other state boards of nursing, the national league for nursing, the national federation of licensed practical nurses, the American nurses credentialing center or other such national organizations as listed in rules and regulations adopted by the board.

History: L. 1973, ch. 308, § 6; L. 1992, ch. 151, § 5; L. 1997, ch. 146, § 4; May 8.

65-4207. List of approved courses; survey of proposed course and institution; resurvey; notice to deficient institution; removal from list; records. (a) The board shall prepare and maintain a master list of approved courses on mental health technology: (1) Which qualify graduates thereof, if they have the other necessary qualifications provided for in this act, to be eligible to apply for a license as a mental health technician; and (2) which meet the requirements of the board for qualification under a continuing education program for licensed mental health technicians.

(b) A survey of the proposed course and of the institution applying for accreditation of the course on mental health technology shall be made by an authorized employee of the board or members of the board who shall submit a written report concerning such study. The board may contract with investigative agencies, commissions or consultants to assist the board in obtaining information about such course and institution. In entering such contracts the authority to approve such courses shall remain solely with the board.

(c) If, in the opinion of the board, the requirements as prescribed in its rules and regulations for approved courses of mental health technology are met, it shall approve the application and course and post evidence of such approval upon the master list. From time to time, as deemed necessary, the board shall cause to be made a resurvey of approved courses and shall have written reports of such resurvey submitted. If the board determines that any previously approved course is not maintaining the content required by this act and by the rules and regulations prescribed, a notice thereof shall be given immediately to the institution specifying the nature and extent of the deficiency. A failure to correct such condition or conditions to the satisfaction of the board within one year following the notice shall cause the course to be removed from the master list of approved courses on mental health technology. Personnel conducting approved courses shall maintain accurate and current records showing in full the theoretical and practical instruction given to all students.

History: L. 1973, ch. 308, § 7; L. 1983, ch. 207, § 9; L. 1988, ch. 243, § 11; July 1.

Prelicensure Annual Report Core Data

Introduction

In collaboration with your board of nursing (BON), NCSBN is assisting with collecting their Annual Report data this year. The survey was designed based on the core data results of a large, mixed-methods study of nursing program quality indicators and warning signs. Your BON may include some additional questions at the end of the survey.

Your BON will receive descriptive results of the nursing programs in their state/jurisdiction, as well as a report of the raw data of each program. Annually, they will receive an aggregate report of all participating BONs so that they can compare their programs to the aggregate.

We are considering this the pilot year for collecting the BONs' Annual Report data, and we'll be interested in any suggestions you might have as we go forward in future years.

Directions

Please complete the following survey for each NCLEX code that you have. Since these are core data, all fields are required before you can proceed to the next question. You may go back and make changes, and you may stop, save the survey and then return. You will have 30 days to complete the survey, and we'll send the results to your BON two weeks after the survey is due. If you have any questions, please email Qiana McIntosh at NCSBN; her email is qmcintosh@ncsbn.org.

Contact Information

Full Name of Program {Free-text entry} _____

Mailing Address of the Program {Free-text entry} _____

Physical Address of the Program _____

City _____

State _____

Zip Code _____

First and Last Name of Person Completing Form {Free-text entry} _____

Email Address of the Person Completing Form _____

Direct Phone # of Person Completing Form {Numeric response} _____

NCLEX® Program Code {10-character alphanumeric code (e.g., US99999999)}

_____

For Graduate Programs, please skip to Graduate section after entering Contact Information.

Program

1. Is the program nationally nursing accredited?   Yes   No

Q: {If yes to 1}Please select the accreditation entity:
- ☐ ACEN – Accreditation Commission for Nursing Education
- ☐ CCNE – Collegiate Commission for Nursing Education
- ☐ NLN-CNEA – Commission for Nursing Education Accreditation
- ☐ Other (please specify): _____

Q: What was the date of the program's last accreditation visit? {mm/yyyy}

Q: Please select the nursing program's regional accreditation. Choose all that apply:
- ☐ Higher Learning Commission of North Central Association of Colleges and Schools (HLC)
- ☐ Accrediting Council for Independent Colleges/Schools (ACICS)

☐ Accrediting Bureau of Health Education Schools (ABHES)
☐ Other (please specify): _____

2. What is the program's current approval status? [Board of nursing or state-designated program approval status.]

    ☐ Full Approval
    ☐ Conditional/Probationary Approval
    ☐ Non-Approved
    ☐ Other _____

Q: What was the date of your last KSBN site visit? {mm/dddd}

3. What best describes the program's geographic location?

    ☐ Urban
    ☐ Suburban
    ☐ Rural
    ☐ Other _____

4. What is the institutional ownership?

    ☐ Public
    ☐ Private Not for Profit
    ☐ Private for Profit

5. What is the program type?

    ☐ Practical Nurse/Vocational Nurse
    ☐ Diploma
    ☐ Registered Nurse – Associates
    ☐ Registered Nurse – Bachelors
    ☐ Master's Entry
    ☐ Other _____

6. In what year was the program founded? [Year the nursing program started (might be different than the year the college/university was founded).] {4-digit year} _____

7. Does the program have any satellite sites?   Yes {Q8}   No {Skip to Q9}

8. {If yes to Q7} How many total sites, including the home site, does the program have? _____

9. What types of learning modalities does the program offer? [Hybrid is defined as a program that combines elements of online learning and traditional in-person learning.]

☐ In-Person Only {Skip to Q11}
☐ Online Only {Q10}
☐ Hybrid {Q10}

10. What percentage of your program is online? {Sliding scale percentage}

11. What best describes the program's academic schedule? [A quarter system divides the academic year into four sessions. A trimester divides the academic year into three sessions. A semester system divides the academic year into two sessions.]

☐ Quarters
☐ Trimesters
☐ Semesters
☐ Other

12. Does the program administer a formal student orientation process? [A formal student orientation is the process of introducing new nursing students to program and health care facility policies, procedures, and technologies. This may include but is not limited to the following with the student: student responsibilities/expectations, professional dress/behavior codes, etc.]
Yes   No

Q: What is the budget that was spent for library and audiovisual acquisitions for the most recent report year? {up to 7 figure dollar amount} _____

Q: Please list the new library and AV acquisitions for the most recent report year. {paragraph box}

13. Does the program offer English as a second language services for non-native English speakers? [Program offers resources where students with ESL can practice reading, listening, speaking, and writing.]
Yes   No

14. Does the program offer disability support services? [Nursing program has procedures for making reasonable accommodations for students who qualify under the American Disabilities Act.]
Yes   No

15. Does the program offer support services to help low socioeconomic students access available resources (e.g., peer mentoring services, tuition assistance, a work-study program, etc.)? [Students have books and resources throughout the program and the program has strategies to help students who can't afford books and resources.]
Yes   No

16. Does the program have a formal remediation process in place for students needing academic support? [The remediation process is designed to promote success for students who are at risk of failure and should include the following elements: description of the deficient areas; an outline of specific, measurable goals to demonstrate success; individualized plan for each student; time

frame for completion, agreed upon by the faculty and student.]
Yes   No

17. Does the program have a formal remediation process in place for students who commit errors/near misses in their clinical experiences? [Program has policies and procedures in place for keeping track of errors and near misses in student clinical experiences and taking action to make system/educational improvements.]
Yes   No

18. Has the nursing program experienced major organizational changes over the past year)? [Major organizational changes may include but are not limited to: new director, new assistant/associate director, staff layoff, faculty layoff, change in university leadership (e.g., provost or president), collapsing programs, economic efficiencies, etc.]
Yes {Q19}   No {Skip to Q20}

19. What major organizational changes has the nursing program experienced in the past year?

   ☐   New Director
   ☐   New Assistant/Associate Director
   ☐   Staff Layoff
   ☐   Faculty Layoff
   ☐   Change in University Leadership (e.g., Provost or President)
   ☐   Collapsing programs (such as downsizing or merging programs)
   ☐   Economic efficiencies/Budget reductions
   ☐   Other

20. Does the program offer simulated clinical experience? [Simulation is an activity or event replicating clinical practice using scenarios, high-fidelity manikins, medium fidelity manikins, standardized patients, role playing, skills stations, and/or computer-based critical thinking simulations.
(NCSBN's National Simulation Study definition)]
      Yes {Q21}   No {Skip to Q23}

21. {If yes to Q20} Are simulation faculty certified? [The Society for Simulation in Healthcare (SSH) provides the Certified Healthcare Simulation Educator (CHSE) certification.]
Yes   No

22. {If yes to Q20} Is the simulation lab accredited by the Society for Simulation in Healthcare (SSH)]
Yes   No

23. How many hours do students spend in direct client care? [Faculty supervised care directly with clients.] {Integer} _____

Q: Please attach a spreadsheet that identifies all current affiliating agencies used for clinical courses with the following information: Agency/facility name, location, type of facility units or areas utilized, and maximum number of students allowed by agency/facility.

24. How many hours do students spend in simulation? [Simulation is an activity or event replicating

clinical practice using scenarios, high-fidelity manikins, medium fidelity manikins, standardized patients, role playing, and computer-based critical thinking simulations.] {Integer}

_____

25. How many hours do students spend in skills lab? [A skills lab is equipped with manikins, task Trainers, and hospital equipment where students can apply basic procedural skills such as administering injections.] {Integer} _____

Q: Do you utilize preceptors in your nursing program? Yes / No.

Q: If yes, please attach a spreadsheet showing the following information for all current preceptors: Name, license number, academic credentials, current clinical area of practice, and place currently employed.

Program Director Data
Q: What is the program director's name? _____

Q: What are the program director's teaching responsibilities? {paragraph box}

26. Is the program director a nurse? [This would include a nurse with an active or inactive license.]
    Yes {Q27}   No {Skip to Q28}

27. {If yes to Q27} What is the program director's highest nursing degree achieved?

    ☐ Diploma
    ☐ Associate Degree in Nursing
    ☐ Baccalaureate of Science in Nursing
    ☐ Master of Science in Nursing
    ☐ Doctor of Nursing Practice
    ☐ Doctor of Philosophy in Nursing
    ☐ Other _____

28. What is the program director's highest non-nursing degree achieved?

    ☐ Associate Degree
    ☐ Bachelor's degree
    ☐ Master of Education
    ☐ Other Master's Degree
    ☐ Doctor of Education
    ☐ Doctor of Philosophy
    ☐ Other Doctoral Degree
    ☐ N/A
    ☐ Other _____

29. In the past five years, how many directors, including interim directors, has the program had?
{Integer} _____

30. Does the program director have administrative responsibility for allied health? [Allied health is a broad field of health care professions made up of specially trained individuals such as physical therapists and respiratory therapists.]
Yes   No

31. Does the program have an assistant/associate director? Yes   No

32. Does the program director have dedicated administrative support? [Administrative support includes general office management such as answering phones and doing clerical work and a variety of other tasks.]
Yes   No

Faculty Data

33. How many full-time faculty are in the prelicensure program? [Full time equivalent (FTE) faculty are expected to work at least 40 hours per week and to teach, participate in curriculum development, hold office hours for student advisement, attend faculty meetings, participate in campus-wide events, attend professional development events, take part in scholarly activities, etc.] {Integer}

_____

Q: How many full-time faculty were hired during this report period? {Integer} _____
Q: How many full-time faculty resigned during this reporting period? {Integer} _____
Q: How many full-time faculty retired during this reporting period? {Integer} _____

34. How many clinical adjunct faculty are in the prelicensure program? [Clinical adjunct faculty are typically staff at the clinical facility that hosts students and they supervise students during clinical rotations.]

   a) Employed by the nursing program {Integer} _____
   b) Not employed by the nursing program {Integer} _____

Q: How many adjunct faculty were hired during this report period? {Integer} _____
Q: How many adjunct faculty resigned during this reporting period? {Integer} _____
Q: How many adjunct faculty retired during this reporting period? {Integer} _____

35. How many part-time faculty are in the prelicensure program? [Part-time faculty work less than 40 hours per week and are responsible for assuming teaching responsibilities, usually collaborating with the full-time faculty. They maintain availability to students and communicate effectively with students and colleagues.] {Integer} _____

Q: How many part-time faculty were hired during this report period? {Integer} _____
Q: How many part-time faculty resigned during this reporting period? {Integer} _____
Q: How many part-time faculty retired during this reporting period? {Integer} _____

Q: Were any contract faculty utilized this reporting year? Yes / No
  Q: If yes, how many? {Integer} _____

Q: Do you have any non-nursing faculty? Yes / No
  Q: If yes, how many? {Integer} _____

Q: How many faculty with Hire Exceptions did you use this year? {Integer} _____
  How many faculty Hire Exceptions were hired this reporting period? {Integer} _____
  How many faculty Hire Exceptions resigned this reporting period? {Integer} _____
  How many faculty Hire Exceptions retired this reporting period? {Integer} _____

Q: Do you have faculty for whom FQR should be removed this reporting period? Yes / No
  If yes, please list: {paragraph box}

36. How many of the full-time faculty have a graduate-level education?

  ☐ Master of Science in Nursing {Integer} _____
  ☐ Master of Science (other than nursing) {Integer} _____
  ☐ Other Masters {Integer} _____
  ☐ Doctor of Nursing Practice {Integer} _____
  ☐ Doctor of Philosophy {Integer} _____
  ☐ Other Doctoral Degree {Integer} _____

Q: *Please attach a spreadsheet with all faculty members listed with the following information: Name, license number, highest degree, employment start date, and employment status (FT, PT, Adjunct, Other)

37. Please specify the typical number of students to one faculty member for didactic/theory courses?
  {Integer} _____

38. Please specify the number of students to one clinical faculty member? [All levels of faculty (full time, part time, and clinical adjunct) in all types of clinical experiences.]
  {Integer} _____

Q: *Please attach a spreadsheet with the following information regarding nursing courses: Name of Course, faculty members for the course, identify course coordinator for each course; if course is a clinical course, please also identify the total clock hours for the course, the observation hours, simulation hours and precepted hours for each course where it applies.

39. Does the program offer formal orientation for new adjunct clinical faculty? [Formal orientation for new adjunct clinical faculty includes overview of the program and the particular course they're teaching, policies and procedures, teaching responsibilities, supervision of students, role modeling, planning post conferences, evaluation of students, etc.]
  Yes No

For the following two questions, we are going to ask you about formal orientation for new faculty. Formal orientation of new faculty includes an overview of the program and faculty resources, policies and procedures, workload, faculty appraisal, curriculum and syllabus development, student assessment, didactic and clinical teaching responsibilities, student advisement, etc.

40. Does the program offer formal orientation for new part-time faculty?
    Yes   No

41. Does the program offer formal orientation for new full-time faculty?
    Yes   No

42. Does the program offer formal mentoring for new full-time faculty? [Formal mentoring includes assignment of a seasoned (at least one year of teaching) faculty member who has taught at the same level for the purpose of providing ongoing support, coaching, guidance, and faculty development for new full-time faculty.]
    Yes   No

Student Data
Q: What is the maximum number of annual admissions as approved by the Kansas State Board of Nursing? _____

Q: TOTAL admissions for reporting period: _____
    How many were articulation students? {Integer} _____
    How many were transfer students? {Integer} _____
    How many were readmissions? {Integer} _____

Q: Of the readmissions, were there any that were articulation or transfer students? {Yes / No}
    If yes, how many articulation? {Integer} _____ Transfer? {Integer} _____

43. How many students are enrolled in the nursing program as of the beginning of the current academic year? [Includes all prelicensure students.] {Integer} _____

44. Do you have a maximum enrollment capacity?   Yes {Q45}   No {Skip to Q46}

45. What is the maximum nursing enrollment capacity for the current academic year? {Integer}

    _____

46. What is the total number of students who started in your most recent graduating cohort? {Integer}

    _____

47. In your most recent graduating cohort, how many students graduated? {Integer} _____

48. In your most recent graduating cohort, how many students did not graduate and are still actively pursuing coursework?   {Integer} _____

Q: How many total students graduated this reporting period? {Integer} _____
    How many were articulation students? {Integer} _____
    How many were transfer students? {Integer} _____

Q: Did you have any RN to BSN students graduate? { Yes / No / NA}. If yes, how many? {Integer}

    _____

Q: Please report the information below for the current reporting year:

Total Number of Students withdrawing due to personal/non-academic reasons: _____
        How many were articulation students? {Integer} _____
        How many were transfer students? {Integer} _____
        How many were readmissions? {Integer} _____

Total Number of students withdrawing due to academic reasons: _____
        How many were articulation students? {Integer} _____
        How many were transfer students? {Integer} _____
        How many were readmissions? _____

Q: Number of <u>qualified</u> applicants turned away: _____

Q: Please report the program's NCLEX pass rates for the last five (5) reported years:
        Year : _____   Rate: _____
        Year: _____   Rate: _____
        Year: _____   Rate: _____
        Year: _____   Rate: _____
        Year: _____   Rate: _____

49. What is the average age of a student enrolled in the program as of the beginning of the current academic year?   {Sliding scale, integer} _____

50. Please provide a detailed breakdown of the racial composition (number in each category) of the students currently enrolled in the program.

    ☐ American Indian or Alaska Native {Numeric response field, integer} _____
    ☐ Asian {Numeric response field, integer} _____
    ☐ Black or African American {Numeric response field, integer} _____
    ☐ Native Hawaiian or Other Pacific Islander {Numeric response field, integer} _____
    ☐ White {Numeric response field, integer} _____
    ☐ Multi-Racial {Numeric response field, integer} _____
    ☐ Other {Numeric response field, integer} _____

51. Please provide a detailed breakdown (number of students in each category) of the ethnic composition of the students currently enrolled in the program.

    ☐ Hispanic or Latino or Spanish Origin {Numeric response field, integer} _____
    ☐ Non-Hispanic or Latino or Spanish Origin {Numeric response field, integer} _____

52. Please provide a detailed breakdown (number of students in each category) by student sex.

    ☐ Female {Numeric response field, integer} _____
    ☐ Male {Numeric response field, integer} _____
    ☐ Other {Numeric response field, integer} _____

Q: Have you received any complaints involving educational statutes or regulations? {YES / NO}
If yes, please explain: {paragraph box}

Q: Have you had any comments or complaints related to NCLEX testing? {YES / NO}
If yes, please specify: {paragraph box}

Q: Response to recommendations and requirements from the last annual survey or last survey visit (during reporting period): {paragraph box}

Q: Are there any future plans or proposed changes to the program? {paragraph box}

Q: In this reporting year, have there been any changes in: {check all that apply}
- ☐ Program policies
- ☐ Organizing curriculum framework
- ☐ Program objectives or outcomes
- ☐ Major curriculum changes
- ☐ Minor curriculum changes

Q: Please provide a description of the practices used to safeguard the health and well-being of students in your programs. {paragraph box}

*Please attach a copy of your current school catalog.

*Please attach a copy of your most current audited fiscal report(s) covering the last two years, including statement of incomes and expenditures.

GRADUATE SECTION:

Program:

1. Is the program nationally nursing accredited?   Yes   No

{If yes to 1}Please select the accreditation entity:
- ☐ ACEN – Accreditation Commission for Nursing Education
- ☐ CCNE – Collegiate Commission for Nursing Education
- ☐ NLN-CNEA – Commission for Nursing Education Accreditation
- ☐ Other (please specify): _____

2. What was the date of the program's last accreditation visit? {mm/yyyy}

3. What is the program's current approval status? [Board of nursing or state-designated program approval status.]

- ☐ Full Approval
- ☐ Conditional/Probationary Approval
- ☐ Non-Approved
- ☐ Other _____

4. What was the date of your last KSBN site visit? {mm/dddd}

5. What advanced practice nursing program tracks do you offer? {check all that apply}

- ☐ MSN - CNS
- ☐ MSN - NP
- ☐ MSN – NM
- ☐ MSN – RNA

- ☐ DNP - CNS
- ☐ DNP – NP
- ☐ DNP - NM
- ☐ DNP – RNA

6. What types of learning modalities does the program offer? [Hybrid is defined as a program that combines elements of online learning and traditional in-person learning.]

- ☐ In-Person Only {Skip to Q8}
- ☐ Online Only {Q7}
- ☐ Hybrid {Q7}

7. What percentage of your program is online? {Sliding scale percentage}

8. Has the advanced practice nursing program experienced any of the following major organizational changes over the past year)? [Major organizational changes may include but are not limited to: new director, new assistant/associate director, staff layoff, faculty layoff, change in university leadership (e.g., provost or president), collapsing programs, economic efficiencies, etc.]

- ☐ New Director
- ☐ New Assistant/Associate Director
- ☐ Staff Layoff
- ☐ Faculty Layoff
- ☐ Change in University Leadership (e.g., Provost or President)
- ☐ Collapsing programs (such as downsizing or merging programs)
- ☐ Economic efficiencies/Budget reductions
- ☐ Other
- ☐ None

9. How many total clinical (clock) hours are in this advanced practice nursing program? [Faculty or preceptor supervised hours with clients.] {Integer} _____

10. What is the budget spent for library and audiovisual acquisitions for the most recent report year? {up to 7 figure dollar amount} _____

11. List the new library and AV acquisitions for the most recent report year. {paragraph box}

12. What are the current number of library holdings? {Integer} _____

13. What are the current number of library holdings regarding nursing? {Integer} _____

Program Director:

14. What is the program director's name? _____

16. Does the program director have assigned teaching responsibilities in the advanced nursing program? Yes / No [if yes, go to Q17 If NO, go to #18]

17. If yes, please list courses taught and credit hours for each course? {paragraph box}

Faculty:

18. How many full-time faculty are in the advanced practice program? {Integer} _____

    How many full-time faculty were hired during this report period? {Integer} _____
    How many full-time faculty resigned during this reporting period? {Integer} _____
    How many full-time faculty retired during this reporting period? {Integer} _____

19. How many clinical adjunct faculty are in the advanced practice program?

    How many adjunct faculty were hired during this report period? {Integer} _____
    How many adjunct faculty resigned during this reporting period? {Integer} _____
    How many adjunct faculty retired during this reporting period? {Integer} _____

20. How many part-time faculty are in the advanced practice program? [Part-time faculty work less than 40 hours per week and are responsible for assuming teaching responsibilities, usually collaborating with the full-time faculty. They maintain availability to students and communicate effectively with students and colleagues.] {Integer} _____

    How many part-time faculty were hired during this report period? {Integer} _____
    How many part-time faculty resigned during this reporting period? {Integer} _____
    How many part-time faculty retired during this reporting period? {Integer} _____

21. Were any contract faculty utilized this reporting year? Yes / No
    If yes, how many? {Integer} _____

22. Do you have any non-nursing faculty? Yes / No
    If yes, how many? {Integer} _____

23. How many faculty with Hire Exceptions did you use this year? {Integer} _____
    How many faculty Hire Exceptions were hired this reporting period? {Integer} _____
    How many faculty Hire Exceptions resigned this reporting period? {Integer} _____
    How many faculty Hire Exceptions retired this reporting period? {Integer} _____

24. How many current faculty are on a Faculty Degree plan? {Integer} _____

25. Do you have faculty for whom FQR should be removed this reporting period? Yes / No
   If yes, please list: {paragraph box}

26. How many of the advanced nursing practice program faculty have:

   ☐ Doctor of Nursing Practice {Integer} _____
   ☐ Doctor of Philosophy in Nursing {Integer} _____
   ☐ Other Doctoral Degree {Integer} _____
   ☐ Master of Science in Nursing {Integer} _____
   ☐ Master of Science (other than nursing) {Integer} _____
   ☐ Other Masters {Integer} _____

*27. Please attach a spreadsheet with all faculty members listed with the following information: Name, license number, highest degree, employment start date, employment status (FT, PT, Adjunct, Other), clinical specialty area, and description of responsibilities for required advanced nursing courses (all required courses should be included with

*28. Please attach a spreadsheet of current Preceptors used in the Advanced Practice programs with the following information for each: Name, license #, academic credentials, professional experience, and place of practice / employment.

*29. Please attach a spreadsheet of current affiliating clinical agencies utilized with your advanced nursing programs. Please include the following information: Name of facility, address/location, and facility units or areas used.

Students:

30. How many students were admitted to each advanced practice programs in this reporting period?

   CNS {Integer} _____
   NP {Integer} _____
   NM {Integer} _____
   RNA {Integer} _____

31. How many students graduated from each advanced practice program in this reporting period?

   CNS {Integer} _____
   NP {Integer} _____
   NM {Integer} _____
   RNA {Integer} _____

32. How many students were admitted to Post-Master's advanced practice programs this reporting period? How many completed the program this reporting period?

   Admissions: CNS {Integer} _____   Completed: CNS _____
                  NP {Integer} _____   NP _____
                  NM {Integer} _____   NM _____
                  RNA {Integer} _____   RNA _____

33. How many students <u>withdrew</u> from an advanced practice program this reporting period for:

> Academic reasons {Integer} _____
> Personal / non-academic reasons {Integer} _____

34. Have you received any complaints involving educational statutes or regulations? {YES / NO}

> If yes, please explain: {paragraph box}

35. Please provide any response to recommendations and requirements from the last annual survey or last survey visit (completed during reporting period): {paragraph box}

36. Are there any future plans or proposed changes to the program? {paragraph box}

37. In this reporting year, have there been any changes in: {check all that apply}
    ☐ Program policies
    ☐ Organizing curriculum framework
    ☐ Program objectives or outcomes

> If yes, please briefly describe changes: {paragraph box}

38. Please provide a description of the practices used to safeguard the health and well-being of students in your programs. {paragraph box}

*39. Please attach a copy of your current school catalog.

*40. Please attach a copy of your most current audited fiscal report(s) covering the last two years, including statement of incomes and expenditures

Faculty Information

License #	Name	Degree	Employment Date	Employment Status (FT, PT, Adj, Other)	Course Coordinator? Y/N	On Degree Plan or Hire Exception? (DP / HE/ na)

Preceptor Information

License #	Name	Academic Credentials	Areas of Clinical Practice / Experience	Place Employed

Clinical Agency Information

Facility Name	Location	Facility Type	Areas Utilized	Max Faculty:Student Ratio Allowed by Agency

Nursing Courses

Course ID	Course Name	Faculty Teaching Course	Course Coordinator? Y / N	Clinical Course (Y / N)	Total Clinical Hours	# Preceptor Hours	# Observation Hours	# Simulation Hours	# Lab Hours
NU128	Ex: Nursing Care of Adults I Clinical	Faculty #1	N	Y	135	0	8	24	
		Faculty #2	N						
		Faculty #3	Y						
NU125	Mental Health Nursing	Faculty 1	Y	N	na	na	na	na	
		Faculty 2	N						

2021 Nursing & MHT Program Site Visits

Spring 2021	School	Level	Visitors	Comments
Jan. 26-27	Johnson CCC	PN	Janelle Martin Rebecca Sander	Reapproval visit (virtual)
Feb. 15-18	Colby CC	ADN	Janelle Martin Patsy Zeller Carol Moreland	w/ ACEN visit (virtual)
Feb. 17-19	Baker University	BSN	Janelle Martin Karen Kidder	w/ CCNE (virtual)
Feb. 24-25	Salina ATC	ADN	Janelle Martin Christina Rudacille	F/U after 1st graduation (virtual)
March 2-3	WSU Tech	PN	Janelle Martin Karen Kidder Amy Hite (O)	Reapproval visit (virtual)
March 31 – Apr 1	Pratt CC	ADN	Janelle Martin Patsy Zeller Carol Moreland	Cond. Approval Follow-up visit
May?	Osawatomie – Larned	LMHT	Janelle Martin Carol Moreland	After 1st graduation
Fall 2021	**School**	**Level**	**Visitors**	**Comments**
Sept. 7-8, 2020	Garden City CC	PN ADN	Janelle Martin Karen Kidder Dee Bohnenblust?	Reapproval prior to ACEN
Sept. 13-15	KSBN Board meetings			
Sept. 21-23	KCKCC	ADN PN	Janelle Martin Dee Bohnenblust?	w/ ACEN
Sept. 29-30	Washburn Tech	PN	Janelle Martin Christina Rudacille	Reapproval visit
Oct. 6-8	Hesston College	BSN	Janelle Martin Amy Hite	w/ CCNE
Oct. 20-22	Seward CCC	ADN	Janelle Martin Patsy Zeller?	w/ ACEN (focus visit for pass rates and reapproval)
Oct. 25-27	NCKT-Hays	ADN PN	Janelle Martin Christina Rudacille?	w/ ACEN?
Fall 2021 COA schedule	Newman	RNA	Janelle Martin Karen Kidder	w/COA
	Barton CC	PN	Janelle Martin	Or could do with ADN in Feb 2022??
	Colby CC	PN	Janelle Martin Rebecca Sander	

Petition for Permission to Test/Retest NCLEX Summary
11/8/2020 to 2/18/2021

Petitioner Name	NCLEX Test	Repeat	Conditions applied to approval
Arwa Bashir	RN	1st time tester - IEN	1) additional 20 hours of study for each area on study plan 2) Total of 30 hours of observational clinical for all unsuccessful areas on exam 3) Successful completion of formal Review Course with predictability score 4) Audit nursing class(es) to cover all unsuccessful areas of NCLEX
Connie Bottorff	RN	Yes	1) additional 20 hours of study for each area on study plan 2) Total of 30 hours of observational clinical for all unsuccessful areas on exam 3) Successful completion of formal Review Course with predictability score 4) Audit nursing class to cover all unsuccessful areas of NCLEX
Diana Olivares	RN	No	1) additional 10 hours of study for each area on study plan 2) Total of 15 hours of observational clinical for all unsuccessful areas on exam 3) Successful completion of formal Review Course with predictability score
Jessica Schoeder	RN	No	1) additional 20 hours of study for each area on study plan 2) Total of 30 hours of observational clinical for all unsuccessful areas on exam 3) Successful completion of formal Review Course with predictability score 4) Audit nursing class(es) in all unsuccessful areas