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March 17, 2003

Linda Ard, PhD, CNS, RNC
Interim Director of Nursing
Collin County Community College District
2200 West University Drive
McKinney, TX 75071

Dear Dr. Ard:

This letter is formal notification of the action taken by the National League for Nursing Accrediting Commission at its meeting on February 26, 2003. The Commission received and reviewed the interim report on the associate degree nursing program and **affirmed the next scheduled accreditation visit to Fall 2006.**

The Commission expressed continuing concerns the implementation of the plan for program evaluation. There was limited indication of aggregated, trended data being collected, analyzed and findings being used in program decision making. At the time of the next review it is expected that these areas will be fully addressed.

Deliberations centered on the *Interim Report*, additional materials requested from the nursing program, and the recommendation of the peer evaluation review panel.

On behalf of the Commission, we thank you and your associates for your cooperation. If you have questions about this action or about Commission policies and procedures, please write or call myself or a member of the NLNAC Staff. If the nursing faculty would be interested in the names of consultants in the area of program evaluation please do not hesitate to contact me.



Susan Abbe, PhD, RN
Director of Accreditation Services

**COLLIN COUNTY COMMUNITY COLLEGE
DISTRICT
Associate Degree Nursing Program**

**2002 Interim Report
for
Continuing Accreditation
By the
National League for Nursing
Accrediting Commission**

Collin County Community College District
ADN Program

2200 W. University Drive
McKinney, TX 75071

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Introduction

6. Collin County Community College District – ADN Program
2200 W. University Drive
McKinney, TX 75071
7. Collin County Community College District
4800 Preston Park Blvd
Plano, TX 75093
8. Linda Darnell Ard, Ph.D., CNS, RNC
Interim Director of Nursing
972-548-6883 (phone); 972-548-6722 (fax)
nard@ccccd.edu
9. Cary A. Israel, President
10. Board of Nurse Examiners for the State of Texas
February 13, 2002 – continued full accreditation with commendation
11. NLNAC – received continuing accreditation for 8 years – received February 1999
12. Commission on Colleges of the Southern Association of Colleges and Schools – reaffirmed
accreditation - 1994
13. The nursing program began in 1988 as an extension campus for Grayson County
College. Collin County Community College was initially approved by the State Board of Nurse
Examiners as an independent program in January 1990.
14. Full – time faculty: 8 Part-time faculty: 7 Director: 1
15. Total number of students currently enrolled: 110
16. Length of Program: 72 credit hours

Program Actions

Concern: “The curriculum lacks integration of the relationships among mission, philosophy, organizing structure, course content, clinical evaluation tools that differentiate expectations for student performance and program outcomes.”

Immediately upon receiving the accreditation visit results and recommendations in the Spring of 1999, the nursing program at Collin County Community College District (CCCCD) began to review the overall curriculum in relation to the concerns. Changes were made based upon the recommendations. The initial step was to review the overall College mission and philosophy in regards to the nursing philosophy.

Collin County Community College District affirms as its mission the commitment to provide, within the resources available, educational programs and services that meet the individual and community needs. The college district ~~seeks~~ to promote lifelong individual growth and excellence through strengthening the intellect, character and capabilities of all students. The college acts as a resource to local, state, national and international communities by providing educational, cultural and civic programs and services.

The philosophy of the College is to achieve its mission by providing the following: a) universal access, b) personal development, c) open involvement and active participation in the learning and decision-making process, d) recognition, e) acceptance and encouragement of diversity, f) high standards of innovation and excellence, and g) recognition of the dignity and worth of all individuals.

The philosophy of the Associate Degree Program is consistent with that of the governing organization. Concepts contained within the philosophy of Collin County Community College District are reflected in the philosophy of the nursing program (See Table 1).

Table 1: PHILOSOPHICAL COMPARISON OF SIMILARITIES OF THE ASSOCIATE DEGREE NURSING PROGRAM AND THE GOVERNING ORGANIZATION

Governing Organization Philosophy	Associate Degree Nursing Philosophy
Universal Access	Recipients of nursing care include individuals, families, special populations, and communities within various ethnic and cultural groups.
Personal Development	Associate Degree Nursing Program provides a sound basis for further personal and professional development... ... nursing education also provides the student with the opportunity to develop as contributing and accountable members of the discipline of nursing and the community. This is demonstrated by legal and ethical dimensions to include accountability for one's own actions.
Open involvement and active participation in the learning and decision making process	Nursing education is a competency-based program of study which actively engages the student in the learning process and holds the student accountable for outcomes
High standards of innovation and excellence	The simulated laboratory setting, clinical experience, and student project components of the nursing courses are aligned to help the student apply theoretical knowledge to practical health care situations. These modalities are structured to include adaptive, applied student participation
Recognition of the dignity and worth of all individuals	Each individual has rights, dignity and worth. The individual is a unique being who interacts, changes and adapts within the environment.

Initially, changes were also implemented in the curriculum and clinical evaluation tools based upon the concerns resulting from the accreditation visit. Since these initial changes, CCCCDD has gone through a curriculum change which was implemented in 2000. This change was mandated by the Texas Coordinating Board of Higher Education (TCBHE). The purpose of the statewide mandate was an attempt to align all associate degree nursing programs. Each program was required to use courses delineated in the Workforce Education Course Manual (WECM). During the mandated revision of the curriculum, close attention was given to integrating the philosophy, curricular strands (See Appendix A) and state ADN competencies (See Appendix B) throughout the courses.

CCCCDD implemented the required changes and retained the integrated approach to the curriculum. (See appendix C). As the “new” curriculum was implemented, updates or changes were made as the need arose in syllabi as well as evaluation tools.

The new evaluation tools reflect the ADN competencies as well as curricular threads. The same tool is utilized throughout the program with differing weights each semester to demonstrate changing student expectations as the student advances through the program. (See Appendix D).

Additional revisions to the curriculum are being required by TCBHE which will be implemented beginning in the Fall of 2003. Courses are currently being revised to reflect these mandates as well as recent changes in the ADN State Competencies. A separate curriculum committee within the nursing faculty has been created in order to facilitate the changes as well as to ascertain the philosophy and all curricular threads are integrated throughout. The curriculum committee will also continuously review the clinical evaluation tools.

The program outcomes are specified as follows: 1. All qualified applicants will be admitted each fall to the nursing program dependent on clinical space and nursing faculty availability. 2. The attrition rate of all nursing students enrolled in a given semester will not exceed 15-20%; attrition in

the program will not exceed 30%. 3. Eighty-five to ninety percent of all new graduates will be employed in the field of nursing within 3 months after graduation. 4. The pass rate on the NCLEX-RN will be maintained at or above the state and national rates. 5. The majority of returned surveys from graduates will express satisfaction with their program of study as measured by the New Graduate Survey questionnaire. 6. The graduates of the ADN program will be encouraged to continue lifelong learning and professional development activities as measured by pursuing a bachelor's degree within 5 years after graduation and/or attendance at continuing education seminars. The first two outcomes are evaluated every semester internally. Outcomes three through five are evaluated annually with a Graduate Student Survey form.

FACULTY PROFILE: FULL- AND PART-TIME

Time FT/PT	Faculty Name	Date of Initial Appointment	Professional Rank	BACC Degree	Institution Granting Degree	Grad Degree	Institution Granting Degree	Area of Clinical Expertise	Area of Functional Experience	Academic Teaching & Other Areas of Responsibility
FT	Linda Darnell (Nell) Ard	Aug 1997	Interim Program Director	BSN	Harding University	Ph.D. in Nursing	University of Texas Health Science Center at San Antonio	Family Nursing	Med-Surg, Fundamentals, Maternal- Child, Pediatrics	Director
PT	Julie Brinzo	Aug 2002	Lab Instructor	BSN	Texas Tech University	MBA with Nsg Hrs	Midwestern University, Wayland Baptist University	Maternal- Child	Maternal- Child, Fundamentals, Med-Surg	Nursing Lab Associate
FT	Barbara Devitt	Aug 1990	Professor of Nursing	BSN	University of Nebraska	MSN	University of Nebraska	Community Health	Med-Surg, Fundamentals, Community, Mental Health	Integrated Sophomore Level
FT	Gertrude (Trudy) Dowden	Aug 2002	Professor of Nursing	BSN	Northwestern State University	MS	Northwestern State University	Perinatal, Nursing Administration	Maternal- Child, Pediatrics, Med/Surg, Fundamentals	Integrated Freshman Level
FT	Mary Jo Giles	Aug 2001	Professor of Nursing	BSN	Florida State University	MSN, WHNP	Texas Woman's University	Women's Health	Maternal- Child, Med/Surg, Fundamentals	Integrated Freshman Level
PT	Karyn Holt	Aug 2002	Associate Professor	BS	University of Texas Medical Branch	MS	Georgetown University	Midwifery	Maternal- Child, Fundamentals	Integrated Freshman Level
FT	Debra Hurd	Aug 2001	Professor of Nursing	BSN	Pennsylvania State University	MS	Texas Woman's University	Community Health	Med/Surg, Critical Care, Community	Integrated Sophomore Level

FACULTY PROFILE: FULL- AND PART-TIME

Time FT/PT	Faculty Name	Date of Initial Appointment	Professional Rank	BACC Degree	Institution Granting Degree	Grad Degree	Institution Granting Degree	Area of Clinical Expertise	Area of Functional Experience	Academic Teaching & Other Areas of Responsibility
PT	Susan Kamath	Oct 1997	Lab Coordinator	BSN	Stanford University	MN	University of California – Los Angeles	Pediatrics	Pediatrics, Fundamentals	Nursing Lab Associate
PT	Janet Mansir	Aug 2002	Associate Professor	BS	Penn State	MS	Texas Woman's University	Med-Surg	Med-Surg, Fundamentals	Integrated Freshman Level
PT	Stacy Martin	Sept 2002	Associate Professor	BSN	University of Texas – Arlington	MSN	University of Texas – Arlington	Med-Surg	Med-Surg, Critical Care, Pediatrics	Integrated Sophomore Level
FT	Lynda (Lyn) Pesta	Jan 1994	Professor of Nursing	BSN	University of Texas – Arlington	MS	Texas Woman's University	Community Health	Med-Surg, Critical Care, Community, Mental Health	Integrated Sophomore Level
FT	Barbara Rickert	Aug 2002	Professor of Nursing	BSN	University of New Mexico	Ph.D. in Nursing	University of New Mexico	Maternal- Child, Community	Maternal- Child, Fundamentals, Mental Health, Med- Surg	Integrated Freshman Level
PT	Diane Schull	Aug 2002	Associate Professor	BSN	Texas Woman's University	Ph.D. in Nursing	Texas Woman's University	Med-Surg	Med-Surg, Fundamentals, Community	Integrated Freshman Level

FACULTY PROFILE: FULL- AND PART-TIME

Time FT/PT	Faculty Name	Date of Initial Appointment	Professional Rank	BACC Degree	Institution Granting Degree	Grad Degree	Institution Granting Degree	Area of Clinical Expertise	Area of Functional Experience	Academic Teaching & Other Areas of Responsibility
FT	Joyce Swegle	May 2002	Professor of Nursing	BS	Central Missouri State	Ph.D. in Nursing	Texas Woman's University	Med-Surg, Mental Health	Med-Surg, Critical Care, Pediatrics, Mental Health	Integrated Sophomore Level
PT	Kimberly Morgan Trestler	Aug 2002	Associate Professor	BS	Texas Woman's University	MS, FNP	Texas Woman's University	Med-Surg, Pediatrics	Med-Surg, Fundamentals, Pediatrics	Integrated Freshman Level
FT	Kim Washington	Aug 1997	Professor of Nursing	BSN	Northeast Louisiana University	MSN	MSN	Psychiatric/ Mental Health	Med-Surg, Fundamentals, Mental Health	Integrated Freshman Level

Faculty Activities

Name		Organizations	CEUs	Current Education
Neil Ard, Ph.D., CNS, RNC		SST, NLN, AWHONN	40+ hrs in maternal-child and educational conferences	NO
Barbara Devitt, MSN, RN		ANA, NLN, SST	20 + hrs in med/surg	NO
Trudy Dowden, MS, RN		None	12 hrs in maternal-child	NO
Mary Jo Giles, WHNP, RN		ANA	35 hrs in Maternal-Child, Women's Health	NO
Debra Hurd, MS, RN		None	26 hrs Med/Surg	NO
Susan Kamath, MN, RN		None	15 hrs in Pediatrics & nursing lab	NO
Lyn Pesta, MS, RN		ANA, SST	20 hrs in Med/Surg	NO
Barbara Rickert, Ph.D., RN		ANAC, SST	20 hrs Bioterrorism, AIDS, Med/Surg	
Joyce Swegle, Ph.D., RN		None	16 hrs Med/Surg	NO
Kim Washington, MSN, RN		NLN, American Holistic Nurse's Assoc., Dallas Group Psychotherapy	14 hours in psych areas	NO
Julie Brinzo, MBA, RN		SST, NCC certification	20 hrs in nursing practice issues	NO
Karyn Holt, CNM, RN		NLN, AWHONN, American College of Nurse Midwives	21 hours in women's health & pharmacology	Working on Ph.D. at Touro University International
Janet Mansir, MS, RN		Association for Professionals in Infection Control & Epidemiology	44+ hrs in infectious diseases	NO
Stacy Martin, MSN, RN		SST, ANA	20 hrs med/surg	NO
Diane Schull, Ph.D., RN		AAAI, ACAA	47 hrs at AAAI & ATS conference	NO
Kim Trester, FNP, RN		American Academy of NPs, TX Nurse Practitioner Association, North TX Nurse Practitioners	20+ hrs of on-line work as well as Practitioner conference	Applied to programs for DNS or EdD

COLLIN COUNTY COMMUNITY COLLEGE DISTRICT ASSOCIATE DEGREE NURSING PHILOSOPHY

In accordance with the mission statement of Collin County Community College District, the faculty of the Associate Degree Nursing Program believes that the study of nursing arises out of a sensitivity and responsiveness to the needs of the community. We espouse the core values of Collin County Community College District: Learning, Service and Involvement, Creativity and Innovations, Academic Excellence, Dignity and Respect, and Integrity as reflected in the content below. Based on these beliefs, the nursing faculty adopts the following philosophy:

Nursing Practice

Nursing is an applied science and an art that provides an essential humanitarian service. Nursing is based on a study of the behavioral and natural sciences. Nursing research builds on these sciences as a basis for providing care to the client throughout the lifespan. The cornerstone of nursing practice is the nursing process that involves the use of critical decision-making skills. Nursing concepts provide direction for nursing care whereas the nursing process provides the structure in which nursing care is delivered and evaluated. Nursing collaborates with health professionals within the community in assisting the client to achieve an optimal level of wellness. Nursing practice can occur in primary, secondary and tertiary care settings.

The recipients of nursing care include individuals, families, special populations, and communities within various ethnic and cultural groups. The individual is a holistic being with physical, psychosocial, intellectual, developmental, and spiritual needs. Each individual has natural rights, dignity, and worth. The individual is a unique being who interacts, changes, and adapts within the environment.

Practice of the Associate Degree Nurse

The faculty believes that the scope and practice of the associate degree nurse includes three major roles: provider of care, coordinator of care, and member of the profession. These are defined by the National League for Nursing document entitled, Educational Outcomes of Associate Degree Nursing Programs: Roles and Competencies. Additionally, the faculty supports the work of the Nursing Education Advisory Committee (NEAC), who represent nursing education, service, professional associations and state agencies, to develop the essential competencies of graduates in education programs in nursing across Texas. The Collin County Community College District Associate Degree Nursing Program has integrated these competencies as a requirement for learning outcomes of its graduates.

The Associate Degree Nursing faculty believes its graduates are prepared to function as an entry-level practitioner in a variety of healthcare settings when health promotion, prevention of illness, and provision of care are directed toward clients with common, recurring, and/or complex health-related problems across the lifespan. Therefore, the faculty agrees that it is both beneficial and desirable for the student to seek employment in an area where the student will have contact with clients in assisting with health care needs. Associate degree nursing practices are characterized by application of accepted principles and interventions with clients who may have predictable or unpredictable healthcare needs. Furthermore, the associate degree nursing graduate is prepared to manage, teach, and provide direct care for individuals, families, and groups in structured settings, using the nursing process. The associated degree nursing graduate works in collaboration with other members of the multidisciplinary health care team using scientific knowledge, current nursing research and technology, caring behaviors, ethical standards, and a legal framework as a foundation to guide nursing actions and decisions. These graduates act as a client advocate, providing services that ensure

client comfort, safety, and confidentiality while assisting the client to achieve maximum health or dignified death. The associate degree nursing graduate maintains accountability while assigning tasks to unlicensed members of the multidisciplinary healthcare team. With supervision and experience, the associate degree nurse is able to assume beginning managerial and leadership functions and manage human and fiscal resources by balancing care and cost-effectiveness. The graduate participates in lifelong learning by using resources for continuing education activities. Informal articulation agreements assist graduates in continuing nursing education at institutions that offer baccalaureate and higher degrees. The Collin County Community College District Associate Degree Nursing Program provides a sound basis for further personal and professional development leading to opportunities for continued growth in the nursing profession and participation in committees and organizations relevant to nursing.

The graduate of Collin County Community College earns an Associate of Applied Science Degree in Nursing and makes application to the Board of Nurse Examiners for the State of Texas to take the national licensure examination. Eligibility for licensure is determined by the Board of Nurse Examiners. Upon successful completion of the examination, the associate degree nursing graduate becomes a Registered Nurse and is legally recognized to practice in the profession.

Nursing Education

Nursing education is a process by which the learner acquires and assimilates scientific and discipline-specific content that results in a change in behavior. This behavior is demonstrated in the cognitive, psychomotor and affective domains. These domains are developed within the learner through didactic and clinical application using simple to complex learning principles and varied teaching strategies.

The general education core curriculum of the College also serves as a contributing cornerstone that emphasizes “learner-centered” rather than “teacher-centered” education. The environment is structured so that it is conducive to self-directed learning. Self-directed learning includes the Learning Resource Center, the simulated health laboratory, science laboratories, remedial and tutorial services, computer laboratories, and extracurricular activities.

Incorporating the aforementioned concepts, the nursing faculty believes that nursing education is a competency-based program of study that actively engages the student in the learning process and holds the student accountable for outcomes. The simulated laboratory setting, clinical experience, and student project components of many of the courses are designed to help the student apply theoretical knowledge to practical health care situations. Additionally, computer-assisted-instruction is utilized as a modality of the teaching–learning continuum that augments individual learning styles and needs. These modalities are intended to fulfill the learning objectives of each nursing course; therefore, they are structured to include active, applied student participation.

Nursing education strives to assist the student to incorporate an appreciation for clients of varying cultures and ethnicities. This is achieved through the assignment of clients with varying health care needs. The student utilizes the nursing process to assess the client, plan and implement appropriate nursing care, and evaluate the client’s response to nursing intervention according to outcome criteria.

The faculty further believe that nursing education also provides the student with the opportunity to develop as contributing and accountable members of the discipline of nursing and the community. Each nursing course stresses the provision and maintenance of client safety. This is demonstrated by legal and ethical dimensions to include accountability for one’s own actions.

In addition, self-assessment is done at the completion of each daily clinical experience with faculty input. These daily evaluations comprise the formative student course evaluation. Prior to the conclusion of the final nursing course, the student is provided a capstone practicum which culminates in the synthesis of nursing practice in a selected setting.

Educational Outcomes

The anticipated educational outcomes of the associate degree nursing program include:

1. Provide nursing care to meet the needs of the individual and the family within organized nursing services;
2. Manage client care utilizing resources within the healthcare setting and for a defined population;
3. Assume the role of the member of the discipline of nursing practicing within its legal and ethical framework.

CURRICULAR STRANDS

The curricular threads represent the program concepts. These threads permeate or weave through the nursing curriculum to integrate the program philosophy, program outcomes, and course level objectives.

The curricular threads are identified and defined as follows:

1. Legal-ethical dimensions – Focuses on the client's environment for safety and the learner's environment for delivering safe nursing care. Emphasis is on learner/student responsibility and accountability for safe nursing practice, client rights, and professional growth and development.
2. Health-illness continuum – identifies the dynamic state of health that continually changes in one's attempt at adaptation to the internal and external environment.
3. Basic Human Needs – defines essential needs of the individual in the attempt to adapt and survive the internal and external environment. These elements are based on Abraham Maslow's hierarchy of needs which include physiological, safety and security, love and belonging, self-esteem, and self-actualization. The hierarchy of needs is used as the basis for

planning nursing care, prioritizing nursing interventions, and managing care for a group of clients.

4. Growth and development – identifies orderly, predictable processes that begin with conception and continue throughout the lifespan and culminates with death. These processes include prenatal, neonatal, adulthood, middle adulthood, and the older adult. The use of Erikson's Psychosocial Development Theory emphasizes growth, development, and psychosocial tasks.
5. Skills competency – encompasses math and technical skills that require practice to develop mastery with defined criteria and time limits. Skills competency and math mastery are components of each nursing course. Math mastery is the achievement of cognitive, process-oriented, and progressively complex methods for interpreting the problem and calculating for the solution. Technical skills are composed of cognitive and psychomotor skills that need to be mastered for the safe delivery of nursing care. Skill competency is the achievement of the mastery of these technical skills.
6. Communication – encompasses the affective, the cognitive, and psychomotor domains in communicating with the client, family, health care team members, and community. Communication includes verbal, written, and behavioral dimensions that cross various cultures, age groups, and professional fields and disciplines. Therapeutic communication is emphasized as well as legally acceptable documentation on the client record. Student accountability is emphasized for documenting nursing care provided and documenting other interventions and communication on the client's behalf.
7. Teaching/Learning – emphasizes teaching-learning principles across the lifespan. Teaching plans are designed specific to the nursing diagnosis and client readiness and development. Discharge teaching is emphasized upon admission of the client to the healthcare system.
8. Nursing Process – defines the critical decision-making skills that provide the structure in which nursing care is delivered and evaluated. The five steps of the nursing process are assessment, analysis, planning, implementation, and evaluation. The nursing process is a circular and on-going activity with the client that incorporates the client's environment, point on the health-illness continuum, psychosocial development, and culture.
9. Pharmacodynamics – describes a system used in conjunction with the nursing process to evaluate the mechanisms by which a drug initiates its actions, desired therapeutic effects, side effects, and administration principles. The five steps of the nursing process are emphasized in conjunction with pharmacodynamics.
10. Nutrition – incorporates the principles of nutrition with the nursing process to assess changes that have occurred in dietary consumption habits as they possibly relate to current patterns of health and disease. The nutritional component is considered for each developmental group.

ENTRY LEVEL COMPETENCIES OF TEXAS GRADUATES OF DIPLOMA/ASSOCIATE DEGREE NURSING PROGRAMS

The entry level competencies of the Diploma (DIP) and Associate Nursing Degree (ADN) graduate which build upon the entry level competencies of the Vocational Nursing (VN) graduate are listed below:

A. Provider of Care:

1. Determine the health status and health needs of clients based upon interpretation of health data and preventive health practices in collaboration with clients, their families, and interdisciplinary health care team members.
2. Formulate goals/outcomes and plan of care based on nursing diagnoses in collaboration with clients, their families and interdisciplinary health care team members.
3. Implement plan of care within legal and ethical parameters, including scope of practice, in collaboration with the client and interdisciplinary health care team to assist client in meeting health care needs.
4. Develop and implement teaching plans for clients concerning promotion, maintenance, and restoration of health.
5. Evaluate clients; responses and outcomes to therapeutic interventions.
6. Provide for the care of multiple clients either through direct care or assignment and/or delegation of care to other members of the health care team.
7. Use critical thinking approach to analyze clinical data and current literature as a basis for decision making in nursing practice.

B. Coordinator of Care:

1. Coordinate human and material resources for the provision of care for clients and families.
2. Collaborate with clients, families and the interdisciplinary health care team for the planning and delivery of care.
3. Refer clients and families to resources that facilitate continuity of care.
4. Function within the organizational framework of various health care settings.

C. Member of a Profession:

1. Assume accountability and responsibility for the quality of nursing care provided to clients and families.
2. Act as an advocate to promote the provision of quality health care for clients.
3. Participate in activities that promote the development and practice of professional nursing.

The Board of Nurse Examiners for the State of Texas and Texas Board of Vocational Nurse Examiners. (February 2002). *Differentiated entry level competencies of graduates of Texas nursing programs*. Austin, TX: Authors.

CURRICULUM ARRANGEMENT

SEMESTER	COURSES	THEORY CONTENT	CLINICAL LAB EXPERIENCE	FACILITIES & UNITS
First Semester Freshman Year	RNSG 1523 RNSG 1205 RNSG 1360	Fundamentals Physical Assessment Perioperative	Fundamentals Perioperative	Medical Center of Plano; Presbyterian Hospital of Plano; Medical City of Dallas; North Central Medical Center (use med/surg, SNF, outpatient surgery units)
Second Semester Freshman Year	RNSG 2404 RNSG 1144 RNSG2361	Mental Health Obstetrical Neonate Reproductive Disorders Advanced Skills	Psychiatric/Mental Health; Reproductive & Maternal/Child	Medical Center of Plano; Presbyterian Hospital of Plano; Terrall State Hospital; Seay Center (In-patient Psychiatric Units; OB, Gyn and nursery units)
Summer Semester	RNSG 1347 RNSG 2161	Pain Assessment GI System Disorders Musculoskeletal Disorders	Medical/Surgical Adult Health	Medical Center of Plano; Presbyterian Hospital of Plano; Medical City of Dallas; North Central Medical Center (use med/surg units)
First Semester Sophomore Year	RNSG 2414 RNSG 2462	Pediatric Overview CV Disorders Pulmonary Disorders Renal Disorders	Medical/Surgical Adult Health; Pediatrics	Medical Center of Plano; Presbyterian Hospital of Plano; Children's Medical Center (med/surg; critical care; & pediatric units)
Second Semester Sophomore Year	RNSG 2435 RNSG 2207 RNSG 2463	Endocrine Disorders Neurological Disorders Immune Disorders Transition to Nursing	Medical/Surgical Adult Health; Pediatrics	Medical Center of Plano; Presbyterian Hospital of Plano; Children's Medical Center (med/surg; critical care; & pediatric units)

RNSG 1523
Introduction to Professional Nursing

Course Level: Introductory; First Semester Freshman Year

Course Credit: 5 credit hours; 80 lecture hours

Course Description: Introduction to the profession of nursing, including the roles of the registered nurse with emphasis on the application of a systematic, problem-solving process to provide care to diverse clients across the lifespan; and including applicable competencies in knowledge, judgment, skills, and professional values within a legal/ethical framework. Content includes applicable competencies in basic workplace skills. Concurrent enrollment in a clinical is required.

Learning Outcomes:

1. Describe the roles of the professional nurse in a variety of health care settings.
2. Discuss the legal and ethical parameters of professional nursing practice, including the Nursing Practice Act.
3. Identify health promotion needs for diverse clients across the lifespan.
4. Identify principles and develop skills for safe basic nursing care, including medication administration.
5. Utilize the nursing process to develop a holistic plan of care for a client with basic health care needs.
6. Identify purposeful and therapeutic communication techniques and application to nursing practice.
7. Demonstrate personal accountability and responsibility for providing safe nursing care.
8. Discuss principles of decision making utilized in the nursing process.

Methods of Instruction: Lecture-discussion, small group discussion, simulated client situations, computer programs, videotapes, case study

Evaluation: The course grade will be determined through the following process:

Periodically scheduled examinations	70%
Comprehensive Final examination	25%
Computer programs	5%

Instructors: Trudy Dowden, MS, RN
Mary Jo Giles, WHNP, MSN, RN
Barbara Rickert, Ph.D., RN
Kim Washington, MSN, RN
Kim Morgan Trester, FNP, MS, RN

RNSG 1360
Clinical I – Nursing (R.N. Training)

Course Level: Introductory; First Semester Freshman Year

Course Credit: 3 credit hours; 192 clinical hours

Course Description: A method of instruction providing detailed education, training and work-based experience, and direct patient/client care, generally at a clinical site. Specific detailed learning objectives are developed for each course by the faculty. On-site clinical instruction, supervision, evaluation, and placement are the responsibility of the college faculty. Clinical experiences are unpaid external learning experiences. Clinical experiences take place in adult health care settings with emphasis on fundamental principles of nursing. Course may be repeated if topics and learning outcomes vary.

Learning Outcomes:

1. Apply the theory, concepts, and skills involving specialized materials, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the profession of nursing.
2. Demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills in the clinical setting.
3. Communicate in the applicable language of the profession of nursing.
4. Provide care for one to two clients, utilizing the nursing process.
5. Identify the role of the associate degree nurse as a member of the profession of nursing.

Methods of Instruction: Selected clinical experiences, care plans, computer programs, and multiple assignments for beginning nursing care in the clinical, pre-conference, post-conference, and other assignments as indicated.

Evaluation Methods: The course grade will be determined through the performance of daily clinical activities as measured by the Clinical Evaluation Tool and written assignments. The clinical evaluation tool has a point distribution for each activity defined on the tool.

Clinical Evaluation Grade	60%
Nursing Care Plan #1	15%
Nursing Care Plan #2	20%
Computer programs	5%

Faculty:

Trudy Dowden, MS, RN
Mary Jo Giles, WHNP, MSN, RN
Karyn Holt, MS, CNM, RN
Janet Mansir, MS, RN
Barbara Rickert, Ph.D., RN
Diane Schull, Ph.D., RN
Kim Washington, MSN, RN

RNSG 1205
Integrated Nursing Skills I

Course Level:	Introductory; First Semester Freshman Year						
Course Credit:	2 credit hours; 64 contact hours (16 lecture & 48 lab hours)						
Course Description:	Study of the concepts and principles essential for demonstrating competence in the performance of nursing procedures. Topics include knowledge, judgment, skills, and professional values within a legal/ethical framework.						
Learning Outcomes:	1. Describe concepts and principles that are basic to the safe performance of nursing skills. 2. Demonstrate competence in the performance of nursing procedures.						
Methods of Instruction:	Lecture-discussion, simulated client situations, demonstration/return demonstration, A-V slide and tapes, practice, and computer lab simulations.						
Evaluation:	The final course grade for RNSG 1219 will be determined by the point achievement on simulated clinical scenarios. Final course grades will also be determined by periodic unit exams and/or quizzes which will all be averaged into the final course grade. <table><tr><td>Clinical Scenarios (3 of them)</td><td>80% of grade</td></tr><tr><td>Final</td><td>15% of grade</td></tr><tr><td>Computer programs/quizzes</td><td>05% of grade</td></tr></table>	Clinical Scenarios (3 of them)	80% of grade	Final	15% of grade	Computer programs/quizzes	05% of grade
Clinical Scenarios (3 of them)	80% of grade						
Final	15% of grade						
Computer programs/quizzes	05% of grade						
Faculty:	Julie Brinzo, MBA, RN Trudy Dowden, MS, RN Mary Jo Giles, WHNP, MSN, RN Susan Kamath, MN, RN Barbara Rickert, Ph.D., RN Kim Washington, MSN, RN						

RNSG 2404
Integrated Care of the Client With Common Health Care Needs

Course Level:	Intermediate; Second Semester Freshman Level
Course Credit:	4 credit hours; 64 lecture hours
Course Description:	Application of a systematic problem-solving process and critical-thinking skills to provide nursing care to diverse clients/families across the life span with common health care needs. Opportunities for collaboration with members of the multidisciplinary health care team. Content includes applicable competencies in knowledge, judgment, skills, and professional values within a legal/ethical framework. Concurrent enrollment in a clinical is required. Areas of focus include psychiatric mental health, pain assessment and management, reproductive and women's health, and maternal/newborn

health care. This course consists of two rotations: psychiatric mental health and maternity and reproductive health.

Learning Outcomes:

1. Apply principles of critical thinking and a systematic problem-solving approach when caring for clients/families with common health care needs.
2. Describe principles of health promotion.
3. Apply therapeutic communication skills to maintain effective interpersonal relationships.
4. Demonstrate collaborative behavior as a member of the multidisciplinary health care team.
5. Describe the legal and ethical parameters of nursing for clients/families experiencing common health care problems.
6. Explain the need for personal and professional growth.
7. Discuss the application of the Nursing Practice act in relation to clients experiencing common health care needs.
8. Describe common needs of the client/family experiencing childbirth.
9. Describe common needs of the client/family experiencing reproductive disorders.
10. Describe common needs of the client/family experiencing disturbances in psychiatric mental health.

Methods of Instruction

Lecture-discussion, small group discussion, simulated client situations, learning modules where appropriate, AV media, demonstrations and practice, selected clinical experiences, process recordings, multiple assignments for nursing care in the clinical, pre-conference, and post-conference.

Evaluation

The course grade will be determined by averaging the grades obtained from the Psychiatric Mental Health rotation and the Maternity and Reproductive Health rotation. The following process will be used to determine the course grade:

Psychiatric Mental Health rotation:

Two scheduled examinations (22.5% each)	45%
Computer programs	5%

Maternity and Reproductive Health rotation:

Two examinations (12.5% each)	25%
Integrated examination	20%
Computer programs	05%

Faculty:

Trudy Dowden, MS, RN
Mary Jo Giles, WHNP, MSN, RN
Barbara Rickert, Ph.D., RN
Kim Washington, MSN, RN
Kim Morgan Trester, FNP, MS, RN

RNSG 1144
Nursing Skills II

Course Level:	Intermediate; Second Semester Freshman Year								
Course Credit:	1 credit hours; 48 lab hours								
Course Description:	Study of the concepts and principles necessary to perform intermediate or advanced nursing skills for care of diverse clients across the life span. Topics include knowledge, judgment, skills, and professional values with a legal/ethical framework.								
Learning Outcomes:	1. Describe concepts and principles that are basic to the safe performance of nursing skills. 2. Demonstrate competence in the performance of nursing procedures. 3. When presented with a clinical scenario, demonstrate critical-thinking skills to make decisions and implement care. 4. Demonstrate the performance of skills that utilize concepts and practices previously learned.								
Methods of Instruction	Lecture-discussion, simulated client situations, demonstration/return demonstration, AV tapes, practice, and computer lab simulations.								
Evaluation:	The final course grade for RNSG 1229 will be determined by the following process: <table><tr><td>Clinical scenarios (5 of them @ 16% each)</td><td>80%</td></tr><tr><td>Computer programs/quizzes</td><td>05%</td></tr><tr><td>Comprehensive final exam</td><td>15%</td></tr></table>			Clinical scenarios (5 of them @ 16% each)	80%	Computer programs/quizzes	05%	Comprehensive final exam	15%
Clinical scenarios (5 of them @ 16% each)	80%								
Computer programs/quizzes	05%								
Comprehensive final exam	15%								
Faculty:	Julie Brinzo, MBA, RN Trudy Dowden, MS, RN Mary Jo Giles, WHNP, MSN, RN Susan Kamath, MN, RN Barbara Rickert, Ph.D., RN Kim Washington, MSN, RN								

RNSG 2361
Clinical II – Nursing (R.N. –Training)

Course Level: Intermediate; Second Semester Freshman Level

Course Credit: 3 credit hours; 192 clinical hours

Course Description:

A method of instruction providing detailed education, training and work-based experience, and direct patient/client care, generally at a clinical site. Specific detailed learning objectives are developed for each course by the faculty. On-site clinical instruction, supervision, evaluation, and placement are the responsibility of the college faculty. Clinical experiences are unpaid external learning experiences. Course may be repeated if topics and learning outcomes vary. Areas of focus include psychiatric mental health, reproductive and women's health, and maternal-newborn settings. This course consists of two rotations: psychiatric mental health and maternity & reproductive health.

Learning Outcomes:

1. Apply the theory, concepts, and skills involving specialized materials, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the profession of nursing.
2. Demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills in the clinical setting.
3. Communicate in the applicable language of the profession of nursing.
4. Provide care for one to two clients, utilizing the nursing process.
5. Identify the role of the associate degree nurse as a member of the profession of nursing.
6. Utilize the nursing process to provide nursing care to meet the needs of the individual and the family within structured care settings.
7. Individualize nursing care for all clients yet focus upon the nursing care of clients experiencing:
 - a. Disturbances in psychiatric/mental health
 - b. Disturbances in reproductive and women's health.
 - c. Normal and/or disturbances in maternal and newborn health.

Methods of Instruction:

Selected clinical experiences, process recordings, nursing care plans, clinical scenarios, case studies, guest speakers, pre-conferences, and post-conferences

Evaluation:

The course grade will be determined through the performance of daily clinical activities as measured by the Clinical Evaluation Tool. The clinical evaluation tool has a point distribution for each activity defined on the tool. The daily clinical evaluations are averaged to determine the final course grade. Both rotations this semester will carry separate grades.

The following process will be used to determine the final course grade:

- a. **Psychiatric Mental Health rotation:**
 - i. Clinical evaluation tool 30%
 - ii. Process recordings (2 @ 5% each) 10%
 - iii. Computer programs 10%

- b. Maternity & Reproductive Health rotation:
 - i. Clinical evaluation tool 35%
 - ii. Nursing Care Plan 15%

Faculty:

Trudy Dowden, MS, RN
 Mary Jo Giles, WHNP, MSN, RN
 Karyn Holt, MS, CNM, RN
 Janet Mansir, MS, RN
 Barbara Rickert, Ph.D., RN
 Diane Schull, Ph.D., RN
 Kim Washington, MSN, RN

RNSG 1347
Concepts of Clinical Decision-Making

Course Level: Intermediate; Summer Session

Course Credit: 3 credit hours; 64 lecture hours

Course Description: Integration of previous knowledge and skills into the continued development of the associate degree nurse as a provider of care, coordinator of care, and member of the profession emphasizing clinical decision-making, knowledge, judgment, skills and professional values within a legal/ethical framework. Areas of focus include musculoskeletal disturbances, gastrointestinal disturbances, and pain management. Course may be repeated if topics and learning outcomes vary.

- Learning Outcomes:
1. Utilize critical thinking and a systematic problem-solving process as a framework for providing care for clients in structured health care settings.
 2. Integrate the roles of the associate degree nurse in the provision of care for clients and families.
 3. Apply the nursing process to provide and manage family-centered nursing care for clients:
 - a. with disturbances of the musculoskeletal system
 - b. with disturbances of the gastrointestinal system
 - c. experiencing pain
 4. Identify ethical and legal responsibilities of the nurse as a member of the discipline of nursing.
 5. Identify community resources for the referral process in relation to clients with musculoskeletal disorders, with gastrointestinal disorders, and experiencing pain.
 6. Describe and implement nursing care for the client who is experiencing intravenous therapy and requiring nasogastric tube insertion and maintenance.

Methods of Instruction

Lecture-discussion, small group discussions, simulated client situations, A-v slides and tapes, demonstrations and practice, case studies, computer simulations.

Evaluation:

The course grade will be determined through the performance on three major exams (90% of course grade) and a case study presentation that counts as 10% of the course grade.

Faculty:

Barbara Devitt, MSN, RN
Debra Hurd, MS, RN
Joyce Swegle, Ph.D., RN
Kim Morgan Trester, MS, FNP, RN

RNSG 2161
Clinical III – Nursing (R.N. Training)

Course Level: Intermediate; Summer Session

Course Credit: 1 credit hour; 48 clinical hours

Course Description: A method of instruction providing detailed education, training and work-based experience, and direct patient/client care, generally at a clinical site. Specific detailed learning objectives are developed for each course by the faculty, on-site clinical instruction, supervision, evaluation, and placement are the responsibility of the college faculty. Clinical experiences are unpaid external learning experiences. Course may be repeated if topics and learning outcomes vary. Clinical experiences take place in adult health settings.

Learning Outcomes:

1. Apply the theory, concepts, and skills involving specialized materials, equipment, procedures regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the profession of nursing.
2. Demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills in the clinical setting.
3. Communicate in the applicable language of the profession of nursing.
4. Provide care for two clients, utilizing the nursing process.
5. Identify the role of the associate degree nurse as a member of the profession of nursing.
6. Utilize the nursing process to provide nursing care to meet the needs of the individual and the family within structured health care settings.
7. Individualize nursing care for all clients yet focus upon the nursing care of clients experiencing:
 - a. disturbances in gastrointestinal function
 - b. disturbances in musculoskeletal function
 - c. disturbances in pain management
8. Evaluate patient/client response to intravenous therapy and/or IV medications.
9. Implement actions in collaboration with the health care team to ensure successful IV therapy.

Method of Instruction

Selected clinical experiences, case studies, clinical projects, clinical scenarios, pre-conferences, and post-conferences.

Evaluation:

The course grade will be determined through the performance of daily clinical activities as measured by the Clinical Evaluation Tool. The clinical evaluation tool has a point distribution for each activity defined on the tool.

The following process will be used to determine the final course grade:
Clinical evaluation 100%

Faculty: Barbara Devitt, MSN, RN
Mary Jo Giles, MSN, WHNP, RN
Debra Hurd, MS, RN
Lyn Pesta, MS, RN
Diane Schull, Ph.D., RN
Joyce Swegle, Ph.D., RN
Kim Washington, MSN, RN

RNSG 2414
Care of the Client with Complex Health Care Needs

Course Level: Intermediate; First Semester of Sophomore Year

Course Credit: 4 Credit Hours; 64 lecture hours

Course Description:

Application of a systematic problem-solving process and critical-thinking skills to provide nursing care to diverse clients/families across the life span with complex health care needs in health maintenance and health restoration. Opportunities to collaborate with members of the multidisciplinary health care team. Topics include the role of the nurse as client advocate and coordinator of care and applicable competencies in knowledge, judgment, skills, and professional values within a legal/ethical framework.

Learning Outcomes:

1. Develop and implement a teaching plan for a client/family to promote health maintenance/health restoration based on assessment data.
2. Demonstrate the ability to utilize critical thinking skills to make safe and ethical clinical decisions.
3. Use a systematic problem-solving process.
4. Develop and implement a plan of care for a diverse client/family across the life span with complex health care needs in a variety of health care settings.
5. Practice within the framework of the Nurse Practice Act.
6. Apply therapeutic communication skills with diverse clients and families across the lifespan and at various points on the health-illness continuum.
7. Recognize opportunities for client advocacy and professional development activities.
8. Collaborate in multidisciplinary planning to provide care for clients/families with complex health care needs.

Methods of Instruction:

Team teaching, Role playing, Audio-Visual materials, Independent study, Computer lab modules, Study guides, Assigned references, Teacher-student conferences, College laboratory skill demonstrations and practice sessions, Supervised care of selected clients in the clinical setting: a. Written nursing care plans/teaching plans, b. Post-clinical conferences, Daily clinical evaluations

Evaluation:

The course grade will be determined through the following processes:

Three scheduled unit examinations = 80%.

Class participation grade is comprised of:

Pop Quizzes = 15%

Assignments = 5%

LS 2000 Medical/Surgical Exams #1 and #2 completed by due date listed on calendar.

Faculty:

Barbara Devitt, MSN, RN

Debra Hurd, MS, RN

Lyn Pesta, MS, RN

Joyce Swegle, Ph.D., RN

RNSG 2462
Clinical IV – R.N. Training

Course Level:

Intermediate; First Semester of Sophomore Year

Course Credit :

4 Credit Hours; 256 clinical hours

Course Description:

A method of instruction providing detailed education, training and work-based experience, and direct patient/client care, generally at a clinical site. Specific detailed learning objectives are developed for each course by the faculty, on-site clinical instruction, supervision, evaluation, and placement are the responsibility of the college faculty. Clinical experiences are unpaid external learning experiences. Course may be repeated if topics and learning outcomes vary. Clinical experiences take place in adult health & pediatric settings.

Learning Outcomes:

1. Develop and implement a teaching plan for a client/family to promote health maintenance/health restoration based on assessment data.
2. Demonstrate the ability to utilize critical thinking skills to make safe and ethical decisions.
3. Use a systematic problem-solving process.
4. Develop and implement a plan of care for a diverse client/family across the life span with complex health care needs in a variety of health care settings.
5. Practice within the framework of the Nurse Practice Act.
6. Apply therapeutic communication skills with diverse clients and families across the lifespan and at various points on the health-illness continuum.
7. Recognize opportunities for client advocacy and professional development activities.

8. Collaborate in multidisciplinary planning to provide care for clients/families with complex health care needs.
9. Provide care for two or more clients, utilizing the nursing process.
10. Individualize nursing care plans for clients yet focus upon nursing care of clients experiencing:
 - a. Pediatric illness and care
 - b. Respiratory disorders
 - c. Cardiovascular disorders
 - d. Liver-biliary disorders
 - e. Renal & urinary disorders.

Methods of Instruction:

Supervised care of selected clients in the clinical setting, nursing care plans, post-clinical conferences, teaching plan

Evaluation:

The course grade will be determined through the performance of daily clinical activities as measured by the Clinical Evaluation Tool. The clinical evaluation tool has a point distribution for each activity defined on the tool. The daily clinical evaluations, examinations, and the written project are averaged to determine the final grade. The course grade in clinical carries a separate from didactic.

The following process will be used to determine the final course grade:

Examinations (3)	5% each
Teaching Care Plan Project	10%
Clinical Evaluation	75%

Faculty: Barbara Devitt, MSN, RN
Debra Hurd, MS, RN
Lyn Pesta, MS, RN
Joyce Swegle, Ph.D., RN

RNSG 2435
Integrated Client Care Management

Course Level : Intermediate; Second Semester of Sophomore Year

Course Credit : 4 credit hours; 64 lecture hours

Course Description:

Application of client assessment skills, critical thinking, and independent nursing interventions to care for diverse clients/ families throughout the life span whose health care needs may be difficult to predict. Emphasis on collaborative clinical decision-making, nursing leadership skills, and client management. Topics include the significance of professional development, trends in the nursing and health care, and applicable knowledge, judgment, skills, and professional values within a legal/ethical framework. Areas of focus include pediatric and adult clients with alterations in defense and protection, endocrine disturbances, neurological conditions, and victims of mass casualty events.

- Learning Outcomes:
1. Utilize critical thinking and a systematic problem-solving process as framework for providing care for clients in various settings within the hospital and community.
 2. Integrate the roles of the associate degree nurse in the provision of care for clients and families.
 3. Apply the nursing process to provide and manage family-centered nursing care for clients:
 - a. with alterations in defense and protection
 - b. with disturbances of the endocrine system
 - c. with disturbances of the neurological system
 - d. involved in a mass casualty event
 4. Identify ethical and legal responsibilities of the nurse as a member of the discipline of nursing.
 5. Identify the community resources for the referral process in relation to clients with integument/infectious/immune, endocrine, and neurological disorders.

Methods of Instruction:

Lecture-discussion, small group discussion, oral/written class project, AV materials, computer assisted technology, case study analysis, teacher-student conferences, assigned readings, and reflective written clinical assignments.

Evaluation:

4 periodically scheduled unit examinations and poster presentation =100% of the course grade.

Faculty:

Barbara Devitt, MSN, RN
Debra Hurd, MS, RN
Lyn Pesta, MS, RN
Joyce Swegle, Ph.D., RN

RNSG 2207
Transition to Nursing Practice

Course Level: Intermediate; Second Semester of Sophomore Year

Course Credit: 2 Credit Hours; 48 lecture hours

Course Description:

Introduction to selected concepts related to the role of the associate degree nurse as a provider of care, coordinator of care, and member of the profession. Review of trends and issues impacting nursing and health care today and in the future. Topics include knowledge, judgement, skill, and professional values within a legal/ethical framework.

Learning Outcomes:

1. Explain the roles of the professional nurse as a provider of care, coordinator of care, and member of a profession.
2. Use critical thinking and a systemic problem-solving process as a framework for providing comprehensive care.
3. Examine multifaceted factors impacting nursing and healthcare.
4. Analyze behaviors and attitudes of the nurse that facilitate adaptation to a changing environment.

Method of Instruction:

Team teaching, Role playing, Seminar, Independent study, Assigned references, Group presentation, Attendance at professional meetings

Evaluation:

The course grade will be determined through the following process:

Student group presentation on a selected topic/issue (required for all students)	= 54%
Professional accountability for participation at Scheduled classes and seminars (Attendance is mandatory at the NCLEX class)	= 13%
Choice of:	
Service Learning	= 33%
Or	
Paper + attendance at two nursing meetings: a professional organization, TNA District 4 and a nursing specialty organization	= 33%
Total of all grade components, required and elected	= 100%

Faculty: :

Barbara Devitt, MSN, RN
Debra Hurd, MS, RN
Lyn Pesta, MS, RN
Joyce Swegle, Ph.D., RN

**COLLIN COUNTY COMMUNITY COLLEGE
ASSOCIATE DEGREE NURSING**

Clinical Evaluation Tool

Clinical Grading: The student's formative and summative clinical grade will result from weekly performance feedback and use of the following forms:

Daily/Weekly Clinical Evaluation Tool
Criterion-Referenced Standards of Clinical Performance
Midterm and Final Clinical Performance Summary

Weekly, using the Daily/Weekly Clinical Evaluation Tool and the Criterion-Referenced Standards of Clinical Performance, students will self-assess their clinical performance for that week. The clinical instructor will then review the student's self-assessment and also rate the student's clinical performance. Any discrepancies between the student's and the instructor's performance ratings will be discussed and explored. This is an ongoing, evolving evaluation process.

At midterm and at the completion of the clinical rotation, the instructor will compile a percentage average (taken from the **Daily/Weekly Clinical Evaluation Tool** records) that demonstrates the student's level of achievement of the competencies.

The final course grade integrates instructor assessments made on the **Daily/Weekly Clinical Evaluation Tool** and feedback given to the student during the course. The final course grade is recorded on the **Midterm and Final Clinical Performance Summary**, is reviewed with the student, and placed in the student's permanent file. *The instructor's assessment of student performance is the final basis for the final grade earned in the clinical course.*

**COLLIN COUNTY COMMUNITY COLLEGE
ASSOCIATE DEGREE NURSING**

Midterm and Final Clinical Performance Summary

General Information:

This document identifies entry-level professional competencies for a registered nurse. Students are evaluated on their ability to demonstrate these behaviors throughout the nursing curriculum.

Competency A, Provider of Care, describes nurse behaviors specific to "The Nursing Process".

Competency B, Coordinator of Care, describes nurse behaviors that demonstrate integration of management concepts and organizational strategies.

Competency C, Member of the Profession, describes nurse behaviors that demonstrate professional ethics, accountability, and patient advocacy.

The following behaviors, normally found within "The Nursing Process" have been given separate distinction because of their importance to patient safety, and because the performance of these behaviors requires integration of all three competencies (A, B and C):

Safety/Asepsis

Medications
Documentation
Critical Thinking

Performance Competencies are “weighted” in importance based upon the student’s level in the nursing program and the particular course being graded. (Example: The Competency “Critical Thinking” is increasingly weighted as the student progresses through the nursing curriculum.)

Refer to the Summarized Scoring and Comments page found at the end of the Performance Summary, identifying course weights for each competency.

PERFORMANCE SUMMARY

The Nursing Process_____

Earned Grade Points

(Includes Items I-VII, Competency A: Provider of Care)

Midterm	Final

- I. Determine the health status and health needs of clients and their families based upon interpretation of health data in collaboration with clients, families, and other health care professionals.
 - A. Assessment
 1. Performs appropriate physical assessment on assigned client(s).
 2. Incorporates laboratory, diagnostic, and chart findings into assessment data.
 - B. Analysis
 1. Interprets data to formulate appropriate nursing diagnosis for assigned client(s).
 2. Supports the identified nursing diagnoses to include:
 - a. Related factors
 - b. Appropriate subjective data
 - c. Appropriate objective data
 3. Prioritizes nursing diagnoses according to assessment findings.
- II. Formulate goals and plan of care for clients and their families based on nursing diagnoses in collaboration with clients, families, and other health care professionals.
 - A. Planning
 1. Prioritizes nursing care based on assessment findings.
 2. Formulates appropriate measurable outcomes for self and client.
 3. Collaborates with other health care team members and with the client/significant other.
 4. Designs care in a systematic, logical manner.

III. Implement the plan of care within legal and ethical parameters in collaboration with clients, families, and other members of health care professionals to assist clients and their families to meet health care needs.

A. Implementation

1. Incorporates scientific rationale for nursing interventions.
2. Applies theoretical knowledge by making appropriate judgments and decisions for nursing care.
3. Implements care specific to identified nursing diagnoses and priorities.
4. Performs all current and past skills according to designated criteria.
5. Implements care according to the prescribed plan of care.

IV. Develop and implement teaching plans for clients and their families concerning promotion, maintenance, and restoration of health.

A. Teaching

1. Identifies client-centered learning needs based on individualized assessment that is
 - a. Appropriate to client/significant other
 - b. Developmentally appropriate
 - c. Timely
 - d. Appropriate to the situation
 - e. Collaborative with other health care providers
2. Develops and implements teaching/discharge plan.
3. Evaluates effectiveness of teaching/discharge instructions.

V. Evaluate client and family responses to therapeutic interventions.

A. Evaluation

1. Collects data throughout the clinical experience in order to evaluate the client's response.
2. Evaluates the effectiveness of nursing actions.
3. Evaluates stated client outcomes with actual client outcomes.

VI. Provide for the care of client(s) and their families in structured settings either through direct care or assignment and/or delegation of care to other members of the health care team.

A. Preparation/Organization for Clinical

1. Selects clients according to clinical and level objectives.

2. Obtains client assignment from student leader (SL).
3. Posts assignments according to agency/school policy.
4. Organizes a nursing care flow sheet.
5. Devises or develops a daily plan of care. (Eg. textbook picture, priorities of care, organizational flow sheet, etc.)
6. Discusses assignment knowledgeably, based on preparation.

B. Manager of Client Care

1. Receives a report on all assigned clients.
2. Completes an assessment and charting on all assigned clients.
3. Advises appropriate nurse of any changes in client's status.
4. Completes total client care on all assigned clients.

VII. Use clinical data and current literature as a basis for decision-making in nursing practice.

Coordinator of Care-----

(Includes Items I-IV, Competency B: Coordinator of Care)

**Earned Grade
Points**

Midterm	Final

I. Coordinate human and material resources for the provision of care for clients and their families.

A. Management and Organization

1. Manages care for assigned client(s) that is:
 - a. Organized
 - b. Timely
 - c. Cost-effective
 - d. Appropriate
2. Demonstrates flexibility and adaptability when clinical/client situations change
3. Brings correct materials/equipment to clinical.
4. Completes required written assignment(s) as designated.

II. Collaborate with clients, their families, and other health care professionals to provide care.

A. Communication

1. Introduces self to client/significant other and explains the purpose of the relationship.
2. Demonstrates therapeutic communication techniques that are:
 - a. Client-centered
 - b. Dignified
 - c. Reality-based
 - d. Appropriate to situation (age, developmental level, cognitive level, education level, etc.)
3. Reports pertinent information to clinical instructor/health care provider.
4. Utilizes appropriate and effective communication techniques with
5. Uses non-verbal communication that is congruent with verbal message.

III. Refer clients and their families to appropriate sources of assistance when necessary to meet health needs.

1. Identify providers and resources to meet the needs of clients and their families.
2. Facilitate communication between client/family member and community resources.
3. Advocate on behalf of the client or family with other members of the health care team.

IV. Function within the organization framework of various structured health care settings in planning and providing care for clients and their families.

1. Identify and participate in activities to improve health care delivery within the health care setting.
2. Make referrals to appropriate individuals within the organization for corrective action.
3. Select human and material resources that are optimal, legal, and cost effective to achieve organizational goals.

Member of the Profession-----

(Includes Items I-III, Competency C: Member of the Profession)

**Earned Grade
Points**

Midterm	Final

I. Assume accountability and responsibility for the quality of nursing care provided to clients and families.

A. Professional**

1. Demonstrates acceptance of school/agency policies and procedures.
2. Reports to clinical area on time.
3. Submits completed assignments on time.
4. Reports to conference on time.

5. Maintains client confidentiality.
6. Recognizes one's own limitations and responds/acts accordingly.

B. Affective Behavior

1. Demonstrates the professional nursing role by:
 - a. Acknowledge instructor feedback by written or verbal response.
 - b. Demonstrating insight into own learning needs using both written and verbal self-evaluation.
 - c. Demonstrating consistent improvement in identified areas of need.
 - d. Expressing concerns to others in an assertive manner.
 - e. Assuming accountability for decisions and/or actions.
 - f. Assuming responsibility for expansion and continued development of own knowledge base.
 - g. Performing nursing care with a positive approach.
 - h. Demonstrating respect for others.

C. Initiative

1. Volunteers for additional learning experience beyond assigned client care.
2. Involves self in finding solution to problems.

II. Acts as an advocate to promote the provision of quality health care for clients and their families.

1. Identify client's and family's unmet needs.
2. Identify organizational procedures for reporting/solving client care problems.
3. Assist health care providers in reporting client care problems.

III. Participate in activities that promote the development and practice of nursing.

1. Promote positive image of nursing.
2. Serve as a positive role model for members of the health care team.
3. Provide care to clients and their families in a calm, mature, and/or self-controlled manner.

Safety/Asepsis-----**Earned Grade
Points**

Midterm	Final

1. Identifies risk situations
 - a. maintains safe environment
 - b. identifies potential for falls and skin impairment
 - c. maintains a safe environment
 - d. identifies client prior to giving nursing care
 - e. identifies allergies
 - f. verifies physician's orders prior to giving care
2. Performs standard precautions in all client/clinical situations.
3. Maintains sterile technique when indicated.

Medications-----**Earned Grade
Points**

Midterm	Final

1. Verbalizes knowledge of each medication to each specific client situation including:
 - a. Classifications
 - b. Actions
 - c. Indications
 - d. Major side effects/adverse reactions
2. Prepares all medications correctly
 - a. Calculates dose correctly
 - b. Selects/Utilizes appropriate equipment
3. Administers medications according to the five/six rights of drug administration.
 - a. Gives medications under the supervision of the instructor
 - b. Documents medication administration correctly according to agency policy.
4. Provides client teaching.

Documentation-----**Earned Grade
Points**

Midterm	Final

1. Documents appropriately using
 - a. Agency forms
 - b. Approved abbreviations
 - c. Medical terminology
2. Documents
 - a. Legibly
 - b. Accurately
 - c. Timely
3. Documents the client's behavior and responses to interventions.

Critical Thinking-----**Earned Grade
Points**

Midterm	Final

1. Uses critical thinking as a basis for decision-making in nursing practice.
2. Reads and discuss relevant, current nursing practice.
3. Recognizes societal trends in relation to health problems/health promotion.

(Note: Pagination differs for actual form.)

CRITERION-REFERENCED STANDARDS OF CLINICAL PERFORMANCE
(Adapted from Krichbaum 1994)

Criteria Initiation	1 Unsatisfactory	2 Provisional	3.5 Assisted Minimally accepted standard	4 Supervised	5 Independent
Effective- ness	Unable to complete task despite continuous cues. Unable to identify or apply principles of care.	Not always accurate. Requires continuous cues. Identifies fragments of principles or applies them inappropriately.	Performs behaviors/activities accurately with frequent supportive or directive cues. Identifies principles but needs help to apply them.	Performs behaviors/activities with occasional supportive or directive cues. Applies theoretical knowledge w/ occasional cues.	Performs behaviors/activities purposefully and accurately, reflecting sound theoretical knowledge base each time the behavior is observed.
Affect	Focuses entirely on own behavior or performance. Appears frozen or unable to relax. Inflexible/rigid, immature, or unprofessional conduct. Unable to cooperate with others.	Focuses entirely on task or own behavior/performance and not on client. Appears anxious, flustered. Rigid behavior. Inappropriate professional behavior.	Focuses primarily on task or own behavior/performance and not on client. Appears anxious, uneasy, apprehensive. Demonstrates inconsistency in adapting to change during times of stress. Occasionally unprofessional.	Focuses on patient/ others initially but lapses when complexity of task/ interaction increases. Appears generally relaxed and confident but occasional anxiety observed. Occasionally lacks flexibility and or maturity. Professional attitude	Focuses entirely on patient during care. Appears relaxed and confident. Demonstrates maturity under duress. Demonstrate flexible attitude. Conducts self in a thoroughly professional manner.
Communic ation	Aggressive or inappropriate communication. Constantly misinterprets information. Unable to apply concepts of therapeutic goal-directed patient communication. Verbal/nonverbal incongruent.	Needs prompting to communicate effectively with others. Needs repeated instructions needed to follow through on activities/behaviors. Ineffective or non- goal directed therapeutic communication. Frequent non congruent verbal/nonverbal behavior.	Communication with others not totally effective. Needs prompting to be effective. Needs occasional prompting to initiate goal directed therapeutic communication with patient. Consistently congruent with verbal and nonverbal behavior	Consistently applies effective communication techniques. Uses goal directed communication with patient and significant others. Consistently congruent with verbal and nonverbal communication	Appropriate, respectful, and assertive when communicating with others. Congruent verbal/nonverbal. Initiates goal directed therapeutic communication with patients and significant others.
Safety	Performs in an unsafe manner or unable to demonstrate desired behaviors. Actions are hazardous to self or others.	Performs safely under supervision only	Performs behaviors/activities in a safe manner each time observed	Performs behaviors/activities in a safe manner each time observed	Performs behaviors/activities in a safe manner each time observed
Initiative	Requires continuous directives and supportive cues to function. Instructor may need to complete the activity or task.	Requires continuous supportive and directive cues to complete activity.	Requires frequent supportive cues and occasional directive cues to accomplish tasks.	Requires occasional supportive or directive cues to accomplish task. Communicates care performed	Requires no supportive cues from the instructor. Informs instructor of intentions and communicates readily and appropriately.
Efficiency	Performs in an unskilled, disorganized, or untimely manner. May be unable to complete activity.	Demonstrates lack of skill; uncoordinated in majority of behaviors and actions. Activities are disrupted or omitted; performs activities w/ considerable delays and lack of time awareness.	Demonstrates partial lack of skill and/ or dexterity in part of activity- uses awkward movements. Wastes energy/resources due to poor planning and repeated behaviors.	Demonstrates dexterity, but uses some unnecessary energy to complete activities in a timely manner. Spends reasonable time on tasks.	Demonstrates dexterity. Spends minimal time on task appropriate to the situation. Does not waste resources.

**COLLIN COUNTY COMMUNITY COLLEGE DISTRICT
ASSOCIATE DEGREE NURSING RNSG 2463
DAILY/WEEKLY EVALUATION TOOL**

Name: _____ Assigned Location: _____ Date: _____

Key: Instructor and self-evaluation are based on Criterion based reference form. Refer to the complete descriptions of clinical objectives that are defined on the midterm/final evaluation form. Numerical values range from 5 to a 1. To change the numerical value into points or a percentage based on 100, multiply the numerical value by 20. For example $3.5 \times 20 = 70$ (minimal acceptable standard). Fractions of the numerical values may be given at the discretion of the instructor.

STUDENT						CLINICAL CRITERIA	INSTRUCTOR					
1	2	3.5	4	5	N/A		1	2	3.5	4	5	N/A
						3.5 is minimally accepted standard						
						PROVIDER OF CARE THE NURSING PROCESS						
						COORDINATOR OF CARE						
						*MEMBER OF THE PROFESSION						
						*SAFETY/ASEPSIS						
						*MEDICATIONS						
						DOCUMENTATION						
						CRITICAL THINKING						

*Denotes overriding areas of concern

INSTRUCTOR COMMENTS:

After reflecting on all of your experiences this week:

1. Choose one at least one event that enriched your learning. Explain why this felt like an exceptional accomplishment to you.
2. List at least one area you plan on improving upon, in order to become more Confident, Comfortable and Competent. Be specific
3. What approaches will you apply to become confident, comfortable, and competent?
4. Look back to last week's goal as related to becoming more confident, comfortable, and competent. Do you see progress? Explain.

Instructor Signature: _____ Student

Signature: _____

Date _____

Weights on Clinical Evaluation Tool by Course

CATEGORY	RNSG 1360	RNSG 2361	RNSG 2161	RNSG 2462	RNSG 2463
The Nursing Process (Provider of Care)	35	30	30	25	25
Coordinator of Care	10	15	15	20	15
Member of the Profession	15	10	10	10	10
Safety/Asepsis	15	15	10	10	10
Medications	5	10	10	10	10
Documentation	15	10	10	10	10
Critical Thinking	5	10	15	15	20

SYSTEMATIC EVALUATION PLAN

CRITERION 1: Mission and/or philosophy of the nursing unit is congruent with that of the governing organization or differences are justified by the nursing unit purposes.		STANDARD: The program has a clear and publicly stated mission and /or philosophy and purposes appropriate to postsecondary or higher education in nursing. EXPECTED OUTCOMES: 1) Comparison of college and program mission and philosophy and outcomes shows congruent beliefs 100% of the time. 2) The program mission is clear and concise. 3) The program mission and philosophy is published at a minimum in the Associate Degree Nursing Student Handbook.							
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Possible Actions Resulting from the Assessment		
							Development	Maintenance	Revision
Mission and philosophy of CCCC:	- College Catalog - Associate Degree Nursing Student Handbook - Minutes of the CCCC Mission and Philosophy Task Force - Faculty Minutes	Nursing Faculty	Annually each May	- Compare governing principles of CCCC and program mission, philosophy, and outcomes for congruency - Examine faculty beliefs about nursing education, and the AD nurse graduate - Once each year the Board of Trustees reviews the goals, vision, and mission of the college.	The method of group discussion has face validity in that the nursing faculty constitute a "panel of experts" who concur each year that the program and college mission, philosophy and outcomes are congruent.	- Nursing director - Nursing Faculty	New faculty orientation	- Continue same program goals - Continue annual process	- Changes in program mission, philosophy, and outcomes reflect changes in college statements and/or faculty beliefs. - Re-evaluate consistency of nursing program mission and/or philosophy when the CCCC Task Force on Mission and Philosophy revises this document.

STANDARD: The program has a clear and publicly stated mission and/or philosophy and purposes appropriate to postsecondary or higher education in nursing.						
EXPECTED OUTCOMES:						
1) All of the faculty serve on college-wide committees and/or task forces.						
2) Ninety (90%) percent of the faculty will attend regularly scheduled faculty meetings.						
3) There will be student representatives/officers for each class						
4) The nursing faculty will be represented at Dean's Council.						
5) One hundred (100%) of the regularly scheduled faculty meetings will reflect faculty participation on departmental issues.						
6) Level coordinators will be identified each academic year to carry out curriculum and course needs.						
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data
Governance structure	• Faculty minutes • CCCC Faculty and Staff Handbook • Job Descriptions • ADN Student Handbook • NLN Faculty Data Sheets • Minutes off the Faculty Senate • Minutes of Team Meetings	• Nursing Director • Nursing Faculty	• Annually at August faculty meeting • Student election of officers each Fall	• Review committee assignments for program and college-wide committees for representation by faculty and nursing director • Determine percentage of faculty serving on program and college-wide committees • Determine frequency of student participation in class meetings	• The method consists of discussions drawn by faculty to judge the extent of participation at faculty and team meetings.	• Nursing director and nursing faculty
						• Encourage new faculty to serve on college-wide committees and task forces • Encourage nursing faculty to serve on Faculty Senate
						• Replace members a term on a committee with other nursing faculty • Continue involvement in Faculty Senate • Maintain minutes of team meetings
						• Encourage input and participation at nursing faculty meetings on an ad hoc basis
Delete #6 to Dean's Council? Representative to Dean's Council? Class mts need to be done availability of class mts? regularly sch. mts? → regularly						

CRITERION 3: Nursing unit is administered by a nurse who is academically and experientially qualified and who has authority and responsibility for development and administration of the nursing program.									
STANDARD: The program has a clear and publicly stated mission and/or philosophy and purposes appropriate to postsecondary or higher education in nursing.									
EXPECTED OUTCOMES: 1) One hundred (100%) percent of the time the nursing director will meet the job qualifications in the job description. 2) Annual evaluation and performance reviews of the nursing director will reflect satisfactory accountability for and use of authority in administering the nursing program.									
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
Qualifications and job performance of program administrator	• Job description • Credentials and vita • College transcripts on file in Human Resources • Annual evaluation by Dean • Annual evaluation by nursing faculty • Job requirements and qualification as required by Texas Board of Nurse Examiners	• Nursing Director • Division Dean • Texas Board of Nurse Examiners	• Annual Fall review of performance	• Division Dean evaluates all program directors each year. • Dean and Vice-President for Academic Affairs review job description once a year. • Opportunity is provided for nursing faculty to evaluate any or all administrative personnel on an annual basis.	• Administrative evaluation tool was revised in 1998 in consultation with Human Resources and the Deans' Council.	• Human Resources personnel file • Division personnel file • Nursing director	• Job descriptions and classifications periodically reviewed by Human Resources personnel.	• Active participation in college-wide committees • Maintenance of membership in professional organizations at the local, state, and national level. • Serve on advisory boards at the local and state level. • Serve as site visitor for the National League for Nursing Accrediting Commission.	• Update job description as needed when local needs and BNE requirements change.

↑ need #4 to delete Dean's eval. of director.

↑ need #4 to delete of division. Dean has eval.

CRITERION 4: Policies of the nursing unit are consistent with policies of the governing organization or differences are justified by nursing unit purposes.

STANDARD: The program has a clear and publicly stated mission and/or philosophy and purposes appropriate to post-secondary or higher education in nursing.

EXPECTED OUTCOMES:

- 1) One hundred (100%) of the policies of the nursing program are consistent with policies of the college.
- 2) Policies of the nursing program are reviewed on an annual basis or as the need arises.

Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Possible Actions Resulting from the Assessment		
							Development	Maintenance	Revision
Policies guidelines	• CCCC Faculty and Staff Handbook • Faculty Contractual Agreement • Associate Degree Nursing Student Handbook • Course syllabi	• Nursing Director • Division Dean • Faculty Senate • Vice President for Academic Affairs • Nursing Faculty • Clinical Agency requirements	• Faculty policies reviewed annually	• Review of nursing program and college-wide policies • Annual review of program goals and outcome with presentation to the Board of Trustees by the nursing director.	• Direct review of program policies and college policies qualitatively measures the degree to which policies are congruent with one another	• Vice President for Academic Affairs • Nursing faculty • Deans' Council • Division Dean	• Discussion led by nursing director at regularly scheduled faculty meetings	• Ongoing group discussion regarding consistency of policies and guidelines	• Adopt program policies to meet college-wide revisions

STANDARD: The program has qualified and credentialed faculty appropriate to accomplish its purposes and strengthen its educational effectiveness. EXPECTED OUTCOMES: 1) One hundred (100%) of faculty demonstrate academic and professional expertise. 2) All faculty will maintain current licensure. 3) One hundred (100%) of the full-time and part-time faculty have MS, MSN or MN with a major in nursing.									
CRITERION 5: Faculty members (full and part-time) are academically and experientially qualified and maintain expertise appropriate to teaching, service and scholarly responsibilities.									
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
Faculty Qualifications	• Rules and Regulations of the Texas Board of Nurse Examiners • Faculty contractual agreements • CCCC Faculty and Staff Handbook • NLNAC Faculty Data Forms • Faculty evaluations by nursing director and Division Dean • Individual licensure renewal • CEU certificates of nursing conferences attended • Student evaluations of faculty each semester	• Individual nursing faculty • Nursing Director • Division Dean	• Initial appointments • Annual performance evaluation of faculty in classroom and clinical setting	• Nursing director reviews faculty credentials for congruency with CCCC and the Texas Board of Nurse Examiners requirements • Individual faculty assess personal CEU needs to maintain licensure and expertise	• Texas Board of Nurse Examiners regulations dictates specific measurable requirements for maintaining licensure. • Student evaluations analyzed and trends documented. • Evaluation of faculty performance by Division Dean and nursing director	• Texas Board of Nurse Examiners • Individual faculty members • Nursing Director • Division Dean	• Keep updated on policies and competencies required by different regulatory agencies and national accreditation standards. • Individual faculty members attend continuing education seminars, conferences, and workshops.	• Biannual curriculum retreats for emerging health trends and curriculum development • Recommend master's ~ prepared nursing faculty for hire when vacancies exist.	• Faculty credentials will meet Texas Board of Nurse Examiners requirements for the year 2000-2001.

CRITERION 6: Number and utilization of full- and part-time faculty meet the needs of the nursing unit to fulfill its purposes.										STANDARD: The program has qualified and credentialed faculty appropriate to accomplish its purposes and strengthen its educational effectiveness. EXPECTED OUTCOMES: 1) Faculty: student ratios in the clinical area is no more than one to ten 100% of the time. 2) Full-time faculty workload is within the range of 15-18 student contact hours for all faculty.									
Component		Where is Documentation Found		Who Has Responsibility		Time/Frequency of Assessment		Assessment Method & Rationale		Assessment Method (reliability, validity, specificity)		Report of the Data		Possible Actions Resulting from the Assessment		Revision			
Faculty utilization		• Class/clinical schedules and load • Faculty meeting minutes • Texas Board of Nurse Examiners Rules and Regulations • CCCC Faculty and Staff Handbook • Faculty Contractual Agreement • Team meeting minutes • Texas Board of Nurse Examiners Annual Report of Nursing Programs		• Nursing Director • Level coordinators		Each semester		• Review of faculty assignments • Review of clinical groups		• Comparison of quantitative data to preset standards set by Texas Board of Nurse Examiners and faculty contractual agreement		• Nursing Director • Texas Board of Nurse Examiners		• Implement teaching across the curriculum • Mentorship of new inexperienced nursing faculty		• Faculty to student clinical ratio of 1:10 or less • Equal workload assignments of full-time faculty		• Addition of associate clinical faculty or joint appointment of faculty at a clinical agency	

CRITERION 7: Faculty performance is periodically evaluated to assure ongoing professional development and competence.		STANDARD: The program has qualified and credentialed faculty appropriate to accomplish its purposes and strengthen its educational effectiveness. EXPECTED OUTCOMES: 1) All nursing faculty will gain 20 CEUs in continuing nursing education every 2-year cycle. 2) All nursing faculty will attend one seminar or workshop each academic year related to teaching methodologies.							
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
• Faculty evaluations by students and nursing director • Performance review by Division Dean	• Faculty evaluation form • NLNAC Faculty Data Forms • Texas Board of Nurse Examiners Rules and Regulations • Teaching assignments: class and clinical practice areas • Individual CEU certificates of attendance • Individual clinical practice in the healthcare setting	• Nursing Director • Individual faculty member • Division Dean	• Student evaluations of faculty each semester • Faculty evaluation in classroom and clinical once each academic year • Copies of faculty member's CEU certificate on file in nursing director's office	• Student evaluations of faculty each semester in class and clinical settings • Faculty evaluations in classroom and clinical each academic year as required by college policy	• Standard procedures for collecting data about faculty competence • Credentialing as a clinical nurse specialist or nurse practitioner in a nursing specialty by a credible nursing organization	• Nursing director • Division Dean • Nursing faculty	• Request finding to support continuing education program via the departmental budget or Council of Excellence • Maintenance of clinical practice based on individual faculty needs and desires	• Review upcoming nursing and/or nursing education seminars for individual faculty needs and competence • Maintain file of CEU certificates in each faculty file and with nursing director	• Adjust amount required for attending a conference or seminar based on available funding by nursing department or Council of Excellence • Increase number of required CEUs per 2-year license renewal cycles based on Texas Board of Nurse Examiners requirements

CRITERION 8: Diversity of talent among the faculty demonstrates recognition of the functions of scholarship through teaching, application, integration and diversity of knowledge.				STANDARD: The program has qualified and credentialed faculty appropriate to accomplish its purposes and strengthen its educational effectiveness. EXPECTED OUTCOMES: 1) All nursing faculty participate in a team-teaching environment in the program of nursing. 2) All nursing faculty share in the teaching of nursing content based on clinical expertise and depth of knowledge about a particular discipline of nursing.					
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
Faculty utilization	• Class/clinical schedules • NLNAC Faculty Data Forms • Course outlines • Team meeting minutes • Annual Report submitted to the Texas Board of Nurse Examiners	• Nursing director • Nursing faculty	Once a semester	• Faculty maintenance of expertise in the clinical setting through maintenance of an active nursing practice or attendance at various CEU programs • Course assignments each semester by nursing director and level coordinator	• Evaluation of amount of time spent in a clinical role or PRN clinical position • Analysis of nursing faculty roles and assignments to meet the needs of the program	• Nursing director • Nursing faculty	• Collaborate with Division Dean to identify new faculty positions and availability of funding • Recommend new nursing faculty positions, full-time, and part-time, to meet needs of growing student population.	• Assign new nursing faculty to teams where there is a need for one with certain clinical expertise.	• Review nursing faculty utilization on a semester-by-semester basis to anticipate staffing needs

CRITERION 9: Student policies of the nursing unit are congruent with those of the governing organization, publicly accessible, non-discriminatory, and consistently applied; differences are justified by the nursing unit's purposes.										STANDARD: The program assures teaching and learning environments conducive to student academic achievement and lifelong learning. EXPECTED OUTCOMES: 1) Program student policies are publicly accessible, non-discriminatory and consistent with the student policies of the college 100% of the time 2) Differences between program student policies and student policies of the college are justified by the program's goals/objectives.				
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision					
Policies exist: • nondiscrimination • admission • academic progression • grading • dismissal • attendance • grievance complaints • graduation requirements • advance placement and granting credit for prior learning • clinical expectations	Documentation for compliance can be found in the following college/program publications: • CCCCD College Catalog • CCCCD Student Handbook • CCCCD program brochures • Associate Degree Nursing Student Handbook	• Nursing director • Nursing faculty • Division Dean • Admission Progression and Graduation Committee of the nursing department	Annually and as needed as revisions dictate and/or prior to reprinting	• Review program policies for accuracy and consistency between the various program and college publications • Review program policies for accuracy and consistent application between the two teams	This method is reliable as evidenced by provision of current college and program policies to students and faculty. All nursing faculty and students are informed about program student policies, are aware of differences between program and college policies, and informed regarding the rationale for program policies that differ from college policies.	• Nursing director • Nursing faculty • Division Dean • Public Information Office • Pre-Nursing Advisory Meeting participants • Nursing students	• Collaborate with Vice President of Student Services regarding proposed new policies and/or procedures (i.e. criminal background checks and drug screening). • Review and revise program student policies as indicated for student success and faculty adherence • Review program student policies for accuracy and consistency with college-wide student policies • Nursing faculty attendance at college-wide and nursing department staff development programs and in-services	• Review and revise program student policies as indicated for student success and faculty adherence • Review program student policies for accuracy and consistency with college-wide student policies • Nursing faculty attendance at college-wide and nursing department staff development programs and in-services	• Incorporate revisions in all college and program publications by reprinting or supplements • Public Information Office and Student Services supply all college campuses with updated college and program publications or supplements • Revise nursing department website to reflect nursing program policies for students enrolled in the program					

STANDARD: The program assures teaching and learning environments conducive to student academic achievement and lifelong learning. EXPECTED OUTCOMES: 1) One hundred (100%) percent of the student support services are administered by individuals professionally and educationally qualified.									
CRITERION 10: Students have access to support services that include, but are not limited to: health, counseling, academic advisement and assistance, career placement, and financial aid; the services are administered by qualified individuals.		Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
Component	Where is Documentation Found								
Student support services: • counseling services • academic advising services • financial aid • registrar and enrollment management services • testing services	• CCCCD College Catalog • Employee personnel files • Curriculum vitae or resumes of student support personnel	• Director of Human Resources • Vice-President of Student Services • Director of Enrollment Management • Registrar • Director of Academic Advising • Director of Financial Aid • Director of Testing • Director of Professional Counseling	Prior to hiring/employment	• Review credentials and qualifications of all individuals applying for and/or providing any of the student support services • Professional counselors have a Master's degree in counseling • Academic Advisors have a minimum • Academic Advisors have a minimum of a bachelor's degree. • Financial Aid advisors have a minimum of a bachelor's degree.	• All student support personnel are knowledgeable and informed about specific program support services. This method of assessment is reliable as evidenced by verification of employee credentials and qualifications from personnel files maintained in the Human Resources Office. • Human Resources verifies credentials and qualifications of all staff of CCCCD.	• Director of Human Resources • Vice President of Student Services • CCCCD Board of Trustees • Nursing Faculty • Nursing director	• Collaborate with student services administrators regarding proposed revision and/or implementation of new credentials and qualifications requirements of student support services personnel.	Review and revise required credentials and qualifications of all student support services personnel	• Incorporate revisions into all student support services job descriptions by reprinting and/or addendum • Human Resources Office provides all appropriate student support services offices and personnel with updated job credentials/qualifications requirements

STANDARD: The program accomplishes its educational and related purposes.

EXPECTED OUTCOMES:

- 1) The new nursing curriculum developed within the guidelines of the Workforce Education Course Manual will be fully implemented by Fall 2003.
- 2) The new curriculum developed by the nursing faculty will flow from the program philosophy and mission statement.
- 3) The length of the program will be 72 credit hours.
- 4) Interdisciplinary collaboration is evident at all times in the curriculum design.
- 5) Significant concepts are inter-related and reinforced throughout the program.

Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Possible Actions Resulting from the Assessment		
							Development	Maintenance	Revision
• New WECM Nursing curriculum • Program length of 72 credit hours	• Course syllabi • Nursing packet • CCCCD College Catalog • CCCCD website	Nursing director	Ongoing revision and writing of new nursing curriculum	• Review information and evaluate the program's length and requirements to assure achievement by students • Nursing faculty will meet as teams to develop new course syllabi for implementation by Fall 2001.	• The method is reliable as evidenced by rates of student retention and attrition • Nursing faculty are seen as discipline experts in their fields of clinical preparation	• Nursing director • Nursing faculty • CCCCD Curriculum Task Force	• Collaborate within faculty teams for the development of course content and course syllabi. • Present new proposed curriculum to the CCCCD curriculum Task Force for approval. • Seek approval of new degree plan from the Texas Higher Education Coordinating Board, the Texas Board of Nurse Examiners, and the National League for Nursing Accrediting Commission. • Identify program outcomes that flow from the curriculum.	• Review and revise new curriculum as needed to reflect program philosophy and mission. • Collaborate between the two teams for consistency and completeness of new curriculum.	• Incorporate and implement new curriculum in all levels of the nursing program • Evaluate the successes and pitfalls of the new graded clinical evaluation tool. • Evaluate the successes and pitfalls of the clinical scenarios implemented at the first year.

CRITERION 1A: Length of program is designed so that students can achieve program objectives and acquire knowledge, skills, values, and competencies necessary for the provision of health services.									
STANDARD: The program accomplishes its educational and related purposes.									
EXPECTED OUTCOMES:									
1) The nursing program will incorporate a ratio of 4 clock hours to 1 credit hour in each nursing course.									
2) Eighty-five (85%) percent or more of nursing students will achieve the objectives and competencies in the established program length.									
3) Total credits within the program of learning are within the generally accepted limits of 60-72 credits.									
4) Total credits within the program of learning provide a balanced distribution with no more than 60% of the total number of credits allocated to nursing courses.									
5) Course content increases in degree of difficulty and complexity from simple to complex.									
6) Each course syllabi contains methods of evaluation and grading.									
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
Program length is appropriate for students to achieve objectives, acquire skills and knowledge necessary for employment in the field.	• Student retention/attrition rates • Graduation rates • Performance on NCLEX-RN • Patterns and rates of employment • Program admission data • PSB Nursing Aptitude Test prior to admission	• Nursing director • Nursing faculty	Each semester and annually	Review information and evaluate the program's length and requirements to assure achievement by students. Knowledge and acquisition of skills necessary for progression in the program and graduation. This will lead to employment in the field.	This method of assessment is reliable as evidenced by rates of student retention/attrition, the graduation rates, the students' performance on NCLEX-RN, patterns and rates of student/graduate employment, and expressed satisfaction rates.	• Nursing director • Nursing faculty • Division Dean • Vice President of Academic Affairs • President • Nursing students • Board of Trustees	• Develop new WECM curriculum so that the length of the program does not increase but remains within the 60-72 limit of credit hours. • Identify support courses and general education courses that may increase length of program.	• Nursing faculty regularly review the rigor, currency and cohesiveness of nursing courses. • Collaborate with general education faculty and their Deans to waive pre-requisites if it increases length of program.	• Incorporate revisions in all college and nursing program publications by reprinting or providing supplements. • Seek approval from accrediting bodies of any curriculum changes.

CRITERION 14: Practice learning environments are selected and monitored by faculty and provide opportunities for a variety of learning options appropriate for comprehensive nursing.				STANDARD: The program accomplishes its educational and related purposes. EXPECTED OUTCOMES: 1) At least 80% of the nursing students will recommend the continued use of a practice learning environment or clinical setting as evidenced by course evaluations. 2) Faculty evaluation of clinical sites demonstrates sufficient patient assignments/learning experiences to compliment classroom content and fulfill course objectives. 3) Agency representatives or responsible persons will evaluate their clinical sites appropriate for the level of assigned students.					
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
Practice learning environments or clinical facilities	• Course evaluations • Student • Faculty • Agency • Affiliation agreements • Nursing faculty	• Nursing director • Nursing faculty • Clinical agency representatives	• End of each semester • Annual course evaluations	• Administer clinical evaluation surveys to • Student: course evaluation • Faculty: evaluation of clinical sites • Agency: evaluation of faculty participation • Course analysis of clinical site evaluations • Review course evaluations and faculty meeting minutes.	Evaluation forms specifically address effectiveness of various clinical agencies in attaining clinical outcomes and course objectives.	• Nursing director • Nursing faculty • Clinical agencies	Investigate feasibility of other clinical agencies and opportunities	Retain current agency affiliations	Deletions or additions to agency contracts based on trends of evaluative feedback.

STANDARD: The program has effectively organized processes and human, fiscal and physical resources necessary to accomplish its purposes. EXPECTED OUTCOMES: 1) The organization supports the educational outcomes of the nursing program through its fiscal resources.									
CRITERION 15: Fiscal resources are available to support the nursing unit purposes commensurate with resources of the governing organization									
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
Nursing Program budget	- Program budget - Carl Perkins grant - Nursing faculty minutes - Hoblitzelle grant	- Nursing director - Division Dean	Annually	- Review program budget and other documents listed. - Review previous year's action plan to evaluate achievements of outcomes. - The budget process is part of the annual master plan for the college. The health care programs are represented in this process by the Division Dean. All CCCCD programs and divisions follow the same budgetary process which is evaluated at several levels to ensure fair and equal allocation of resources.	Each Spring, nursing director and faculty review and analyze program needs. Develop goals and budget projections and rationale.	- Nursing director - Vice-President of Administration - Division Dean - Board of Trustees	Review final approved budget during the Fall of each academic year.	- Document faculty input into the program budgetary process. - Review expenditures on an ongoing basis and balance the line items.	Revise program budget annually with projections for the next academic year.

STANDARD: The program has effectively organized processes and human, fiscal and physical resources necessary to accomplish its purposes.

EXPECTED OUTCOMES:

1) Students and faculty will evaluate classroom, laboratories, multi-media facilities, conference rooms, and office spaces as satisfactory or adequate 90% of the time.

CRITERION 16: Physical facilities are appropriate to support the purposes of the nursing unit.		Possible Actions Resulting from the Assessment							
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
Physical facilities of CCCCD Central Park Campus	- Nursing faculty minutes - Director of Physical Plant - Office of Institutional Research - CCCCD Master Plan	- Nursing director - Nursing faculty - Director of Physical Plant - Associate Vice President of Institutional Research - CCCCD CPC Provost	Annually each Spring	- Analyze results of facilities survey by students and faculty - Review of college-wide physical facilities and rationale for requests is part of CCCCD master plan - Individual faculty inform nursing director or physical plant director of facility problems or desired changes. - Faculty and nursing director are informed of physical facility changes as they occur.	- Reliability is determined by comparative analysis of student facility surveys - Validity is determined by content measures of satisfaction	- Nursing director - Nursing faculty - Director of Physical Plant - CPC Provost	Report of facilities survey to college-wide staff and faculty	Continue administering the current CCCCD facilities survey tool by office of Institutional Research.	Review facilities survey tool and update as required by changes in college facilities.

CRITERION 17: Learning resources are comprehensive, current, developed with nursing faculty input, and accessible to faculty and students.									
STANDARD: The program has effectively organized processes and human fiscal and physical resources necessary to accomplish its purposes.									
EXPECTED OUTCOMES: 1) All learning resources are selected and/or developed with faculty input. 2) Eighty (80%) percent of nursing students will evaluate computer assisted instruction assignments as beneficial within individual course evaluations. 3) All students will evaluate availability of software and hardware as satisfactory. 4) All library holdings include references that are current and comprehensive as defined by the nursing faculty. 5) All students and faculty will have access to information via the Internet. 6) Each entering nursing class will have an orientation to the Learning Resources Center. 7) Each level coordinator prepares a current course syllabus each semester.									
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
• Learning Resources • Health Sciences Computer Lab • Hospital Lab	• Nursing faculty meeting minutes • List of LRC holdings • List of AV resources • CAI programs • Annual course evaluations • CCCCD ADN Student Handbook • CCCD College Catalog • LRC brochures and publications	• Nursing director • Nursing faculty • Division Dean • Dean of LRC • Health Sciences Computer Lab Coordinator • CPC Director of LRC	Annually each Spring	• Review library holdings, computer software and AV materials in the context of currency and adequacy. • Access and assess required nursing texts, videos, computer programs for currency and availability • Review college catalog for descriptions of learning resources available on campus. • Assess availability and accessibility of all students to computer lab and hospital lab. • Evaluate student comments in the context of multi-media instruction and resources.	• As experts in the educational process, nursing faculty are reliable assessors of the currency and adequacy of library and software holdings. • Individual course evaluation forms allow students to evaluate multi-media presentations and use within each course. • Individual faculty provide opportunity for students to evaluate assigned computer software. • Faculty request AV titles for purchase. • Faculty request CAI programs for purchase.	• Nursing director • Nursing faculty	Nursing faculty collaborate with colleagues from the CPC LRC to develop specific programs and/or exercises that promote learning as it relates to nursing.	• Maintain current library holdings. • Maintain current software and AV resources. • Maintain nursing faculty liaison with the CPC LRC.	• Update library, software and AV holdings. • Provide required course textbooks in the CPC LRC. • Weed LRC of nursing textbooks that are 5 years or older on an annual basis.

STANDARD: The program has an identified plan for systematic program evaluation and assessment of educational outcomes.									
EXPECTED OUTCOMES:									
1) The written plan for the systematic evaluation of the nursing program is used for analysis by the faculty and director 100% of the time.									
2) The plan for the systematic evaluation of the nursing program is implemented by the faculty at the prescribed times.									
CRITERION 18: Written planning for systematic program evaluation and assessment of outcomes include the following elements:									
• definitions of criteria and required and elective outcomes									
• defined levels of achievement (decision rules for action)									
• time frames for assessment of all plan components									
• person(s) responsible for each component of the plan									
• methods and/or tools to assess each criterion and outcome									
• reliability, validity, and trustworthiness of methods and tools used									
• data collected, analyzed, aggregated, and trended, and verification that findings are used for decision-making in program development, maintenance and revision.									
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Possible Actions Resulting from the Assessment		
							Development	Maintenance	Revision
Systematic Program Evaluation Plan	• Systematic evaluation plan • Nursing faculty minutes • Team meeting minutes	• Nursing director • Level coordinators • Nursing faculty	• As identified on the various components of the systematic program evaluation • The entire systematic program evaluation plan will be revised every 3 to 4 years if criteria developed by NLNAC changes.	• Assess the degree to which each outcome is being or has been evaluated. Evaluate benchmarks based on trended data. • Review the Systematic Program Evaluation Plan and all of its components including outcomes. • Direct review and assessment of the Systematic Program Evaluation and program-related minutes provide data necessary to determine if the plan is developed and implemented.	The Systematic Program Evaluation Plan is ongoing in relation to the continuous collection of data required by the plan. Since all components of the plan are reported to either the nursing faculty or different teams, validation of implementation is reflected in the respective minutes.	• Nursing director • Nursing faculty • Division Dean • NLNAC • Texas Board of Nurse Examiners • Vice President of Academic Affairs • President	• Develop an efficient, systematic means of tracking implementation of the plan. • Implement a statistical program for analysis of collected data and statistical measurement of the instruments used for data collection.	• Implement the Systematic Program Evaluation based on the 1999 Interpretative Guidelines for Standards and Criteria for accreditation purposes.	• Revise the Systematic Program Evaluation Plan when NLNAC revises the criteria.

CRITERION 19: Required and elective outcomes, as they relate to student academic achievement by program type, are evaluated. Required Outcome: a. Critical Thinking							STANDARD: The program has an identified plan for systematic program evaluation and assessment of educational outcomes. DEFINITION: A way of processing information based on material previously learned or recently acquired, scientific or non-scientific based, that is used to make judgments and, ultimately, decisions. It is reflective and reasonable thinking about nursing and/or client problems in a variety of settings. The application of the nursing process is to achieve client outcomes. EXPECTED OUTCOMES: 1) All nursing students will achieve a satisfactory rating on assessment and clinical decision-making competencies 80% of the total clinical day. 2) Critical thinking test scores will increase 20% or more from first testing to second testing as measured by a valid and reliable critical thinking evaluation tool. 3) Graduate ready nursing students will utilize the nursing process as a basis for critical thinking for decision-making in order to differentiate and apply therapeutic and theory-based nursing interventions to client/aggregates as evidenced by successful completion of a 32- to 36- hour role transition experience. 4) All nursing students will apply the nursing process consistently to achieve client outcomes.						
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Possible Actions Resulting from the Assessment						
							Development	Maintenance	Revision				
Critical thinking	• Clinical evaluation tool • Course syllabus • Program philosophy • Program outcomes • Course objectives • Student's theory and clinical grades	• Nursing director • Nursing faculty • Nursing students	• Formative evaluation: during each semester of the nursing program with daily clinical evaluations • Summative at the conclusion of the nursing program during the role transition clinical experience.	• Successful completion of each clinical course and didactic course on the first level. • Successful completion of each second level course concluding with the Role Transition Experience. • Rationale: To facilitate development and progression of critical thinking from that of a nursing student to one of a beginning graduate nurse. • The Role Transition experience is the capstone of the clinical experience to demonstrate nursing competency.	• Agreement between formative and summative evaluations • Analysis of Role Transition Evaluation Tool as completed by clinical preceptor and clinical instructor • Comparison of critical thinking test score results from first year in nursing school to second year prior to graduation	• Nursing director • Nursing faculty • Nursing student	• Successful completion of each nursing course in the program of study. • Develop clinical scenarios for implementation in the skills lab. • Provide in-service to faculty regarding critical thinking teaching methods. • Continue to develop critical thinking questions within each course.	• Review and analyze course and clinical objectives to meet the program outcomes. • Continue to review nursing program curriculum for inclusion of critical thinking opportunities. • Review clinical evaluation tools for specificity within each course.	• Clarify and revise course and clinical objectives. • Incorporate results of critical thinking tools to revise and update clinical and/or course objectives. • Clarify expectations of Role Transition experience with student and clinical preceptor.				

CRITERION 19: Required and elective outcomes, as they relate to student academic achievement by program type, are evaluated: Required Outcome: b. Communication Abilities										STANDARD: The program has an identified plan for systematic program evaluation and assessment of educational outcomes. DEFINITION: Communication is a process by which there is an interchange of information that may occur verbally, nonverbally, in writing, or through information technology. Included in this process are the nurse, client, significant persons, members of the health team, and appropriate community agencies. (NLN Associate Degree Nursing Competencies, 1998). EXPECTED OUTCOMES: 1) One hundred (100%) percent of students in all courses will achieve a satisfactory rating on communication/collaboration clinical competencies 80% of the total clinical days. 2) Eighty (80%) percent of graduates surveyed will rate their abilities to communicate/collaborate by indicating they are competent or highly competent in both preparation and practice of communication competencies on the graduate follow-up survey. 3) Graduate-ready nursing students will demonstrate appropriate communication skills as measured by use of written, verbal, nonverbal, and information technology modalities.									
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Possible Actions Resulting from the Assessment												
							Development	Maintenance	Revision										
Communication Abilities	• Course clinical evaluation tool • Student papers and projects: – process recordings – creative teaching projects – discharge planning – change-of-shift report • Daily clinical evaluation tool • Evaluation of role-playing in critical thinking exercises • Interactive computer program reports	• Nursing director • Nursing faculty • Nursing students	• Ongoing evaluation process in the clinical setting • Formative evaluation at the conclusion of each semester	• Successful completion of the nursing program • Successful completion of clinical requirements • Students are able to demonstrate competency in areas related to communicating with individuals and families	• Assessment using clinical evaluation tools • Analysis of clinical performance as measured by the assessment tool • Nursing Admission, Progression and Graduation Committee interrater reliability evaluation as indicated	• Evaluation tools placed in permanent student file following each semester with documentation of clinical performance • Nursing director • Nursing faculty	• Development of additional resources to facilitate the development of appropriate communication skills • Expand the use of information technology in the development and application of communication skills	• Collaboration among the faculty in identifying learning needs and facilitating communication skill development	• Revision of clinical assignments and course objectives as needed. • Revision of clinical evaluation tools as analysis of findings indicate • Review graduate follow-up surveys for appropriate and complete data required for evaluation. • Investigate the involvement of Office of Institutional Research in graduate and employer survey analysis										

CRITERION 19: Required and elective outcomes, as they relate to student academic achievement by program type, are evaluated. Required Outcome: c. Therapeutic Nursing Interventions										STANDARD: The program has and identified plan for systematic program evaluation and assessment of educational outcomes. DEFINITION: Therapeutic nursing interventions are those nurse behaviors and nurse actions that assist the client to move toward a desired or positive outcome. Caring is working with the client to create an environment of hope and trust where the client's choices are respected. Nursing interventions are derived from scientific knowledge associated with the biophysical and behavioral sciences, nursing theory-based on research and past nursing experience and are implemented within the legal and ethical framework of nursing and adheres to the standards of nursing practice. (NLN Associate Degree Nursing Competencies, 1998) EXPECTED OUTCOMES: 1) One hundred (100%) of students in all courses will achieve a satisfactory rating on clinical competencies associated with the implementation phase of the nursing process 80% of the total clinical days. 2) One hundred (100%) of graduates surveyed will rate their abilities to practice within the ethical, legal, and regulatory frameworks of nursing as competent or highly competent in both preparation and practice. 3) At least 90% of the employer follow-up surveys will rate skills associated with therapeutic nursing interventions as competent or highly competent.									
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision										
Therapeutic Nursing Interventions	• Skills Lab Return Demonstrations and Clinical Scenarios • Student Clinical evaluation tool • Nursing care plans • Graduate Follow-Up Survey • Employer Survey	• Nursing faculty • Nursing director • Level coordinators	• Student clinical evaluations are done on a daily basis with a summative evaluation at the completion of the clinical rotation. • Skills lab check-offs and clinical scenarios occur at various times throughout the semester. • Student projects and written assignments occur throughout the semester. • Graduate and Employer Surveys are sent 6-9 months following graduation.	• Students receive formative and summative evaluation tool. Analysis of frequency distribution of the ADN clinical competencies identified by the faculty as requiring skills in therapeutic nursing interventions • Expected level of attainment of identified competencies is 80% of total clinical days rated as satisfactory. • Nursing faculty develop critical elements to be observed upon return demonstration of a nursing skill.	The clinical evaluation tools used in each course were recently developed with a grade attached. These tools reflect the ADN competencies developed by a task force of the Texas Nurses Association. The first semester this tool was used was Fall 2000. Reliability and validity of the tool has not been established.	• Nursing director • Nursing faculty report on students in clinical or academic jeopardy at monthly faculty meetings.	Encourage faculty to explore new clinical learning experiences and strategies for teaching in the clinical areas.	• Continue current method of evaluating students in the clinical setting. • Review clinical scenarios used in the skills lab for currency. • Continue current survey method and encourage greater return.	Clinical and lab experiences reflect the nursing skills required to meet current and contemporary health care needs within the community.										

CRITERION 19: Required and elective outcomes, as they relate to student academic achievement by program type, are evaluated. Required Outcome: d. Patterns and Rates of Employment									
STANDARD: The program has an identified plan for systematic program evaluation and assessment of educational outcomes. DEFINITION: The type of health care setting and position held by a CCCC graduate, 6-9 months following graduation. EXPECTED OUTCOMES: 1) Eighty-five (85%) percent of all new graduates will be employed in the field of nursing within 6 months following graduation. 2) At least 50% of all new graduates available for employment will have a position as a graduate nurse at the time of graduation. 3) There will be a return of 40% on Graduate Follow-Up Surveys 6-9 months after graduation to identify patterns and rates of employment									
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
Patterns and rates of employment	Graduate Follow-Up Survey	Nursing director	- Graduation held each May - Graduate Follow-Up Survey sent between November to February	- Assess graduating students employment status at time of exit meeting for percentage of students offered positions as graduate nurses. - Assess trends in type of health care setting that is hiring CCCC ADN graduates upon graduation. - Assess Graduate Follow-Up Survey for percentage of graduates employed as an RN and type of health care setting at 6-9 months following graduation. - Benchmark is based on an average of results from the Graduate Follow-Up Survey.	The exit meeting is conducted collectively with the graduating class just prior to final exam week in the Spring semester. Good reliability is expected since the student is self-reporting employment. Benchmark will be determined when trended data of a minimum of two graduating classes have been compiled.	- Nursing director - Nursing faculty - Division dean	- Encourage students to establish work-related relationships prior to graduation. - Encourage students to respond to Graduate Follow-Up Survey.	Assess reliability and validity of revised Graduate Follow-Up Survey.	Include question of employment at time of exit meeting and report data.

STANDARD: The program has an identified plan for systematic program evaluation and assessment of educational outcomes. DEFINITION: Performance on NCLEX and certifying examinations is defined by the performance of first-time takers on the NCLEX-RN. EXPECTED OUTCOMES: 1) The pass rate of graduates taking the NCLEX-RN on the first attempt will be equal to or greater than the state and national rates of all program types. 2) The pass rate of graduates taking the NCLEX-RN on the first attempt will correlate positively with results on the Mosby Assess Test or similar tool. 3) The pass rate of graduates taking the NCLEX-RN on the first attempt will exceed 85% over 2-year cycle.									
CRITERION 19: Required and elective outcomes, as they relate to student academic achievement by program type, are evaluated. Required Outcome: e. Performance on NCLEX and Certifying Examinations		Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Possible Actions Resulting from the Assessment		
Component	Where is Documentation Found						Development	Maintenance	Revision
Performance on NCLEX and certifying examinations	• Nursing director's files • Texas Board of Nurse Examiners website • Report from the Texas Board of Nurse Examiners sent quarterly • Nursing faculty meeting minutes	• Nursing director • Nursing faculty • Nursing graduates	Annually	Successful completion of the ADN Program in preparation for taking the NCLEX exam. Having a degree from an approved nursing program is a criterion for sitting for the NCLEX exam.	• Analysis of the Texas Board of Nurse Examiners results indicates whether student has passed or failed. • Whereas the scores tracked correlate to success within the program, no correlation can be made related to first-time takers of the NCLEX-RN.	• Nursing director • Nursing faculty • Nursing graduates	• Analysis of results of the Mosby Assess Test or similar tool prior to graduation. • Encourage students to take a NCLEX prep course or purchase software to prepare for the exam.	• Advise students who perform poorly on the Mosby Assess Test or a similar tool. • Evaluate completeness of nursing curriculum and course objectives each semester in meeting program outcomes.	• Modify admission criteria if graduation rates and pass rates on the NCLEX decline. • Develop trending data that correlates pass rate on the NCLEX with admission GPA, PSB Nursing School Aptitude results, and average course grade percentage.

CRITERION 19: Required and elective outcomes as they relate to student academic achievement by program type, are evaluated. Elective Outcome: A. Program Satisfaction										STANDARD: The program has an identified plan for systematic program evaluation and assessment of educational outcomes. DEFINITION: Program satisfaction is the perceived level of approval of the nursing program. EXPECTED OUTCOMES: 1) At least 85% of the graduate surveys returned will rate program satisfaction as completely satisfied or satisfied. 2) An average of 85% of the graduate surveys returned will rate the competencies related to the ADN role as well-prepared to prepared.									
Component		Where is Documentation Found		Who Has Responsibility		Time/Frequency of Assessment		Assessment Method & Rationale		Assessment Method (reliability, validity, specificity)		Report of the Data		Possible Actions Resulting from the Assessment					
Program Satisfaction		• Graduate Follow-Up Survey results		• Nursing director • Nursing faculty		Annually 6-9 months following graduation		Graduate Follow-Up Survey mailed to graduates 6-9 months following graduation. The tool is specifically designed to evaluate graduate satisfaction with the nursing program by measuring the graduate's perception of competence in the ADN competencies. The graduate's positive perception of competence will positively correlate to satisfaction of their nursing education.		• Reliability is supported by instrument measures. Anonymity of the survey supports reliability. • Validity is supported by correlation within the instrument responses.		• Nursing director • Nursing faculty • Division dean		Institute 2 nd mailing if no return within three months of initial mailing of the Graduate Follow-Up Survey		Continue to administer survey 6-9 months following graduation.		• Revise course content based on identified trends in survey results. • Revise Graduate Follow Up Survey to tie in with the WECM nursing curriculum by Fall 2001.	

CRITERION 19: Required and elective outcomes, as they relate to student academic achievement by program type, are evaluated. Effective Outcome: b. Employer Satisfaction With Graduates										STANDARD: The program has an identified plan for systematic program evaluation and assessment of educational outcomes. DEFINITION: Employer satisfaction with graduates is the employer's (any agency employing the graduate in an RN capacity) perceived satisfaction of the employee. EXPECTED OUTCOMES: 1) At least 90% of employers of CCCCD nursing graduates will rank competencies related to the ADN role as competent or highly competent.									
Component		Where is Documentation Found		Who Has Responsibility		Time/Frequency of Assessment		Assessment Method & Rationale		Assessment Method (reliability, validity, specificity)		Report of the Data		Possible Actions Resulting from the Assessment					
Employer Satisfaction With Graduates		Employer Survey		• Nursing director • Nursing faculty • Nursing Advisory Committee minutes		6-9 months following graduation between November and February		• Analyze data from Employer's Survey. • Employer evaluation of graduate performance is an appropriate, simple and efficient method of assessing employer satisfaction. • Benchmarks are based on averaged results of previous employer surveys.		Although subject to error, self-report of perceptions have been used over the past 10 years and are considered reliable measures of satisfaction		• Nursing director • Nursing faculty		• Inquiry of other reliable methods of measuring employer satisfaction. • Assess employers of RNs as to what abilities a new graduate needs in today's health care setting.		• Implement revised WECM curriculum on all levels by Fall 2001. • Work with Nursing Advisory Committee on identifying trends in contemporary nursing.		• Revise course content and/or teaching methods based on identified trends in survey data. • Revise Employer Survey to reflect new WECM curriculum and ADN competencies.	

STANDARD: The program demonstrates integrity in its practices and relationships.

EXPECTED OUTCOMES:

- 1) All advertising and recruitment materials, the ADN Student Handbook, and CCCC catalog contain accurate and fair information about the program and procedure for admission
- 2) All students receive fair and accurate information regarding programs and policies that affect them.
- 3) The nursing department website is updated periodically with current information.

Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
Published information about the program	- Nursing packet - ADN Student Handbook - CCCCD catalog - CCCCD website and department website - CCCCD Schedule of classes	- Nursing director - Nursing faculty - Division Dean - Webmaster - Academic Advisors - Nursing students - Enrollment Management - Special Projects Coordinator	- Annually during Spring semester - CCCCD Catalog printed yearly - CCCCD Schedule of Classes printed each semester	- Review ADN Student Handbook, College catalog, nursing packet, and any other published document that informs prospective or current nursing students of programs or policies for fair and non-discriminatory information. - Review applicant pool for accuracy and completeness for admission to the nursing program. Trend data for needed changes for instructions for selective admission. - Conduct pre-nursing advising meetings twice a semester to discuss procedures and policies of the nursing program.	Direct review of advertising and recruitment materials ensures accurate, consistent, and non-discriminatory information regarding the nursing program and its policies and procedures.	- Nursing director - Nursing faculty - Academic advisors - Nursing students - Prospective nursing students	Implement nursing advising sessions two times per semester.	- Continue to revise the department website for dissemination of information to students and the public. - Continue to revise the nursing packet with current information on an ongoing basis	Reflect new curricular changes in all published documents including the CCCC college catalog, CCCC Schedule of Classes and nursing packet.

CRITERION 21: Complaints about the program are addressed and records are maintained and available for review.					STANDARD: The program demonstrates integrity in its practices and relationships. EXPECTED OUTCOMES: 1) A file of complaints about the program is maintained, reviewed and addressed.				
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Development	Maintenance	Revision
A file of complaints about the program must be maintained and available for review.	- Graduate Survey Follow-Up Data - Student course evaluations - Any written correspondence critical of the nursing program	- Nursing director - Nursing faculty	Each semester	- Review and summarize feedback on Graduate Survey - Review and document feedback on course evaluations - Nursing director and/or Division Dean will review and take appropriate action on any official complaints - The Admissions, Progression, and Graduation Committee will address complaints against the nursing program and recommend plan of action.	- This method of assessment is reliable as evidenced by trend analysis for examination and evaluation regarding graduates expression of program concerns/complaints. - The APG Committee's recommendations provide reliability as evidenced by application of program policies and procedures.	- Nursing director - Nursing faculty - Division Dean - Level Coordinators	- Examine avenues for graduates' or current students' expression of program concerns and complaints. - Collaborate with Vice-President of Student Services and/or Division Dean regarding proposed or new policies and/or procedures.	- Review and identify program and/or course concerns and/or problems. - Review and revise nursing program policies for accuracy and consistency. - Implement grievance appeals process when indicated.	Consider and implement program/course curricular changes based on noted trends in feedback from graduate surveys and student evaluations.

CRITERION 22: Compliance with Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained.							STANDARD: The program demonstrates integrity in its practices and relationships. EXPECTED OUTCOMES: 1) The institution has a written, comprehensive program to promote student loan repayment.			
Component	Where is Documentation Found	Who Has Responsibility	Time/Frequency of Assessment	Assessment Method & Rationale	Assessment Method (reliability, validity, specificity)	Report of the Data	Possible Actions Resulting from the Assessment			
							Development	Maintenance	Revision	
Student Loan Repayment Program	- Financial Aid literature - CCCCD Student Handbook - CCCCD College Catalog - ADN Student Handbook - Federal Stafford Loan Default Rate	- Nursing director - Financial Aid Director	- Annual audit by outside agency - As required due to federal agency policy change.	- Interview Financial Aid Director - Review printed information for inclusion of loan repayment policies. - Review default percentage (% of students repaying loans)	The official default percentage rate of 20% or less is currently the best measure for assessing loan repayment per Financial Aid office.	- Nursing director - Director of Financial Aid	- Encourage students to apply for available scholarships. - Author statement for ADN Student Handbook and other appropriate department publications regarding ethical responsibility of students to repay loans.	Continue current loan repayment program since CCCC default rate is declining and currently reported at 17.9%.	Consult Director of Financial Aid to ensure that current and accurate information regarding loan repayment appears in ADN Student Handbook.	