

## Cover Page for Assessment Resource

<b>Department Submitting Report:</b>	<b>Division of Mathematics, Science and Health Careers</b>
<b>Brief Description of Report/Document:</b>	
<b>Self-Study document for the Nursing Program. The Program is accredited by the National League for Nursing Accrediting Commission (NLNAC).</b>	

**Community College of  
Philadelphia  
Nursing Program  
Self-Study Report**

**Presented to:**

**The National League for Nursing Accrediting Commission**

**February 2011**

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# INTRODUCTION

## Fact Sheet

1. Program Type: Associate in Applied Science (A.A.S.), major in Nursing
2. Purpose of the visit: Continuing accreditation
3. Date of visit: February 22, 23, 24, 2011
4. Name and address of the parent institution:  
Community College of Philadelphia  
1700 Spring Garden Street  
Philadelphia, PA 19130
5. Name and credential of chief executive officer of the parent institution:  
Stephen M. Curtis, Ph.D.  
President
6. Regional association by which the parent institution is accredited:  
Middle States Association Commission on Higher Education  
  
Date of most recent accreditation: 2004
7. Name and address of the nursing unit:  
Department of Nursing  
Community College of Philadelphia  
1700 Spring Garden Street  
Philadelphia, PA 19130
8. Name and title of administrator of the unit in nursing:  
Barbara N. McLaughlin, Ph.D., R.N., CNE, ANEF  
Head, Department of Nursing  
Telephone: 215-751-8853  
Fax: 215-751-8937, 215-496-6002  
Mobile: 267-408-2334  
Email: bmclaughlin@ccp.edu
9. Name of State Board of Nursing and approval:  
Pennsylvania State Board of Nursing - Full approval

10. Date of last National League for Nursing Accrediting Commission visit:2003

11. Enrollment as of December 2010:

First year students (Nursing 101)-117

Second year students (Nursing 231)-118

12. Number of nursing faculty as of December 2010:

Full time: 15

Part-time/Adjunct: 22

## **Overview of Community College of Philadelphia and the Nursing Program**

Community College of Philadelphia is an open admission, associate degree granting institution that provides accessible, low-cost higher education for all who may benefit. The College's initial accreditation by Middle States Association was granted in 1968. Since it began operation, more than 482,000 students have enrolled at the College. Community College of Philadelphia is the only public institution of higher education in the City of Philadelphia, and is also the largest single point of entry into higher education for students of color in Philadelphia. The College's Main Campus is a 14 acre complex located in the heart of Center City Philadelphia. Three Regional Centers, situated at central points in Philadelphia's northeast, northwest, and western regions, combined with more than 30 different community sites, extend the College beyond Center City. The College's diverse locations enable the institution to serve more than 42,000 credit and non-credit students each year. A complete overview of Community College of Philadelphia can be found in the Appendix.

In September of 1966, Community College of Philadelphia received provisional approval from the Pennsylvania State Board of Nursing to plan and implement a nursing curriculum leading to an Associate in Applied Science degree. The Nursing Program opened that fall with two faculty and ten students. Graduating the first class of students in May 1968, the Nursing Program received full State Board of Nursing approval in 1969. In 1970, the Nursing Program received initial accreditation from the National League for Nursing. Since its first graduating class in May 1968, the nursing program has graduated over 3,600 Registered Nurses.

## **EXECUTIVE SUMMARY**

### **I. Mission and Governance**

Community College of Philadelphia is an open admission, comprehensive, urban community college; however, several programs, including nursing, have selective admission. The Nursing Program was established in 1966 and has graduated over 3,600 Registered Nurses, most of who continue to live and work in the city.

The nursing program is one of eight allied health career programs in the Division of Mathematics, Science and Health Careers. Under the guidance of the Collective Bargaining Unit for full-time faculty the faculty and administration of the Nursing Program enjoy autonomy in defining the governance structure of the department, the roles and responsibilities for faculty within the department, and those activities which are directed toward accomplishing the teaching mission of the Department. Full faculty participation in academic program review and strategic planning is in place within the Nursing Program. The Department's long history of success has led to a climate of confidence, trust, and collaboration with administration. The Head of the Nursing Program reports to the Division Dean who reports to the Vice President for Academic Affairs.

The Nursing Program is led by a long time member of the nursing faculty who has been Head of the Department of Nursing for the past year and is fully released from teaching. The Head of the Department of the Nursing is active in the life of the College, currently serving as Co- Chair of the Critical Thinking Assessment Committee. The Head of the Department of Nursing is active on the state and national level and has held positions with the National League for Nursing Accrediting Commission serving as a site visitor and with the National League for Nursing on the nominations committee and several task groups including curriculum innovations. The Head of the Department Nursing has a twelve-month contract and, in accord with the Collective Bargaining Agreement (CBA), is elected by the nursing department faculty every two years.

The Nursing Program has a strong presence in the Philadelphia community. Local baccalaureate, associate degree and Licensed Practical Nursing (LPN) program directors actively participate in the Nursing Program's Advisory Committee. The

Nursing Program affiliates with over thirty health care agencies in the city and representatives from selected agencies also serve on the Nursing Advisory Committee.

## **II. Faculty**

All fifteen full time and twenty-two part-time/adjunct faculty have a graduate degree with a major in nursing. In addition, three of the fifteen full time faculty hold a doctoral degree. The nursing faculty have shown evidence of scholarship through teaching, application and the integration of knowledge as evidenced by publications, speeches and obtaining external funding for student support and curriculum development. Two of the full time faculty have received the Christian R. and Mary F. Lindback Foundation Award for excellence in teaching at the Community College of Philadelphia. Between 2003 and 2010, faculty published a number of articles in peer review journals. Since 2007, the Nursing Program has been awarded nearly one million dollars in funding from The John A. Hartford Foundation to enhance the teaching of care of older adults in pre-licensure nursing programs. Four full-time faculty members are project staff for this grant and have participated in the development of unfolding case studies, teaching strategies and essential nursing actions related to care of older adults. In addition, dissemination of information has occurred at numerous local, regional, and national conferences.

The nursing faculty maintain clinical expertise through practice, community service, and attendance at professional conferences. Five full-time faculty members have advanced certification in the specialty areas of maternal and child health, oncology, rehabilitation nursing and adult mental health nursing. Three faculty members are Certified Nurse Educators. Several part-time faculty members are nurse practitioners who work in advanced practice roles.

Faculty in the Department of Nursing are active members of professional organizations. One faculty is an NLNAC visitor and one has served on the Evaluation Review Panel. Faculty members have also served on test construction panels, nomination committees, journal review boards, and as consultants for the NLN Center of Excellence designation.

In 1993 the Nursing Program received one million dollars from the Independence Foundation to establish an endowed chair in community based nursing education. The



chair is elected every two years by the nursing faculty. The purpose of the chair is to strengthen nursing education's focus on community based care in Philadelphia as well as to support the education of nursing students. The Chair collaborates with the other three Independence Foundation Chairs in Philadelphia at LaSalle University, Temple University and the University of Pennsylvania, to accomplish this mandate. The current Chair was elected in December 2009.

A Collective Bargaining Agreement between the College and the Faculty Federation deals with student-teacher ratios, benefits, workload and other policies and procedures. By contract, class size is limited to thirty-six students. The full time teaching responsibility for nursing and allied health faculty is fifteen contact hours plus five office hours per week each fall and spring semester. Faculty teaching between sixteen and twenty contact hours per semester volunteer for the extra contact hours and receive extra pay.

All faculty are evaluated by students at the end of each semester. Using a four point Likert scale, nursing faculty in the aggregate, are consistently rated by students as 3.50 or higher on sixteen items assessing the quality of instruction. Nursing faculty are evaluated according to the Nursing Department Faculty Evaluation Plan. Tenured faculty elect to perform peer and self evaluations on an annual basis. Non-tenured faculty are evaluated annually by the Head of the Department of Nursing who makes recommendations to the Dean regarding contract renewal.

The College's orientation program for new full-time faculty is supplemented by the Department of Nursing. New full time and part-time/adjunct faculty are mentored by the Clinical Coordinator and Course Coordinators. All faculty have opportunities for professional development through College sponsored programs four times each year, the College's Teaching Center, a travel fund for professional conferences, the College Foundation's mini-grants and partial tuition reimbursement for course work.

The Department of Nursing has a stable, experienced, well qualified faculty. This has enhanced the program's ability to be known across the city and to benefit students through development of collaborative relationships with higher education institutions and health care organizations in Philadelphia. Hiring new faculty is challenging due to a national shortage of nursing faculty, the diminished emphasis on teaching careers in

graduate nursing programs, and teaching salaries which are not competitive with those offered in clinical settings. Two highly qualified, experienced nurses have joined the full time faculty within the last year.

### **III. Students**

Students at Community College of Philadelphia are intrinsically community-based. Nursing students at the College typically live, work, and complete their education within the Philadelphia community. Ninety percent of the College's nursing graduates remain in Philadelphia to serve their neighbors as Registered Nurses, contributing to the health and economy of the region. The majority of these individuals, who traditionally represent diversity in age, gender, race, academic ability, and socioeconomic status, stay to work in the local community, providing health care services across the life span in a wide variety of settings: acute care, long-term care, ambulatory care and community health centers. Their frame of reference for the provision of health care to diverse groups is firmly grounded in an understanding of the need for a continuum of care, with the local neighborhood as the common ground for delivery of essential services.

The current nursing student body of approximately two hundred and fifty students is culturally diverse. Thirty-two percent of the student body is African-American, four percent are Asian, four percent are Hispanic and sixty percent are white. Approximately thirty-five percent have a college degree prior to entering the nursing program. The average age of nursing students is thirty-one and seventy-seven percent are female.

The nursing faculty believes in a career ladder and offers advanced placement opportunities for LPNs. In addition, the Nursing Program has articulation agreements with college and university nursing programs in the Philadelphia region based on the state articulation model for Pennsylvania and nursing graduates transfer to baccalaureate nursing programs as juniors.

To support students, the College offers a full array of comprehensive services provided by well qualified staff. Two full time counselors work with nursing and allied health students. Two nursing faculty are paid to provide academic advising for nursing students. In addition, faculty are available during office hours and offer group tutoring sessions. Support is provided throughout the year to all nursing students by Learning

Laboratory Specialists. Support services, policies and procedures for nursing students are found in the Nursing Student Handbook and the College Student Handbook.

Students are admitted annually in the fall except for advanced placement students who enter the program in the spring of first year courses. Admission criteria for the Nursing Program are clearly stated, entirely numeric and distributed to students in application sessions. All admission decisions are conditional upon receipt and evaluation of health records, criminal background check, child abuse clearance, and drug screening.

All published information about the Nursing Program is accurate, consistent and current both in print and on line. Admission criteria are clear and readily available to applicants. In addition, the College provides clear, accurate and current information concerning students' legal and ethical responsibilities concerning financial aid.

Faculty make every attempt to provide clear information to students about grading policies and procedures for each course and attempt to resolve any student misunderstanding immediately. The Course Coordinators provide support and advice to students and faculty whenever a concern arises.

#### **IV. Curriculum**

The Department of Nursing is a regional and national leader in curriculum innovation for associate degree nursing programs. The Nursing Program was one of two lead sites for the W.K. Kellogg Foundation funded Community-College Nursing Home Partnership Dissemination Project (1990-1993). During that project, faculty worked with twenty-seven regional associate degree nursing programs to integrate gerontology into the curriculum. This model served as a foundation for dissemination of the 19130 Zip Code Project, supported by the Independence Foundation from 1995 to the present. The national focus of the Nursing Department also includes development of a web-based tool to collect health promotion/disease prevention data. The 19130 Zip Code Project has become a national prototype of health promotion/disease prevention nurse-delivered services in community-based settings. Each semester students in the second year of the program spend approximately 3,000 hours in the local community delivering health promotion and disease prevention services to vulnerable populations, representing over 5,000 encounters each semester with local residents from across the life-span. Analysis of data collected from these encounters provides information to identify constituencies

served and describe common health promotion/disease prevention services to meet the health care needs of vulnerable populations. This replicable data collection model, which is be used by other service learning projects across the United States in affiliation with the National Nursing Center Consortium (NNCC), a national organization of nurse managed centers serving vulnerable populations, is the only such model in use nationally.

The Nursing Program curriculum has also served as a national model for care of older adults. Through The John A. Hartford Foundation funding, faculty have developed essential nursing actions for care of older adults in a campaign called ACES, Advancing Care Excellence for Seniors. The long term care component stresses the complexity of care related to older adults.

Teaching strategies to enhance critical thinking is another hallmark of the Nursing Program. Every student writes a critical thinking paper each semester and an in-class client care writing assignment during the second semester nursing courses. Critical thinking learning activities are woven throughout student faculty experiences in both classroom and clinical settings, where faculty-student interaction is enhanced by small group seminars and collaborative learning experiences.

The Nursing Department is fortunate to be located in Philadelphia, a national center for health professions education and health care. As a result, the Nursing Program is able to provide a variety of clinical experiences for students in over thirty health care agencies including medical centers, community hospitals, long term care facilities and community based agencies.

The Nursing Program is comprised of 64 credits using the College's formula of six hours of clinical laboratory for one credit. When calculated using the NLNAC formula of three hours of clinical laboratory for one credit, the Nursing Program is comprised of 72 credits. Using either formula, the nursing credits do not exceed sixty percent of the total credits.

The Nursing Program's integrated curriculum consists of four nursing courses over four semesters. Each nursing course flows from the mission and core values and builds on previous courses. All nursing courses include a large group lecture, a small group seminar and clinical experience. In addition, the first two nursing courses include a nursing skills laboratory. Skills testing based on critical elements is required of every

student in the first two nursing courses. The clinical evaluation tool, which is based on the QSEN competencies, is used for all four nursing courses and demonstrates clear progression in the nursing program. Criteria for satisfactory performance are clearly stated in the clinical evaluation tool.

## **V. Resources**

The operating and capital budgets provide sufficient resources to accomplish Nursing Program purposes. The operating budget for the past several years has been approximately \$1.2 million. The Head of the Department of Nursing solicits input on budgetary needs from the nursing faculty and communicates these needs to the Dean. The College has a full array of comprehensive services to support faculty and students including Institutional Research, the College Foundation, a curriculum development office, duplicating, day care, cafeteria, bookstore, Center on Disability and gymnasium.

There is access to information technology across the College campus and each faculty office has a computer with internet capabilities. Test scoring and analysis is available through the Computer Center and used regularly by nursing faculty. The Office of Institutional Advancement assists in grant writing.

The Library provides excellent support to students and faculty, including electronic databases and journals. In addition to hard copies of books and journals, the Library subscribes to EBSCO Host and Proquest electronic databases.

The College Nursing Skills Laboratory is supervised by a masters prepared full time nursing faculty member who also teaches most of the laboratories. A Technical Specialist assists the College Nursing Skills Laboratory Coordinator in the day-to-day operation of the laboratory. The Technical Specialist also has the responsibility for maintaining student records. Each semester, four to six nursing students serve as peer tutors, providing practice opportunities and reinforcing concepts taught by faculty. The College Nursing Skills Laboratory is well stocked and contains up to date equipment, including twelve computers for student use.

## **VI. Outcomes**

The NCLEX-RN pass rate for Nursing Program graduates has been above the state mean for the last three years. First time test takers have passed NCLEX-RN at a rate of 86-90% for the past three years.

Following a decline in the NCLEX-RN pass rate for first time takers in 2007, faculty undertook a comprehensive analysis of the nursing curriculum. Specific strategies were implemented as well as an optional exit testing activity.

According to the College Office of Institutional Research, the College graduation rate has ranged from 10.8% to 12.4% in the last five years while the Nursing Program graduation rate has ranged between 81-84% for the last three years.

The job market in Philadelphia remains challenging for new graduates from all pre-licensure programs. While the Nursing Program graduates are highly valued in the Philadelphia nursing job market, they have experienced difficulty in finding employment. Recently, graduates have reported obtaining employment in a variety of settings outside of the acute care environment.

Graduates feel that the Nursing Program helped them develop communication and critical thinking skills. Employer surveys demonstrate that Nursing Program graduates are prepared for their positions.

**Strengths of the Nursing Program include:**

- The Nursing Program is highly visible in the College, has strong administrative support and is highly regarded in the community.
- The nursing faculty is well prepared, dedicated to the education of nursing students and committed to change.
- The nursing faculty have shown evidence of scholarship through teaching and through application and integration of knowledge as evidenced by publications, speeches and external funding for student support, curriculum innovation and faculty development.
- The nursing student body is culturally diverse.
- The nursing faculty believes in a career ladder and offers advanced placement opportunities for LPNs. In addition, the Nursing Program has articulation agreements with college and university nursing programs in the Philadelphia region.
- The nursing curriculum is contemporary, cohesive and coherent. Each course flows from the mission and organizing framework and builds on previous courses.
- The operating and capital budgets provide sufficient resources to accomplish the Nursing Program purposes.

- The Nursing Program has been successful in obtaining external funding for student scholarships, curriculum change, service learning in community based care and innovative curriculum strategies.
- All published information about the Nursing Program is accurate and current.
- The NCLEX-RN pass rate (86-90%) for Nursing Program graduates has been above the state level.
- Student retention in the Nursing Program exceeds that of the College student population.

**Areas of Concern for the Nursing Program include:**

- Faculty salaries are not competitive when compared with salaries offered to masters prepared nurses in clinical settings such as hospitals.
- Faculty are beginning to use technology to design teaching-learning activities but need additional support to extend and expand these efforts.
- Students report that they need to work to meet their many responsibilities; it is unclear how the nursing program can adapt to meet their needs.
- The nursing shortage is not evident in the Philadelphia region and is resulting in a lack of jobs for many new graduate nurses.

## I. MISSION AND ADMINISTRATIVE CAPACITY

<p><b>Standard:</b> The nursing education unit's mission reflects the governing organization's core values and is congruent with its strategic goals and objectives. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified outcomes.</p>
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### Criteria 1.1

**The mission/philosophy and outcomes of the nursing education unit are congruent with those of the governing organization.**

The Statement of Mission of the Community College of Philadelphia is found in the College Catalog and is fully incorporated into the Department of Nursing Philosophy and Core Values. The faculty of the Department of Nursing at Community College of Philadelphia developed their philosophy of nursing by interweaving the College Mission with their beliefs about nursing. The faculty fully subscribes to the College Mission of preparing students to be informed and concerned citizens who actively participate in the cultural life of the city and who are educated to meet the changing needs of their profession. Additionally, the program outcomes of the Department of Nursing, which focus on areas of program satisfaction, graduation rates, NCLEX-RN pass rates, and job placement, fully reflect the core mission of the Community College of Philadelphia to provide access to higher education for all who may benefit and to develop career technologies which provide a coherent foundation for college transfer, employment, and life-long learning. The Philosophy of the Department of Nursing was accepted by the faculty at the November 2009 faculty meeting. Table 1-1 shows the congruence between the College Mission and the Nursing Program Philosophy. The Philosophy and Core Values are found in the Student Nurse Handbook.



**Table 1-1**

**Comparison of College Statement of Mission and Nursing Department Philosophy**

College Mission	Nursing Department Philosophy
<p>The College’s programs of study in the liberal arts and sciences, career technologies, and basic academic skills provide a coherent foundation for college transfer, employment, and life-long learning.</p>	<p>Faculty in the Department of Nursing are strong advocates of the College’s mission. Faculty believe that our associate degree nursing graduates are prepared with the knowledge, skills, and abilities necessary for practice, transfer and self-fulfillment.</p>
<p>The College serves Philadelphia by preparing its students to be informed and concerned citizens, active participants in the cultural life of the city, and enabled to meet the changing needs of business, industry, and the professions.</p>	<p>The College and the nursing program draws together students from a wide variety of ages and backgrounds and seeks to provide programs that increase awareness and appreciation of a diverse world, that improves students’ abilities to pursue paths to inquiry, and that fosters self-fulfillment through service to others and preparation for future work.</p>
<p>Community College of Philadelphia seeks to create a caring environment which is intellectually and culturally dynamic and encourages all students to achieve:</p> <ul style="list-style-type: none"> <li>• greater insight into their strengths, needs, and aspirations, and greater appreciation of their own cultural background and experience.</li> </ul>	<p>The collective vision of faculty in the Department of Nursing is based on a shared commitment to student success. Educational growth is a process in which the teacher guides the learner as an active participant. Faculty function as nursing experts, as facilitators of learning and as nurturers of students.</p>
<ul style="list-style-type: none"> <li>• increased awareness and appreciation of a diverse world where all are interdependent.</li> </ul>	<p>Faculty are committed to assisting students to value their own unique backgrounds and experiences as a foundation for service to others, to prepare for future work and study and to enjoy the challenges in the nursing profession.</p> <p>Service is the commitment to engage local, regional and national communities. It includes participation in organizational activities that benefit the program, college, community, and profession and involves developing and sustaining partnerships that are critical to the program, student and faculty development, and the profession. Faculty believe that the essence of our relationships with students is to inspire students to develop values and beliefs that include a commitment to service to the local community.</p>
<ul style="list-style-type: none"> <li>• heightened curiosity and active interest in intellectual questions and social issues.</li> </ul>	<p>Specifically graduates of the program integrate theories and concepts from science and liberal arts in the practice of nursing, fully collaborate with nurses and other members of the health care team to provide safe, culturally sensitive, effective nursing care to clients in a variety of settings and consistently practice within the legal and ethical framework of nursing.</p>

<ul style="list-style-type: none"> <li>improved ability to pursue paths of inquiry, to interpret and evaluate what is discovered, and to express reactions effectively.</li> </ul>	<p>Scholarship is the discovery, translation, application and transmission of knowledge, skills and abilities/attitudes that contribute to the development and practice of evidence based nursing. It includes a passion for life long learning. Commitment to scholarship is best demonstrated through evidence based learning throughout the curriculum to promote student inquiry, creative curriculum designs and research to determine the impact of innovative approaches on student learning. Faculty hold a strong belief that the associate degree is the first step in a career pathway leading to increased opportunities in nursing.</p> <p>Support of students is achieved through mentoring, interactive learning and extensive faculty student partnerships to individualize learning strategies, both formal and informal. It includes the principle of equity, treating all persons in a respectful manner, advocacy for student and faculty beliefs, attitudes and perspectives and acknowledgment and inclusion of the variations of individuals. Through mentoring and by fostering the co-learner philosophy with students, faculty are committed to helping students to embrace professional practice and academic advancement.</p>
<ul style="list-style-type: none"> <li>self-fulfillment based on service to others, preparation for future work and study, and enjoyment of present challenges and accomplishments.</li> </ul>	<p>Nursing education at the Community College of Philadelphia supports the fact that nursing is a challenging, satisfying profession that empowers individuals, families, communities, and society at large. Faculty believe in incorporating professional standards and national competencies to guide the curriculum; the NCLEX blueprint and Quality Safety in Nursing Education (QSEN) competencies (Cronenwett et al, 2007) provide standards that guide our curriculum. Additionally, faculty incorporate core values of scholarship, service, support, and excellence that serve as the foundation for carrying out the Department of Nursing's philosophy and inform decision-making regarding the program of learning.</p> <p>A culture of excellence reflects a commitment to clinical competence, legal and ethical practice, collaboration, integrity and leadership. This approach to professionalism embodies the unique nature of nursing. Faculty and clinical partners, as role models for students, personify the qualities for professionalism and hold students to standards of nursing care that demonstrate caring, empathy, respect for self and colleagues, and a commitment to continuous growth and understanding.</p>

## Department of Nursing Core Values and Philosophy

The mission of Community College of Philadelphia (College Catalog, p. 5) affirms a belief in access to higher education for all who may benefit by providing a coherent foundation for college transfer, employment, and lifelong learning.

The College and the Nursing Program draw together students from a wide variety of ages and backgrounds and seeks to provide programs that increase awareness and appreciation of a diverse world, that improves students' abilities to pursue paths to inquiry, and that fosters self-fulfillment through service to others and preparation for future work.

In concert with the College's mission statement, the faculty in the Department of Nursing adheres to a philosophy based on the belief that the fundamental nature of education is growth. The collective vision of faculty in the Department of Nursing is based on a shared commitment to student success. Educational growth is a process in which the teacher guides the learner as an active participant. Faculty function as nursing experts, as facilitators of learning and as nurturers of students. Faculty are committed to assisting students to value their own unique backgrounds and experiences as a foundation for service to others, to prepare for future work and study and to enjoy the challenges in the nursing profession.

Faculty in the Department of Nursing are strong advocates of the College's mission. Faculty believe that our associate degree nursing graduates are prepared with the knowledge, skills, and abilities necessary for practice, transfer and self-fulfillment. Specifically graduates of the program integrate theories and concepts from science and liberal arts in the practice of nursing, fully collaborate with nurses and other members of the health care team to provide safe, culturally sensitive, effective nursing care to clients in a variety of settings and consistently practice within the legal and ethical framework of nursing.

Nursing education at the Community College of Philadelphia supports the fact that nursing is a challenging, satisfying profession that empowers individuals, families, communities, and society at large. Faculty believe in incorporating professional standards and national competencies to guide the curriculum; the NCLEX blueprint and Quality Safety in Nursing Education (QSEN) competencies (Cronenwett et al, 2007)

provide standards that guide our curriculum. Additionally, faculty incorporate core values of scholarship, service, support, and excellence that serve as the foundation for carrying out the Department of Nursing's philosophy and inform decision-making regarding the program of learning. The core values are:

- **Scholarship** – Scholarship is the discovery, translation, application and transmission of knowledge, skills and abilities/attitudes that contribute to the development and practice of evidence based nursing. It includes a passion for life long learning. Commitment to scholarship is best demonstrated through evidence based learning throughout the curriculum to promote student inquiry, creative curriculum designs and research to determine the impact of innovative approaches on student learning. Faculty hold a strong belief that the associate degree is the first step in a career pathway leading to increased opportunities in nursing.
- **Service** – Service is the commitment to engage local, regional and national communities. It includes participation in organizational activities that benefit the program, college, community, and profession and involves developing and sustaining partnerships that are critical to the program, student and faculty development, and the profession. Faculty believe that the essence of our relationships with students is to inspire students to develop values and beliefs that include a commitment to service to the local community.
- **Support** - Support of students is achieved through mentoring, interactive learning and extensive faculty student partnerships to individualize learning strategies, both formal and informal. It includes the principle of equity, treating all persons in a respectful manner, advocacy for student and faculty beliefs, attitudes and perspectives and acknowledgment and inclusion of the variations of individuals. Through mentoring and by fostering the co-learner philosophy with students, faculty are committed to helping students to embrace professional practice and academic advancement.
- **Excellence** – A culture of excellence reflects a commitment to clinical competence, legal and ethical practice, collaboration, integrity and leadership. This approach to professionalism embodies the unique nature of nursing. Faculty and clinical partners, as role models for students, personify the qualities for professionalism and hold students to standards of nursing care that demonstrate caring, empathy, respect for self and colleagues, and a commitment to continuous growth and understanding.

The outcome of the interplay of professional standards, national competencies and core values is captured in the ability of graduates to provide safe and effective care in a wide variety of settings and to uphold the professional standards of nursing. In this way, faculty honor and acknowledge a deep commitment to the health and welfare of the Philadelphia community.

## **Criteria 1.2**

### **The governing organization and nursing education unit ensure representation of students, faculty, and administrators in ongoing governance activities.**

The organizational charts of the College and the Department of Nursing are represented in organizational charts found in the Appendix. Dr. Stephen M. Curtis, the President, reports to the Board of Trustees who are appointed by the Mayor of the City of Philadelphia. All academic programs are centralized under the direction of Dr. Judith Gay, Vice President for Academic Affairs who reports directly to the President of the College. The nursing program is one of six departments in the Division of Math, Science and Health Careers which is headed by Dean Mary Anne Celenza who reports directly to the Vice President for Academic Affairs.

All employees in the Department of Nursing (faculty, technical specialist, and nursing grants manager) report directly to the Head of the Department of Nursing who reports directly to Dr. Mary Anne Celenza, Dean, Division of Math, Science and Health Careers. Dr. Celenza meets regularly with the administrators of all the educational units in the Division to discuss issues and share information. The Dean's office is located near the Department of Nursing and the Dean is accessible, supportive, and responsive. The Head of the Department of Nursing is a member of the Department Head Council, a committee of department heads throughout the college, which meets on a regular schedule to discuss and address common interests.

During the academic year, the Vice President for Academic Affairs holds regular meetings of department heads to discuss issues and share information. At the beginning of each fall and spring semester, the College offers a week of professional development activities that includes news and updates from the President, Vice President for Academic Affairs and the Vice President for Student Affairs. There is a strong communication and collaboration among the nursing faculty, Division Dean and the College administrative teams.

Faculty and students participate in the governance of the College and the nursing education unit as appropriate for the accomplishment of the goals/objectives of the College and the nursing education unit. All nursing faculty are active participants in

Department of Nursing Committee as evidenced by a department committee list available on site. Table 1-2 demonstrates nursing faculty participation in College wide committees and groups.

**Table 1-2**  
**Nursing Faculty Participation in College Wide Activities**

Governance Activity	Participation
Faculty and Staff Federation of the American Federation of Teachers, AFL-CIO	All Full Time and Part Time Faculty and all classified staff are members; one nursing faculty member is the elected representative and one nursing faculty member is the alternate representative for the Department of Nursing
Faculty Federation Nursing Department Representative	Ivory Coleman
Department Head Council	Barbara McLaughlin
Council on Education	Carolyn Bartsch
Student Affairs Committee	Susan Orehowsky
Gonfalons Committee	Laureen Tavolaro-Ryley Jean Forsha Byrd
President's Distinguished Faculty Award Committee	Carol Moriarity
The Christian and Mary Lindback Award Committee	Ivory Coleman Andrea Mengel
Critical Thinking Task Force	Barbara McLaughlin, Co-Chair
Achieving the Dream Task Force	Barbara McLaughlin
Student Appeals Committee	Jean Forsha Byrd
Federation Scholarship Committee	Patricia Rexer
Academic Master Plan Committee	Laureen Tavolaro-Ryley
Effective Communication Assessment Committee	Laureen Tavolaro-Ryley
Integrity Work Group	Tamika Curry Lisa Johnson

Full time faculty, part time faculty and classified staff at CCP are members of and represented by the Faculty and Staff Federation of the American Federation of Teachers, AFL-CIO. The Faculty and Staff Federation plays an important role in the governance and organization of the college through collective bargaining, resolution of grievances and structural decision-making bodies. The current Collective Bargaining Agreement (CBA) extends until August 2011 and is available on site.

Within the nursing education unit, faculty serve on policy-making committees. Faculty committees and membership are outlined in the Nursing Faculty Bylaws that are available on site.

Nursing faculty teach as a team in one of the two courses offered each semester. The course teaching teams hold regular meetings throughout the semester to plan learning activities, review assessment of students, address student and faculty concerns, and evaluate the course. Two students from each course are elected by their peers to serve as Student Representatives to the course team. The students attend course teaching team meetings and serve as a liaison between the students and the faculty. Students are invited to participate in discussion at curriculum and teaching team meetings.

Students in the nursing program also participate on College wide committees. In addition to participating on college wide committees, students in the nursing program are currently involved in a number of activities on campus. In a recent survey of currently enrolled students the following student activities were listed:

- Phi Theta Kappa
- Nursing Peer Tutors
- Learning Lab Tutors for Math and Chemistry
- Student Ambassadors
- International Student Organization
- New Student Orientation
- 2010 Student-Faculty Fellowship Program in Belize
- Student Nurses Club
- Student Representative for Nursing Course

### **Criteria 1.3**

#### **Communities of interest have input into program processes and decision-making.**

CCP is accredited by the Middle States Commission. The next visit is scheduled for 2014. The nursing program is fully approved by the Pennsylvania State Board of Nursing and appears on the Board's list of approved nursing programs on its official website.

Because the Pennsylvania community colleges operate outside of any formal statewide community college system, the colleges formed a Commission for Community Colleges which provides leadership on key programmatic and funding issues and advocates for community colleges with state government officials. CCP is a member of this organization.

The Department of Nursing maintains full compliance with the Professional and Vocational Standards for education programs of the Pennsylvania State Board of Nursing. In addition, the nursing program submits annual reports to the Board of Nursing, NLNAC and the NLN. The nursing program is an institutional member of the National League for Nursing and the National Organization of Associate Degree Nursing (NOADN). The Department of Nursing was one of the first three nursing programs to be recognized as a Center of Excellence by the National League for Nursing (NLN) in 2003. The nursing program reapplied for COE designation in 2007 and in 2010 and COE designation continues until 2015.

The Head of the Department of Nursing represents the College and the Department of Nursing through extensive relationships with local, regional, state, and national agencies. She attends Pennsylvania Colleges of Associate Degree Nursing meetings. This group of deans and directors of associate degree nursing programs meets in Harrisburg twice a year to discuss common needs and issues.

The Nursing Advisory Committee is comprised of members of the local nursing community and meets twice each year. The committee includes a practical nursing educator, educators from bachelors and higher degree nursing program as well as representatives from clinical agencies used by the nursing program. Input from this group provides essential information related to the practice environment and the influence on nursing academics.

#### **Criteria 1.4**

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

The Department of Nursing has a number of formal agreements with outside agents and agencies to accomplish specific goals and objectives. These partnerships will be discussed later in this report. Funds from outside agents and agencies for designated use by the Department of Nursing for specific purposes are managed by the Department of Nursing with assistance from the CCP Office of Institutional Advancement and CCP's financial management offices including the controller and the office of finance and budget.



Endowments for student scholarships, a faculty chair and grants provided by outside agents and foundations are managed by the Community College of Philadelphia Foundation and include:

#### Faculty Chair

- Independence Foundation Chair in Nursing

#### Nursing Student Endowed Scholarships

- The Harold E. Kohn Memorial Nursing Student Scholarship
- Arronson-Lavine Nursing Student Scholarship
- Independence Foundation Nursing Student Scholarship
- Anne Ritter Nursing Student Scholarship
- Dr. Thomas W. Langfitt Nursing Student Scholarship
- Hal Lane Chesler Memorial Nursing Student Scholarship
- Temple School of Nursing Alumni Association Nursing Student Scholarship
- Brent Blundin Nursing Student Scholarship

#### Current Grants

- The John A. Hartford Foundation Fostering Geriatrics in Pre-Licensure Nursing Education, Phase II (2009-2012)
- Independence Foundation Health Promotion in Zip Code 19130 (2009-2011)
- HRSA Faculty Development: Integrated Technology into Nursing Education and Practice Initiative, subcontract with Drexel University (2008-2013)
- HRSA Scholarships for Disadvantaged Students
- Pennsylvania Higher Education Foundation Scholarships
- Independence Blue Cross Nursing Student Scholarships
  - The Department of Nursing has written articulation agreements for nursing students with the following local educational organizations:
- Temple University
- Thomas Jefferson University
- NewCourtland School of Practical Nursing Program

The Department of Nursing has written agreements with a number of hospitals, long term care facilities, and community agencies to provide for the clinical education of nursing students. The list of agencies is available in the Curriculum section and contracts are available on site.

The John A. Hartford Foundation grant Fostering Geriatrics in pre-Licensure Nursing Education has a Steering Committee which includes representatives from CCP, NLN, the Independence Foundation and Laerdal Medical for the Americas. The Steering committee meets in person or by conference call at least four times each year.

The Department of Nursing is one of several colleges to participate in the HRSA Faculty Development: Integrated Technology into Nursing Education and Practice Initiative via a subcontract with Drexel University (2008-2013). Grant participants in the PADCNETC (Pennsylvania District of Columbia Nursing Education Technology Collaborative) include Drexel University, CCP, Howard University in Washington, DC and Bloomsburg University. The CCP project director attends regular meetings of the grant Collaborative Executive Committee. In addition, the CCP nursing faculty participate in multiple faculty development programs each year, live and virtual at both CCP and at Drexel University.

### **Criteria 1.5**

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

Barbara McLaughlin, PhD, RN, was elected to the position of Head of the Department of Nursing in 2009. She serves as the full time director of the nursing program and possesses the qualifications required by the Pennsylvania State Board of Nursing. The Pennsylvania State Board of Nursing Standards for Schools of Nursing and a job description for Dr. McLaughlin are available for review during the visit.

Prior to serving as Head of the Department of Nursing, Dr. McLaughlin was a faculty member at Community College of Philadelphia for 25 years. During that time she gained experience in program development, classroom and clinical teaching, and student advisement. Dr. McLaughlin's extensive experience in curriculum development and program evaluation is reflected in her professional vitae that is available during the site visit. Dr. McLaughlin maintains current expertise in nursing education through attendance and presentations at conferences and participation in professional activities. She has presented locally, regionally and nationally on nursing education topics.

Dr. McLaughlin holds a Doctor of Philosophy degree with a major in Nursing from Widener University and a Master of Science in Nursing degree with a concentration in nursing education from Villanova University. She is a member of the National League for Nursing, the National Organization of Associate Degree Nurses and Sigma Theta Tau. Dr. McLaughlin is active in professional activities including being a National League for Nursing Accrediting Commission (NLNAC) site visitor. She has served on a number of

National League for Nursing committees and task groups as evidenced in her curriculum vitae which is available during the site visit. Dr. McLaughlin is a Certified Nursing Educator (CNE) and is a Fellow of the Academy of Nurse Educators (ANEF).

#### **Criteria 1.6**

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

The nursing education unit is administered by the Head of the Department of Nursing. All department heads at CCP are elected by the faculty and appointed by the Vice President for Academic Affairs for two year terms. Dr. McLaughlin was elected by the faculty and appointed by the Vice President for Academic Affairs for a two-year term beginning January 2010.

As Head of the Department of Nursing, Dr. McLaughlin is responsible for providing academic leadership and managerial direction. Dr. McLaughlin leads the faculty and staff in all educational endeavors of the Department of Nursing. She interprets and reports on trends in the nursing profession, nursing education and health care to College administrators. Dr. McLaughlin provides leadership for maintaining the excellence and integrity of the nursing program. Organizationally, she leads the planning and budgeting process for the Department of Nursing and develops collaborative relationships outside the College. The Head of the Department of Nursing is one of two department heads to hold a twelve-month contract. This twelve month contract is in recognition of the workload of the Head of the Nursing Program and size of the department. The Head of the Department of Nursing has no required teaching assignment. As all department heads are faculty, benefits and salary are calculated as per the collective bargaining agreement. Department heads are not covered by the full time contract. Although they have the same benefit package as faculty they receive additional money (emolument) and extended time credit in the summer for their service. Because the Nursing Department head is on a 12 month contract, these additional monies were included in the salary calculation.

The Head of the Department of Nursing enjoys an excellent working relationship with College administration and other academic and support units. Nursing is a highly

respected department with a faculty of creative and innovative individuals who work closely with admissions, counseling, the learning laboratory, student services, financial aid, institutional advancement, and other faculty and staff. Examples of these working relationships, overseen by the department head, include the coordination of the annual admissions process and orientation, distribution of scholarship funds and oversight of grants.

The Head of the Department of Nursing, working closely with the faculty, determines the needs of the department prior to each semester. Based on the needs of the department, the department head makes faculty assignments for the next semester. Part-time faculty are hired as needed. Guidelines for faculty workload are determined by the collective bargaining contract. All department heads are responsible for requesting additional faculty lines. When a full time faculty position becomes available, a search occurs after a determination of departmental needs by the faculty. The Faculty Selection Committee sends candidates to the department head after review. The department head interviews the candidates and recommends appointment to the Dean and Vice President for Academic Affairs. The President makes the final determination on hiring decisions.

The Head of the Department of Nursing collaborates with faculty in the development, implementation, and evaluation of the program of learning. The department is participating in grant-funded projects related to the integration of community based care and geriatrics in to associate degree nursing programs. These projects have allowed faculty to explore, expand, and disseminate lessons learned about the development of community partnerships and advancing excellence in care for older adults. These projects, supported by the department head, have changed the program of learning in the nursing program as well as the methodologies used to help students learn. In addition, these projects have facilitated opportunities for professional growth of the faculty through attendance at workshops and conferences, article publications and leadership roles.

The Head of the Department of Nursing is responsible for evaluation of the program of learning to the Board of Trustees of the College and to the State Board of Nursing in annual reports. Evaluation of the program of learning occurs formally through implementation of the program evaluation plan and the reporting of data collected to

faculty, students, College personnel, Nursing Program Advisory Committee, and the State Board of Nursing.

**Criteria 1.7**

**With faculty input, the nurse administrator has the authority to prepare and administer the program budget and advocates for equity within the unit and among other units of the governing organization.**

All department heads at Community College of Philadelphia participate in the budget process. Each spring, department heads are responsible for determining both operating and capital budget requests for the next fiscal year (July 1 to June 30). The Head of the Department of Nursing working closely with the nursing faculty, prepares a budget for submission to the Dean of Mathematics, Science, and Health Careers. The appropriate College administrators review budgets with final approval by the Board of Trustees occurring in late spring.

Faculty salaries and work load are governed by the Collective Bargaining Agreement. Benefits are administered by the Human Resources office and are consistent for employees throughout the college. Travel funds for faculty to attend professional development activities are administered by the Faculty Federation.

The Head of the Department of Nursing must approve all expenditures for the Nursing Department including laboratory supplies. The nursing budget has been very stable and there have been no substantive changes in the nursing budget in recent years. Budget information is available on site. The Head of the Department of Nursing participates in developing budgets before grants are submitted and after a grant is received, is responsible for approving expenditures related to grant budgets. In addition, the nursing faculty has been a steady recipient of Perkins Funding.

### **Criteria 1.8**

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

Personnel policies for nursing faculty are the same as those in effect for other faculty members of the College and are detailed in the Collective Bargaining Agreement By and Between Community College of Philadelphia and Local 2026 of the American Federation of Teachers, AFL-CIO (the Faculty Federation). All faculty are represented by the Faculty Federation as either full voting members, or if the faculty member prefers, as a fair share payer. The current Collective Bargaining Agreement (CBA) expires August 31, 2011. A copy of the collective bargaining agreement is available on site. Rights, responsibilities, and tenure are consistent for all full-time faculty at the College. Faculty rights and responsibilities are specified in the Collective Bargaining Agreement (CBA). Faculty achieve tenure upon being appointed for a fifth year counting from the original appointment at the level of instructor or above. Eleven of the 15 full time faculty are tenured. Faculty not tenured have been employed full-time less than five years.

Appointment, academic rank, evaluation, promotion, recognition of professional competencies, and salaries are interrelated and are addressed in the CBA. Rank upon hiring is granted by the Board of Trustees. Prior work, teaching experience, and educational credentials are considered. Rank is contractual and based on the CBA. Policies of appointment, academic rank, evaluation, promotion, and salaries are the same for the nursing department as for other departments in the College.

The teaching load for the nursing faculty is measured in contact hours. Each hour a faculty member is assigned teaching responsibility is counted as a contact hour. Currently, the full time teaching load for nursing faculty is 15 contact hours per week per semester. This differs in that faculty in some departments outside of the Division of Mathematics, Science, and Health Careers have a teaching assignment of 12 credit hours per semester; however, this is consistent with the CBA. The workload system varies by department and is contractual.

Assignments over 15 contact hours per semester are voluntary and paid using the extended time rate. The maximum teaching assignment in a given semester is twenty

contact hours. All nursing faculty teach between 15 and 20 contract hours each fall and spring semester. Nursing faculty do not teach in the summer. All Health Careers faculty must maintain five office hours a week. The remainder of the College faculty are required to maintain six office hours a week.

Adjunct faculty fall in two categories: Part-time faculty and Visiting Lecturers. Part-time faculty and Visiting Lecturers are not eligible for tenure. The teaching load for Visiting Lecturers is the same as for full time faculty, including overload pay for contact hours exceeding 15 in a given semester which is consistent with the CBA. There is a difference in the teaching assignment of part-time nursing faculty and other part-time faculty. Part-time nursing faculty assignments are 12 contact hours per week while faculty in other departments are considered part-time at nine or fewer credit hours per week. This difference is based on the need to maintain continuity of clinical instruction which exceeds nine hours each week. However, part-time nursing faculty teaching loads are maintained at 12 contact hours per week based on student learning needs in the clinical setting as well as the importance of maintaining stable, effective relationships with clinical agencies. Faculty doing additional work outside of teaching responsibilities, for example, grant work, course coordinator, are paid by extended time per contact hour.

### **Criteria 1.9**

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

A student who has a complaint about the nursing program is entitled to have the complaint heard. There are policies in the College Student Handbook which govern the procedures for dealing with student concerns regarding classroom issues, grade appeals, and sexual harassment. These procedures enable the student to have their concerns addressed from the level of the faculty member with further recourse if necessary to the department head, the division dean, the vice president for academic affairs, and the Student Appeals Committee.

There have been three formal grade appeals about the nursing program within the past five years. These complaints were handled using the process described above and in the College Student Handbook. One complaint was dropped and the other two

complaints were decided in 2009 with the Vice President of Academic Affairs affirming the faculty's decision.

There have been no grievances by the nursing faculty in the past fifteen years. The process for handling faculty grievances is contained in the CBA.



## II. FACULTY AND STAFF

<b>Standard:</b> Qualified Faculty and staff provide leadership and support necessary to attain the goals and outcomes of the nursing education unit.
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### Criteria 2.1

**Full- time faculty are credentialed with a minimum of a masters’ degree with a major in nursing and maintain expertise in their areas of responsibility.**

**2.1.1 The majority of part-time faculty are credentialed with a minimum of a master’s degree with a major in nursing; the remaining part-time faculty hold a minimum of a baccalaureate degree with a major in nursing.**

**2.1.2 Rationale is provided for utilization of faculty who do not meet the minimum credential.**

The Department of Nursing employs fifteen full-time faculty, including one who serves as the Head of the Nursing Department. All faculty members in the Department of Nursing are in compliance with the Commonwealth of Pennsylvania State Board of Nursing faculty requirements with a graduate degree in nursing and are licensed as Registered Nurses in Pennsylvania. Members of the full time nursing faculty hold credentials from a variety of institutions of higher learning. These are available on the Faculty Profile Chart (Table 2-1). Four faculty members hold doctoral degrees: two in nursing, one in education and one in podiatric medicine. Several full-time faculty maintain certification in clinical specialty areas including maternal-child health, oncology, rehabilitation, medical-surgical nursing, adult health, diabetes education and adult mental health. Three full-time faculty are Certified Nurse Educators. Complete information is located in the Faculty Profile.

The Department of Nursing employs twenty-two part-time faculty members with masters’ degrees in nursing who have excellent clinical backgrounds and are licensed as Registered Nurses in the Commonwealth of Pennsylvania. Three part-time faculty have certificates in nursing education. Five adjunct faculty are nurse practitioners. Many part-time faculty currently practice in mental health, telemetry, oncology, orthopedics, critical

care, and among others. Full information is available on the Faculty Profile. Faculty transcripts are available for review in the Human Resources Department of the College. Copies of all professional licenses are available on site in the Department Office West 2-5.

All full and part-time faculty members exhibit evidence of current knowledge and clinical experience appropriate to their teaching responsibilities. Pennsylvania law now requires that Registered Nurses obtain 30 hours of Board-approved continuing education over each two-year licensure period, beginning with Registered Nurses whose expiration date is October 31, 2010. Additionally, faculty members attend continuing education programs as part of their certification requirements. Most recently, all full and part-time faculty have been able to take advantage of inservices and conferences available to them through participation in the Hartford and the HRSA grants. In addition faculty have received mini-grants from the College's Foundation. Several faculty annually attend the NLN Education Summit. When the NLN Summit was held in Philadelphia in September 2008, both full and part-time faculty attended at least part of the conference. Full-time faculty can apply to the Faculty Federation for monies to attend conferences for professional development. Full information regarding conferences, programs and inservices attended, and presented by, full and part-time faculty over the past three years is available in the table entitled Summary of Scholarly Activities (Table 2-2).

After seven years of full time service, faculty can apply for a one-semester sabbatical leave with full salary and benefits or for a year-long leave at fifty percent salary and full benefits. Over the past five years, three faculty have taken advantage of this option for travel, clinical practice and academic pursuit.

## **Criteria 2.2**

### **Faculty (full- and part-time) credentials meet governing organization and state requirements.**

The Bylaws of the Faculty Organization of the Department of Nursing state in Section VIII, entitled Job Descriptions that the qualifications for Full- time, Part-time and Visiting Lecturer faculty positions include a minimum of a master's degree in nursing,

teaching experience preferred, current nursing clinical practice, and a current Pennsylvania Professional Nurse license in good standing. All full- and part- time faculty meet those criteria.

The Pennsylvania State Board of Nursing Policy 21.71, entitled Administrative and Instructional Personnel, states the Nurse Administrator must have or obtain a doctoral degree within five years, have a minimum of at least one graduate degree in nursing, maintain a current license as a Professional Nurse in the Commonwealth, and have expertise in nursing practice, nursing education and administration. The Head of the Nursing Department has been a full-time faculty member since 1990, has made extensive contributions to the field of nursing education and has a PhD from Widener University. Additional information is available on the Faculty Profile and Summary of Scholarly Activities.

Faculty members must have at least one graduate degree in nursing, be licensed as a Professional Nurse in the Commonwealth, and shall have clinical expertise in their areas of instruction. All faculty meet these criteria. The policy also states that the program must maintain full-time faculty in the areas of practice encompassed in the curriculum. The nursing education unit meets these criteria by maintaining faculty attending professional development programs and engaging in clinical practice. All full-time faculty are required to attend two weeks of professional development at the beginning of the fall and spring semesters.

### **Criteria 2.3**

#### **Credentials of practice laboratory personnel are commensurate with their level of responsibilities.**

The College Skills Laboratory Coordinator is a full-time faculty member who develops and maintains resource lists for laboratory classes, supervises the ordering of supplies and equipment, discards outdated supplies, submits budget requests for equipment and supplies to the Department Head, arranges for cleaning and repair of equipment, and teaches in the classroom as assigned. The Laboratory Coordinator holds a masters' degree in nursing with expertise in Medical-Surgical nursing and oncology. All laboratory sections are taught by full-time faculty with masters' degrees in nursing and clinical expertise in medical-surgical nursing. Skills laboratory sections are

scheduled with a 15:1 student-to-teacher ratio. The Laboratory Coordinator works with the full time faculty to ensure consistency in content across all sections. The Lab Coordinator has also attended seminars on simulation and contributed to the development of the Vital Sim mannequin simulation program. Currently, all nursing courses include clinical activities using the Vital Sim mannequins.

Part-time faculty participate in clinical skills assessment at the end of each semester. All part-time faculty are clinical instructors and possess clinical expertise.

#### **Criteria 2.4**

**The number and utilization of faculty (full- and part-time) ensure that program outcomes are achieved.**

One faculty member is elected by the full-time faculty to be the Head of the Department for a two year term. This is a 12-month appointment. The Department Head works closely with both full- and part-time faculty in the development, implementation and evaluation of the program. One full-time faculty member is appointed by the Department Head to be the Clinical Coordinator and is given 12 credits of release time to perform this function. The Clinical Coordinator and full-time faculty meet as a Curriculum Committee of the Whole to design, assess and evaluate the curriculum. The Clinical Coordinator also serves as liaison with affiliating agencies, teaches in the classroom and coordinates graduate follow-up surveys. The College Skills Laboratory Coordinator, already addressed in Standard 2.3, also teaches in the classroom and seminar as assigned.

Prior to each semester the needs of the department are assessed and full-time faculty are assigned to either the first year (Nursing 101 and 132) or second year (Nursing 231 and 232) of the program. Faculty preferences are considered, but the needs of the department supersede faculty requests. Each course is taught by a faculty teaching team. The first year courses (Nursing 101 and Nursing 132) consist of the components of Lecture (3 hours per week), College Skills lab (2 hours per week), Seminar (1 hour per week) and Clinical (12 hours per week). The components of the second year courses of the program (Nursing 231 and 232) consist of Lecture (3 hours per week), Seminar (2 hours per week) and Clinical (12 hours per week). Each team is led by two Course Coordinators who are elected by the team. The Course Coordinators receive extended

time payment for the semester and are responsible for organizing the activities of the team. Team members take responsibility for attendance, grade-keeping, test construction and student advising. Each faculty member assumes responsibility for development and delivery of individual course content.

All full-time faculty teach fifteen assigned contact hours per semester (30 for the academic year) including lecture, skills lab, seminar, and clinical. Any teaching assignment exceeding 15 hours per semester is considered overload according to the Collective Bargaining Agreement and faculty are paid according to the college-wide formula. Nursing courses are 18 contact hours (N101 and N132) or 17 contact hours (N231 and N232, therefore most nursing faculty have an overload assignment. Staffing needs are met by allowing full-time faculty to work additional contact hours (up to five per semester) to meet the needs of the department and to meet faculty student ratios. All teaching overload is voluntary and paid at the contractual rate.

Faculty student ratios for each component of the course, based on approximately 130 students in each year of the program, are: Lecture 22:1, Seminar 14:1 in first year, 20:1 in second year, College Skills Laboratory 12:1, and Clinical area 8:1. One faculty member manages the department HRSA grant activities through Drexel University and has been instrumental in educating staff, developing simulation activities, and integrating technology such as web-based resources into the curriculum. One nursing faculty member is selected to serve as the Independence Foundation Chair in Nursing for a renewable three year term. The Independence Foundation Chair was endowed by the Independence Foundation, a Philadelphia based philanthropy, in 1993 to “encourage and facilitate the finest scholarship and teaching.”

Part-time faculty, all prepared at the masters’ degree level, are hired on a semester by semester basis and used for clinical instruction. All faculty development programs offered by the College and the Department of Nursing are available to part-time faculty. Given the current number of students in the program, the number of full and part-time faculty are sufficient to insure the delivery of a quality education to the students.

### **Criteria 2.5**

**Faculty (full and part-time) performance reflects scholarship and evidence-based teaching and clinical practices.**

Both full- and part-time faculty attend continuing education conferences in their areas of expertise in order to maintain certification, complete continuing education requirements, and to ensure that the best practices in nursing practice and nursing education are taught and implemented in the classroom and clinical areas. Many faculty with expertise in their specialty areas have presented at conferences. Many faculty continue to practice actively in nursing in such positions as advanced practice nurses and as faculty at other nursing programs. Complete information on faculty participation in these activities is available on the Summary of Scholarly Activities table.

In particular, through funding from the HRSA grant, all full- and part-time faculty have been invited to participate in inservice programs and conferences related to implementing simulation in nursing education. Faculty attended HRSA funded inservice programs on the use of the technology in nursing education. Faculty received PDAs or iPods, were able to select free textbook software and taught to load it on the PDA or iPod. The nursing education unit purchased two Vital Sim mannequins and received training on the use of the manikins by Laerdal as well as development of simulation scenarios by expert Drexel University personnel. The NLN template has been used by faculty to develop scenarios that have been used throughout the program. Faculty have also received instruction on MicroSim InHospital, which utilizes computerized scenarios that are now being used as part of the clinical experience. Full- and part-time faculty attended a day- long conference in June of 2009 and June of 2010 funded by the HRSA grant. Department of Nursing faculty members presented at the conferences on activities developed through the grant.

The Hartford Foundation grant has also provided faculty development opportunities, such as the ACES Conference in June 2010. Faculty have also received instruction in using the geriatric resources available on the Hartford Foundation's website, in particular the Try This series, which demonstrates the use of evidence-based tools for assessing geriatric syndromes. These have been used by faculty with students in the clinical and classroom areas.

In addition, two faculty members applied for and received a Community College of Philadelphia Mini-Grant for the purchase of audience response devices. Faculty

received instruction in the use of the devices and use them in the classroom to stimulate discussion and immediate evaluation of learning. The devices are also being used as part of the community clinical in classrooms during the health promotion teaching.

### **Criteria 2.6**

**The number, utilization and credentials of non-nurse and staff are sufficient to achieve the program goals and outcomes.**

The Department of Nursing receives secretarial support services through the College, by having access to the full time divisional support staff. The divisional staff consists of one Coordinator, two Technical Craft Specialists and two Classified Staff members which are shared with the Division of Mathematics, Science and Health Careers faculty. One additional full-time Technical Craft Specialist is dedicated to the nursing department. She provides secretarial and technical support to the Department Head, faculty and Laboratory Coordinator. Additional assistance is received from student workers who receive work-study funds. These students work under the supervision of the Division Office Coordinator. A full-time Nursing Grant Program Manager was hired in 2009 to oversee and assist with the various grants. This person also provides support as needed. The Laboratory Coordinator receives additional assistance from nursing students with work-study funding as well as student peer tutors. Support with math tutoring, counseling and admissions is all provided by the college by through the learning labs, writing center, allied health counselors and other college departments. Technical support is also received through the college's Audio-Visual/Multi-Media, Information Technology and Duplicating Services. All support is easily accessed and meets the needs of the faculty.

### **Criteria 2.7**

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

As stated in the College Employee Handbook, the College provides a variety of orientation programs for both new employees as well as staff who are promoted or transferred. New full-time faculty currently are invited to participate in a year-long

orientation program. Further information regarding the College orientation program is available on site.

The Department of Nursing provides program-specific orientation to full-time faculty through mentoring. Each new faculty member is assigned to work closely with an experienced faculty member. There are currently two new full-time faculty, both hired for the 2010-2011 academic year. New faculty attend all departmental meetings and participate on committees. New faculty are evaluated each semester during the first year and yearly thereafter. Full time faculty become tenured upon appointment to the fifth year of service according to the Collective Bargaining Agreement.

### **Criteria 2.8**

#### **Systematic assessment of faculty (full-and part-time) performance demonstrates competencies that are consistent with program goals and outcomes.**

The Department of Nursing faculty strive to maintain a positive learning environment that combines effective teaching strategies and support to students. Towards these outcomes faculty performance is evaluated to assure competence and development. The College evaluation process may be viewed in the Collective Bargaining Agreement, September 1, 2006 to August 31, 2011

A number of assessment methods are employed to evaluate faculty including: student-evaluation, peer-evaluation, self-evaluation and evaluation by the Chair of the Nursing Department. These data are available on site.

The Department of Nursing engages in a college-wide computerized student evaluation process at the end of each course. The evaluation form utilizes a 4-point Likert scale with 4 as the highest possible score. The nursing faculty, as a whole, consistently maintains a rating between 3 and 4. In addition to the college-generated evaluation tool, the Department of Nursing asks students to evaluate the course and the faculty.

At the conclusion of each semester, each faculty member receives a copy of aggregate and personal evaluation data which they may review with the Head of the Nursing Department. A summary of aggregate data are available on site.

Faculty are asked to complete a yearly self-evaluation and to engage in a voluntary peer evaluation. The peer evaluator is provided a course syllabus and opportunity to observe the classroom activity. If acceptable to both parties the evaluation



is signed, returned to the Head of the Nursing Department and placed in the faculty member's personal file.

The Head of the Department of Nursing must evaluate newly hired faculty annually until they are tenured. Tenured faculty may also participate in the evaluation process. The Dean of the Division conducts an annual performance evaluation of the department head.

### **Criteria 2.9**

**Non-nurse faculty and staff performance is regularly reviewed in accordance with the policies of the governing organization.**

At this time, the only non-nursing assistive personnel in the Nursing Department is the full-time Technical Craft Specialist. It is the responsibility of the Head of the Department of Nursing to evaluate her performance on an annual basis.

The Nursing Grant Program Manager is an administrative position. She works closely with and is evaluated by the Independence Foundation Chair.

**Table 2-1**  
**COMMUNITY COLLEGE OF PHILADELPHIA**  
**DEPARTMENT OF NURSING**  
**FACULTY PROFILES**

<b>Faculty Name and Rank</b>	<b>FT/PT</b>	<b>Date of initial appointment</b>	<b>Bachelor Degree</b>	<b>Graduate Degrees</b>	<b>Areas of Clinical Expertise</b>	<b>Academic Teaching and Other Responsibilities</b>
Carolyn Bartsch Assistant Professor	FT	2004 (PT) 2005 (FT)	Charity Hospital SON Stockton State College BSN	University of Pennsylvania MSN	Critical Care/Trauma Med/Surg	N231-232 Admissions Committee Curriculum Committee Faculty Selection Committee Student Nurses Club Council on Education (College-wide)
Jean Byrd Assistant Professor	FT	2002 (FT)	College of New Jersey BSN	Villanova University MSN	Med/Surg Nursing Education CNE	N231, 232 Course Coordinator Grant Activities Curriculum Committee Students Appeals Committee
Ivory Coleman Professor	FT	1980 (FT)	Hampton University BSN	Pennsylvania State University MSN University of Pennsylvania EdD	Med/Surg Community Nursing	N23, 232 Chair, Admissions Committee Chair, Advanced Placement Grant Activities Curriculum Committee Faculty Federation Rep
Tamika Curry Assistant Professor	FT	2004 (PT) 2004 (VL) 2005 (FT)	Thomas Jefferson University BSN	Thomas Jefferson University MSN	Med/Surg, Telemetry, Family Nurse Practitioner	N101, 132 Course Coordinator Admissions Committee Faculty Selection Department head Selection Scholarship Committee Student Nurses Club
Vonda Leonard Assistant Professor	FT	2001 (VL) 2005 (FT)	Philadelphia General Hospital SON Diploma Temple University	University of Pennsylvania MSN	Certification Maternal/Child health	Nursing 101, 132 LPN Support Group Curriculum Committee Sunshine Committee

			BS Ed University of Pennsylvania BSN			Admissions Committee
Petrina McFarlane Visiting Lecturer	FT	2010 (VL)	Community College of Philadelphia ADN Thomas Jefferson University BSN	Thomas Jefferson University MSN Post masters Nursing Ed.	Med/Surg, Cardiology	N132 Curriculum Committee
Barbara McLaughlin Professor	FT	1990 (FT) 1985 (PT)	Episcopal Hospital SON Diploma Holy Family University BSN	Arcadia University MEd Villanova University MSN Widener University PhD	Med/Surg Nursing Education CNE	Department Head Grant Activities
Andrea Mengel Professor	FT	1975 (FT)	Philipsburg State General Hospital SON Penn State University BSN	University of Pennsylvania MSN University of Pennsylvania PhD	Nursing Community Nursing Geriatric Nursing Psychiatric Nursing Education	Independence Foundation Chair Scholarship Committee Curriculum Committee Grant Activities
Carol Moriarity Assistant Professor	FT	2003 (PT) 2009 (FT)	Helene Fuld SON Diploma Rutgers University BSN	Rutgers University MSN Pennsylvania College of Podiatric Medicine DPM	Psychiatric Nursing Geriatric Nursing Adult health APN	N132 Curriculum Committee Scholarship Committee President's Faculty Award Committee
Susan Orehowsky Assistant Professor	FT	2002 (PT) 2003 (FT)	Syracuse University BSN	LaSalle University MSN	Med/Surg CS Diabetes CDE Nursing Education CNE Geriatrics	N231,232 Course Coordinator Chair, Scholarship Committee Curriculum Committee ESL Support group Faculty Selection Student Affairs Committee
Maureen Quinn Assistant Professor	FT	1989 (FT)	Suffolk SON of Southampton Hospital Diploma Long island University BSN	New York University MSN	Rehabilitation Nursing Med/Surg Geriatrics	N231, 232 Curriculum Committee Student Appeals Committee

Patricia Rexer Assistant Professor	FT	2006 (FT)	Kutztown University BSN	Villanova University MSN	Med/Surg Community Nursing Nursing Education	N101, 132 Course Coordinator Curriculum Committee
Ann Russo Assistant Professor	FT	1990 (FT)	Northeastern Hospital SON Diploma LaSalle University BSN	Gwynedd Mercy College MSN	Med/Surg Oncology	N101,132,231,232 Academic Advising Curriculum Committee Faculty Selection Committee Lab Coordinator
Laureen Tavolaro- Ryley Associate Professor	FT	1996 (PT) 2001 (VL) 2001 (FT)	York College of Pennsylvania BSN	University of Pennsylvania MSN	Psychiatric Nursing Gerontology	N231-232 Curriculum Coordinator Chair, Faculty Selection Chair, Department Head Selection Chair, Independence Chair Selection Grant Activities
Sandra Blatz Adjunct	PT	2002	Hahnemann University BSN	Gwynedd Mercy College MSN Drexel University FNP Certificate	Med/Surg Adult health Critical Care Family Nurse Practitioner	N231,232 Clinical
Tammi Britt Adjunct	PT	2008	Widener University BSN	West Chester University MSN	Med/Surg	
Amy Burckhardt Adjunct	PT	2007	Frankford Hospital SON Diploma LaSalle University BSN	University of Phoenix MSN, Certificate in Education	Certified in Med/Surg Nursing	N101, 132 Clinical
Annemarie Carboy-Costello Adjunct	PT	2005	Community College of Philadelphia AND LaSalle University BSN	LaSalle University MSN	Med/Surg Orthopedics Certified LNC Certified	N101,132 Clinical
Amira Clemens Adjunct	PT	2009	Community College of Philadelphia AND Thomas Jefferson University BSN	Thomas Jefferson University MSN Post Masters Certificate in Nursing Education	Med/Surg Telemetry Cardiac Nursing Nursing Education	N231, 232 Clinical

Christine DeFamio Adjunct	PT	2009	Thomas Edison University BSN	University of Pennsylvania MSN	Nurse Practitioner Med/Surg	N231-232 Clinical
Joan DellaRocca Adjunct	PT	2001	LaSalle University BSN	LaSalle University MSN	Med/Surg Adult Health Nurse Practitioner	N101, 132 Clinical
Denise Dougherty Adjunct	PT	2007	Community College of Philadelphia AND Thomas Jefferson University BSN	Thomas Jefferson University MSN	Family Nurse Practitioner Med/Surg Pain Management Certification	N101, 132 Clinical
George Fenimore Adjunct	PT	2002	Burlington County Community College ADN MCP/Hahnemann University BSN	MCP/Hahnemann University MSN	Clinical Research Med/Surg Cardiac Nursing	N231-232 Clinical
Felicia Jones-Haskins	PT	2008	Hampton University BSN	Widener University MSN	Pediatrics Geriatrics Nursing Education	N231, 232 Clinical
Elaine Kemp Adjunct	PT	2005	Episcopal Hospital SON Diploma LaSalle University BSN	LaSalle University MSN	Med/Surg Oncology Case Management	N101,132 Clinical
Paul Kernozek Adjunct	PT	2004	Westfield State College BA in Psychology Boston University BSN	Boston University MSN	Med/Surg CNS Rehabilitation CNS Certified in Counseling	N101, 132 Clinical
Patricia Kline Adjunct	PT	1993-1995 PT 2007 PT	Holy Family University BSN	Hahnemann University MSN	Critical Care Med/Surg Clinical Research	N101-132 Clinical

Eileen Norton Adjunct	PT	2010	Frankford Hospital SON Diploma Penn State University BSN	Gwynedd Mercy College MSN	Med/Surg Gerontology	N231, 232  Clinical
Joseph Pannapara Adjunct	PT	2010	Thomas Jefferson University BSN	Thomas Jefferson University MSN	Neurology ICU Med/Surg	N101-132  Clinical
Jennifer Patterson Adjunct	PT	2007	Methodist Hospital SON Diploma	Simmons College MSN	Med/Surg, Critical Care Womens Health, Nursing Education Board Certified Adult Nurse Practitioner	N231-232  Clinical
Linda Regul Adjunct	PT	1999	Gwynedd Mercy AD, BS Business Administration	Gwynedd Mercy College MSN	Clinical Nurse Specialist Oncology OCN Med/Surg	N231-232  Clinical
Martina Russell Adjunct	PT	2001	Howard University BSN	University of Pennsylvania MSN, Certified Nurse Midwife	Med/Surg Emergency Nursing Nursing Education	N101-132  Clinical
Christine Slavin Adjunct	PT	2002	Frankford Hospital SON Diploma Regents College BSN	Thomas Jefferson University MSN	Med/Surg Nursing Education	N231-232
Ann Slivjak Adjunct	PT	2002	Thomas Jefferson University BSN	University of Pennsylvania MSN	Oncology-AOCN Med/Surg	N101-132  Clinical
Constance Sumner Adjunct	PT	2003	Hahnemann University AND LaSalle University BSN	LaSalle University MSN Post masters Certificate Nursing Education	Med/Surg Oncology Nursing Education	N101-132  Clinical

Lula Thompson Adjunct	PT	1992	Community College of Philadelphia AGS, AAS Hahnemann University BSN	LaSalle University MSN	Med/Surg Community health Geriatric Ed Safety	N213-232  Clinical
Mieczyslaw Witek Adjunct	PT	2005	School of Nursing Krakow Poland ADN	Medical Academy, Krakow Poland MSN	Med/Surg	N231-232  Clinical

**Table 2-2**  
**Community College of Philadelphia**  
**Department of Nursing**  
**Evidence of Scholarly Activities for Full Time Faculty**  
**2007-Present**

<b>Name</b>	<b>Certification Title with Next Recertification Date</b>	<b>Current Academic Courses/Degrees in Progress</b>	<b>Conferences Attended/ Dates 2007-present</b>	<b>Publications</b>	<b>Presentations or Courses Taught Other than at CCP/ Date</b>
Carolyn Bartsch			Neurological Nursing: Brain Tumors (PESI) 11/09  NLN Education Summit Philadelphia PA 9/09  Pennsylvania/Washington DC Technology Collaborative Conference 5/09  HRSA Conference: Testing Your Creations, CCP 4/09  HRSA Conference: The Development Process CCP 3/09		Teach Medical Terminology course at Camden County Community College Camden County, NJ 2003-present

			<p>HRSA Conference: Introduction to Simulation CCP 1/09</p> <p>Emerging Infectious Diseases, Infection Control and Bloodborne Pathogens (PESI) 10/26/07</p>		
Jean Byrd	<p>Certified Nurse Educator 9/2014</p> <p>Advanced Cardiac Life Support 5/2012</p> <p>Pediatric Advanced Life Support 5/2012</p>		<p>NLN Education Summit Phoenix, AZ 9/26-29/07</p> <p>Growing Up 12/26/07</p> <p>Grown Up 12/26/07</p> <p>CHS: Prevention of CAUTI 5/8/08</p> <p>Drexel University Nursing Education Institute 6/28/08</p> <p>Nurse Asthma Care and Education 7/9/08</p> <p>Clinical Education Redesign: Simulations, Innovations and Partnerships 11/7-8/08</p> <p>Providing High Quality Care for Older Adults 11/25/08</p> <p>Southeastern Pennsylvania Deans and Directors Alliance Chief Nursing Officers Conference: Advancing leadership in the Clinical Area: Teaching; Doing It! Evaluating Outcomes! 12/15/08</p> <p>Introduction to Simulation 1/26/09</p>		<p>NLN Summit, Phoenix, AZ Converting Your Traditional Course to a Hybrid 9/07</p> <p>Drexel University Education Institute: Converting Your Traditional Course to a Hybrid 6/08</p> <p>Adding Sound to Your Power Point Presentation Using Your PDA 5/15/2009</p> <p>NLN Education Summit :Nursing Education Technology Collaborative 9/09</p> <p>NNCC Annual Conference Improving Community Health: Do You Have Time To Walk? 11/6/09</p> <p>Simulation in an Associate Degree</p>



			<p>Simulations: The Development Process 3/16/09</p> <p>Designing and Developing Simulations 2/20/09</p> <p>Simulations: Testing Your Creations 4/6/09</p> <p>Connecting the Dots: Geriatric Nursing, Education and Clinical Simulation International Conference 4/2/09</p> <p>Methamphetamine Abuse 5/12/09</p> <p>Moderate Sedation/ Analgesia 5/12/09</p> <p>Pennsylvania/ District of Columbia Nursing Technology Conference 5/15/09</p> <p>Debriefing and Guided Reflection 7/27/09</p> <p>NLN Summit Philadelphia, PA 9/23/26/ 09</p> <p>Simulation in Health Care: Where No One Has Gone Before 3/24-26/10</p>		Program 3/25/10
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Ivory Coleman			<p>NLN Nursing Education Summit 9/08 9/09 9/10</p> <p>Toxins in our Midst; Breast Cancer in Our Environment 6/08</p> <p>NNCC Annual Conference 11/09 Chi Eta Phi Sorority Inc. Annual Conference 7/09</p> <p>Bridging Generations: Caring Across the Life Span</p> <p>Legislative Health Social Policy Update: The Change is Real</p> <p>Approaches to Reducing Health Disparities Across the Lifespan</p> <p>ENRS: Reflecting Our Past and Imagining Our Future: The Globalization of Nursing Research</p> <p>Simulation: The Basics; Designing Your Own Creations Testing Your Creations</p> <p>Providing High Quality Care for Older Adults 08</p>		<p>On the Advisory Board for the ASD Excelsior College curriculum</p>
Tamika Curry			<p>NLN Education Summit Las Vegas, NV 9/29 -10/2/ 10</p> <p>New Days/New Ways Advancing Care Excellence for Seniors/NLN and CCP</p>		<p>New Days/New Ways Advancing Care Excellence for Seniors/NLN and CCP Situational Decision Making: End of Life Care</p>

			<p>Philadelphia June 2010 Altamonte Springs, FL June 2010</p> <p>Technology and Simulation Conference, Philadelphia, PA 5/2010</p> <p>NLN Education Summit Philadelphia, PA 9/23 -26/ 09</p> <p>Technology and Simulation Conference, Philadelphia, PA 5/2009</p> <p>Connecting the Dots: Geriatric Nursing, Education and Clinical Simulation International Conference 4/2/09 Drexel University Nursing Education Institute 6/28/08</p> <p>NLN Education Summit Phoenix, AZ 9/26-29/07</p>		<p>Philadelphia June 2010 Altamonte Springs, FL June 2010</p> <p>Technology and Simulation Conference, Philadelphia, PA Technology Resources to Optimize Care of Older Adults 5/2010</p> <p>Drexel University Education Institute: Converting Your Traditional Course to a Hybrid 6/2008</p> <p>NLN Education Summit, Phoenix, AZ Converting Your Traditional Course to a Hybrid 9/2007</p>
Lisa Johnson	<p>Certified Pediatric Nurse 2011</p> <p>Certified Pediatric Oncology Nurse 12/31/2012</p> <p>BLS Instructor 10/2012</p> <p>Chemotherapy/Biotherapy Provider 12/31/2010</p>	Online Teaching Webinar	<p>Emergency Nurse Pediatric Course 1/16/2011</p> <p>10/10 Association of Pediatric Hematology/Oncology Nursing</p> <p>9/10 CPN Item Writer Workshop</p> <p>9/09 Association of Pediatric Hematology/Oncology Nursing</p> <p>6/09 Drexel University Education Institute</p> <p>4/09 Contemporary Trends and Challenges for the Clinical Nurse</p>		<p>Poster Presentation Active Life v. Active Bleeding: Often a Dilemma for Children with Hemophilia (2010)</p> <p>Poster Presentation Chemotherapy Administration Safety (2010)</p> <p>Delaware School Nurse Conference Assessing and Managing Pain in Children Utilizing</p>

			<p>Educator</p> <p>11/08 IV Venipuncture Certification Program</p>		<p>NIC/NOC Classifications 3/07</p> <p>In-Service Training and Teaching Video on BMI Screenings for Delaware School Nurses 4/07</p> <p>Mental Health Clinical 2007 – 2010</p> <p>Health of the Community and Aggregates 2008</p> <p>Adult Nursing III Clinical 2008</p> <p>Health Assessment Lab 2009 – 2010</p> <p>Senior Seminar 2009 - 2010</p> <p>Pediatrics Clinical 2010</p> <p>Adult Nursing I Clinical 2009</p> <p>Adult Nursing II Clinical 2009 -2010</p> <p>Gerontology Clinical 2009 - 2010</p>
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Vonda Leonard	Maternal-Child Health ANA-NACOG 2012		<p>6<sup>th</sup> Annual Pediatric Nursing Conference: Embracing the Challenge 10/12/09</p> <p>High Risk Obstetrics: Current Risks, Treatments and Issues 9/23/09</p> <p>Caring for Children with Infectious Diseases 9/30/09</p> <p>NLN Education Summit 9/09</p> <p>Introduction to Simulation 1/26/09 Simulation: The Basics 2/16/09</p> <p>Simulations: The Development Process 3/16/09</p> <p>Simulations Testing Your Creations 4/6/09</p> <p>Evidence-Based Practice Nursing Conference 4/24/09</p> <p>Implications of Evidence in Practice 4/23/10</p>		
Petrina McFarlane			HRSA: Promoting Patient Safety Through Collaboration, Technology and Simulation 5/14/10		
Barbara McLaughlin	<p>Certified Nurse Educator 9/2014</p> <p>ANEF-annual dues</p>		<p>NLN Technology Conference 2009</p> <p>PONL Annual Leadership Conference 2009</p> <p>NLN Education</p>	<p>Teaching and Learning in Nursing Education – ESL article</p> <p>Teaching and</p>	<p>NLN Technology Conference: Using eResources to Teach Care of Older Adults 10/09</p> <p>PONL Annual Leadership</p>

			<p>Summit 9/09</p> <p>UNC Simulation and the Older Adult 4/09</p> <p>IUPUI Simulation Conference 11/08</p> <p>NOADN Convention 11/08</p> <p>NLN Education Summit, San Antonio, TX 9/08</p> <p>Drexel University Nursing Education Institute, Atlantic City, NJ 6/08</p> <p>NSNA Grapevine, TX 4/08</p> <p>NOADN Las Vegas, NV 11/07</p> <p>AACN Geriatric Nursing Education Consortium 10/07</p> <p>NLN Education Summit Phoenix, AZ 9/07</p> <p>American Association of Community Colleges 4/07</p>	<p>Learning in Nursing –writing competencies in nsg education.</p> <p>Nursing Ed Perspectives-1/10 Hartford</p> <p>Adams, M, Editor, Achieving Excellence in Nursing Education. NLN 2009 (Chapter on Students)</p> <p>JNE article- Hartford</p> <p>I will get specifics for these.</p>	<p>Conference. Promoting Safety Through Technology and Collaboration: The PADCNETC Project 2009</p> <p>NLN Education Summit: Using the Older Adult Client to Teach Complexity in Prelicensure Nursing Programs 9/09</p> <p>NOADN Convention Opening Speaker with Elaine Tagliareni- National Survey Findings: Teaching Students to Care for Older Adults: Challenges and Possibilities 9/08</p> <p>NLN Education Summit San Antonio, TX. Teaching Students to Care for Older Adults: Challenges and Possibilities 9/08</p> <p>A Demonstration of Teaching Strategies in Action: Using the How To Try This Series to Teach Geriatrics</p> <p>Connecticut Community</p>
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					<p>Colleges- Teaching Strategies to Integrate Geriatrics into Nursing Curricula: Using the How To Try This Series Videos and Online Resources 9/08</p> <p>Taught Nursing Research course Immaculata University 7/08</p> <p>Drexel University Nursing Education Institute Atlantic City, NJ Teaching Strategies to Integrate Geriatrics into Nursing Curricula: Using the How To Try This Series Videos and Online Resources 6/08</p> <p>Introducing Evidence Based Practice to First Year Nursing Students</p> <p>Community College of Philadelphia-All Day Workshop. Using Quality and Safety in Nursing Education (QSEN) Competencies to Develop Clinical Evaluation Tools for Older Adults in Community and Long Term Care Settings</p>
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					<p>4/2008</p> <p>AACC, Philadelphia, PA. Presented -How Will Your Allied Health Program Meet the Needs of an Increasing Older Adult Population? 4/2008</p> <p>NSNA, Grapevine, TX Presented student workshop: Using the How To Try This Series to Assess Your Older Adult Client 4/2008</p> <p>NSNA Grapevine, TX. Presented faculty workshop: Current John A. Hartford Foundation Funded National Projects: How To Try This, GNEC, and Fostering Geriatrics in Associate Degree Nursing Programs 4/2008</p> <p>NOADN, Las Vegas, NV. Partnering with the John A. Hartford Foundation to Foster Geriatrics in Associate Degree Nursing Education 11/07</p> <p>NLN Education Summit Phoenix, AZ Partnering with the John A. Hartford Foundation to Foster</p>
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					<p>Geriatrics in Associate Degree Nursing Education 9/07</p> <p>Deans and Directors of Pennsylvania Associate Degree Nursing Programs Plenary Session: Fostering Geriatrics in Associate Degree Nursing Programs: Resources and Strategies 4/07</p> <p>AACC Convention: A Partnership with the John A. Hartford Foundation to Foster Geriatrics in Associate Degree Nursing Education 4/2007</p>
Andrea Mengel			<p>NLN Summit Las Vegas 2010 Philadelphia 2009 Phoenix 2008 San Antonio 2007</p> <p>Pennsylvania Colleges of Associate Degree Nursing Meetings March and October each year until 2010</p> <p>NLNAC Self Study Forum, New Orleans, April 2009</p> <p>Community College Baccalaureate</p>	<p>Enhancing Geriatrics in Associate Degree Nursing Education: An Assessment of Current Curricula and Clinical Experiences. <i>Journal of Nursing Education</i>, V49, No 5, 2010. Ironside, P.M., Tagliareni, M. Elaine, McLaughlin</p>	<p>New Days/New Ways Advancing Care Excellence for Seniors/NLN and CCP Philadelphia June 2010 Altamonte Springs, FL June 2010</p> <p>Special Session Panel on Faculty Compensation, NLN Summit 2009</p> <p>Testimony for American Association of Community Colleges on</p>

			<p>Association Annual Meeting Reno NV March 2009</p> <p>National Nursing Centers Consortium “The Health Center Empowerment Project: Northeastern Regional Workshop Event” Philadelphia, February 2009</p> <p>NCLEX Invitational, National Council of State Boards of Nursing, Chicago, September 2009</p> <p>Nursing Education Technology Collaborative Annual Conference, Philadelphia May 2008 May 2009</p> <p>Many Paths/Many Possibilities: Career Options in Nursing CCP November 2009</p> <p>Drexel/CCP Faculty Development Simulations/Faculty Development Introduction to Simulation January 2009 The Basics February 2009 The Development Process March 2009 Testing Your Creations April 2009</p>	<p>Barbara, King, Eunice and Mengel, Andrea</p>	<p>H.R. 4231, the Department of Veterans’ Affairs Nurse Retention Act of 2004</p> <p>Member, Governor Rendell’s Advisory Committee on Health Care Reform 2004-2006</p>
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<p>Carol Moriarity</p>	<p>Adult Nurse Practitioner 10/2013          Psychiatric Mental Health Nurse (PMHRN) 10/2013          Biomedical/Clinical Research Investigator 11/2010</p>	<p>Many paths, Many Possibilities: Career Options in Nursing Introduction to Simulation , CCP, 11/2009</p> <p>APNA : 23 Annual Conference 10/2009</p> <p>Key Concepts in Bipolar Disorder Diagnosis and Management 10/2009</p> <p>Pennsylvania/ District of Columbia Nursing Education Technology Collaboration Conference 5/2009</p> <p>Simulation: Testing Your Creations , CCP 4/2009</p> <p>Simulation: The Development Process CCP, 3/2009</p> <p>Simulation: The Basics, CCP 2/2009</p> <p>Introduction to Simulation, CCP 1/2009</p>	<p>Promoting Patient Safety Through Collaboration, Technology and Simulation, Drexel U. 5/2010</p> <p>Psychopharmacology Institute, ISPN 4/2010</p> <p>International Society of Psychiatric-Mental Health Nurses Annual Conference 4/2010</p> <p>Implications of Evidence in Practice Conference , CCP 4/2010</p>	<p>Moriarity, C. (2009). Should Your Assessment Include Herbs? The Fifth Dimension, Department of Psychiatry, 1(1), p 3. Department Publication Cooper University Hospital, Camden, N.J.</p> <p>Suokhrie, L., Moriarity, C., Emory, C., White, R &amp; Bowen, J. 2009.Differences in Automated and Manual Blood Pressures in Hospitalized Psychiatric Patients. Bridges to Excellence, 3(1), p 10. Department Publication Cooper University Hospital, Camden, N.J.</p> <p>Moriarity. C. (2008).</p>	<p>Drexel University Nursing Professionals Conference: Promoting Patient Safety Through Collaboration, Technology and Simulations; Building Self Esteem Through Simulation 2010</p> <p>Poster Presentation International Society of Psychiatric/Mental Health Nurses St. Louis, MO Differences in Automated and Manual Blood Pressure in Hospitalized Psychiatric Patients 2010</p> <p>Poster presentation American Psychiatric Nurses Association Conference, Charleston, SC: Experiential Learning: Connecting Millenials, Gen Xers, Boomers, WWIIers 2009</p> <p>Association of Rehabilitation Nurses Conference Albuquerque NM. Experiential Learning Connecting Millenials, Gen Xers, Boomers, WWIIers 2009</p>
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		<p>2009 Nurse Practitioner Exam Review – Adult Track, 8/2009</p> <p>Drexel University Nursing Education Conference 6/2008</p> <p>Evidenced-Based Geriatric Practice Conference, CCP 4/2008</p> <p>Boot Camp for Nurse Educators, 2007</p> <p>APNA Annual Conference, 10/ 2007</p>		<p>Geropsychiatric issues: the Triple D’s Depression, Delirium, Dementia. The Fifth Dimension, Department of Psychiatry, 1(1), pp. 2-3. Department publication Cooper University Hospital, Camden, N.J.</p>	<p>Drexel University Nursing Institute Conference, Atlantic City, NJ: Baby Boomers, Gen Xers and Millenials: Bridging the Gap 2008</p> <p>Poster presentation Research Week, Cooper University Hospital: Differences in Automated and Manual Blood Pressure in Hospitalized Psychiatric Patients 2008</p> <p>Presentation, Philadelphia, Pa Community College of Philadelphia: Nursing Faculty Development Day. Clinical Concept Mapping 2008</p> <p>Mini-grant: Philadelphia, PA. Grant recipient, Coordinator, Moderator Community College of Philadelphia Evidenced-Based Geriatric Practice Conference 2008.</p> <p>Poster: Albuquerque, New Mexico Boot</p>
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					<p>Camp for Nurse Educators. Bridging the Generation through Experiential Learning 2007</p> <p>Poster: Kissimmee, Florida American Psychiatric Nurses Association Conference. Brief Interventions 2007</p>
Susan Orehowsky	<p>Certified Diabetes Educator 12/2010 Recert in process</p> <p>Medical/Surgical Clinical Specialist 2014</p> <p>Certified Nurse Educator 9/ 2014</p>		<p>NLN Conference, Philadelphia, PA New Days, New Ways: Advancing Care Excellence for Seniors (ACES) 6/10</p> <p>HRSA Conference Promoting Patient Safety Through Collaboration, Technology and Simulation 5/10</p> <p>PADCNETC Annual Conference 6/09 Philadelphia, PA</p> <p>NLN Education Summit 9/07 9/08 9/09</p> <p>Evidence Based Practice Nursing Conference CCP, 4/09</p>		<p>Mentoring English as a Second Language Students: Are They Hearing What You're Saying? Poster Presentation NLN Education Summit September 2009</p> <p>Hybrid Nursing Skills Lab Poster Presentation NLN Education Summit September 2008</p> <p>Insulin Training and Diabetes Education for Caregivers Presented to Med Techs at Assisted Living Facilities</p>

			<p>Drexel/CCP Faculty Development Introduction to Simulation 1/09 Simulation: The Basics 2/09 The Development Process 3/09 Testing Your Creations 4/09</p> <p>CCP, Philadelphia, PA Providing High Quality Care for Older Adults 11/08</p> <p>AADE Convention Washington DC August 2008</p>		<p>2007-present</p> <p>Drexel University School of Nursing: Med/Surg Clinical Rotations Adjunct Faculty Summer 2009</p> <p>Senior Clinical Skills Lab Summer 2007</p>
Maureen Quinn	Certified Registered Nurse (CRRN) 9/2015		<p>Implications of Evidence in Practice, CCP 4/10</p> <p>Many Paths, Many Possibilities: Career Options in Nursing; Introduction to Simulation. CCP, 11/09</p> <p>APNA: 23<sup>rd</sup> Annual Conference 10/09</p> <p>Simulation: Testing Your Creations, CCP 10/09</p> <p>Simulation: The Development Process CCP, 3/09</p> <p>Drexel University Nursing Education Conference 6/2008</p>		<p>Poster presentation American Psychiatric Nurses Association Conference, Charleston, SC: Experiential Learning: Connecting Millenials, Gen Xers, Boomers, WWIIers 2009</p> <p>Association of Rehabilitation Nurses Conference Albuquerque NM. Bridging the Generation Gap Through Experiential Learning 2009</p>

			<p>Evidenced-Based Geriatric Practice Conference, CCP 4/2008</p> <p>Boot Camp for Nurse Educators, 2007</p> <p>APNA Annual Conference, 10/ 2007</p>	
Patricia Rexer			<p>HRSA Conference: Promoting Patient Safety Through Collaboration, Technology and Simulation, Drexel University 5/10</p> <p>Implications of Evidence in Geriatric Nursing Practice, CCP Conference, 11/09</p> <p>Many Paths, Many Possibilities: Career Options in Nursing, Introduction to Simulation, CCP, 11/09</p> <p>HRSA Conference: Simulation: Testing Your Creations, CCP 4/09</p> <p>Implications of Evidence in Nursing Practice Conference CCP 4/09</p> <p>HRSA Conference: Simulation: The Development Process CCP, 3/09</p> <p>HRSA Conference: Introduction to Simulation, CCP 1/09</p> <p>NLN Education Summit Phoenix, AZ 9/07</p>	<p>Instructor for Kaplan NCLEX Review Courses 2009-present</p> <p>Hybrid Nursing Skills Lab Poster Presentation NLN Education Summit 9/08</p>

Ann Russo	Certified Oncology Nurse 2012		<p>NLN Education Summit 9/07 9/08 9/09</p> <p>Pennsylvania/ District of Columbia Nursing Education Technology Collaboration 2009</p> <p>Implications of Evidence in Practice 2010</p> <p>Clinical Education: Simulations, Innovations and Partnerships 2008</p> <p>Providing High Quality care to Older Adults 2008</p> <p>ACES: Advancing Care Excellence for Seniors 2010</p>		<p>Mentoring English as a Second Language Students: Are They Hearing What You're Saying? Poster Presentation NLN Education Summit 9/09</p> <p>Hybrid Nursing Skills Lab Poster Presentation NLN Education Summit 9/08</p> <p>Simulation on a Shoestring: Making the Most of Your Low Fidelity Resources</p>
Laureen Tavoraro-Ryley	Certified Psychiatric Clinical Specialist 2011		<p>NLN Education Summit Conference: 9/2007 9/2008 9/2009 9/2010</p> <p>NNCC Conference: 2007 2008 2009</p> <p>Dementia Congress: 2008</p>	<p>NIH Bridges to the Baccalaureate article in Journal of Teaching and Learning 2009</p> <p>American Journal of Nursing Book of the Year Judge in the category of Mental Health Publications 2009</p>	<p>Technology and Simulation Conference, Philadelphia, PA Technology Resources to Optimize Care of Older Adults 2010</p> <p>NNCC Conference Philadelphia, PA: Improving Community Health: Do You Have the Time to Walk? 2009</p> <p>NLN Education Summit San Antonio, TX A Demonstration of Teaching Strategies in</p>



					<p>Action Using the How to Try This Series to Teach Geriatric Assessments</p> <p>NLN Education Summit, Phoenix AZ LPN to RN Transition: How Much is Too Little? 2007</p> <p>NNCC Conference , Washington DC Mentoring the Next Generation of Community Health Nurses 2007</p>
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**Community College of Philadelphia  
Department of Nursing  
Evidence of Scholarly Activities for Part Time Faculty  
2007-Present**

Name	Certification Title with Next Recertification Date	Current Academic Courses/Degrees in Progress	Conferences Attended/ Dates 2007-present	Publications	Presentations or Courses Taught Other than at CCP/ Date
Sandra Blatz			Assessment Made Easy 8/16/09  Preventing Falls 3/12/09  Ischemic Stroke 1/6/10		
Amy Burkhardt	AMSN Medical Surgical Certification 10/31/14		Contemporary Trends and Challenges for the Clinical Nurse Educator 4/09  Introduction to Online Teaching 2008		Adjunct faculty:  Health Assessment Online DeVry University  Assessment Course Bucks County Community College Spring 08

					Assessment Drexel University Fall 09  Clinical Teaching Drexel University
Amira Clemens	BCLS: 2012 ACLS: 2010	Post Masters in Nursing Education			
Joan DellaRocca	Adult Nurse Practitioner 2015		Diabetes Conference 2008 NP Conference 2008 Multiple mini conferences and online CME activities	Atrial Fibrillation <i>Nursing 2007</i>  Appendicitis <i>Nursing 2008</i>	Adjunct faculty: Drexel University Health Assessment 2002-2009
Denise Dougherty	Family Nurse Practitioner  Pain Management Certification		Cardiac Auscultation 4-18-10  Pharmacology Update 8/2009		
George Fenimore	DNP in progress		Integrating Evidence-Based Content and Activities into Practice. Villanova, PA. 5/3/07	Fenimore, GS., Manno, MS. Control cirrhosis complications.	Clinical Instructor; Simulation Laboratory  NU313/314 Nursing

			<p>Villanova, PA Crucial Competencies for Resolving Organizational Conflict. 5/4 2007</p> <p>High-Performance Management. Linda Hill, PhD. Audio Conference. 5/7/2007</p> <p>Money Management: Utilizing the Basic Budgeting Process. 5/18/2007.</p> <p>Positive Criticism: The Capstone of Effective Coaching. 8/82007.</p> <p>Collection, Review and Analysis of Clinical Evidence for Genetic Testing. 11/14/07</p> <p>Preparing for the Genetic Information Nondiscrimination Act of 2007. 11/15/ 2007.</p> <p>Performance-Based Coaching: Unleashing Excellence. 4/9/2008.</p> <p>Clinical Faculty Workshop:</p>	<p><i>Nursing Critical Care. 3(1):44-53, January 2008.</i></p> <p>Manno, MS., Fenimore, GS. Preparing for your next role. <i>Nursing Management. 39(5):50-53, May 2008.</i></p> <p>Fenimore, GS. Pharmacologic Stress Testing in the Assessment of Coronary Artery Disease. <i>Nursing 2010.</i> (in press).</p>	<p>Management of Adults with Acute and Chronic Disorders</p> <p>NU404/405 Nursing Management of Adults with Neurologic/Sensory and Psychosocial Disorders</p> <p>NU412/413 Nursing Management of Adults with Complex Problems</p> <p>Clinical instruction Thomas Jefferson University Hospital</p> <p>Acute Stroke Unit</p> <p>Intermediate Neurosurgical Intensive Care Unit</p> <p>Inpatient Acute Rehabilitation Unit</p> <p>Jefferson Hospital for</p>
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			<p>Orchestrating Evaluation. 8/19/2008.</p> <p>Providing High Quality Care for Older Adults. Community College of Philadelphia. Philadelphia, PA.11/25/08</p> <p>Utilizing the balanced Scorecard to Measure and Manage Performance. 12/8/2008.</p>		<p>Neuroscience</p> <p>Neurosurgical Intensive Care Unit</p> <p>Intermediate Neurosurgical Intensive Care Unit</p> <p>Cooper Hospital/University Medical Center</p> <p>Emergency Department</p> <p>Intensive Care Unit</p> <p>Coronary Care Unit</p> <p>Trauma Intensive Care Unit</p> <p>Intermediate Trauma Intensive Care Unit</p> <p>Pediatric Intensive Care Unit</p> <p>Neonatal Intensive Care Unit</p> <p>Virtua Health System-</p>
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					Voorhees Division  Intermediate Cardiac Care Unit
Patricia Kline			Evidence based Practice Nursing Conference Community College of Philadelphia 4/09  Clinical Nursing Education Seminar Villanova University 12/07		Adjunct Clinical Faculty at Villanova University School of Nursing: Med/Surg, Advanced med/Surg, Leadership, Health Assessment, 2006-present  Poster presentation: Penn-ICOWHI 18 <sup>th</sup> Congress: Cities and Womens' Health: Global perspectives. Philadelphia, PA 4/10
Elaine Kemp			Contemporary Topics on Cervical & Ovarian Cancers, Fox Chase Cancer Center, May 3 2007  Every Breath Counts: Lung Cancer From Prevention Through Survivorship, Fox Chase Cancer		

			Center, November 11, 2008  Practical Pharmacology for Adult Health, Fox Chase Cancer Center, November 17, 2009		
Eileen Norton					Holy Family University Clinical Instructor, 2006-present
Joseph Pannapara	ACLS 2012		8 <sup>th</sup> Annual Cerebrovascular Conference,  Philadelphia PA 3/09		
Jennifer Patterson	Adult Nurse Practitioner-BC  8/2013		Clinical Education Updates 12/3/09  Drexel University Mid-Level Practitioner Annual Conference 2/2007		Care of the Critically Ill Obstetric Patient, Hospital of the University of Pennsylvania Critical Care Course 2006-08  Adjunct Clinical Faculty, Brandywine Hospital School of Nursing, Coatesville, PA 2009-present

Linda A. Regul	Oncology Certification 2012  Chemotherapy Provider 2012				Chemotherapy Side Effects CCP 3/2010  Chemotherapy Administration and Side Effects Grandview Hospital 4/8/10  Pain Assessment Fox Chase Cancer center 10/09  Current Instructor for CPR for Health Care Professionals, Fox Chase Cancer Center
Christine Slavin		Certified Diabetes Educator	Ultimate One Day Diabetes Course 2009		Critical Care Course 2010  Diabetes Course 2009-present  Wound Care Course 2009
Anne Slivjak	AOCN 12/2013				OCN Review Course: Quality of Life Issues 9/09



<p>Constance H. Sumner</p>	<p>Oncology Certified Nurse  Re-cert 2012</p>	<p>LaSalle University, School of Nursing, Phila., PA  Post Master's Certificate in Nursing Education 2007</p>	<p>Our Environment, Our Health: A Nurses Call to Action, Alliance of Nurse for Healthy Environment, Jun 10  Promoting Patients Safety Through Collaboration, Technology &amp; Simulation, Drexel University, May 10  Nurses Championing the Health of Minority Communities Through a Greener Environment, Jefferson University Hospital, Aug 09  Diversity in a Virtual World: The Transformation of Nursing Education, TESC, May 09  Advancing the Image of Prof Nursing, Chi Eta Phi, Apr 09  Web 2.0 &amp; Beyond: Talking Your Online to the Next Level, Drexel,</p>		<p>Advocacy in Action: Breast Cancer &amp; the Environment, ANHE, Jun 10  Nurses Championing the Health of Minority Communities Through a Greener Environment, (Body Burden), Jefferson University Hospital, Aug 09  Young African American Women &amp; Breast Cancer, Bethel Deliverance Church, Apr, 09  Sisters in Charge: Breast Health Awareness, Hickman Church, Feb, 09  Breast Cancer &amp; the Environment, Rochester Chapter, Chi Eta Phi ,</p>
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			<p>Apr, 09</p> <p>Contemporary Trends &amp; Challenges for the Nurse Educator, Drexel, Apr, 09</p> <p>Oncology Nursing Society 33<sup>rd</sup> Annual Congress, ONS, May 08</p> <p>PSNA, Environmental Health: Impact on Nurses, Nursing Practice &amp; Education 07</p> <p>Northeast Region, Chi Eta Phi, Inc., Community Outreach, Apr 07</p>		<p>NY, Jan, 09</p> <p>Cancer &amp; Environmental Risk, Mosaic #12, Feb, 09</p> <p>Cultural Awareness and Sensitivity, monthly orientation for new hires, @ FCCC, 08</p> <p>Multigenerational Nursing Workforce, nurse externs, @FCCC, 08</p> <p>Guest on Radio One's "Praise in the City Program", Praise 103.9. Spoke about breast cancer risk reduction and early screening, in collaboration with Keystone Mercy Health Plan, 08</p> <p>Guest speaker on WURD-AM, talk radio, during</p>
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					<p>HealthQuest Live, May 08</p> <p>Unique Epidemic of Breast Cancer Among Young African American Women, Oct 07</p> <p>Personal Care Products &amp; Breast Cancer: What is the Evidence? Jul 07</p> <p>What is the Evidence: Environmental Links to Breast Cancer, Apr 07</p> <p>Prostate Cancer Risk Reduction for Club Valiant, Black Firefighter Association, Jan 07</p> <p>PECO, Breast Cancer Risk Reduction, Feb 07</p> <p>Bethel International</p>
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					Church, Breast Cancer Risk Reduction, Feb 07  Personal Care Products: Risk for Breast, for T. Jefferson Hospital & Chi Eta Phi, Mar 07
Lula Thompson	CCPST Certified Child Passenger Safety Technician	Prep course for Certified Nurse Educator	NLN Summit Philadelphia PA 9/23-26/09  National Black Nurses Association  Toronto, Canada  7/31-8/8/2009  Leadership Strategies for the Twenty-First Century Drexel University  1/20/10		Presentation to PASCEP Program class at Temple University, What You can Do With Powerpoint 11/28/07
Mieczslaw Witek			Third Annual Nurse Educator Update  Delaware Community College 6/2009		

### III. STUDENTS

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

**Criteria 3.1**

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

Student policies are congruent with those of the college. Policies that are available to all students are found in the College Catalog and the College Student Handbook. The College Catalog is publicly available on the college’s website at <http://www.ccp.edu/site/academic/catalog/index.php> . The College Student Handbook is given to incoming students during the college wide orientation and is readily available in the Winnet, and Bonnell Buildings. The Nursing Student Handbook is updated annually and is available exclusively to current nursing students online on the College-owned portal MyCCP group site at <http://my.ccp.edu/cp/home/loginf>. Access to the Nursing group site on MyCCP is granted only to nursing students using their college designated username and password. Table 3-1 reflects the policies that are consistent for both the nursing students and the larger body of students at the Community College of Philadelphia.

**Table 3-1  
Nursing Program Policies Congruent with College Policies**

<b>Policy</b>	<b>College</b>	<b>Nursing Program</b>
Student Code of Conduct	College Catalog, College Student Handbook - Pages 142 - 154	Nursing Student Handbook – page 8
Students with Disabilities	College Catalog, College Student Handbook – page 123	Nursing Student Handbook – page 12

Academic Appeals	College Catalog, College Student Handbook – pages 149-154 & page 158	Nursing Student Handbook – page 11
Grading	College Student Handbook –pages 155 – 157	Appears on course syllabus
Financial Aid	College Catalog , College Student Handbook –pages 108 -109	Additional scholarships available for nursing students are publicized on department group pages.
Infectious Agent & Bloodborne Pathogen Exposure Policy	College Student Handbook –pages 162 -163	Nursing Student Handbook – page 9

Although students in the nursing program abide by the same policies as other students in the college, there are some differences. Those differences are outlined in Table 3-2 which reflect the policies that are specific to the nursing program.

**Table 3-2**  
**Policies Which Differ in the Nursing Program**

<b>Policy</b>	<b>Location</b>
Admission	College Catalog
Progression	College Catalog, Nursing Syllabi, Nursing Student Handbook – page 17
Advanced Placement	College Catalog
Readmission	College Catalog
Clinical Evaluation	Nursing Student Handbook – pages 9 -10
Clinical Requirements <ul style="list-style-type: none"> <li>• Heath Requirements (Immunizations, TB screening, Physical Examination Clearance)</li> <li>• CPR Certification</li> <li>• Criminal Background Check</li> <li>• FBI Clearance</li> </ul>	Nursing Student Handbook – pages 12-14

<ul style="list-style-type: none"> <li>• Child Abuse Clearance</li> <li>• Social Security Verification</li> <li>• Drug Screening</li> <li>• Health Insurance</li> <li>• Liability Insurance</li> </ul>	
Student Appeals Procedure	Nursing Student Handbook – page 11

## Admission

Admission to the College is open; however admission to specific programs, including nursing is selective. During the admission process, all students take math, reading, and writing placement tests. The College reserves the right to require students to register for developmental course work or special courses and to limit the number of courses in which a student may enroll based on the results of the admission testing. All students applying to the College and the Nursing Program must have a high school diploma or a state general equivalency diploma (GED). Information concerning admission, the nature of the program of learning, selection policies, advanced placement, articulation, retention, progression, and requirements for graduation is outlined in the College catalog as stated in Table 3-2.

Information regarding the Nursing Program is available online to all interested students. Applicant information sessions are offered throughout the fall semester by the Counseling Center. During these sessions, interested students have the opportunity to ask questions and complete an admission worksheet that assists them in calculating the likelihood of their admission to the program. Students may also submit an application at this time.

The Nursing Program admits students in the fall semester. Advanced placement students enter in the second semester of the nursing program. Applicants to the Nursing Program must meet the College admission requirements. In addition, nursing program applicants must meet the following requirements:

- Successful completion of high school biology or Biology 106 and high school chemistry or Chemistry 110. Students may use STS 101 in place of Biology 106 and Chemistry 110. Two years of college preparatory high school math or placement at the Math 118 level or higher are required. Students must also

place into English 101. These courses must have been completed within 10 years prior to application with a grade of C or better.

- Cumulative college GPA of 2.75 or better on a 4.0 scale.
- Completion of the Allied Health Test with a minimum score of 15. This requirement is waived for applicants to the Advanced Placement option.
- Completion of Criminal Background Check, Child Abuse Clearance, FBI clearance, and Social Security verification.
- Completion of physical examination clearance, record of immunizations, drug screening, and TB screening.
- Procurement of CPR certification for Health Care Providers, student nurse liability insurance, and personal health insurance.

Admission decisions consider three factors which contribute to the overall numeric admission score: GPA (must be 2.75 or higher), Allied Health Test Score (15 or higher), and a pattern of success in courses (not more than one D, F, or W in the past 2 years).

### **Advanced Placement**

Students seeking advanced placement enter the program through one of two routes. Licensed Practical Nurses, medical corpsmen, and students who have completed at least one year of clinical experience in another nursing program may apply for advanced placement. All students entering through the Advanced Placement Option take a transition course (Health B9026) prior to beginning their studies. Health B9026 is offered in preparation for entrance into Nursing 132. Advanced Placement Option applicants are not required to take Biology 106 in recognition of their health care background. However, all Advanced Placement Option applicants must meet the pre-admission chemistry and math requirements. In addition, they must also complete all co-requisite courses for Nursing 101.

### **Progression**

Other policies that differ from the college policies include progression in the program. To remain in the Nursing Program, students must maintain a grade of “C” or better in all nursing and required pre- and co-requisite courses. This is different from the



college in that students need to maintain a D or better for progression. During all clinical laboratory experiences, students must maintain client safety. Violation of safety may result in an immediate clinical failure, an administrative withdrawal and a grade of “F” for the course. Students whose knowledge, skills, and /or abilities are evaluated as inconsistent with professional standards may be dropped from the curriculum pending the results of a departmental hearing. In addition, nursing students must demonstrate proficiency in mathematics computation each semester.

### **Readmission**

Students requesting readmission to the Nursing program must meet program entry requirements and conditions for acceptance. Students requesting readmission are selected on a competitive basis using a numeric grading scale, as space permits. The program must be completed within four years of initial enrollment. Students who were dropped from the program for unprofessional conduct or violation of safety issues may not be considered for readmission. Students applying for readmission must have a college GPA of 2.75 by July 1 for September enrollment or by September 1 for January enrollment.

### **Clinical Evaluation**

In 2009, the faculty completed revisions and pilot testing of the clinical evaluation tool. Based on the Quality and Safety in Nursing Education (QSEN) knowledge, skills, and abilities, the clinical evaluation tool is weighted by nursing course. Each student receives a copy of the clinical evaluation tool prior to their first clinical experience. The clinical evaluation tool is also available on each course’s group site and on the faculty resource group site.

The clinical nursing faculty member informs students of required clinical objectives (QSEN KSA’s) at the beginning of each course. Each student will be evaluated as Satisfactory or Unsatisfactory for every clinical objective required in the nursing course for which the student is enrolled. The clinical objectives for each course constitute the established level of practice for that course. Satisfactory performance is

essential for each clinical objective required in each of the four nursing courses to progress in the nursing program.

Every student is evaluated at mid-semester during a conference with the clinical faculty member. The purpose of mid-semester evaluation is to assess the student's progress in meeting clinical objectives for the course at mid-semester and to provide the student the opportunity to collaborate with the faculty to develop goals for the remainder of the semester. The student's performance on each clinical objective is discussed. At the midterm, students may receive an MP (making progress), NI (needs improvement) or NO (not observed) A student who receives an NI will be given a remediation plan. The plan should include goals for meeting the objective. If the student is unable to perform skills being learned in the current semester, the student shall receive a Remediation Plan (RP) and provide evidence of remediation to the clinical faculty by the following week.

If the student is unable to perform clinical skills learned in previous semester(s), the student shall receive a Clinical Warning (CW). A student who receives a CW or RP is at risk for receiving a grade of unsatisfactory for one or more objectives at the end of the semester and therefore, a failing grade for the course.

Each student will be evaluated as Satisfactory or Unsatisfactory for each clinical objective required in the nursing course for which the student is enrolled at the end of the semester. A student who receives a grade of satisfactory for every clinical objective achieves a satisfactory grade for the clinical portion of the course. Exceptional performance will be noted in the Faculty Comment section.

A student who receives a grade of unsatisfactory for one or more objectives at the end of the semester has not demonstrated the necessary knowledge, skills and abilities for the established level of practice. The student receives an unsatisfactory grade for the clinical portion of the course and, therefore, a grade of "F" for the course.

A student having difficulty meeting clinical objectives during a semester will receive written notification by the clinical nursing faculty member. The written notice is either a "Remediation plan "(RP) or a "Clinical Warning" (CW).

- Remediation Plan (RP) is given to a student who needs to improve performance of a clinical objective. An RP will be written by the clinical nursing faculty member. When a student receives an RP, the student has one week to remediate as per the remediation plan and shall be re-evaluated by the clinical nursing

faculty member. If the student is not satisfactory following remediation, a clinical warning will be given. A written summary of this process is signed by both the clinical nursing faculty member and the student and forwarded to the faculty course coordinator.

- Clinical Warning (CW) is given to a student whose activity or lack of activity 1) does not meet acceptable standards of legal and ethical professional nursing practice, and/or 2) threatens the client's safe, effective care environment, physiological integrity, psychosocial integrity or health promotion. A clinical warning indicates that the student does not have the necessary knowledge, skills and abilities for the established level of practice. A clinical warning will be given when the student is unable to perform a skill that was evaluated as satisfactory in the previous nursing course.

The clinical instructor informs the student of the first clinical warning and the student is removed immediately from clinical experience. Parameters, including a date to re-evaluate the student, is set for the student's future performance. A written summary of the clinical warning, signed by both the clinical nursing faculty member and the student, is attached to the student's clinical evaluation tool. The student cannot return to clinical experience until the student is evaluated by a nursing faculty member. The course teaching team is notified of the clinical warning.

If a student receives a second clinical warning, the process described above will occur and will be followed by a meeting between the student, clinical nursing faculty member (if s/he deems to attend), the faculty course coordinator and the head of the nursing program (or her designee) to discuss the student's progress in the course. The course teaching team is notified of the clinical warning.

If a student receives a third clinical warning, the student meets with the faculty course coordinator, clinical nursing faculty member (if s/he deems to attend) and the head of the nursing program (or her designee). A third clinical warning indicates that the student does not have the necessary knowledge, skills and abilities for the established level of practice. The course teaching team is notified of the clinical warning. If the course teaching team determines that the student does not demonstrate the necessary knowledge, skills and abilities for the established level or practice, the course teaching team will assign a grade of unsatisfactory for clinical performance. The student will be removed from the nursing course and receive a grade of "F" for the course.

## **Clinical Requirements**

Nursing students are required to have an annual physical examination, TB screening and proof of required immunizations by their health care provider. Completed health requirements are reviewed by the health requirements coordinator prior to admission to the nursing program and before the second year. Students are also required to complete CPR Certification, Criminal Background Check (Pennsylvania State Police and FBI Clearance), Child Abuse Clearance, Social Security Verification, Drug Screening, and show proof of both Health Insurance and Liability Insurance. Students may also obtain information about student health insurance through the Office of the Vice President of Student Affairs.

## **Student Appeals Procedure**

Although the College has a grievance procedure for academic and disciplinary concerns, the Department of Nursing supplements this mechanism with a department student appeals procedure. This optional process provides the nursing student with a forum and the right to due process within the Department of Nursing. The Nursing Department grievance process is described in the Nursing Student Handbook.

Each semester, students are elected to represent their peers at the course teaching team meetings. These representatives serve as a communication link between faculty and students regarding course issues and student needs. Guidelines for student representatives can be found in the Nursing Student Handbook on page 19.

### **Criteria 3.2**

**Student services are commensurate with the needs of students pursuing or completing associate degree program, including those receiving instruction using alternative methods of delivery.**

All college services are available to nursing students as described in the College Student Handbook and Table 3-3.

**Table 3-3**  
**Student Services**

• <b>Career and Transfer Center</b>
○ Self-Assessment
○ Career Exploration
○ College Transfer
• <b>Career Services Center</b>
○ Support on career development and job search issues
• <b>Center for Male Engagement</b>
○ Provides opportunities for participants to be mentored by professionals, alumni and peers.
○ Geared toward African-American males, the CME is available for all students.
• <b>Child Development Center</b>
○ Enrolls children each semester on a first-time, first-serve basis after class registration.
• <b>Counseling Center</b>
○ Academic
○ Personal
○ Career
○ Transfer
• <b>Financial Aid</b>
○ Any student may apply for financial aid.
• <b>International Student Services</b>
○ Assist international students.
• <b>The Women’s Center</b>
○ Comprehensive social, emotional, and personal development services.
• <b>Student Leadership and Involvement</b>
○ Student Government Association and Student run newspaper.
• <b>Student Clubs and Organizations</b>
• <b>Intercollegiate Sports</b>
• <b>Intramural Sports</b>
• <b>Physical Fitness</b>
• <b>Recreation</b>
• <b>Bookstore</b>
• <b>Campus Security</b>
• <b>Dining Services</b>
• <b>Academic Advising</b>
• <b>Center on Disability</b>
• <b>Collaborative learning Community (CLC)</b>
• <b>College Achievement Partnership (CAP)</b>
• <b>Computer Labs</b>
• <b>Distance Education</b>
• <b>English as a Second Language (ESL) Program and Services</b>
• <b>Learning Lab</b>
• <b>Library</b>
• <b>Trio Student Support Services</b>

All nursing faculty participate in academic guidance and counseling. By Collective Bargaining Agreement (CBA) contract, each full-time faculty member maintains five office hours per week to assist students who need academic support. Faculty nursing members act as academic advisors for all nursing students.

Two counselors, designated as Allied Health Counselors, assist students in the application process prior to admission to the Nursing Program. All counselors have master's degrees in counseling. Credentials of counselors can be found in the College Catalog. Each April, the Counseling Center sponsors a Nursing College Fair on the main campus. This event provides an opportunity for students to speak with representatives from area baccalaureate programs about transfer opportunities.

Within the nursing department, tutoring services are also available. Each semester, nursing faculty are asked to recommend second year students for the Peer Tutoring Program. Students selected as peer tutors are oriented to the role and supervised by the College Nursing Skills Laboratory Coordinator. Peer tutors in the college Nursing Skills Laboratory offer help with academic and nursing skills. In addition to scheduled laboratory times, the labs are open for skill practice during the week. First year nursing students also have opportunities to work in the College Nursing Skills Laboratory as Laboratory Assistants. Student Laboratory Assistants help other students in finding books, supplies, and audiovisual equipment. Both the peer tutor and laboratory assistant positions are paid positions for nursing students. In addition, through the College Learning Lab, students may seek the academic assistance from faculty and peers. Help is also available for reading, writing, and study skills. One Learning Laboratory Specialist has a masters' degree in reading and also holds a bachelor of science degree in nursing. This tutor is available to all nursing students at posted designated hours in the College Learning Laboratory.

Financial aid information is available to all students. Students may qualify for a variety of loans and scholarships from state and federal sources. In addition to the College-wide financial aid programs, the Department of Nursing administers the following scholarships:

- Arronson-Lavine Scholarship Fund established in 1981
- The Independence Scholarship Fund established in 1994
- Harold E. Kohn Memorial Scholarship established in 1999

- Hal Lane Chesler Memorial Scholarship established in 2002
- Independence Blue Cross Scholarship established in
- Thomas A. Langfitt/ Temple Alumni Scholarship established in
- Anne Ritter Scholarship established in

Students applying for a scholarship must meet GPA requirements and have faculty recommendations. These funds are described in the Nursing Student Handbook and application packets are distributed and explained to all first year nursing students in the spring. Qualified students also receive funds from Scholarships for Disadvantaged Students, United States Department of Health and Human Services. Receipt of these monies is based solely on financial need and the completion of financial aid applications. In summary, the College offers a full array of student support services staffed by qualified individuals.

The College Center on Disability evaluates any student with a disability and assists the student in formulating an individualized program. Nursing faculty has a long-standing, cooperative relationship with the Center on Disability.

### **Criteria 3.3**

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

The Community College of Philadelphia College Catalog online describes rights and privacy act provisions. Each year the College informs students of the Family Educational Rights and Privacy Act (FERPA) of 1974. The College maintains information within files and databases that are essential and appropriate to College operations and student welfare. These records include the academic transcript, demographics, major field of study, dates of attendance, status of the student, and degrees awarded. Students who receive financial aid have an additional individual record in the Financial Aid office.

Student records are considered confidential and are maintained under strict security procedures College wide. Access to the student database is limited to department heads, counselors and faculty who engage in academic advisement. Further, under FERPA, a student may wish to have the college withhold directory information from outside agencies.

Each student in the Nursing Program has an assessment file that contains the clinical evaluation tool, examinations, and papers from nursing courses. Each student's official record is maintained by the Office of Student Records and Registration.

#### **Criteria 3.4**

#### **Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained.**

The Community College of Philadelphia is in compliance with the Higher Education Reauthorization Act Title IV. The college has internal auditors as the first step in determining compliance, and maintains a participation agreement with the Department of Education.

#### **Criteria 3.4.1 A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.**

The guidelines for financial aid are found online in the College Catalog, as well as in the College Student handbook on pages 108 and 109. The Financial Aid Office is responsible for administering all financial aid awards and programs. During the financial aid process students are made aware by financial aid counselors of the latest changes newest changes affecting student loans. Students are aware that private lenders will no longer originate new loans under the Federal Family Education Loan program (FFELP) after June 30, 2010. Instead all loans originate from the William D. Ford Federal Direct Loan Program.

#### **Criteria 3.4.2 Students are informed of their ethical responsibilities regarding financial assistance.**

Students receiving loans are required to attend entrance and exit counseling sessions regarding their financial obligations and repayment. Students also receive information directly to their email address and a



special booklet is available for students to obtain concise information about financial aid. This booklet is available on site.

### **Criteria 3.5**

**Integrity and consistency exist for all information intended to inform the public, including the programs accreditation status and NLNAC contact information.**

Information about the Nursing Program can be found in the College Catalog online and is available to the public. Accreditation status and the National League for Nursing Accreditation Commission contact information can be found in the College Catalog and in the Nursing Student Handbook on page 4. The nursing department also disseminates information regarding the program in the College's Counseling Department, the Admission Department, and at open houses held throughout the academic year.

### **Criteria 3.6**

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

All information regarding policies, procedures, and program information may be found in the Nursing Student Handbook on pages 8 – 20. Also included in the Nursing Student Handbook is the Pennsylvania State Board of Nursing Standards of Nursing Conduct. The Nursing Student Handbook is updated annually and posted electronically on the MyCCP group site. Changes to policies, procedures, and program information that may occur during the academic year are communicated to students by email, and electronic announcement posts on the MyCCP Banner group site.

### **Criteria 3.7**

**Orientation to technology is provided and technological support is available to students, including those receiving instruction using alternative methods of delivery.**

During the College wide new student orientation, students are informed of the services available for technology support. The College's help desk also provides students with technological support. In addition to this, students have access to online tutorials through the Academic Computing office and these are available online. Students using the Webstudy Course management platform for hybrid courses are also required to complete a self assessment quiz to determine technology skills.

## IV. CURRICULUM

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

### Criteria 4.1

**The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning and program outcomes.**

The nursing curriculum is based on the Nursing Program's core values, guidelines from the National Council of State Boards of Nursing and Quality and Safety Education for Nurses competencies.

The Nursing Program's core values include:

- Scholarship
- Service
- Support
- Excellence.

The four categories of client needs identified by the National Council of State Boards of Nursing (NCSBN) include:

- safe, effective care environment
- physiological integrity
- psychosocial integrity
- health promotion and maintenance.

The six Quality and Safety Education for Nurses (QSEN) competencies (Robert Wood Johnson Foundation) include:

- patient-centered care
- teamwork and collaboration
- evidence based practice
- quality improvement

- safety
- informatics

The nursing faculty is responsible for the ongoing development, implementation and evaluation of the nursing curriculum. The curriculum is designed to prepare students to achieve these student learning outcomes. Science and liberal arts courses were chosen to provide the student with a general education as well as a foundation for an understanding of the art and science of nursing. The Core Values and Philosophy of the Nursing Program was revised by the Curriculum Committee and approved by the nursing faculty in 2009. The Nursing Program's student learning outcomes, stated in the catalog, provide the foundation for the nursing curriculum.

Upon completion of this program, graduates will be able to:

- Integrate theories and concepts from science and liberal arts in the practice of nursing.
- Collaborate with nurses and other members of the health care team to provide safe, culturally sensitive, effective nursing care to clients in a variety of settings.
- Practice within the legal and ethical framework of nursing.

These broad based outcomes are designed to coordinate concepts from the program of learning. The integration of concepts provides a significant basis for processing the specific knowledge of nursing. The collaboration with members of the health team is an essential approach in providing safe care that is both culturally sensitive and client centered. This belief is built upon with progression of the program, and exposure to both expanded settings and client populations. An understanding of a practice within the legal and ethical parameters is again a concept that lends itself to a deeper understanding with increased exposure to health issues and client needs, and becomes more complex with these experiences.

The outcome of the interplay of professional standards, national competencies and core values is captured in the ability of graduates to provide safe and effective care in a wide variety of settings and to uphold the professional standards of nursing. In this way,

faculty honor and acknowledge a deep commitment to the health and welfare of the Philadelphia community.

There are four nursing courses: Nursing 101, Nursing 132, Nursing 231 and Nursing 232. In these four courses, faculty guide students to analyze and synthesize information through the use of case studies, critical thinking assignments, discussion and other forms of interactive inquiry utilizing an evidenced based approach to guide practice. In addition to observing how an expert nurse thinks and solve problems, the student develops an appreciation of the complexity of client needs in the provision of care. Students practice critical thinking and management skills through collaborative efforts with nursing faculty, peers and clinical agency staff. The student's development is enhanced by opportunities to apply nursing knowledge while caring for clients across the life span in a variety of settings, for example, hospitals, nursing homes, schools and independent living facilities. Each of these settings offers the student an opportunity to integrate knowledge, skills and abilities in order to assist clients to function at an optimal level and to work collaboratively with members of the health care team.

The program of learning is designed to help students progress toward the acquisition and integration of knowledge, skills and abilities they will need as graduate nurses to practice safely and accountably in today's health care environment with a patient centered approach. The beginning student's vision is one in which discrete pieces of nursing knowledge are seen. However, as students progress through the program, they engage in learning activities that promote integration of new knowledge with new skills and abilities. Faculty guide students in establishing a context for this knowledge by relating it to quality and safety in the provision of client care. Over time students begin to understand how the client, the client's health care needs, and the client's family and community are interwoven. As a result of this larger view of the context of client's needs, students are able to engage in collaborative care planning and critical thinking necessary for practice, transfer to baccalaureate programs, and self-fulfillment based on service to others.

In the first nursing course (Nursing 101), classroom and seminar discussion, as well as clinical learning activities, focus on the client experiencing health promotion or health maintenance needs. Students are introduced to skills related to physical

assessment, medical asepsis, medication administration and provision of basic nursing care. Students practice these skills in the clinical environment as they begin to understand ways to maintain and promote physiological and psychosocial integrity for adult clients. Anatomy and physiology (Biology 109), nutrition (Diet 111) and composition (English 101) are taken concurrently and enhance the student's knowledge base for thinking and writing about health promotion and health maintenance in the context of meeting basic client needs.

The second nursing course in the curriculum (Nursing 132) builds on the knowledge, skills and abilities developed by students in the introductory semester. Classroom and clinical learning experiences focus on the client experiencing a threat to physiological or psychosocial integrity. Students continue to consider health promotion and health maintenance needs of clients and families. The needs of the family in transition are also considered. In the clinical environment, collaborating with members of the health care team to deliver safe and effective nursing care, students practice skills related to surgical asepsis and the reduction of risk for clients. In addition, faculty assist students to continue using constructs discussed in the first semester to help clients and families to function optimally and adapt to life transitions. Three co-requisite courses, anatomy and physiology (Biology 110); mathematics (Math 118 or above); and advanced composition (English 102) enhance the student's ability to promote physiological and psychosocial integrity during clinical experiences and to complete writing assignments that require application of critical thinking.

In the third semester (Nursing 231), students are expected to expand their context for understanding client needs by synthesizing and integrating knowledge from a variety of sources and to interweave previously acquired knowledge with new knowledge. Students use resource management and clinical decision making principles to plan, implement and prioritize safe and effective care, developing the ability to promote both physiological and psychosocial integrity, to maximize client self-care and to foster optimal functioning for clients in a variety of settings. An increase in the utilization of technology as a teaching method is further enhanced in the third semester. In addition, knowledge about environmental factors influencing health is expanded as the student

studies microbiology (Biology 241), introduction to sociology (Sociology 101), and Computer Information Studies (CIS 103).

In the fourth semester (Nursing 232) students have opportunities to apply knowledge, skills and abilities while caring for clients across the life span. Clinical learning experiences include possibilities for students to care for adults, infants, children and the elderly in acute care, long-term care and community-based settings. Each of these settings offers the student the opportunity to synthesize and integrate knowledge, skills and abilities learned in previous courses and to utilize management principles to develop, implement and evaluate a plan of care, in collaboration with members of the health care team, to promote optimal functioning for clients and families across the life span. Three credits of humanities and three credits of general electives are taken concurrently so that the student may pursue personal interests or prepare for transfer to a bachelor's degree nursing program after graduation.

All four nursing courses are hybrid courses in which some teaching learning activities occur via distance education. The amount of distance education varies by course but the majority of each nursing course occurs in the traditional classroom, skills laboratory or clinical setting. The online education component of nursing courses involves audiovisual assignments, clinical simulations and on line forum discussions.

Applicants may apply for Advanced Placement in the Nursing Program as described in the catalog. Successful applicants receive credit by life experience for Nursing 101 and take a transition course, Health B 9026, in preparation to join the Nursing Program for the second nursing course (Nursing 132). The transition course is designed to best prepare candidates to join the nursing class in the second course of the program. Transition focuses on honing writing skills, preparing students for test taking, demonstrating skills progression, integrating psychiatric content familiarization of the role of the registered nurse. All other curriculum requirements for students achieving advanced placement are the same as for students who did not achieve advanced placement.

The nursing curriculum, organized using concepts stated in the Nursing Program core values and philosophy, is designed to prepare students to achieve program objectives which are the Nursing 232 course objectives (Table 4-1).

**Table 4-1**  
**Course/Program Objectives**

<b>Professional Standard, Guidelines, National Competencies</b>	<b>N101</b>	<b>N132</b>	<b>N231</b>	<b>N232</b>
<p><b>NCLEX: Safe and Effective Care Environment</b> In understanding the application of theories and concepts related to nursing practice reflecting the coordination of care with members of the health care team and the provision of effective treatments and procedures utilizing environmental safety, the student will:</p> <p><b>QSEN Competencies</b></p> <ul style="list-style-type: none"> <li>• patient-centered care</li> <li>• teamwork and collaboration</li> <li>• evidence based practice</li> <li>• quality improvement</li> <li>• safety</li> <li>• informatics</li> </ul> <p><b>Core Values</b></p> <ul style="list-style-type: none"> <li>• Scholarship</li> <li>• Service</li> <li>• Support</li> <li>• Excellence.</li> </ul>	<p>Assess physiological, psychosocial, developmental and environmental factors that influence the delivery of safe and effective nursing care.</p>	<p>Prioritize the relationships among physiological, psychosocial, developmental and environmental risk factors to deliver safe and effective nursing care.</p>	<p>Evaluate the relationships among physiological, psychosocial, developmental and environmental risk factors, and systems influences to plan and implement safe and effective nursing care.</p>	<p>Independently plan, implement and evaluate both patient care outcomes and system effectiveness in order to deliver safe and effective care in a variety of practice settings.</p>

<p><b>NCLEX: Safe and Effective Care Environment</b></p> <p><b>QSEN Competencies</b></p> <p><b>Core Values</b></p>	<p>Demonstrate the use of standardized communication techniques with members of the health care team to provide safe and effective care to client(s).</p>	<p>Communicate with members of the health care team using evidence-based practice concepts to provide safe and effective care to client(s).</p>	<p>Plan, implement and evaluate safe and effective client centered care for clients/families across the life span in both transitional and permanent settings using communication, resource management, and clinical decision making principles.</p>	<p>Work effectively with inter-professional teams to develop a comprehensive plan of care by fostering communication, mutual respect and shared decision-making to achieve quality patient care in both transitional and permanent settings.</p>
<p><b>NCLEX: Safe and Effective Care Environment</b></p> <p><b>QSEN Competencies</b></p> <p><b>Core Values</b></p>	<p>Demonstrate accountability by functioning within the legal/ethical parameters of nursing practice.</p>	<p>Demonstrate accountability by functioning within the legal/ethical parameters of nursing practice.</p>	<p>Demonstrate accountability by functioning within the legal/ethical parameters of nursing practice.</p>	<p>Demonstrate accountability by functioning within the legal/ethical parameters of nursing practice.</p>
<p><b>NCLEX: Physiological Integrity</b></p> <p>In understanding the application of theories and concepts related to physiological functioning of clients in order to provide basic care and reduce the risk of potential complications for clients, the student will</p> <p><b>QSEN Competencies</b></p> <p><b>Core Values</b></p>	<p>Demonstrate basic nursing skills by accessing research evidence, clinical experts, and information technology to identify standards of care.</p>	<p>Demonstrate the integration of risk reduction knowledge, skills and attitudes related to potential complications of treatment and disease by using research evidence, clinical experts and information technology to support clinical decision making.</p>	<p>Plan, implement and evaluate therapeutic nursing interventions to reduce risk for clients and families across the lifespan in a variety of settings using research evidence and collaborative strategies.</p>	<p>Use data to minimize risk of harm to patients across the life span and monitor outcomes of care processes to make changes in order to continuously enhance the quality and safety of clients/families.</p>



<p><b>NCLEX: Psychological Integrity</b></p> <p>In understanding the application of theories and concepts related to psychosocial functioning for clients and families, utilizing a holistic approach to facilitating coping and support, the student will:</p> <p><b>QSEN Competencies</b></p> <p><b>Core Values</b></p>	<p>Utilize therapeutic communication skills to assess coping mechanisms, cultural influences and preferences of clients/families.</p>	<p>Use therapeutic interventions for care of clients/families with psychosocial health alterations, accounting for client/family preferences, values, and needs.</p>	<p>Using a client/family centered approach, plan, implement and evaluate care of clients and families with complex psychosocial and physiological health alterations in a variety of settings.</p>	<p>Provide high quality, comprehensive care for clients/families based on an understanding of complex psychosocial and physiological health alterations, respect for client and family preference, values and needs.</p>
<p><b>NCLEX: Health Promotion and Maintenance</b></p> <p>In understanding the application of theories and concepts related to health maintenance and health promotion for clients across the lifespan by incorporating principles of disease prevention to promote self-care and improve health, the student will:</p> <p><b>QSEN Competencies</b></p> <p><b>Core Values</b></p>	<p>Identify factors that influence client/family's ability to function optimally across the lifespan and at transitions in care.</p>	<p>Acknowledge the client /family as a full partner in incorporating the principles of health promotion and disease prevention to promote optimal functioning through life transitions.</p>	<p>Plan, implement, and evaluate the utilization of appropriate resources and patient teaching to engage patients/families in active partnerships to maximize self-care and optimal functioning across the lifespan and at transitions in care.</p>	<p>Evaluate and modify as needed client/family's response to therapy in order to maximize self-care and optimal functioning across the lifespan.</p>

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## **Criteria 4.2**

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

Nursing courses are reviewed regularly for congruency, scope, and sequencing. The Curriculum Committee is composed of all nursing faculty and meeting approximately three times each semester. Faculty are organized by course teaching teams which meet approximately six times each semester. Both the Curriculum Committee and course teaching teams regularly revised the curriculum as evidenced in minutes available on site. Faculty use a variety of aggregate data to accomplish this review. Complete data for the last three years are available on site.

In addition, faculty use data from student evaluation of each course. These data for the last four semesters are available on site. During planning meetings prior to each semester, faculty review aggregate scores, as well as faculty and student evaluations of each course, to plan subsequent semesters. In addition, national, regional and local trends in health care are considered. The use of these evaluation data in the educational planning process are reflected in faculty and teaching team minutes.

Nursing faculty organize the program of learning to reflect current trends in nursing practice as indicated in the following documents:

- National Council of State Boards of Nursing, Inc. (NCSBN) Job Analysis of Newly Licensed Nurses 2011
- Quality and Safety for Nursing Education (QSEN) competencies.

In addition, the faculty considered the Department of Nursing's core values as well as health care and nursing needs of residents of Philadelphia with special attention to residents of the 19130 zip code. The client needs component of the NCLEX-RN Test Plan represents four broad categories of the health care needs of clients: safe and effective care environment, physiological integrity, psychosocial integrity, and health promotion/maintenance. Faculty choose to organize the program of learning around these health care needs. Additionally, faculty looked to the safety and quality competencies developed by QSEN to design a curriculum that incorporates established professional standards, guidelines, and competencies.

The nursing faculty design and offer a curriculum that is both contemporary and interactive. The program of learning includes a combination of lecture, seminar, college skills laboratory, writing and clinical experiences in acute care, long term care and community settings. This arrangement of course activities allows for the knowledge, skills and abilities taught in the Nursing Program to be applied to the provision of care to clients and families and encourages the student to utilize a critical thinking approach to the provision of care.

The knowledge, skills and abilities essential to safe and accountable, and collaborative nursing practice are taught and nurtured first in lecture and in small group seminar and practice, and then applied with clients across the lifespan in a variety of settings. The use of evidence to guide practice is a consistent thread. Throughout the curriculum, the student is immersed in the triad of lecture, seminar, and clinical learning experiences to incorporate professional standards, guidelines and competencies. In addition, in the first year (Nursing 101 and Nursing 132), the student also attends College Nursing Skills Laboratory. While the content changes from course to course within the curriculum, students are required to apply the assessment and intervention techniques initially learned to promote health in the first semester to a client experiencing threats to physiological and psychosocial integrity in subsequent semesters. These activities are designed to gradually guide the student to become more autonomous in planning interdisciplinary nursing care directed toward achievement of safe, effective, high quality care for clients and families in a variety of clinical settings.

### **Criteria 4.3**

**The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.**

The four nursing courses in the curriculum, Nursing 101, Nursing 132, Nursing 231 and Nursing 232, are arranged in a progressive sequence. The course objectives for N232 also serve as the program objectives. Course objectives are structured around the NCSBN categories of client needs, the Department of Nursing Core Values and the QSEN competencies. Course objectives progress toward increasing complexity in all four categories of client needs as described in Table 4-1 which demonstrates how the

nursing faculty has designed the nursing curriculum to incorporating the Nursing Program's core values, NCSBN categories and QSEN competencies.

The College Nursing Skills Laboratory augments material learned in class, clinical, and reading assignments. It provides a forum for students to practice the skills necessary to become a competent practitioner. In the College Nursing Skills Laboratory, students have access to audiovisual and computer based learning programs. Additionally, student tutors augment these learning activities by providing assistance to peers as they practice skills and review classroom and clinical critical thinking learning objectives.

The clinical learning experience fosters provision of safe, effective, and high quality nursing care to clients and families in a variety of clinical settings. The clinical learning experience starts as part of the College Nursing Skills Laboratory experience and progresses to an in-patient, hospital environment in the first year of the curriculum. In the second year of the curriculum, students are exposed to a wider range of clinical settings through experiences in additional hospitals, as well as community agencies and a long-term care facility. Through these experiences and with the supervision of faculty, aspects of the role of the registered nurse are explored. As students move through the curriculum, the faculty act more as guides and coaches in supporting students to become safe and accountable practitioners. Students also meet before and after each clinical experience in order to process the day's events, analyze strategies for planning care, better understand collaborative practice and develop a heightened understanding of the group dynamic they are experiencing.

In every semester of the Nursing Program, faculty conduct P.A.S.S. (Promoting Academic Success of Students) sessions for students. These sessions are student driven small group learning activities where faculty discuss specific content derived from classroom objectives and act as guides and resources for students. In the first year of the program, faculty often provide case studies as a way to focus learning; in the second year of the program, students come to the sessions with questions or areas of concern in order to challenge assumptions, clarify discrepancies and synthesize topics related to collaborative care planning. P.A.S.S. sessions are voluntary on the part of both students and faculty.

The process and criteria for evaluation of students is contained in each nursing course syllabus. Students are evaluated in each component of the course. In first year courses (Nursing 101 and Nursing 132, students are evaluated on their performance in class, skills laboratory and clinical. The second year courses, (Nursing 231 and Nursing 232) do not contain a skill laboratory component and students are evaluated for their performance in class, seminar and clinical. The student must achieve satisfactory performance in all components of the course and achieve a grade of 70% or higher to pass any nursing course.

#### **Criteria 4.4**

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

The service learning component of the community rotation fulfills many needs in the community, servicing a diverse group of people across the lifespan in various settings such as schools, homeless shelters, senior centers, health clinics and Head Start programs. Engagement within the community is constantly evolving to meet the needs within the community. Often times the first discussion that the faculty have with students is about the ability of students to meet the needs of the community rather than having a preconceived agenda on what the community may want.

The nursing faculty worked collaboratively with the National Nursing Center Consortium (NNCC), Philadelphia, Pennsylvania, to develop a data collection tool based on identification of uniform data elements and national targets from Healthy People 2010. The tool describes both individual and group encounters in partner agencies and utilizes a format that records and tracks the types of referrals made to a wide variety of health care providers.

The 19130 Zip Code Project represents the nursing department's commitment to a community based approach to curriculum design. In the mid 1990's, the Nursing Program designed the 19130 Zip Code Project as a service-learning project to provide health promotion and disease prevention services in the community around the College and to respond to national and local trends toward a health care system that is grounded in community based care. Additionally, faculty are intent on helping students recognize the value of service to the local community and the need to engage in scholarship and

evidence based approaches to population based care. The Independence Foundation of Philadelphia has funded the project since its inception in 1996.

Nursing faculty have integrated community based education into the associate degree curriculum and, with community partner agencies, have developed health promotion, disease prevention programs for targeted populations served by that agency. Nursing faculty and students have built collaborative relationships with community residents and with community agencies in the College's neighborhood. Learning activities related to integration of community based care in all four nursing courses facilitate student achievement of program objectives. Table 4-2- illustrates how selected community based learning activities, as one example of curriculum design to support national and local trends in health care, are fully integrated in all four nursing courses.

**Table 4-2**

**Selected Community Based Learning Activities**

Nursing 101

- Critical Thinking Paper: Health Promotion of a Client in a Community Setting
- Seminar: Introduction to Community Assessment: Windshield Neighborhood Survey
- Seminar: Well-Elder Experience: Interview of an Elder in the Community who lives independently: Healthy Aging

Nursing 132

- Critical Thinking Paper: Promoting Health for the Client at Risk
- Seminar: Cultural Traditions
- Clinical: Discharge planning, concept mapping

Nursing 231

- Critical Thinking Paper: Community Resources for a Family experiencing a chronic illness of one of their members
- Clinical Experience: 19130 Zip Code Project, Community Assessment of Neighborhood around assigned agency
- Group Teaching Experiences in collaboration with the health care team based on a needs assessment in partner agency
- Surveillance of Targeted Population and Case Management
- Health Teaching and Surveillance in assigned agency
- Collection of Data on web-Based Tool
- Seminar: Family Systems

### Nursing 232

- Clinical Experience: 19130 Zip Code Project, Community Assessment of Neighborhood around assigned agency
- Group Teaching Experiences in collaboration with the health care team based on a needs assessment in partner agency
- Surveillance of Targeted Population and Case Management
- Collection of Data on web-Based Tool
- Seminar: Caring for HIV patients in the community

\*students experience the community rotation in either N231 or N232 not both

Concepts of community based care, issues of cultural competence, and principles of collaborative, interdisciplinary care delivery of health promotion/disease prevention services are introduced in the first year of the curriculum and are enhanced and expanded in subsequent semesters. In the second year of the nursing program, all nursing students spend six weeks engaged in delivery of health promotion/disease prevention services in the 19130 Zip Code Project. The Project is designed to foster collaborative relationships with neighborhood agencies to meet local nursing needs and to provide health promotion and disease prevention services to targeted groups in partner agencies. These services are characterized by on-going assessment of the needs of individuals and families, collaboration with agency staff, sensitivity to the needs of culturally diverse populations and a strong emphasis on health education. Activities undertaken by the Nursing Program in the local neighborhood have focused primarily on expansion of health promotion and disease prevention services determined to be essential to the mission of these agencies.

Currently, health promotion/disease prevention services are provided by second-year nursing students under the supervision of nursing faculty two days per week for six hours each day for six weeks during the academic year. Table 4-3 presents a profile of student experiences in the 19130 Zip Code Project which includes service activities, data collection and recording for academic year 2009-2010.

All direct client services provided in the community care part of this program are:

- health promotion/disease prevention services
- based on the service learning model

- provided by second year nursing students under the supervision of nursing faculty
- at established community agencies such as schools and senior housing
- determined in collaboration with agency staff based on the agency's mission and needs.

Data analysis about the services provided and the constituencies served has been conducted regularly for the past ten years during the course of the Independence Foundation's support for the College's 19130 Zip Code Project (1996-present).

During the 2009-2010 academic year (August 2009-July 2010), approximately 7,800 individuals were served during 367 group sessions. For the first six months of 2010 (spring semester), approximately 3,900 individuals were served in group sessions. During the 2009-2010 academic year, 244 individuals were served. Approximately one half of those individuals were served in spring semester during the first six months of 2010.

The majority of clients served were African American children. Seventy five percent (75%) of the individuals served were of African American ethnicity. Eighty seven percent (87%) of the individuals served were from 3 to 18 years of age (pre-school through high school). A description of the demographic characteristics of the clients served from January until July of 2010 (one semester which represents one half of the annual population total) is contained in Table 1.

**Table 4-3**  
**Client Social, Cultural, & Demographic Characteristics**

	Individual Clients Served January through June 2010	Individuals Served in Groups January through June 2010
<u>Total number served</u>	122	3,888
	N (%)	%
<u>Gender:</u>		
Male	68 (56%)	46%
Female	54 (44%)	54%
<u>Ethnicity</u>		
American Indian/Native Alaskan	1 (1%)	1%
Asian	5 (4%)	2%
Black/AA	93 (76%)	65%
Hispanic or Latino	11 (9%)	9%



White	12 (10%)	23%
More than 1 race/ethnicity	0	Less than 1%
Other	0	0
Not reported or refused	0	0
<u>Age Group</u>		
Birth—2 years	1 (1%)	Less than 1%
3-5 years	41 (34%)	38%
6-10 years (combined with 3-5 years group)		
11-13 years	65 (53%)	29%
14-18 years (combined with 11-13 years)		
19-24 years	2 (2%)	5%
25-44 years (combined with 19-24 years group)		
45-64 years	3 (2%)	2%
65 + years	10 (8%)	19%
Multiple ages	NA	7%

Please note:

- Age categories for Zip Code web based data collection tool do not correspond exactly with this table, so age groups were combined to approximate the age categories in the required table above.
- Percentages were rounded.
- Number of individuals served in groups may include duplicate clients.

The most common health promotion/disease prevention services provided are contained in Table 4-4. The most common surveillance activities for individuals and groups were weight, vision, height and blood pressure screening. The most common teaching activities for groups related to exercise, nutrition, safety, prevention of sexually transmitted diseases and hypertension management. The majority of individuals served were children and individuals of African-American ethnicity. Most individual encounters lasted from 10-15 minutes (52%). All abnormal screenings were referred; approximately 40% of the individuals seen were referred to a health care provider for follow-up care.

**Table 4-4**

**Most Commonly Provided Health Promotion/Disease Prevention Services\***

Individuals	Groups
<p>Surveillance</p> <ul style="list-style-type: none"> <li>• Weight</li> <li>• Vision</li> <li>• Height</li> <li>• Blood Pressure</li> <li>• Pulse</li> <li>• Hearing</li> </ul>	<p>Surveillance</p> <ul style="list-style-type: none"> <li>• Weight</li> <li>• Vision</li> <li>• Blood Pressure</li> <li>• Height</li> <li>• Pulse</li> </ul>
<p>Teaching</p> <ul style="list-style-type: none"> <li>• First Aid Education (abdominal pain, headache, nosebleed, cuts)</li> <li>• Nutrition Education</li> <li>• Hypertension Management</li> <li>• Street/Home Safety Education</li> <li>• Medication Side Effects</li> <li>• Stress Management</li> <li>• Growth and development</li> </ul>	<p>Teaching</p> <ul style="list-style-type: none"> <li>• Exercise Education</li> <li>• Nutrition Education</li> <li>• Street/Home Safety Education</li> <li>• STD/Family Planning</li> <li>• Hypertension Management</li> <li>• Personal/Dental Hygiene Education</li> <li>• First Aid Education (headaches, fever, nausea)</li> <li>• Medication Administration and Safety</li> <li>• Diabetes Education</li> <li>• Stress Management</li> </ul>

\*Listed in order of most frequent to least frequent for the Most Commonly Provided Services.

**Table 4-5**

**Selected Geriatric Nursing Learning Activities**

<p>Nursing 101</p> <ul style="list-style-type: none"> <li>• Seminar: Well-Elder Experience, Interview of an Older Person in the Community</li> <li>• Class: Grieving</li> <li>• Lab: Geriatric Assessment</li> <li>• ACE and Lecture- Assessment across the life span</li> </ul>
<p>Nursing 132</p> <ul style="list-style-type: none"> <li>• Seminar: Cultural Traditions</li> <li>• Seminar: Medication Reconciliation</li> <li>• Seminar: Recognizing Elder Abuse in the Community</li> <li>• Critical Thinking Paper: Safety, incorporates <i>How To Try This</i> series</li> <li>• Seminar: Geriatric Assessment</li> <li>• Conference: Evidence Based Geriatrics</li> </ul>

#### Nursing 231

- Seminar: Family Systems
- Seminar: Polypharmacy
- Clinical: Geriatric Simulation
- Clinical: Experience in Long Term Retirement (“Aging in Place”) Communities (12 days over six consecutive weeks)
- Clinical: *How To Try This* series
- Clinical simulation: Geriatric Nursing Care

#### Nursing 232

- Clinical: Geriatric Simulation
- Clinical: Experience in Long Term Retirement (“Aging in Place”) Communities (12 days over six consecutive weeks)
- Clinical: How To Try This series
- Clinical simulation: Geriatric Nursing Care

#### **Criteria 4.5**

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

Grading policies for the College are outlined in the College Catalog and the College Student Handbook. Grading policies for the Department of Nursing are specified in each nursing course syllabus. Nursing students receive a detailed syllabus that provides course objectives, grading policies and evaluation criteria for the course. All four course outlines can be found onsite. Faculty review the syllabus including grading criteria with students at the beginning of each course.

All four nursing courses have a passing grade of 70 %. Multiple-choice objective examinations are given throughout each course, and a final cumulative examination is given at the end of each course. The content tested is presented in lectures, seminars, nursing skills laboratory, or is found in the required readings. Responses to test questions require the application and synthesis of concepts, principles and knowledge and skills discussed in the courses. The tests offer a critical thinking approach emphasizing development of nursing care plans to address the core competencies of a safe and effective care environment, physiological integrity, psychosocial integrity, and health promotion and maintenance. The objective examinations increase in complexity as the

student progresses through the program of learning; in the first year, questions emphasize application of core concepts. In the second year of the curriculum, questions continue to evaluate application of knowledge and theories as well as analysis, evaluation, and prioritization of complex care situations and multiple client situations. The examinations are patterned after the NCLEX examination. This approach allows the student to be assessed on the content of the course and at the same time to become more familiar with the format of the NCLEX examination.

The student demonstrates competence in clinical skills learned in the nursing skills laboratory, and reinforced throughout the semester in clinical experiences by successfully completing skills testing at the end of the first two semesters of the Nursing Program (Nursing 101 and Nursing 132). The skills test requires the student to correctly complete designated skills while the faculty observes. In addition, the material learned in the nursing skills laboratory is included in the objective examinations given in all nursing courses. Each semester nursing students are required to demonstrate proficiency in mathematical computation prior to progression into the next semester. Students are required to achieve 90% mastery in mathematics testing each semester.

One clinical evaluation tool is used for all four nursing courses. The clinical tool is based on the Quality and Safety Education for Nurses (QSEN) competencies. A copy of the clinical evaluation tool is in Appendix. The clinical evaluation tool requires students to meet objectives in a systematic, cumulative manner and reflects progress toward program objectives. The criteria for achieving a satisfactory clinical evaluation are described on the clinical evaluation tool. Skills build from semester to semester and students are held accountable for all previously learned skills. A grade of satisfactory for all previous and current clinical objectives is required for successful completion of any nursing course. Guidelines for the evaluation process, criteria for performance and the protocol for remediation are detailed in the Nursing Student Handbook and in the clinical evaluation tool.

Students receive a copy of the clinical evaluation tool at the beginning of their course of study to use for reference throughout the program. Faculty review clinical objectives for each course with students during clinical orientation at the beginning of

each semester. At the end of the semester, each student is evaluated on each course objective and on every objective from previous nursing courses.

Clinical performance is evaluated as satisfactory or unsatisfactory, based on evaluation of the student's performance on clinical objectives for the course. The clinical evaluation tool for all four nursing courses encompasses the QSEN competencies: patient-centered care; teamwork and collaboration; evidence based practice; quality improvement; safety; and informatics.

The clinical instructor facilitates learning by directing and guiding students in their learning experiences. Written assignments, such as care plans, teaching plans, and process recordings also provide opportunities for the student to demonstrate an understanding of the course objectives.

In addition, as detailed in each course syllabus, assignments such as a critical thinking paper and seminar activities contribute to the student's course grade. Each semester the student is expected to be successful in completing a writing assignment that demonstrates ability to plan care for clients and families using a critical thinking approach. The focus of each paper changes in each course but the central theme of the papers is client needs, incorporating, with varied emphasis, the core concepts of a safe and effective care environment, psychosocial and physiological integrity, and health promotion/disease prevention. In each semester the student is required to write a paper exploring one or more core concepts in depth. The paper allows the student to explore not only a variety of client populations, but also the varied roles of the nurse in managing clients and families. A clear outline for each paper is given to each student, including criteria for grading the paper. The expectation is that the student will not only be able to provide appropriate content in the writing assignment, but will also be able to present the material clearly and concisely, utilizing an approach consistent with the discipline of nursing, using correct grammar and APA format.

In lectures, seminar discussions and clinical experiences, students are encouraged to utilize a critical thinking approach in prioritizing care. Seminars also provide an activity for the students to synthesize the information learned in lecture and experienced during clinical assignments. Seminar discussions allow for topics such as legal and ethical issues, cultural issues, therapeutic communication skills, management of multiple

clients, and collaborative experiences in planning interdisciplinary care, to be discussed as a small group experience. Students benefit from the enhancement of group dynamics utilized in seminar discussion.

The critical thinking and writing assignment required each semester is a learning activity that allows the student to integrate theory and practice in developing plans of care for clients and families. Teaching clients and families in community settings is a major component of the critical thinking papers in the first three semesters. In the fourth semester, students consider the relevance of a personal philosophy of nursing to collaborative care planning and management issues. The critical thinking and writing assignment reflects growth in the student's ability to achieve graduate competencies; that is, to articulate a plan of care that is evidence based and directed toward maximizing self-care and optimal functioning for clients and families across the lifespan in a variety of settings. This learning activity also validates the importance of writing in a clear and concise manner.

The knowledge and skills to collaborate in a patient centered approach which is essential to safe and accountable nursing practice are taught and nurtured first in lecture and in small group seminar and practice, and then applied with clients across the lifespan in a variety of settings. Throughout the curriculum, the student is immersed in the triad of lecture, seminar, and clinical learning experiences to incorporate the core concepts of safe and effective care, physiological integrity, psychosocial integrity, and health promotion and maintenance. While the content changes from course to course within the curriculum, the categories of client needs, interwoven with the QSEN competencies, build on each other and the activities experienced by the students expand the students' ability to integrate information from one semester to the next. For example, students are required to apply the assessment and intervention techniques initially learned to promote health in the first semester to a client experiencing threats to physiological and psychosocial integrity in subsequent semesters. These activities are designed to gradually guide the student to become more autonomous in planning interdisciplinary nursing care directed toward achievement of optimal functioning for clients and families in a variety of clinical settings.

In each semester of the nursing program, a carefully designed assignment plays an integral part in the evaluation of student learning. This assignment, known as the Critical Thinking and Writing Paper (CTW), increases in complexity in each succeeding semester. The guiding principle of each assignment is related to the student's use of resources including but not limited to faculty, journals, content experts, and community partners to assist them in dealing with a client problem or professional issue. Each of the assignments requires students to develop outcomes for evidence based interventions and then evaluate those outcomes. Students are guided through this process with help from faculty mentors who work closely with them over the course of the semester. While this assignment is meant to introduce the use of evidence in practice to students, it has also proved valuable to faculty as a variable to identify students at risk. By using a grading rubric and establishing inter-rater reliability, faculty are able to correlate grades on the CTW assignment with test grades and predicted success in the nursing program. The collection of these data allows faculty to target at risk students for additional mentoring to improve performance on subsequent written assignments.

#### **Criteria 4.6**

**The curriculum and instructional processes reflect educational theory, interdisciplinary collaboration, research, and best practice standards while allowing for innovation, flexibility, and technological advances.**

Faculty use a variety of methods to evaluate teaching learning practices. Course evaluation tools are designed by faculty and completed by students at the end of each semester. Students are asked to rate course objectives on a Likert type scale and are encouraged to provide feedback about the quality, amount, and variety of course assignments. Students comment about formal and informal support by faculty, as well as the benefits of additional learning activities. Aggregate data about course grades are evaluated each semester. Consideration of course trends is discussed at planning meetings held each semester, prior to development of new course materials. Rubrics used for grading the Critical Thinking and Writing paper are analyzed each semester and mean scores are assessed for each element of the paper.

As the College began to offer online learning opportunities, faculty in nursing realized that they too needed to participate in this learning strategy. While recognizing

the need to include innovative pedagogies, faculty were particularly cognizant of wanting to maintain the supportive, co-learner relationships they valued with students in the face to face classroom, laboratory, seminar, and clinical settings. Since this would be impacting both faculty and students, it was vital that this be a collaborative effort and be based on evidence.

Law and Society Week has become an ongoing annual opportunity for students in the fourth semester to participate in a professional conference experience. Along with colleagues from the College's paralegal program, faculty and students take part in an entire day of discussion related to health care and legal/ethical issues. Using an interdisciplinary approach, students in nursing and paralegal programs interact to discuss current issues and trends related to their professional practice.

Students in the Department of Nursing learn that evidence for practice can originate in a variety of ways. Faculty at the Community College of Philadelphia are committed to creating a supportive environment for students to experience and share examples of evidence based practice. These opportunities for scholarship and service exist both within the program and the professional arena and have become an integral part of the curriculum. While much of the service provided by faculty and students occurs in the community clinical rotations, students are also active at acute and long term care clinical sites. Informing staff about evidence related to nursing interventions has become an integral part of each clinical rotation. Each clinical group of Nursing 132 students in collaboration with agency staff develops a research question, completes a literature review, collects data and presents their research project in the annual "Evidence Based Practice" symposium attended by all Nursing 132 students. Collaboration further extended in Nursing 231 and 232, as the students go to Drexel University and experience the simulation lab, interviewing and assessing a standardized patient and getting feedback via a taped accounting of the experience.

Sharing information that one has learned or discovered is an important professional responsibility. To this end, students in the Department of Nursing are encouraged to collaborate with peers and faculty in scholarly endeavors. To foster this activity, faculty model this behavior by working together in teaching teams, committees and task forces to develop innovative programs based on research.



In addition to the CTW paper, students and faculty participate in several conference days that allow students to explore issues and concepts related to evidence based practice. Each fall semester, all students and faculty attend presentations by speakers. Recent discussions related to career ladders, health policy and excellent care for older adults. Speakers for these events included accomplished nurses and community representatives. Students were able to engage in conversation with experts using case studies. Course evaluations by the students reflected the relevance of this issue and the impact the discussion had on practice and career planning.

During the spring semester students are involved in presentations within their course, Nursing 132 (second semester students), and Nursing 232 (fourth semester students). In 2005 and 2006, second semester students worked in their clinical groups creating case presentations based on clients they had cared for in the clinical setting. With support from clinical faculty, groups developed their presentation around the nursing interventions and rationales for these interventions.

In 2007, faculty and students adopted a concurrent session format and focused on evidence based practice issues. Clinical groups, with guidance from their clinical faculty member, selected a clinical issue or procedure and researched the evidence supporting the method of intervention. Each clinical group developed an abstract for their presentation as well as handouts and critical thinking questions for a 30 minute presentation. In preparation for the day, faculty offered sessions to discuss research and resources that could be used to support the presentation.

In the spring of 2006, the partially online hybrid model of the seminar component of Nursing 132 (second semester) was launched. All nursing faculty, both first and second year, participated in the pilot project by teaching a section of the online seminar. Both faculty and students learned a great deal about teaching and learning in the online environment. While participating in this pilot project, faculty began to develop hybrid models for components of Nursing 101 (first semester) and Nursing 231(third semester). For Nursing 101, it was decided that parts of three of the four course components (lecture, seminar, college laboratory) would become hybrid. The fourth component, clinical experience, did not change. Seminar and lecture components in Nursing 231 underwent the transition as well. Along with students who had been part of the initial

pilot, faculty previewed videos and other resources that would become part of the learning package in the hybrid model. By September 2006, the hybrid model was in place to begin the semester. Faculty and student representatives then began to develop the seminar component of Nursing 232 and revise the piloted Nursing 132 seminar while adding lecture and college laboratory to the hybrid model.

To capture what was learned, what worked and what did not, both students and faculty were surveyed at the end of fall 2006. At the same time, each department in the College was asked to develop an outcomes assessment question for the semester. Faculty in the Department of Nursing chose to focus on the online hybrid initiative and formulated the following research question.

What is the impact of the implementation of hybrid course delivery on student learning?

- a. How do scores on measurement strategies compare to the same material delivered in a traditional classroom?

Measurement strategy – compare statistical data of specific test questions from previous years, compare overall grades on tests, compare overall grades in the course.

- b. Do students spend more time engaged with the information when it is offered online?

Measurement strategy – survey students for amount of time spent online.

- c. Do students utilize their time for additional learning activities when course material can be accessed at will online?

Measurement strategy – survey students regarding time usage.

- d. How does the online environment effect student/faculty interaction?

Measurement strategy– survey students and faculty about time and amount of face to face encounters (PASS sessions, faculty/student discussions, one to one office time, time on email).

Students took an active role in the evaluation of the experience and contributed significant constructive criticism related to the experience as well as ways to make the hybrid model a more beneficial learning experience.

Initially, faculty were concerned about students' access to computers. As can be seen, most of the students enrolled in the program had access to computers in their homes. For those who needed to use computers at the College, the Department of Nursing has dedicated space with twelve computers with internet access in addition to the CCP's numerous computer laboratories. Many students had never taken a distance learning or online course before entering the nursing program. In addition, faculty technology skills were somewhat limited in the initial year of implementation. As the survey illustrated, most students felt they had sufficient skills for the course.

Seminars in Nursing 101 and 132 are one hour in length while Nursing 231 and 232 have two hours allotted. According to the survey, most students spent between one and six hours per week on this course component in the online hybrid model. This time was used to read assignments related to the seminar, post responses to the reading and comments of fellow students, and read responses of other students. In Nursing 231, students created and viewed student led presentations online. In Nursing 101, most students felt the workload was about what they had expected. Students in Nursing 231 overwhelmingly thought the workload exceeded their expectations. Faculty in that course agreed that revision was needed and based on student input began to rethink a number of the assignments for both this course and the upcoming Nursing 232 seminar.

Participation in seminar, whether online or face to face, is a significant source of learning for students and faculty. Overall, students felt that their participation level in the online environment was the same or more as in face to face classrooms. Many students who were hesitant to speak in a face to face group were comfortable writing responses to fellow students and faculty. When the groups did meet face to face occasionally, there were clearly those who elected to participate more than others.

Students were given the opportunity to respond in free text to questions related to most helpful and least helpful aspects of the online hybrid model. In general responses were favorable although some students prefer all face to face interaction. Faculty used data gathered in the online surveys to revise existing courses and guide in the development of new components. Below is a sampling of student responses taken from the online evaluation tool.

Faculty were able to maintain a high level of interaction with students through a variety of supportive strategies that brought faculty and students together. Discussion groups, known as PASS (Promoting Academic Success for Students) sessions were continued as an integral part of student learning. During these sessions, students have the opportunity to informally dialogue with faculty about topics discussed in class, seminar, and college laboratory. Faculty frequently use case studies and evidence based literature to guide the discussion. This represents an example of supportive learning environments and provides a forum for scholarly exchange.

Supportive strategy sessions are held at various times during the week for optimum availability and are well attended. These sessions are voluntary activities on the part of both faculty and students. On course evaluations, students consistently list these sessions as one of the most helpful strategies contributing to their success. While no new information is delivered at these sessions, it does give students an opportunity to hear the information again in an additional format. Faculty schedule these sessions on a weekly basis each semester. This approach provides a flexible venue for faculty and students.

Success With Academic Testing (SWAT) is a strategy designed by faculty to assist students with NCLEX-RN style questions. This activity links NCLEX style test questions with current content that is being taught. By the end of the second year of the program, the students have systematically completed a selected NCLEX book and have experienced the rigor of test taking. SWAT sessions were established in response to the realization that increasing the processing of NCLEX style questions yielded a better outcome for academic success. SWAT sessions provided a venue for students to think out loud about higher level questions. Faculty and students review questions and reason out loud in their pursuit of the correct answer in select seminars. Through the use of these strategies as well as mentoring, faculty and students are able to continue to nurture a supportive, collaborative learning environment within the nursing program. While much of the learning occurs in groups, the value of individualized experiences cannot be overlooked.

Faculty value innovative approaches to curriculum design. A major initiative for faculty since being designated as a Center of Excellence (COE) school is that faculty have discussed ways to blend service with scholarship by challenging assumptions

through evaluation and by utilizing data collection and analysis to pilot new teaching practices. Faculty believe that teaching and evaluation complement each other; they are not either/or approaches to scholarship. For us, all innovation must be evaluated and supported with data.

Consequently, in fall 2006, faculty redesigned introductory skills laboratories that focus on physical assessment and included weekly on-line video programs, as well as increased the amount of time for practice. Additionally, in the spring semester of 2007, faculty emphasized prioritization of assessment findings in each classroom encounter and asked clinical faculty to incorporate discussions of priority problems based on physical assessment data into post conference conversations. The mean scores for assessment and identification of priorities on the critical thinking paper rubric increased significantly.

Additionally, faculty often create focus groups of students to provide feedback about innovative teaching learning approaches. During spring semester 2007, faculty conducted two focus groups of first year students to determine how students perceived pharmacology integration. Faculty were concerned that students had difficulty with selected pharmacology questions on unit examinations and clinical faculty provided feedback that students evidenced limitations in grasping important facts about medications. During the focus groups, students provided feedback about the use of on-line and classroom approaches to pharmacology and offered suggestions for improving delivery of information. As a result of student input, faculty have redesigned pharmacology integration for fall 2007, selecting on-line resources, developing weekly quizzes to support learning and building in extra tutorials to promote retention and application of knowledge. In order to establish baseline data, faculty gave a comprehensive pharmacology quiz to students at the end of the first year classes in spring 2007. This quiz was not used as part of the student's grade but will be repeated next year to determine if students' scores improved with new approaches to pharmacology integration. Faculty are energized by this mini-research study and value innovative practices based on evidence. Working together on projects that include evaluation and analysis of data provides opportunities for curriculum development, student support, and faculty scholarship.

In 2008 the faculty became intrigued by the concept of integration of simulation into the curriculum. Select faculty attended conferences to learn more about the benefits of simulation, types of simulation and the process of utilizing simulation as pedagogy. While there was initial trepidation, the faculty remained open minded to the possibilities. Since budget restraints were a concern, the initial foray into simulation was the faculty acting as standardized patients, writing scenarios that pertained to the content for the final examination in the Spring 2008 semester. Students rotated through simulation scenarios, and then were asked to give evaluation feedback. There was an overwhelmingly positive response to the simulations.

The students were able to process the content, and apply knowledge to real life scenarios, with an increased comfort level in understanding the material. As a result of these evaluations, the faculty added standardized patient simulations to seminars the following academic year; again matching the scenario content with the material taught in class. Once again the students offered positive feedback on the effectiveness of this activity. This approach remains a mainstay in the second year courses, with continued discussion of the utilization of this approach with the first year students.

In 2009 human patient simulators were purchased for the nursing laboratory in an effort to increase the simulation experience. One clinical day in the agency was replaced by a clinical day in the skills lab with the simulation mannequin. Faculty was trained in the use of the mannequin, as well as the debriefing exercises. Once again student evaluation was very positive in terms of assisting with critical thinking, skills, communication and assessment. Students noted that they felt they were able to be exposed to client experiences not necessarily available to them in the clinical setting. The faculty felt that students were able to safely make mistakes and in turn learn from these experiences in a way not permissible in the clinical setting. As faculty felt more comfortable with the human patient simulators, they supported each other in becoming more familiar with the simulators thus increasing their utilization of this approach. Currently all four nursing courses use the human patient simulators for student learning. Faculty continue to strive to use this approach more, attending conferences and sharing information with each other about incorporation into clinical and skills lab experiences.

Since 2008, through collaboration with Drexel University related to their five year HRSA Technology grant, second year students have had the opportunity to participate in a standardized patient experience in the simulation lab at Drexel University. This experience included exposure to a standardized patient scenario, feedback from the participants and a video for students to view their specific performance. While the students were initially anxious about this encounter, the evaluations reflected a very positive benefit to the experience. Students wrote a reflection of the event and overwhelmingly talked about the insight gained from actually watching themselves in practice. The faculty felt that this experience played a significant role in professional practice, assessment, and critical thinking, and remains an activity for second year nursing students.

### **Empowerment through individualized learning experiences**

During the long term care experience, fourth semester students have the unique opportunity to interact with older adults in a way that assists students to reach their individual potential during the clinical experience. A project was undertaken by two faculty who work together with second year students in a life care community for older adults. The project was designed to bring specific core concepts, such as therapeutic communication and change agent theory, to life for the student. The content of the project was designed to bridge the generation gap between an aging population and a new generation of nursing providers. The curriculum in geriatrics is flexible enough to allow exploration of techniques that encourage empowerment for the student and enhancement of quality care for residents of the long term care community. The success of this project was evaluated through the sense of confidence and proficiency the students exhibited in assigned exercises. Faculty found that this project was both relevant and enhancing to the residents and inspiring and enlightening for the students.

In collaboration with agency staff, faculty developed exercises to address empowerment, creativity and shared humanity by focusing on three areas of concern for older adults:

- Exercises in self-esteem were developed to assist the student and the resident to explore positive aspects of body, personality and skill or talent;

- Students were encouraged to engage the older adult in a guided interaction in which the resident utilized imagery as a way to shut down internal chatter and create a safe haven from which to transition into sleep;
- Students were encouraged to experience with the resident the joy of reminiscence and the importance of active listening in an effort to link one generation with another and bring a shared humanity to the forefront of therapeutic endeavors.

The most powerful outcome of this project, from a student's point of view, is a changed perception of older people. It is an idea shift from older people as static, needy patients to older people as interactive, sometimes funny, sometimes vulnerable members of society. The methods employed allow for a shared humanity to emerge which students and residents, with staff, bridge the generation gap. The students develop an enhanced sense of self confidence regarding not only their ability to understand and value a geriatric population, but also they begin to appreciate the opportunity to become a change agent.

By providing students with a curriculum that is flexible and empowering, faculty are able to foster scholarship and service in many settings. The long term care setting, for example, offers a unique opportunity for students to provide care while experiencing the confidence of influencing change. By creating a supportive learning environment, faculty provide the opportunity for students to discover their individual strengths and needs as they grow as professional nurses.

#### **Criteria 4.7**

**Program length is congruent with the attainment of identified outcomes and consistent with the policies of the governing organization, state and national standards, and best practices.**

The program of learning requires 64 credits for graduation (College Catalog) and has full approval from the Pennsylvania State Board of Nursing. Nursing credits are distributed on the basis of one (1) credit for each hour of lecture and seminar, one (1) credit for each two (2) hours of college laboratory, and one (1) credit for each six (6) hours of clinical laboratory. This allocation is consistent with College policy. The



nursing program can be completed in four consecutive academic semesters (Table 4-6). If a student stops out of the nursing course sequence, the student must wait a semester to rejoin the nursing curriculum since each course is offered only once a year.

Converting clinical experience to a 1:3 ratio as required by the NLNAC adds eight (8) credit hours to the program of learning (2 credits hours per semester), leading to a total nursing credit allotment of 36 credits. Utilizing this formula, the total number of credits for the program of learning is 72 credit hours and is within the accepted limits for the associate degree.

Students must complete the Nursing Program within four years of the first admission. Students who want to return to the nursing program must meet readmission criteria which are entirely numeric and consider overall grade point average, biology course grades and success pattern in nursing courses. A copy of the Readmission Worksheet detailing these criteria is available on site.

**Table 4-6**  
**Courses Required in the Nursing Program by Semester**

Semester	Course	Credits	HOURS/WEEK			
			Class	Seminar	Lab	Clinical Experience
1	Nursing I (Nursing 101)	7	3	1	2	12
	Biology 109 – Anatomy and Physiology	4	3		2	
	Diet 111 – Intro to Nutrition	3	3			
	English 101 – Expository Writing	3	3			
	<b>TOTAL</b>	17				
2	Nursing II (Nursing 132)	7	3	1	2	12
	Biology 110 – Anatomy and Physiology	4	3		2	
	English 102 – Composition	3	3			
	Math 118 – Intermediate Algebra (or higher math)	3	3			
	<b>TOTAL</b>	17				
3	Nursing III (Nursing 231)	7	3	2		12
	Biology 241 – Microbiology	4	3		2	
	Sociology 101-Intro to Sociology	3	3			
	CIS* 103-PC Applications	3	3			
	<b>TOTAL</b>	17				
4	Nursing IV (Nursing 232)	7	3	2		12
	Elective: Humanities	3	3			
	Elective: General	3	3			
	<b>TOTAL</b>	13				

\* Computer Information Systems

The nursing faculty believe that a balance exists between the specialty component of the Associate in Applied Science (A.A.S.) degree and the general education courses.

As stated in the College catalog, the general education courses provide students with exposure to a breadth of traditional arts and science disciplines as well as assisting them to develop competence in information literacy and technological competency. These courses support the philosophy and core values of the nursing curriculum. The general education courses are Biology 109, Biology 110, Biology 241, English 101, English 102, Sociology 101, Diet 111, Math 118 (or higher math), Computer Information Science (CIS) 103, Humanities elective, and unrestricted elective.

Students in the nursing program graduate with 28 credits in nursing, which constitutes 44% of the total credit hours required for graduation. The support and general education courses constitute the remaining 36 credits (56 % of total credits) necessary for awarding the A.A.S. degree.

In summary, the nursing program is designed so that students can acquire the knowledge, skills and abilities necessary for safe, accountable and effective practice as professional nurses within a two year time frame.

#### **Criteria 4.8**

**Practice learning environments are appropriate for student learning and support the achievement of student learning and program outcomes; current written agreements specify expectations for all parties and ensure the protection of students.**

The nursing faculty select clinical facilities that facilitate the ability of students to achieve course objectives and program outcomes. Clinical facilities are selected based on availability and relevance to nursing course objectives, which are developed to assist the student to progress toward achievement of program objectives and successful completion of the RN licensing examination.

Recognizing that Philadelphia has a diversity of health care facilities with different philosophies and client populations, the nursing department utilizes a variety of clinical settings. The Nursing Program uses large and small teaching hospitals, long term care facilities, and numerous community agencies. (Table 4-7). Facilities are added or deleted based on changes in health care trends and on input from faculty regarding the ability of the clinical setting to meet course objectives and program outcomes.

Beginning in 1996, over twenty community based agencies were added to the second year curriculum in order to give students the opportunity to participate in

practical, hands on, health promotion and disease prevention nursing services to vulnerable populations in North Philadelphia.

In the first year of the curriculum, students spend two consecutive days per week in acute care hospital settings which provides opportunities for students to develop skills in all aspects of basic care, communication and documentation. Students remain in the same medical/surgical in-patient setting during each semester, since faculty believe that familiarity with the setting and the instructor, allows the student to progress to multiple patient assignments at the end of the first year.

In the second year of the curriculum, students continue to have clinical experiences on two consecutive days per week. This opportunity offers students a wide range of clinical settings through experiences in at least two more hospitals, as well as community agencies and a long-term care facility. Through this experience, students are able to broaden their exposure to interdisciplinary care in order to have opportunities to assist clients and families to achieve optimal functioning in a variety of care settings. Over 25 community agencies partner with the Department of Nursing to offer health promotion and disease prevention service learning experiences for students as part of the 19130 Zip Code Project.

The nursing department contracts for use of clinical facilities. The contracts are developed utilizing input from nursing faculty and College administration. The contracts are updated and renewed according to individual policies of the contracting agency. Prior to the clinical rotation in each nursing course, each faculty member meets with agency personnel, usually the unit nurse manager or director of nursing education, or in the case of community agencies, with the director or health care liaison, to share course outlines and clinical objectives. Meetings with agency personnel occur on an informal basis throughout the semester. A formal final evaluation meeting is held at the completion of each semester. Following these meetings, faculty submit a form titled Evaluation of Learning Experiences Available at Affiliating Agencies to the Head of the Department of Nursing. Results from these evaluations are shared with the Nursing Curriculum Coordinator and appropriate changes are made for subsequent semesters.

Program design provides opportunity for students to achieve program objectives and acquire knowledge, skills, values, and competencies necessary for nursing practice.

**Table 4-7****Clinical Agencies**

<b>Clinical Agency</b>	<b>Nursing Course</b>	<b>Type of Experience</b>
<b>Acute Care agencies</b>		
Albert Einstein Medical Center	All courses	Medical/surgical experience
Fox Chase Cancer Center	Nursing 231 & 232	Medical/surgical experience
Good Shepherd/Penn Partners	All courses	Medical/surgical experience/long term acute rehabilitation
Hahnemann University Hospital	All courses	Medical/surgical experience
Holy Redeemer Hospital and Medical Center	All courses	Medical/surgical experience
Jeanes Hospital	Nursing 101 & 132	Medical/surgical experience
Lankenau Medical Center	Nursing 101 & 132	Medical/surgical experience
Mercy Hospital of Philadelphia	Nursing 101 & 132	Medical/surgical experience
Pennsylvania Hospital	All courses	Medical/surgical experience
Presbyterian University of Pennsylvania Medical Center	Nursing 101 & 132	Medical/surgical experience
Temple University Hospital	Nursing 101 & 132	Medical/surgical experience
Thomas Jefferson University Hospital	All courses	Medical/surgical experience
<b>Long Term Care agencies</b>		
Cathedral Village	Nursing 231 & 232	Long term care experience in a continuing care community
Philadelphia Protestant Home	Nursing 231 & 232	Long term care experience in a continuing care community

The Watermark at Logan Square	Nursing 231 & 232	Long term care experience in a continuing care community
<b>Community Based agencies</b>	<b>Nursing Course</b>	<b>Type of Experience</b>
Archdiocese of Philadelphia High Schools	Nursing 231 & 232	Community based activities
Children’s Crisis Center	Nursing 231 & 232	Community based activities
Community College of Philadelphia	Nursing 231 & 232	Community based activities
New Courtland Spring Garden Senior Center	Nursing 231 & 232	Community based activities
Philadelphia Public Health Department –District 5	Nursing 231 & 232	Community based activities
Project Home	Nursing 231 & 232	Community based activities
School District of Philadelphia	Nursing 231 & 232	Community based activities
Spring Garden Towers	Nursing 231 & 232	Community based activities
Young World	Nursing 231 & 232	Community based activities
The Philadelphia School	Nursing 231 & 232	Community based activities
St. Joseph ‘s Preparatory School	Nursing 231 & 232	Community based activities
North Philadelphia Head Start	Nursing 231 & 232	Community based activities

## V. RESOURCES

<b><u>Standard:</u> Fiscal, physical, and learning resources promote the achievement of the goals and outcomes of the nursing education unit.</b>
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### Criteria 5.1

**Fiscal resources are sufficient to ensure the achievement of the nursing education unit outcomes and commensurate with the resources of the governing organization.**

The College's funding derives primarily from three sources: the City of Philadelphia, the Commonwealth of Pennsylvania, and student tuition. The College has a comprehensive, centralized budgeting process that encompasses a thorough review and justification of all expenditures. Resource allocation decisions are made with the College's strategic plan and the various cost center plans in mind. Resource allocation is part of a yearly budget process from enrollment projections in November to the final budget requests presented to the Board of Trustees in June. The process involves all cost center administrators, from the vice president level down to department heads. During this process, both operational and capital budgets are developed. Operational budgets are developed for the fiscal year; capital budgets are developed using a three-year time frame. Operational budgets are designed to meet the immediate functional needs of the College, taking into consideration assumptions concerning revenues and enrollment projections. As these projections evolve into realities, the budgets are adjusted prior to their final approval by the Board of Trustees.

The nursing program enjoys fiscal allocations that are sufficient to accomplish program goals. These resources are comparable to other health career programs at the College. The Head of the Department of Nursing is responsible for preparing the budget for the nursing program. Faculty are asked to submit capital budget requests to the Department Head of Nursing each year. In addition, the Nursing College Laboratory Coordinator submits an operational budget for laboratory supplies to the Department Head of Nursing. Requests for audiovisual software are submitted to Multimedia Services and approved on a rolling basis.

The Department of Nursing budget has remained stable at about \$1.5 million. Table 5-1 describes the operating budget for the nursing program from 2007 to present. Table 5-2 is a summary of capital items purchased for the Department of Nursing in the years 2007-2010. Tables 5-3 through 5-6 summarize nursing department purchases funded by grant monies.

**Table 5-1**  
**Operating Budget for the Nursing Program 2007-2010**

<b>Object Code</b>	<b>2007-08</b>	<b>2008-09</b>	<b>2009-10</b>	<b>2010-11</b>
Faculty Salaries	\$858,224	\$884,948	\$720,915.05	\$787,937
Visiting Lecturer	\$42,500		\$54,318.06	\$23,233.80
Academic Year Credit Pool	\$543,603	\$662,949	\$733,206.97	\$779,460
Extended Time-Administrative Project			\$29,460	\$29,924
Full-Time Classified	\$38,779	\$40,229	\$40,233.62	\$42,143.00
Student Wages	\$5,316	\$5,316	\$5,957	\$5,316.80
Supplies Pool	\$14,617		\$13,702.69	\$12,550
Freight	\$400.00	\$400.00	\$175	\$400.00
Postage			\$75.20	\$82.67
Hospitality	\$250.00	\$250.00	\$307.00	\$370.00
Institutional & Professional Membership*			\$500.00	\$480.00
Travel Pool	\$4,966	\$8,614.00	\$6,400.00	
Maintenance Pool	\$550	\$570		
Telephone line service	\$450	\$500	\$500	\$600.00



Budget Notes:

- Extended time and release time are not charged to budget until end of fiscal year.
- Professional memberships and accreditation fees are charged to the budget of the Dean, Mathematics, Science and Health Careers.
- Faculty travel funds for professional development are administered by the Faculty Federation as per CBA.
- Salaries for adjunct faculty are budgeted as academic year credit pool.
- Student wages are for peer tutors in the College Nursing Skills Laboratory.

**Table 5-2**

**Summary of Capital Items for the Department of Nursing Purchased 2007-2010**

<b>Item Purchased</b>	<b>Total Amount</b>
2 Male/Female catheterization simulators	\$1,600.00
12-Lead EKG placement trainer mannequin	\$726.00
2 AC suction with battery backup	\$1,600.00
2 Welch/Allyn Oscopes	\$890.00
2 Examination and Diagnostic breast models	\$980.00
2 Lifeform tracheostomy care simulators	\$890.00
2 Chester Chest mannequins with central IV lines	\$2,500.00
1 Bandaging Simulator	\$599.00
1 Cardiac monitor used with Vital Sim Mannequin	\$4,500.00
3 Pulse Oximeters for nursing skills lab	\$1,160.00
1 Micro Sim Computer Program	\$4,000.00
2 infusion pumps	\$6,000.00
Tables and chairs for room W2-17	\$16,244.00
<b>Total</b>	<b>\$41,689.00</b>

**Table 5-3**

**Summary of Items Purchased Through Independence Foundation Grant**

Storage units in room W2-17 for community supplies	\$4,500.00
Supplies for community clinical activities	\$12,000-15,000/year
<b>Total</b>	<b>16,500.00-19,500.00</b>

**Table 5-4**

**Summary of Items Purchased Through John A. Hartford Foundation Grant**

<b>Equipment</b>	<b>Total Amount</b>
2 Vital Sim Mannequins	\$8,062.00
Computer software for Vital Sim	\$4,400.00
Faculty training for Vital Sim	\$3,000.00
<b>Total</b>	<b>\$15,462.00</b>

**Table 5-5**

**Community College of Philadelphia Foundation Mini-Grants**

150 devices for the Audience Response System (spring 2010)	\$5,000
Geriatric student-led conference (spring 2008)	\$5,000
Faculty preparation for NLN CNE certification (spring 2007)	\$1,500.00
<b>Total</b>	<b>\$11,500.00</b>

**Table 5-6**

**Independence Foundation Endowed Chair**

Endowed Chair in Community Health Nursing	\$1,000,000
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For the past three years, the Nursing Department at Community College of Philadelphia has subcontracted with a five-year HRSA grant awarded to Drexel University. The grant: “Faculty Development: Integrated Technology into Nursing Education and Practice Initiative” has provided Personal Digital Assistants (PDAs) or iPod Touches for all full and part-time CCP faculty. Drexel University has also provided CCP faculty with simulation training. Through this grant faculty are engaged in at least one development program each semester as well as a technology conference each year in May. In addition, senior CCP students use the Drexel University simulation facilities for Standardized Patient Encounters twice per semester.

### **Criteria 5.2**

**Physical resources (classrooms, laboratories, offices, etc.) are sufficient to ensure the achievement of the nursing education unit outcomes and meet the needs of faculty, staff, and students.**

The Head of the Department of Nursing has an office within the Division of Mathematics, Science, and Health Careers Suite (W2-5). The office is approximately 12 feet by 12 feet and is equipped with a computer, printer, fax, desk, several chairs, bookcases, and file cabinet. The Head of the Department of Nursing has a telephone with voice mail. Computer access includes internet and email.

Each full-time faculty member in the nursing department has an office in the West Building. Offices are approximately 8 feet by 10 feet. Each office has a desk, bookcase, file cabinet, 2 chairs and a telephone with voice mail. All nursing faculty have computers with internet and email access in their office. Part-time faculty are assigned to share offices with full-time faculty. Each part-time faculty has a phone extension with voice mail capabilities. Every full and part-time faculty member has a CCP email address.

Within the Division of Mathematics, Science, and Health Careers Suite (W2-5) is a conference room available to faculty within the Division by appointment. Faculty wishing to utilize the room sign-up on a first come, first served basis. The room accommodates 8-10 people and is equipped with a large conference table and chairs. Also located within W2-5 are two administrative assistants and three Technical Specialists.

Faculty can utilize classrooms throughout the College through the College scheduler. These rooms have multi-media capabilities. In addition to office space, the nursing department uses several classrooms throughout the main campus.

Until the Fall of 2009, the Department of Nursing routinely used two large, tiered classrooms in the West Building (West 2-47 and West 2-48) for the lecture component of the nursing courses. Each room had the capacity to seat 75 students at long tables and chairs. Each room had a retractable screen, blackboards, and an overhead projector. There was also a podium and table at the front of each room. In Fall 2009, construction began to add a new addition to the West Building. This caused the temporary closure of West 2-47 and West 2-48. From Fall 2009 until the present, the Department of Nursing routinely uses S2-3 for the lecture component of the nursing courses. S2-3 is a tiered classroom that has the capacity to seat 130 students. This room is equipped with desks and chairs, a retractable screen, blackboard, overhead projector, and a smart podium and table at the front of the room. Once the construction of the new building is completed W2-47 and W2-48 will be renovated and returned to the Nursing Program for their use. It is anticipated that these rooms will be ready for Fall, 2011 classes.

Rooms for the seminar component of each course are assigned by the College scheduler and usually located in the West Building. Each classroom is equipped with desks and chairs, a blackboard, retractable screen, podium and table. Rooms for examinations are assigned by the College scheduler and are usually located in the Winnet building. Each classroom is equipped with desks and chairs, a blackboard, retractable screen, podium and table.

The College Nursing Skills Laboratory Suite is located on the second floor of the West Building. This suite consists of six rooms including three laboratories, (West 2-15, 16, & 22), an office/supply room, a computer room (West 2-22A) and a multipurpose room (West 2-17). Each of the three laboratory rooms has a blackboard, bulletin board, computer, desks, chairs, VCR/DVD player, hospital bed with mannequin, and sink. West 2-15, West 2-16 and West 2-22 serve as primary classrooms for the College Nursing Skills Laboratory classes. W2-22 is also used as a student practice and tutoring room. This room has all required textbooks as well as videotapes and DVD's for student use. Adjacent to West 2-22 is West 2-22A, a room with six computers and two printers for use

exclusively by nursing students. All computers have word processing software as well as numerous software programs. A list of computer software holdings is available on site. West 2-17, the multipurpose room, has three additional computers with internet access that are linked to the printers in West 2-22A. The multipurpose room has a large conference table with chairs. The room is also equipped with a television/VCR/DVD and microwave for the use of nursing students and faculty. This space provides students with opportunities for skills practice and individual and group study time. Additionally, student mailboxes are located in this room.

The Department of Nursing, along with other departments in the Division of Mathematics, Science, and Health Careers, has access to the services of two administrative assistants and three Technical Specialists who report to the Office Manager in the office of the Dean, Division of Mathematics, Science, and Health Careers. One of the Technical Specialists is responsible for the handling of records, selected clerical needs, and assisting the Nursing College Skills Laboratory Coordinator. She reports to the Department Head of Nursing. Each semester an average of six students are employed by the division as student workers and assist with clerical activities. In addition the Nursing Department Head and to a less extent, the nursing faculty can obtain support for student issues and other needs from the Coordinator of the Mathematics, Science and Health Careers Division. The faculty of the Department of Nursing recognizes the outstanding work of the Technical Specialists, the administrative assistants and the student workers in their efforts to meet the ever-increasing production demands of the College and the Department of Nursing. Each administrative assistant/technical specialist has an open office area comparable to support staff in other areas. The areas are equipped with computers with internet access, telephones, filing cabinets, desks, a fax machine and printer. The Technical Specialist responsible for the handling of records, selected clerical needs, and assisting the Nursing College Skills Laboratory Coordinator has a private office space located in close proximity to the Head of the Department of Nursing and a desk in the College Nursing Skills Laboratory. A full time Nursing Program Grants Manager is funded by current grants. Her office is equivalent in size and furnishing to the faculty offices and is located near the Nursing College Skills Laboratory. The Head of the Department of Nursing and the Dean, Division of

Mathematics, Science, and Health Careers assess the needs of the department as sufficient.

The duplicating operations of the College, which are centralized, offer exceptional support to the department. The copy center is equipped with high volume copiers that copy on two sides, collate, staple, and insert separators. Documents can also be scanned into electronic format. The copy center produces brochures, programs and flyers for the department's various presentations and events. Faculty can submit items for duplication in person or on-line.

Other areas providing support services to the Department of Nursing are the Recruitment/Admissions Office, the Finance Office, the Community and Government Relations Office, Student Records and Registration, the Financial Aid Office, Institutional Research, the Center on Disability, the Counseling Center, the Women's Center, and the Center for Male Engagement.

The Recruitment/Admissions Office processes applicants for admission to the nursing program. The Recruitment/Admissions Office is responsible for arranging the administration of the pre-admission Allied Health Test and initial review of applicants. Financial aid applications are processed through the Financial Aid Office. Student Records and Registration is responsible for the maintenance of student academic records and the distribution of semester grades and cumulative grade point averages. Institutional Research has implemented a comprehensive, ongoing assessment plan and provides regular reports related to student outcomes. The Center on Disability provides services that are intended to assist students in achieving maximum independence while at the College. The Counseling Center assists students with educational matters, career selection, transfer planning and personal situations that affect the student's academic performance. The Women's Center and the Center for Male Engagement offer a variety of services for students in the College such as support and discussion groups, educational programs, conferences, and advocacy support on issues impacting men and women and their families.

### **Criteria 5.3**

**Learning resources and technology are selected by the faculty and are comprehensive, current, and accessible to faculty and students, including those engaged in alternative methods of delivery.**

The Library at the Community College of Philadelphia is well staffed and widely used by faculty, students and staff. The Library is located in the Mint Building. The holdings include 110,000 books, 276 hardcopy periodicals and newspapers, and a collection of microfilms, microfiche, and audiovisual materials in a multi-level facility. An integrated online catalog and numerous searchable databases can be accessed via the Internet. Many of the online databases contain full text articles. A complete list of databases, periodical holdings and electronic journals is available on the College Library website. Instruction by a professional library staff member is available to provide students with the knowledge and skills to locate, evaluate and use a wide range of resources to support their college course work.

The Dean of Educational Support Services, a Department Head, ten full-time and seven part-time librarians, an office supervisor, secretary, and staff provide library services. The library is open from 8 a.m. to 10 p.m. Monday through Thursday, 8 a.m. to 5 p.m. Friday, and 8:30 a.m. to 3 p.m. on Saturday.

Physical equipment in the Library includes adequate ventilation and lighting. There are sufficient tables, chairs and study carrels in close proximity to electrical outlets for portable computer use. There are five copy machines located in the Library for student use.

The College Library has 20 computer stations with Internet access including access to the Library online catalogue and searchable databases. All computer stations are connected to one of two network printers in the library. The library also has a computer room with 10 computers that are all connected to a network printer. In addition, the library has Wi-Fi. Students may also access the library online catalogue and databases from the College Nursing Skills Laboratory and off-campus sites, including their home computers, by using a designated username and password. The password changes each semester.

In addition to hard copies of nursing and allied health texts and journals, the Library subscribes to EBSCO Host and Proquest, two online databases that provide

abstracts and many full text articles for journals in nursing and allied health related fields. During the first semester of the nursing program, students receive an orientation to the library and how to access the college catalogue, periodical holdings and searchable databases. Librarians are available to assist students with specific database searches upon request.

The Department of Nursing has a Library Committee that is responsible for routinely reviewing library materials to determine those items that should be deleted from the current holdings. This committee, with input from the entire nursing faculty, makes recommendations as to which titles should be added to the collection.

In addition to the Library and College Nursing Skills Laboratory, students may reserve study rooms in the Winnet Student Life Building.

Students have access to computers in several settings throughout the College. The Student Academic Computing Centers in the Bonnell and West Buildings, the Library and resource rooms all have computers for student use. Students may use the word processing capabilities or access the internet at these locations. In addition, the Department of Nursing has twelve computers in the College Nursing Skills Laboratory dedicated to student use for word processing, internet access, and software use.

Faculty and students receive support with computer and computer technology from the Help Desk and the Academic Computing Department. The Help Desk can be reached by phone from 8 am until 7 pm Monday through Friday and 8 am until 2 pm Saturday. Technicians answer questions and solve computer problems via the phone. If needed, a specialist is sent to the person in need of assistance.

Multimedia Services has its main office in the Bonnell Building with satellite offices in the West, Mint, and Winnet Student Life Buildings. Technicians from this department are available for set up of audiovisual equipment when requested. A variety of audiovisual equipment is available through this department.

The Department of Nursing houses many textbooks, audiovisual aids, and computer programs within the College Nursing Skills Laboratory. In addition, the Nursing Department receives subscriptions to several nursing education and nursing practice journals. These journals are available to both nursing students and faculty in the College Nursing Skills Laboratory. Software for computers is recommended to the



College Nursing Skills Laboratory Coordinator by faculty. A list of all departmental resources is available on site.

Resources in the College Nursing Skills Laboratory are sufficient to meet learning needs of the students. Prior to each semester, the College Nursing Skills Laboratory Coordinator orders supplies. The budget allows for the purchase of adequate quantities of disposable equipment for use by students. As noted in the operational and capital budgets, significant supplies and equipment are purchased each year.

## VI. OUTCOMES

<p><b>Standard:</b> Evaluation of student learning demonstrates that graduates have achieved identified competencies consistent with the institutional mission and professional standards and that the outcomes of the nursing education unit have been achieved.</p>
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### Criteria 6.1

**The systematic plan for evaluation emphasizes the ongoing assessment and evaluation of the student learning and program outcomes of the nursing education unit and NLNAC standards.**

Evaluation of the program is an on-going and systematic process. The systematic program evaluation plan addresses each of the NLNAC standards and criteria. The plan has been revised several times since its development, most recently as a result of the revised NLNAC's 2008 Standards and Criteria. Nursing faculty completed revisions in fall semester 2008 and approved the current plan in December 2009. The complete Systematic Program Evaluation Plan appears in the Appendix.

Faculty have used the plan as a guide for reviewing and updating policies and procedures within the department. The plan has also been instrumental in helping faculty to identify strengths of the program as well as areas needing improvement.

In addition to the NLNAC Standards the College has initiated a mandatory Assessment Plan which consists of assessment of course and program learning outcomes. At the program level, an internal audit of each program is done by the Director of Assessment in conjunction with the Department Head and respective Dean every five years. The next audit for the Department of Nursing is scheduled for 2012. Each program is also required to submit to the respective Dean a Quality/Viability Index review annually.

### Criteria 6.2

**Aggregated evaluation findings inform program decision making and are used to maintain or improve student learning outcomes.**

Throughout the Self-Study Report, evidence has been provided that data based on the assessment methods described in the Systematic Program Evaluation have been aggregated, trended, and used to make curricular changes. Examples include:

- The philosophy has been revised to better reflect the mission of the College, current trends in health care and core values for the nursing education unit.
- Course objective have been revised to reflect QSEN competencies and NLN competencies.
- The faculty revised the clinical evaluation tool to reflect current practice trends including the QSEN competencies.
- The student evaluation of each nursing course is the basis for planning for each subsequent semester.
- The Nursing Student Handbook is updated annually.
- Course delivery systems are regularly evaluated and revised.
- The careful inclusion of technology, including simulation, has been integrated and evaluated.
- The implementation of a plan to increase NCLEX pass rates resulted in a 16% increase and stabilization of results.
- The review of cohort study data and admission procedures resulted in change of admission GPA to 2.75.
- The review of Advanced Placement Option student success resulted in elimination of the use of the NLN mobility profile examination and the awarding of one semester credit for life experience.

At the conclusion of each semester, in addition to the course evaluation tools provided by the College, the nursing program has each student complete a course evaluation tool based on the course objectives. There is also an opportunity for the students to provide qualitative information about the course. The evaluation asks the student to assess what they learned, how they learned, and their perceptions of the nursing program. Table 6-1 is an example of the information gathered from selected semesters. Additional course evaluations are available on site.

**Table 6-1**  
**Student Evaluation of Nursing 101**  
**Fall 2008**

What you learned

Course objective	A	B	C	D	E
1. Assess physiological, psychosocial, developmental, and environmental factors that influence the delivery of safe and effective nursing care	52%	36%	10%	1%	
2. Communicate with members of the health care team to provide safe and effective care to clients.	64%	26%	9%	0%	
3. Demonstrate accountability by functioning within the ethical/legal parameters of nursing practice, according to the student's expected level of knowledge, skills and abilities.	55%	35%	0%	1%	
4. Demonstrate basic skills related to physical assessment, medical asepsis, medication administration and provision of care.	61%	32%	7%	0%	
5. Provide basic care to physiologic function.	59%	36%	5%	0%	
6. Identify communication skills that facilitate a therapeutic relationship with clients.	62%	28%	9%	0%	
7. Assist client/families assess coping mechanisms and cultural influences of clients and families.	31%	48%	21%	1%	
8. Identify factors that facilitate client/family's ability to function optimally across the lifespan.	43%	44%	13%	0%	
9. Understand risk factors that influence health promotion for clients and families.	58%	34%	7%	0%	

A – I have an excellent knowledge base

B – I know enough to meet this objective

C – I know a lot, but I need to know more to meet this objective

D – I don't know enough to meet this objective

E – I didn't learn anything about this

How you learned

	A	B	C	D	E
1. Classroom faculty are knowledgeable nurses.	81%	17%	1%		
2. Classroom faculty are effective teachers.	62%	30%	7%	1%	
3. My clinical teacher was a knowledgeable nurse.	90%	9%	0%	1%	
4. My clinical teacher was an effective teacher.	77%	18%	4%	1%	
5. My college lab teacher was a knowledgeable nurse.	69%	26%	3%	2%	
6. My college lab teacher was an effective teacher.	56%	26%	13%	5%	1%
7. The skills videos were a helpful resource.	37%	47%	13%	3%	
8. College nursing skills laboratory study guides were a useful tool	62%	28%	7%	2%	2%
9. The online portion of the college nursing skills lab helped me to prepare to practice skills.	33%	42%	15%	7%	3%
10. Tutors in the college lab were knowledgeable.	27%	33%	37%	3%	
11. Textbook readings were relevant to what I was learning.	63%	31%	4%	2%	
12. The ACE component of the course prepared me to assess my clients.	65%	25%	7%	3%	

\*Students' perception of the nursing program

What one thing was most valuable in helping you to successfully complete this course?	What one event during this course had the most impact on you?	Consider your seminar experience. Which ones were most helpful?
Faculty support Clinical experiences Assessment in beginning PASS sessions ESL support group Tutors in the lab Attending class every time Reading the text book	Clinical experiences Faculty support Introduction to assessment in the beginning Going over the tests "How I coped when Mommy died" video	Test discussion weeks Community assessment Legal/ethical issues Assessment of older adults

\*in order of highest number reported

### **Criteria 6.3**

#### **Evaluation findings are shared with communities of interest.**

Data gathered from course evaluations, graduate follow-up studies, NCLEX reports and faculty discussions are shared with communities of interest. These communities include parent institution administration, Pennsylvania State Board of Nursing, a variety of funders including those who fund grants and scholarships, clinical agencies, and associate degree colleagues. Information is also included in College wide reports such as the President's Annual Report which is sent to the Board of Trustees as well as other community constituents. Minutes from the Nursing Program Advisory Committee reflect the discussion of pertinent topics such as job placement and current trends in nursing practice. During orientation of new freshmen and at the beginning of each course semester, students are given the opportunity to engage in conversation related to employment, NCLEX and a number of other relevant topics. All information is available to students on request.

In addition, with the development of the Department of Nursing's Facebook page, information related to the program and specific class news is posted for graduates. Most recently both faculty and students have used this venue to network regarding available nursing positions.

### **Criteria 6.4**

#### **Graduates demonstrate achievement of competencies appropriate to role preparation.**

The Graduate Follow-Up Survey has been mailed to graduates six months following program completion each year. Graduates are asked to identify their employer so that they may be contacted regarding graduate achievement of qualities and attributes. The response rate for the employer survey has been less than desired for the years 2004-2008. A variety of strategies were discussed with interested parties such as the Nursing Advisory Committee, Nursing Faculty, and representatives at the clinical agencies used during the course of the program.

In 2009, faculty decided to adopt a new strategy. Instead of asking for data about individual graduates, it was decided to seek aggregate data about our

graduates as a group. Each employer identified by graduates as well as all of our clinical agencies was sent a letter of explanation and a rating form (available on site). The contact person was asked to distribute the questionnaire to any nurse manager who had hired a CCP graduate in the last three years. This allowed employers to make a general assessment of CCP nursing program graduates. The strategy yielded a total of twelve responses for seven different employers. A total of 34 graduates were represented. The employers responding were all acute care settings and included large university hospitals as well as community hospitals and those specializing in a particular population. Two of the hospitals responding hold Magnet status. While not a large response, it represented a much better response rate than the past four years.

The results of the survey demonstrate that graduates of the nursing program are performing at or above the level of their peers. Faculty have interpreted these data as revealing that graduates of the nursing program are able to work effectively in a collaborative manner to provide safe and effective care to clients.

**Table 6-2**  
**Employer Follow Study**

<b>Qualities/Attributes</b>	<b>Aggregate data for graduates hired in the last 3 years (2007-2009)</b>
Mastery of Nursing Knowledge	<b>Scale of 1-4</b>
Performance of Technical Nursing Skills/Procedures	2.87
Organization/Prioritization/Care Management Skills	2.80
Communication Effectiveness	2.75
Work/Team Relationships/Collaboration	3.10
Professionalism/Dependability/ Accountability	2.90

Ability to deliver safe, effective, quality nursing care	2.80
Culturally sensitive/Shows respect for patient/family preferences and needs	2.87

1= Below level of peers, 2= Average to peer group, 3=Above average to peer group, 4= Superior to peer group

### **Criteria 6.5**

**The program demonstrated evidence of achievement in meeting the following program outcomes:**

**Performance on licensure exam**

**Program completion**

**Program satisfaction**

**Job placement**

#### **6.5.1 The licensure exam pass rates will be at or above the national mean.**

Community College of Philadelphia nursing graduates have maintained an acceptable pass rate on the NCLEX-RN. The average pass rate for graduates of the Nursing Program over the past five years is 83.3% with a range between 71% and 90%. Results for the last five years are demonstrated in Table 6-3.

In 2007 the Community College of Philadelphia nursing graduates pass rate was 11% below the Pennsylvania pass rate. Faculty discussed a number of possible factors influencing the result, developed a variety of strategies to assist students and consulted with the Office of Institutional Research to design a cohort study related to predictors of success on the NCLEX-RN. This study has continued for four years. The consistent predictors of success on NCLEX-RN are student performance on assessment measures in nursing courses and the student score on the HESI exam.

After considerable faculty discussion related to standardized test packages and benchmark scores, an action plan was immediately developed. Faculty created a program known as S.W.A.T. (Success With Academic Testing). This initiative requires that all students purchase a designated NCLEX review book selected by the faculty. Each week a series of questions is assigned to be



completed. Each student must visit their faculty mentor to validate completion of the questions and discuss the student's clinical reasoning. A series of selected questions is discussed during seminar in an effort to hone test taking skills and strategies.

In addition, faculty began to offer the opportunity for students to participate in the HESI RN-exit test. Each February, fourth semester students are offered the opportunity to take this test on campus. It is not a mandatory activity; however, since first offering this in February 2007, all second year students have taken the exit exam. There is no grade requirement assigned to this activity and students pay for the examination. Students receive immediate results as well as a remediation plan. Faculty receive both individual and aggregate data for the class. The data gathered from this exam are used to develop focused review sessions in the later part of the fourth nursing course. All students are invited attend these sessions. Also, there are voluntary support resources available to students who want more experience with computer adaptive testing.

Following the implementation of this action plan, the Community College of Philadelphia nursing graduate pass rate increased by 16% and was 2% above the Pennsylvania pass rate. The data included in Table 6-3 is based on the National Council of State Boards Reports on graduates that have taken the NCLEX-RN. The data do not include graduates who tested outside the Commonwealth of Pennsylvania.

**Table 6-3**  
**NCLEX-RN Pass Rates**

<b>Year</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
Number of Graduates	122	131	119	105	130
Pennsylvania	87%	82%	85%	87%	86.5%
Community College of Philadelphia	82%	71%	87%	90 %	86.59 %

**6.5.2 Expected levels of achievement or program completion are determined by the faculty and reflect program demographics, academic progression, and program history.**

Table 6-4 describes nursing student graduation rates for the past four years. The College graduation rate for the past three years has ranged between 11 and 12%.

**Table 6-4**  
**Graduation Rate for Nursing Students\***

<b>Graduation year</b>	<b>Percent Graduating Within 3 years of Admission</b>
2008	84.2%
2009	83%
2010	81%

\*Includes generic students only

### **6.5.3 Program satisfaction measures (qualitative and quantitative) address graduates and their employers.**

Each year, at six months following graduation, graduates are surveyed regarding program satisfaction. The survey includes a series of Likert scale statements asking graduates to rate overall satisfaction with the program, preparation for current position, the development of clinical judgment skills, the ability to provide high quality care to clients and families, and the ability to uphold the professional standards of nursing. Prior to 2009, the graduate satisfaction survey was mailed to each graduate. After a 2008 response rate of 23.2%, faculty discussed a variety of strategies to increase the feedback from graduates. In 2009, the graduate satisfaction survey was distributed to the students via a Department of Nursing Facebook page set up for CCP Nursing Alumni. The follow-up study was administered using Survey Monkey. The result was a response rate of 45.7% of the 130 graduates.

The graduate follow-up survey was revised in the fall of 2009 to reflect the QSEN competencies including questions related to quality of care and professional standards. The surveys through the years have asked about various qualitative data based on the current need. The data collected ranged from what is the best review book and why, to what advice would you offer to a new graduate who is seeking a first job in nursing, to what else would you like to tell us?

Data gathered from the graduate follow-up studies have been used by faculty in a variety of ways. A number of students remarked on the effectiveness of the SWAT initiative in encouraging them to prepare for NCLEX. In addition, graduates commented on the helpfulness of the critical thinking paper in preparing them for writing requirements in their bachelor's degree programs.

**Table 6-5**  
**Results of Graduate Follow-up Survey\***  
**Classes of 2006, 2007, and 2008**

	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
Number of Graduates	122	131	119	105
Response rate	32/122 – 26.2%	66/131 – 50.3%	23/119- 19.3%	47/105 45.7%
Overall, I found the nursing program at Community College of Philadelphia to be	4.2	3.8	4.11	4.56
The nursing program provided the assistance I needed to function as a graduate nurse.	4.25	4.27	4.55	4.5
The nursing program assisted me with development of clinical judgment skills	4.25	4.4	4.0	Not asked
The nursing program assisted me to provide high quality care to clients and families.	Not asked	Not asked	Not asked	4.48
The nursing program helped me to uphold the professional standards of nursing.	Not asked	Not asked	Not asked	4.67

Using the following rating scale: 5=strongly agree/very satisfactory – 1= strongly disagree/unsatisfactory

\*Table demonstrates the mean score for each of the quantitative questions.

#### **6.5.4 Job placement rates are addressed through quantified measures that reflect program demographics and history.**

For the years 2006 and 2007, job placement rates remained as in the past with nearly 100% of the graduates employed as registered nurses well within six months of graduation. Many had several offers prior to graduation. In 2008 graduates reported that employers were slower to hire and had begun to delay hiring until the graduate had been successful on the NCLEX-RN examination. At six months, most graduates had secured a position. A number reported being offered part time employment. An additional trend that was noted at this time was the increased diversity in employment sites reported by graduates. In addition to the acute care setting, a number had accepted positions in home care, community care, and long term care facilities.

In 2009 the employment picture for registered nurses in the Philadelphia area took a downward turn. In spite of the reports of a nursing shortage, hospitals in the tri-state area (Pennsylvania, New Jersey and Delaware) and beyond were beginning to limit the number of new graduate nurses that they were hiring. Many, in particular the large university hospitals, were hiring only graduates of bachelor's degree programs if they were hiring at all. Both prior to graduation and on the graduate follow-up study, graduates of the CCP nursing program were reporting a very low employment rate. Graduates reported completing upwards of 25 applications with little or no responses at six months following graduation. Those finding employment were taking part time positions that occurred in settings considered non-traditional for new graduates such as home care, outpatient clinics, mental health facilities and acute rehabilitation units. Graduates did report that many of them secured their positions by networking with classmates on the department Facebook page.

The graduating class of 2010 is beginning to report a slight improvement in the employment picture. While very few had secured registered nurse positions at the time of graduation, a number report that they have been hired for a diverse array of positions. The employment picture for acute care settings has remained stagnant with most hospitals not hiring any new graduates, regardless of type of

pre-licensure education program. Members of the Nursing Program Advisory Committee report that they are hiring only those nurses with experience and will consider all graduates after one year of experience in any setting.

**Table 6-6**  
**Job Placement Rates and Patterns**  
**Classes Graduating 2006-2010\***

<b>Year</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
Response Rate	N of graduates = 122 32/122 =26.2%	N of graduates = 131 66/131 = 50.3%	N of graduates = 119 23/119= 19.3%	N of graduates= 105 47/105=45.7%
Employed in Nursing	32 (100%)	66 (100%)	20 (87%)	15 (32%)
Clinical Areas	Med/Surg Pediatrics Gerontology Emergency Room Maternity Mental Health Rehabilitation	Med/Surg Pediatrics Gerontology Emergency Room Maternity Mental Health Rehabilitation Community clinics Home care	Med/Surg Pediatrics Gerontology Emergency Room Maternity Mental Health Rehabilitation Community clinics Home care	Home care Mental health Gerontology – LTC Acute Rehabilitation

\*Results for Class of 2010 will be available on site.

## **APPENDICES**

## **SYLLABUS**

### **Nursing 101**

**Fall 2010**

**Placement in Curriculum:** Fall Semester

**Course Description:** Introduction to the knowledge, skills and abilities associated with nursing practice. Concepts of physiological integrity, psychosocial integrity, a safe, effective care environment and health promotion/maintenance are examined. The nursing process provides a framework to help the learner think critically, assess factors that influence safe and effective care delivery, and integrate theory with care of clients and families.

**Co-requisite:** Biol 109, Diet 111, Engl 101

#### **Course Objectives:**

Upon completion of N101, the student will:

1. Assess physiological, psychosocial, developmental and environmental factors that influence the delivery of safe and effective nursing care.
2. Demonstrate the use of standardized communication techniques with members of the health care team to provide safe and effective care to client(s).
3. Demonstrate accountability by functioning within the legal/ethical parameters of nursing practice.
4. Demonstrate basic nursing skills by accessing research evidence, clinical experts, and information technology to identify standards of care.
5. Utilize therapeutic communication skills to assess coping mechanisms, cultural influences and preferences of clients/families.
6. Identify factors that influence client/family's ability to function optimally across the lifespan and at transitions in care.

**Teaching Strategies:** The strategies listed below will be employed to teach the content of the course to actively demonstrate the strategies taught in the course.

Class Discussions/Seminar, Selected Readings

Webstudy Quizzes and Assignments

On-line Pharmacology Assignments

Writing Assignments

Clinical Experience

College Nursing Skills Laboratory



## Weekly Topics

See week-to-week schedule on the last page.

## Evaluation Methods

N101 is divided into three segments for evaluation purposes. A satisfactory grade in each segment is required for successful completion of the course. All evaluation tools derive from course objectives. The three segments are:

**College Nursing Skills Laboratory** performance is evaluated by student skills demonstration and written testing. Students are tested on critical elements of skills at the end of the semester. All critical elements must be performed at a satisfactory level. If a student is unsatisfactory, retesting is done. A student must pass testing of the critical elements after two times or will fail the course. All re-testing of critical elements must be completed before N101 final examination is taken.

**Clinical Experience** is graded on a Satisfactory-Unsatisfactory basis. Students are evaluated as Satisfactory or Unsatisfactory for each clinical objective required in the nursing course for which the student is enrolled. A student who receives a grade of satisfactory for every required objective receives a satisfactory grade for the clinical portion of the course. A student who receives a grade of unsatisfactory for one or more objectives has not demonstrated the necessary knowledge, skills and abilities for the established level of practice. Students who receive an unsatisfactory grade for the clinical portion of the course receive a grade of "F" for the course. See clinical evaluation tool for further clarification. Students are required to achieve 90% mastery in mathematics testing.

**Class Discussions/Seminar** testing occurs during scheduled N101 lecture times. The tests will be approximately 1 hour in length except for the final which will be 2 hours in length. There are 3 unit examinations, a comprehensive final examination, a critical thinking paper and MyNursingLab On-line Pharmacology Quizzes. Grade percentages are as follows:

### Grading:

Test # 1	20%
Test # 2	20%
Test # 3	20%
Final Exam	25%
CT Paper	10%
<u>MyNursingLab Quizzes</u>	<u>5%</u>
<b>Total -</b>	<b>100%</b>

**Students must take all exams during the scheduled testing times.** In the event of an emergency, and the student cannot take an exam during the scheduled testing time, the student must notify Patti Rexer (215-751-8572), or Tamika Curry (215-751-8573) prior to the start of the scheduled exam time. The faculty voice mail records the date and time of the call.

A newly constructed test will be given if a test is missed and the attendance policy is followed. This make-up test will be given by the faculty during office hours or at an hour mutually agreed upon by the student and faculty. The student assumes the responsibility for contacting the course coordinator to schedule the make-up test. **If the student does not notify a course coordinator prior to the start of the missed exam, the student will receive a 0 for that exam.**

Students arriving late for a test will not be given additional time for testing. Students are referred to the Nursing Student Handbook on the groupsite for further information concerning policies on test absence and test grading.

**Class :** Seventy percent is the minimum required for successful completion of this segment of N101. The range of grade scores is:

- A = 90%
- B = 80%
- C = 70%
- D = 60%
- F = Below 60%

Failure if any one or more of these three segments:

- College Nursing Skills Laboratory
- Clinical Experience
- Class Discussion/Seminar

results in failure of N101 regardless of performance in the other segment(s) of the course. Failure of N101 requires withdrawal from the nursing program.

### **The Center on Disability**

The Center on Disability provides accommodations and support services to all qualified students with disabilities attending Community College of Philadelphia to ensure their access to the College's academic programs, activities and services. Services are provided with the intention of assisting students to achieve maximum independence. The Center has a staff that includes a director, two counselors, disability resource assistant, disability aides and other support staff. Additional learning disabilities specialists provide tutoring services through the College's Learning Lab facilities. The Center on Disability is located in Room M1-22 (on the first floor of the Mint Building). Our phone number is 215-751-8050 (voice or TDD). Students with disabilities who are registered with the Center on

Disability must inform the instructor by the end of the first week of classes if special accommodations are requested.

For further information, refer to the CCP Center on Disability Student Handbook at the following Webpage:

[http://www.ccp.edu/site/academic/cod/student\\_handbook/index.html](http://www.ccp.edu/site/academic/cod/student_handbook/index.html)

Center on Disability information Webpages:

<http://www.ccp.edu/site/academic/cod/>

[http://www.ccp.edu/site/academic/cod/about\\_cod.html](http://www.ccp.edu/site/academic/cod/about_cod.html)

**CCP College Policies can be viewed at the following**

**Website:**[http://www.ccp.edu/site/academic/catalog/college\\_policies.html](http://www.ccp.edu/site/academic/catalog/college_policies.html)

**The CCP Student Code of Conduct is available online at:**

[http://www.ccp.edu/site/current/conduct\\_code/pdfs/CCP\\_Student\\_Code\\_of\\_Conduct.pdf](http://www.ccp.edu/site/current/conduct_code/pdfs/CCP_Student_Code_of_Conduct.pdf)

**COMMUNITY COLLEGE OF PHILADELPHIA**

**DEPARTMENT OF NURSING**

**NURSING 101**

**FALL 2010**

**REQUIRED TEXTS**

1. Adams, P., Holland, L., and Bostwick, P. (2010). *Pharmacology for nurses: A pathophysiologic approach*. (3<sup>rd</sup> ed.). Upper Saddle River, New Jersey: Pearson, Prentice Hall.

*My Nursing Lab (Online Pharmacology course)*. My Nursing Lab is the on-line pharmacology component that is a mandatory part of nursing 101. This component of the course will be part of your course grade. **You can purchase the Adams textbook anywhere.** Then you must separately purchase the access code for Mynursinglab from a website we will give you later. **Do not try to purchase Mynursinglab now.** We just checked the website and the third edition is not available for purchase yet. We will let you know which website to purchase it from and when it will be available. There is no rush for Mynursinglab anyway as we don't use it until October.

If you purchase the Adams textbook in the CCP bookstore, it will be bundled together with the Mynursinglab access code. I am told the textbook will be available for purchase in the bookstore in late August.

2. McKinney, E., James, S., Murray, S., and Ashwill, J. (2009). *Maternal-child nursing*. (3rd Ed.). Philadelphia: Elsevier/W. B. Saunders.
3. Potter, P. and Perry, A. (2009). *Fundamentals of nursing*, (7th Ed.). Philadelphia: Mosby/Elsevier.  
*Evolve Select from Elsevier* – Helpful (but optional) on-line resources are included with the McKinney and Potter textbooks if you purchase these books from the CCP bookstore. (They will be available in the bookstore in late August). You may choose to purchase the books elsewhere, but you will not have access to the online resources that accompany these books.
4. Smeltzer, S. C., Bare, B. G., Hinkle, J. L. and Cheever, K. H. (2009). *Brunner and Suddarth's textbook of medical-surgical nursing* (12th ed.). Philadelphia: Lippincott, Williams and Wilkins. (Smeltzer also has a lab and diagnostic test manual, listed on the next page, in case you want to buy both books.)

5. Weber, J., (2009). *Health Assessment in Nursing*. (4th ed.). Philadelphia: Lippincott, Williams and Wilkins.
6. Weber, J., (2009). *Nurse's Handbook of Health Assessment* (7th ed.). Philadelphia: Lippincott, Williams and Wilkins.

### **RECOMMENDED TEXTS**

#### **A. APA PUBLICATION MANUAL**

*Publication manual of the American Psychological Association* (6<sup>th</sup> ed.). (2009). Washington, DC: American Psychological Association.

#### **B. ONE MEDICAL/NURSING DICTIONARY** You may even want to consider getting a medical dictionary that you can download to your PDA instead of a book. Skyscape has many nursing references that you can purchase and download.

*Tabor's Cyclopedic Medical Dictionary* (2009).

*Mosby's Dictionary of Medicine, Nursing and Health Professions* (2008).

#### **C. ONE NURSING DRUG REFERENCE HANDBOOK**, (make sure it is the most recent edition—2010 or 2011). You may even want to consider getting a drug handbook that you can download to your PDA instead of a drug handbook. Skyscape has many nursing references that you can purchase and download.

##### **Some examples:**

*Nursing 2011 Drug Handbook.*

*Mosby's 2010 Nursing Drug Reference.*

*Saunders Nursing Drug Handbook 2011.*

*Nursing Spectrum Drug Handbook 2010.*

*PDR Nurse's Drug Handbook 2010.*

*Lexi-Comp Drug Information Handbook for Nursing 2010.*

*Nurse's Pocket Drug Guide 2011.*

*Delmar Nurse's Drug Handbook 2010.*

#### **D. ONE DIAGNOSTIC AND LABORATORY STUDIES BOOK** You may even want to consider getting a lab book that you can download to your PDA instead of a book. Skyscape has many nursing references that you can purchase and download.

Smeltzer, S. C. (2009). *Brunner and Suddarth's handbook of laboratory and diagnostic tests*. Philadelphia: Lippincott, Williams and Wilkins.

LeFever-Kee, J. (2009). *Laboratory and diagnostic tests with nursing implications* (8th ed.). Upper Saddle River, New Jersey: Pearson Prentice Hall.

Van Leeuwen, A. M. and Poelhuis, D. (2009). *Davis's comprehensive handbook of laboratory and diagnostic tests with nursing implications* (3rd ed.). Philadelphia: F.A. Davis.

Dunning III, M. B. and Fischbach, F. T. (2010). Nurse's quick reference to common laboratory and diagnostic tests (5th ed.). Philadelphia: Lippincott, Williams & Wilkins.

#### **E. ONE NURSING DIAGNOSIS BOOK**

Doenges, M. E. and Moorhouse, M. F. (2008). Application of nursing process and nursing diagnosis: An interactive text for diagnostic reasoning (5th ed.). Philadelphia: F.A. Davis.

Ackley, B. J. and Ladwig, G. B. (2010). Nursing diagnosis handbook: An evidence-based guide to planning care (9th ed.). Philadelphia: Mosby/Elsevier.

#### **F. DRUG CALCULATION WORKBOOK**

Macklin, D., Chernecky, C., and Infortuna, M. H. (2010). Math for clinical practice (2nd ed.). Philadelphia: Mosby/Elsevier.—highly recommended for everyone.

#### **G. NURSING PROCEDURE MANUAL**

Smith-Temple, A.J. (2005). Nursing guide to clinical procedures (5th Ed.). Philadelphia: Lippincott, Williams and Wilkins.

#### **H. MEDICAL TERMINOLOGY BOOK**

Willis, M. C. (2009). Medical terminology, quick and concise: A programmed *learning approach*. Philadelphia: Lippincott, Williams & Wilkins.—**especially recommended for ESL students, but helpful for all students.**

#### **I. BOOK FOR STUDENTS WHO SPEAK ENGLISH AS A SECOND LANGUAGE**

Hull, M. (2009). Medical English clear and simple: A practice-based approach to English ESL healthcare professionals. Philadelphia: F.A. Davis.

## Syllabus

### Nursing 132

**Placement in Curriculum:** Spring Semester

**Course Description:**

Concepts of physiological integrity, psychosocial integrity, a safe, effective care environment and health promotion/maintenance are further explored as students assess and intervene to improve function for clients and families experiencing threats to physiological and psychosocial integrity. Nursing care is aimed at restoring optimal functioning for clients/families and assisting them through life transitions, using the nursing process as a framework to help the learner think critically and integrate theory with practice.

**Prerequisite:** Nurs 101, Biol 109, Diet 111, Engl 101:

**Co-requisite:** Biol 110, Eng 102, Math 118

**Course Objectives:**

Upon completion of N132, the student will:

1. Prioritize the relationships among physiological, psychosocial, developmental and environmental risk factors to deliver safe and effective nursing care.
2. Communicate with members of the health care team using evidence-based practice concepts to provide safe and effective care to clients.
3. Demonstrate accountability by functioning within the legal/ethical parameters of nursing practice.
4. Demonstrate the integrations of risk reduction knowledge, skills and attitudes related to potential complications of treatment and disease by using research evidence, clinical experts and information technology to support clinical decision making.
5. Use therapeutic interventions for care of clients/families with psychosocial health alterations, accounting for client/family preferences, values and needs.
6. Acknowledge the client/family as a full partner in incorporating the principles of health promotion and disease prevention to promote optimal functioning through life transitions.

**Teaching Strategies:** The strategies listed below will be employed to teach the content of the course to actively demonstrate the strategies taught in the course:

Class Discussions/Seminar

Selected Readings  
Online Resource Materials  
Writing Assignments  
Clinical Experience  
College Nursing Skills Laboratory

### **Weekly Topics**

See attached week to week.

### **Evaluation Methods**

N132 is divided into three segments for evaluation purposes. A satisfactory grade in each segment is required for successful completion of the course. All evaluation tools derive from course objectives. The three segments are:

**College Nursing Skills Laboratory** performance is evaluated by student skills demonstration and written testing. Students are tested on critical elements of skills at the end of the semester. All critical elements must be performed at a satisfactory level. Students are required to achieve 90% mastery in mathematics testing. The final examination will be comprehensive. Students will be given two opportunities to be successful in skills testing. A failure to receive a pass in both portions of skills testing after 2 attempts will result and course failure regardless of numerical grade.

**Clinical Experience** is graded on a Satisfactory-Unsatisfactory basis. Students are evaluated as Satisfactory or Unsatisfactory for each clinical objective required in the nursing course for which the student is enrolled. A student who receives a grade of satisfactory for every required objective receives a satisfactory grade for the clinical portion of the course. A student who receives a grade of unsatisfactory for one or more objectives has not demonstrated the necessary knowledge, skills and abilities for the established level of practice. Students who receive an unsatisfactory grade for the clinical portion of the course receive a grade of “F” for the course. See clinical evaluation tool for further clarification.

**Class Discussions/Seminar** will take place online and in person. You will need to refer to the week-week schedule, and Webstudy. Also, testing occurs during scheduled N132 lecture times. The tests will be approximately 1 hour in length except for the final which will be 2 hours in length. There are 3 unit examinations, a comprehensive final examination, on-line pharmacology quizzes, a critical thinking paper, an evidence-based practice group project and a summative in class writing assignment.



Test #1	20%
Test #2	20%
Test #3	20%
Final Exam	20%
CT Paper	10%
In Class Writing Assignment	5%
My Nursing Lab Quizzes	5%
Evidence Based Practice Project	P/F (clinical requirement)

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100%

Seventy percent is the minimum required for successful completion of this segment of N132. The range of grade scores is:

- A = 90%
- B = 80%
- C = 70%
- D = 60%
- F = Below 60%

Students must attend all scheduled testing. In the event of an emergency, the student must call the course coordinator on the day of the test prior to the test. The faculty voice mail records the date and time of the call. Students arriving late for a test will not be given additional time for testing.

A newly constructed test will be given if a test is missed and the attendance policy is followed. This make-up test will be given by the faculty during office hours or at an hour mutually agreed upon by the student and faculty. The student assumes the responsibility for contacting the course coordinator to schedule the make-up test.

Students are referred to the Nursing Student Handbook for information concerning policies on test absence and test grading. Failure of any one or more of these three segments:

- College Nursing Skills Laboratory
- Clinical Experience
- Seminar/ Class Discussion

results in failure of N132 regardless of performance in the other segment(s) of the course. Failure of N132 requires withdrawal from the nursing program.

### **Students with Disabilities**

Students with disabilities who are registered with the Center on Disability must inform the instructor by the end of the first week of classes if special accommodations are requested.

For further information, please refer to the Community College of Philadelphia Student Handbook, or click on the following links on the school website:

<http://www.ccp.edu/site/academic/cod/>

[http://www.ccp.edu/site/academic/cod/about\\_cod.html](http://www.ccp.edu/site/academic/cod/about_cod.html)

The CCP Student Handbook is available online at:

<http://www.ccp.edu/site/offices/cod/cod.pdf>

**COMMUNITY COLLEGE OF PHILADELPHIA**

**DEPARTMENT OF NURSING**

**SPRING 2010**

**Book List**

**REQUIRED TEXTS:**

Adams, P., Holland, L., & Bostwick, P. (2008). *Pharmacology for nurses: A pathophysiological approach*, (2<sup>nd</sup> ed.). Upper Saddle River, New Jersey: Pearson Prentice Hall.

Castillo, S. (2010). *Strategies, techniques and approaches to thinking*. (4<sup>th</sup> Ed.). Philadelphia: Elsevier/W.B. Saunders.

Ignatavicius, D.D. and Workman, M.L. (2010). *Medical-surgical nursing: Critical thinking for collaborative care* (6<sup>th</sup> ed.). Philadelphia: Elsevier/W.B.Saunders.

McKinney, E., James, S., Murray, S., and Ashwill, J. (2009). *Maternal-child nursing*. (3<sup>rd</sup> Ed.). Philadelphia: Elsevier/W. B. Saunders.

*My Nursing Lab Clinical Skills*. (2009). Pearson Health Science. Prentice Hall.

Potter, P.A. and Perry, A.G. (2009). *Fundamentals of nursing*, (7<sup>th</sup> ed.). St. Louis: Mosby Elsevier.

Smith-Temple, A.J. (2005). *Nurses guide to clinical procedures*, (5<sup>th</sup> ed.). Philadelphia: Lippincott, Williams & Wilkins.

Varcarolis, E.M. and Halter, M.J. (2009). *Essentials of psychiatric and mental health nursing*. Philadelphia: W. B. Saunders.

Weber, J. (2008). *Nurses handbook of health assessment*. (Textbook and handbook) (6<sup>th</sup> Ed.). Philadelphia: Lippincott Williams and Wilkins.

**RECOMMENDED:**

**B. APA PUBLICATION MANUAL**

*Publication manual of the American Psychological Association* (6<sup>th</sup> ed.). (2009).

Washington, DC: American Psychological Association.

**C. ONE MEDICAL/NURSING DICTIONARY, for example:**

*Tabor's cyclopedia medical dictionary.* Philadelphia: F.A. Davis.

*Mosby's medical, nursing and allied health dictionary.* Philadelphia, Mosby.

Miller-Keane. *Encyclopedia & dictionary of medicine, nursing and allied health.*  
Philadelphia: Saunders

**D. ONE NURSING DRUG REFERENCE HANDBOOK,** (make sure to purchase the most recent edition) **for example:**

*Davis' drug guide for nurses.* Philadelphia: F.A. Davis.

*Springhouse nursing drug guide.* Springhouse, PA; Springhouse Publishing.

*Delmar, PDR nurse's drug handbook.* Delmar, NY: Delmar Publishing.

*Mosby's drug guide for nurses.* Philadelphia: Mosby.

*Mosby's nursing drug handbook.* Philadelphia: Mosby.

*Mosby's nursing drug reference.* Philadelphia: Mosby.

**E. ONE HANDBOOK OF DIAGNOSTIC AND LABORATORY STUDIES, for example:**

*Delmar's guide to laboratory and diagnostic tests.* Delmar, NY: Delmar Publishing.

Fishback, F. *Nurse's quick reference to common laboratory and diagnostic tests.*  
Philadelphia: Lippincott.

Pagano & Pagano. *Mosby's diagnostic and laboratory test reference.* Philadelphia:  
Mosby.

**F. ONE NURSING DIAGNOSIS BOOK, for example:**

Gulanick, M. and Myers, J. L. (2006). *Nursing care plans: Nursing diagnosis and interventions,* (6<sup>th</sup> ed.). Philadelphia: Mosby.

Ludwig, G. and Ashley, B. (2007). *Nursing diagnosis handbook – An evidence guide to planning care.* Elsevier: Mosby.

**G. DRUG MATH WORKBOOK**

Macklin, D., Chernecky, C., and Infortuna, M. H. (2010). *Math for clinical practice* (2<sup>nd</sup> ed.). Philadelphia: Elsevier.

## **SYLLABUS N231-2010**

**Placement in Curriculum:** Fall Semester

### **Course Description:**

Nursing care for clients/families experiencing common health alterations across the lifespan in a variety of settings are studied in depth. Students synthesize and integrate knowledge, skills and abilities associated with nursing practice to develop a plan of care for clients/families to assure the delivery of safe and effective care, to facilitate physiological and psycho-social integrity, and promote health. Clinical decision making skills and resource management principles are introduced.

**Prerequisite:** Nurs 132, Engl 102, Biol 110, Math 118;

**Corequisites:** Biol 241, Soc 101, CIS 103.

### **Course Objectives:**

Upon completion of N231, the student will:

1. Evaluate the relationships among physiological, psychosocial, developmental and environmental risk factors, and systems influences to plan and implement safe and effective nursing care.
2. Plan, implement and evaluate safe and effective client centered care for clients/families across the life span in both transitional and permanent settings using communication, resource management, and clinical decision making principles.
3. Demonstrate accountability by functioning within the legal/ethical parameters of nursing practice.
4. Plan, implement and evaluate therapeutic nursing interventions to reduce risk for clients and families across the lifespan in a variety of settings using research evidence and collaborative strategies.
5. Using a client/family centered approach, plan, implement and evaluate care of clients and families with complex psychosocial and physiological health alterations in a variety of settings.
6. Plan, implement, and evaluate the utilization of appropriate resources and patient teaching to engage patients/families in active partnerships to maximize self-care and optimal functioning across the lifespan and at transitions in care.

**Teaching Strategies:** The strategies listed below will be employed to teach the content of the course to actively demonstrate the strategies taught in the course:

Class Discussions/Seminar

Online Activities

Case Studies

Selected Readings  
Writing Assignments  
Student Activities  
Presentations  
Clinical Experience  
Simulation

## Weekly Topics

See attached week to week.

## Evaluation Methods

N231 is divided into three segments classroom, clinical and seminar for evaluation purposes. All evaluation tools derive from course objectives. The following are components of each segment that contribute to the evaluation process:

**Clinical Experience** is graded on a Satisfactory-Unsatisfactory basis. Students are evaluated as Satisfactory or Unsatisfactory for each clinical objective required in the nursing course for which the student is enrolled. A student who receives a grade of satisfactory for every required objective receives a satisfactory grade for the clinical portion of the course. A student who receives a grade of unsatisfactory for one or more objectives has not demonstrated the necessary knowledge, skills and abilities for the established level of practice. Students who receive an unsatisfactory grade for the clinical portion of the course receive a grade of “F” for the course. See clinical evaluation tool for further clarification.

**Seminar** is graded based on student participation and per the guidelines and objectives of each individual online seminar. There will be opportunity for group discussions in the online forum and individual exploration of the content areas.

In the N231 Seminar there are 24 graded items. The Forums will be graded on a yes or no basis according to the *Quality Posting Guidelines*. These 24 items will equal 10% of your total grade. The following scale will be used in calculation your seminar assignment grade. This equals 10% of your total grade.

"Yes"	Grade
24	100
23	90
22	80
21	70
20	60
19	50
18	40
17	30

16	20
15	10
14 or less	0

**Objective Examinations** with questions based on content which was presented and discussed during the designated class time. The tests will be one hour in length with the exception of the final examination which is two hours long. The tests are given, will be given during scheduled N231 lecture times and the final examination will be given at the time designated by the college during finals week.

**Critical Thinking Paper** will be written based on the topic and criteria presented to the students. A rubric and thorough explanation of the expectations of the paper will be presented to the students during the first week of school, and will include the date the paper is due.

#### **Outline of Value of Each Evaluation Measure**

Test # 1	20%
Test #2	20%
Test #3	20%
Test #4 (Comprehensive)	20%
Online Seminar	10%
Critical Thinking Paper	<u>10%</u>
	100%

Seventy percent is the minimum required for successful completion of N231, in addition to a satisfactory completion of each clinical experience. The range of grade scores is:

- A = 90%
- B = 80%
- C = 70%
- D = 60%
- F = Below 60%

Students are referred to the Student Handbook for information concerning policies on tests, grading and absences. Failure of either the class room (which includes the content from the seminar experience) segment or the clinical segment results in failure of N231. Failure of N231 requires withdrawal from the nursing program.

### **REQUIRED TEXTS**

- Adams, M., Holland, L., and Bostwick, P., (2008). Pharmacology for nurses: A pathophysiological approach. (2nd edition). Saddle River, New Jersey. Prentice Hall.
- Anderson, E. and McFarlane, J (2008). Community as Partner. (5th Edition). Philadelphia: Lippincott, Wolters Kluwer..
- Gulanick, M. and Myers, J.L. (2003). Nursing Care Plans: Nursing Diagnosis and Interventions, (5th Edition). Philadelphia: Mosby.
- Ignatavicius, D.D. and Workman, M.L. (2006). Medical-Surgical Nursing: Critical Thinking for Collaborative Care, (6th Edition). Philadelphia: Elsevier/W.B.Saunders.
- Macklin, D., Chernecky, C., Infortuna, M.H. (2005). Math for Clinical Practice. Philadelphia: Elsevier.
- McKinney, E.S. James R. et al (2009). Maternal-Child Nursing (3rd ed.) St. Louis:
- Ohman, Kathleen A. (2010). Davis's Q&A for the NCLEX-RN Examination. Philadelphia FA Davis.
- Smith-Temple, A.J. (2005). Nurses Guide to Clinical Procedures, (5th Edition). Philadelphia: Lippincott, Williams & Wilkins.
- Vaccaro, E. (2009). Essentials of Psychiatric Mental Health Nursing: A Communication Approach to Evidence-Based Care Nursing: A Clinical Approach. Philadelphia: W.P. Saunders.

### **RECOMMENDED TEXTS**

#### **A. ONE MEDICAL/NURSING DICTIONARY, for example:**

Tabor's Cyclopedia Medical Dictionary. Philadelphia: F.A.Davis.  
Mosby's Medical, Nursing and Allied Health Dictionary: Philadelphia, Mosby.  
Miller-Keane. Encyclopedia & Dictionary of Medicine, Nursing and Allied Health.  
Philadelphia: Saunders

#### **B. ONE NURSING DRUG REFERENCE HANDBOOK, (make sure it is the most recent edition) for example:**

Davis' Drug Guide for Nurses, Philadelphia: F.A. Davis  
Springhouse 2010 Drug Guide. Springhouse, PA; Springhouse Publishing.



Delmar, PDR Nurses' Drug Handbook. Delmar, NY: Delmar Publishing.  
Mosby's Drug Guide for Nurses. Philadelphia: Mosby.  
Mosby's Nursing Drug Handbook. Philadelphia: Mosby.  
Mosby's Nursing Drug Reference: Philadelphia: Mosby.

**C. ONE HANDBOOK OF DIAGNOSTIC AND LABORATORY STUDIES, for example:**  
Delmar's Guide to Laboratory and Diagnostic Tests. Delmar, NY: Delmar Publishing.  
Fishback, F. (2005). Nurse's Quick Reference to Common Laboratory and Diagnostic Tests, Philadelphia: Lippincott.  
Pagano and Pagano. (2005). Mosby's Diagnostic and Laboratory Test Reference, (7th Edition). Philadelphia: Mosby.

## Syllabus

**Course Number: Nursing 232**

**Course Title: Nursing IV**

### **Course Description:**

Nursing care for clients/families experiencing common health alterations of cell structure and/or function, ischemia, obstruction, trauma, immune response, and infection are studied. Health alterations of the neurosensory, digestive/elimination, renal/urinary, endocrine, and fluid systems are examined in depth. Psychosocial health alterations are studied. Management, ethical and legal foundations for nursing practice are emphasized.

**Pre or co-requisites:** Nursing 231, Bio 241, Soc 101, CIS 103

**Co-requisites:** Humanities elective, General Elective

### **COURSE OBJECTIVES**

1. The student will independently plan, implement and evaluate both patient care outcomes and system effectiveness in order to deliver safe and effective care in a variety of practice settings.
2. The student will work effectively with inter-professional teams to develop a comprehensive plan of care by fostering communication, mutual respect and shared decision-making to achieve quality patient care in both transitional and permanent settings.
3. The student will demonstrate accountability by functioning within the legal/ethical parameters of nursing practice. The student will explain actual and potential physiological and psychosocial health alterations.
4. The student will use data to minimize risk of harm to patients across the life span and monitor outcomes of care processes to make changes in order to continuously enhance the quality and safety of clients/families.
5. The student will provide high quality, comprehensive care for clients/families based on an understanding of complex psychosocial and physiological health alterations, respect for client and family preference, values and needs.
6. The student will evaluate and modify as needed client/family's' response to therapy in order to maximize self-care and optimal functioning across the lifespan.

## Teaching Strategies:

Lecture  
analysis of case studies  
discussion  
demonstrations  
individual projects  
simulation  
clinical experiences.

## Evaluation Methods

<b>Test #1</b>	<b>20%</b>
<b>Test #2</b>	<b>20%</b>
<b>Test #3</b>	<b>20%</b>
<b>Comprehensive Final Examination</b>	<b>20%</b>
<b>Seminar</b>	<b>10%</b>
<b>Critical Thinking Paper</b>	<b>10%</b>

N232 is divided into two segments for evaluation purposes. A satisfactory grade in each segment is required for successful completion of the course. All evaluation tools derive from the course objectives. Failure of either of the segments, lecture or clinical laboratory, results in failure of the course regardless of performance in the other segment of the course. Failure requires withdrawal from the nursing program.

**Lecture:** Testing occurs during scheduled N232 lecture times. The tests will be approximately 1 hour in length except for the final which will be 2 hours in length. Seventy percent is the minimum required for successful completion of this segment of N232. The range of grade scores is:

A = 90%  
B = 80%  
C = 70%  
D = 60%  
F = 50%

Students are referred to the **Student Handbook** for information concerning policies on test absence and test re-grading.

**Seminar:** The N232 seminar is offered as a hybrid, meaning partially online and partially in the classroom setting. In the N232 Seminar there are 22 graded items that will be graded on a Yes or No basis.

In order to receive a “Yes” the assignment must be completed in a satisfactory matter by the assigned time frame. To receive a “Yes” for class attendance you must come to class on time and be an active participant. Students coming to class and participating in other

activities during class such as text messaging will receive a “no” for attendance. The reasons for receiving a “no” for attendance are not exclusive to this list.

The guideline for a quality posting in the forum will follow.

The following scale will be used in calculation your seminar assignment grade. This equals 10% of your total grade.

<b>“Yes”</b>	<b>Grade</b>
22	100
21	90
20	80
19	70
18	60
17	50
16	40
15	30
14	20
13	10
12 or less	0

### **Quality Posting Guidelines**

Please follow these guidelines when posting in the forums. In order to achieve maximum value of the class forum it is important that all students comply with the following guidelines. The class forum takes the place of your in class time; we would meet for 1 hour each week *you should plan to spend a minimum of one hour weekly in the forum* (this does not include prep time, reading time or time to complete assignments). The forum is a discussion—your seminar class time. The goal of the forum is to collaborate with each other; it is just not for the instructor to read. Everyone should read the posts made by everyone in the forum.

Forums are graded on a Yes/No basis. In order to receive a “Yes” all categories of the post must receive a “Yes.” You will be required to make two posts in each forum, pay close attention to the directions. At least one of your posts must be in reply to another student’s comment, unless otherwise indicated. When you respond you must add to the conversation and content of the post. Your response must be related to student’s reflection for which you are commenting.

**Answers and comments in a post must be well thought out estimate a minimum of 1 paragraph or 4 sentences long unless requested to do otherwise.** When responding in the forum you must try to construct your response as grammatically correct as possible, i.e., proper capitalization, spelling and grammar, no abbreviations, no use of computer slang, happy/sad face is fine at the end of the post. ☺

A student can post more than minimum requirements. Your **first post must be by 7:00pm Thursday night**. The week closes Monday at 7:00pm. Reflections made after the week closes are not graded.

**Clinical laboratory:** Performance is graded on a satisfactory or unsatisfactory basis. Criteria are detailed in the clinical evaluation tool.

**Required Texts:**

Adams, M., Holland, L. & Bostwick, P. (2008). *Pharmacology for Nurses: A pathophysiologic Approach* (2<sup>nd</sup> ed.). Saddle River: Pearson / Prentice Hall.

Billings, D. (2007). Lippincott's Q&A Review for NCLEX-RN. Philadelphia: Lippincott.

Ignatavicus, D. et al. (Eds.) (2006). *Medical-Surgical Nursing Across the Health Care Continuum* (5.th ed.). Philadelphia: W.B. Saunders.

Piliteri, A. (2007) *Maternal & Child Health Nursing*. (5th ed.) Philadelphia: Lippincott

Varc Carolis, E. M. (2009). *Essentials of Mental Health Nursing*.(1st ed.). Philadelphia: W.B. Saunders.

## FUNDING SOURCES

Funding Source	Title of Grant	Description	Amount	Project Period
<b>Endowments</b>				
Arronson Lavine Scholarship  The Independence Foundation, Philadelphia, PA  Kohn Memorial Fund	Arronson Lavine Scholarship  Independence Foundation Scholarship Fund  Harold Kohn Memorial Scholarship	These funds generate revenues that provide scholarships to nursing students. Each year up to eight scholarships awards are made to nursing students entering the second year of the program. Students contract to work for one year in a Philadelphia hospital or nursing home.	\$100,000  \$250,000  \$100,000	1981 to present  1984 to present  1999 to present
<b>Scholarships and Student Support</b>				
Southeast Pennsylvania Area Health Education Center	Area Health Education Center Program (AHEC): Abuse and Violence	This grant funded the enhancement of student training through the development and implementation of a conference on abuse and violence.	\$3,500	11/12/1998-12/31/2000

<b>Funding Source</b>	<b>Title of Grant</b>	<b>Description</b>	<b>Amount</b>	<b>Project Period</b>
Pennsylvania Higher Education Foundation	McKenzie Scholarship	This competitive scholarship for nursing students provides funding to aid students with the cost of tuition, books, other expenses required by the school, etc.	\$28,472	5/22/2007-6/30/2010
Independence Blue Cross	Nursing Education Grant	This competitive scholarship for nursing students provides funding to aid students with the cost of tuition, books, other expenses required by the school, etc.	\$59,335	7/1/2004-6/30/2010
National Institutes of Health Office of General Medical Sciences (Subcontract with Thomas Jefferson University)	Project IMPART (Improving Minority Professionals Access to Research Tracks): A Research Program for Minority Students	This grant provided an innovative research-based program for nursing graduates to transfer into the RN-BSN program in the College of Allied Health Sciences at Thomas Jefferson University. Project Impart is designed to improve the academic potential of underrepresented minority student participants, to facilitate their transition to advanced practice, to prepare them to address health issues of minority populations, and to formulate and achieve goals related to the integration of research into their professional career.	\$96,472	9/30/1994-9/29/2002
The Independence Foundation, Philadelphia PA	Community Nursing Interns: A Collaborative Model to Address Community-Based	Assisted five minority nursing graduates of Project IMPART with tuition and a stipend to complete their BSN degree at Thomas Jefferson University.	\$532,174	1/1/1997 – 12/5/2009

<b>Funding Source</b>	<b>Title of Grant</b>	<b>Description</b>	<b>Amount</b>	<b>Project Period</b>
	Nursing Initiatives for Underserved Populations	This grant supported the Independence Foundation Community Nursing Interns project associated with the 19130 Zip Code Project. In return for tuition and a stipend, three minority registered nurse Interns will develop and evaluate community-based care initiatives for under-served populations and serve as faculty extenders in the Zip Code Project.		
National Institutes of Health	Bridges to Baccalaureate/Research Models for Change	This grant was a collaborative project with Drexel University to support minority students as they considered a career in research.	\$602,807	4/1/2005-3/31/2008
Pennsylvania Higher Education Foundation	Nursing Education Grant	This scholarship for nursing students provides funding to aid students with the cost of tuition, books, other expenses required by the school, etc.	\$768,736	9/1/2003-6/30/2011
U.S. Department of Health and Human Services	Scholarships in Nursing for Disadvantaged Students (SDS Program)	Scholarships for nursing students are provided to cover the cost of tuition, books, other expenses required by the school, etc. Scholarships are provided to disadvantaged students and awards are based on family income-level and other eligibility criteria.	\$1,521,156	7/1/1995-6/30/2011



<b>Faculty and Curriculum Development</b>				
Independence Foundation	Project Support for Fostering Geriatrics	This grant will provide additional funding for dissemination of materials to students and faculty in support of activities undertaken in the Fostering Geriatrics in Pre-Licensure Nursing Education grant.	\$46,500	9/22/2009-1/14/2011
US Department of Health and Human Services (Subcontract with Drexel University)	Faculty Development Integrated Technology into Nursing Education and Practice Initiative	This grant will support the training and use of emerging technologies by nursing faculty, including simulation equipment and personal digital assistants used for clinical access to online assessment tools.	\$55,387	7/1/2008-6/30/2011
Philadelphia Workforce Development	Articulated Collegiate Nursing Care	This grant supported development of seamless articulation model for LPNs studying for ADN/RN.	\$100,097	6/27/2005-6/30/2008
The Helene Fuld Health Trust, HSBC Trustee	Community-Based Nursing National Dissemination Conferences	This grant supported the development and implementation of three national conferences to assist BSN and ADN educators to integrate community based care into the nursing curriculum: Atlanta, Chicago, Las Vegas, Boston, Berkeley, and Philadelphia. The grant also supported the development of videos and establishment of a computer-based ListServe for conference participants to continue sharing strategies on implementing a community-based curriculum.	\$274,747	6/15/1998 – 5/15/2002

John A. Hartford Foundation	Fostering Geriatrics in Pre-Licensure Nursing Education: Phase 1 and 2	This grant will support the development and dissemination of curriculum guidelines, teaching strategies and tools for integrating essential nursing actions for older adults into pre-licensure nursing programs.	\$1,024,508	1/15/2007-3/31/2012
W. K. Kellogg Foundation	Nursing-Home-Community College Partnership	The purpose of this national grant is to develop a replicable model to enhance the teaching of geriatrics in long-term care settings.	\$1,200,000	1986-1994
The Independence Foundation, Philadelphia, PA	19130 Zip Code Project	The purpose of this grant is to develop a replicable model to meet local nursing needs in a community-based health care system. An initial assessment of the college's neighborhood and health-related needs of agencies in the 19130 Zip Code was conducted and nursing students met local nursing needs in a service-learning model. Development and implementation of evaluation measures to assess the impact of health promotion and health education activities within the 19130 zip code. Development of a tool to describe and track comprehensive health promotion services to vulnerable population in neighborhood based sites and to disseminate tools to fund nursing centers affiliated with the National Nursing Center Consortium (NNCC).	\$1,756,316	11/1995 – 12/31/2010

**COMMUNITY COLLEGE OF PHILADELPHIA**

**DEPARTMENT OF NURSING**

**CLINICAL EVALUATION TOOL**

Student Name \_\_\_\_\_

Student J Number \_\_\_\_\_

N101 Fall 200\_ Acute Care

Agency/unit:

Faculty:

\_\_\_\_\_

N132 Spring 200\_ Acute Care

Agency/unit:

Faculty:

\_\_\_\_\_

N231 Fall 200\_ Acute Care Long Term  
Care/Community (circle)

Agency/unit:

Agency/unit

Faculty:

Faculty:

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**N232 Spring 200\_**  
**Care/Community (circle)**

**Acute Care**

**Long Term**

**Agency/unit:**

**Agency/unit:**

**Faculty:**

**Faculty:**

### **INTRODUCTION**

Clinical experiences in the nursing program are designed to prepare the student for the practice of nursing in Pennsylvania which means “diagnosing and treating human responses to actual and potential health problems through such services as case finding, health teaching, health counseling, and provision of care supportive to or restorative of life and well-being, and executing medical regimens as prescribed by a licensed physician or dentist” (Pennsylvania Act No. 179, P.L. 1607, December 1986).

All clinical experiences are supervised directly by a clinical nursing faculty member in order to facilitate student learning and insure the safety of the public. The clinical nursing faculty member evaluates each nursing student based on clinical objectives specific for each nursing course. The purpose of clinical evaluation is to determine whether the student has the necessary knowledge, skills and abilities for the established level of practice.

Each student has an obligation to abide by all rules, regulations, policies and procedures governing acceptable behavior at the College and at all affiliating hospitals and agencies. Failure to follow established rules, regulations, policies and procedures can result in disciplinary action up to and including removal from the nursing program.

## **EVALUATION PROCESS**

The clinical nursing faculty member informs students of required clinical objectives at the beginning of each course. Each student will be evaluated as Satisfactory or Unsatisfactory for every clinical objective required in the nursing course for which the student is enrolled. The clinical objectives for each course constitute the established level of practice for that course. Satisfactory performance is essential for each clinical objective required in each of the four nursing courses to progress in the nursing program.

Every student is evaluated at mid-semester during a conference with the clinical faculty member. The purpose of mid-semester evaluation is to assess the student's progress in meeting clinical objectives for the course at mid-semester and to provide the student the opportunity to collaborate with the faculty to develop goals for the remainder of the semester. The student's performance on each clinical objective is discussed. At the midterm, students may receive an MP (making progress), NI (needs improvement) or NO (not observed) A student who receives an NI will be given a remediation plan. The plan should include goals for meeting the objective. If the student is unable to perform skills being learned in the current semester, the student shall receive a Remediation Plan (RP) and provide evidence of remediation to the clinical faculty by the following week.

If the student is unable to perform clinical skills learned in previous semester(s), the student shall receive a Clinical Warning (CW). A student who receives a CW or RP is at risk for receiving a grade of unsatisfactory for one or more objectives at the end of the semester and therefore, a failing grade for the course.

Each student will be evaluated as Satisfactory or Unsatisfactory for each clinical objective required in the nursing course for which the student is enrolled at the end of the semester. A student who receives a grade of satisfactory for every clinical objective achieves a satisfactory grade for the clinical portion of the course. Exceptional performance will be noted in the Faculty Comment section.

A student who receives a grade of unsatisfactory for one or more objectives at the end of the semester has not demonstrated the necessary knowledge, skills and abilities for the

established level of practice. The student receives an unsatisfactory grade for the clinical portion of the course and, therefore, a grade of “F” for the course.

A student having difficulty meeting clinical objectives during a semester will receive written notification by the clinical nursing faculty member. The written notice is either a “Remediation plan “(RP) or a “Clinical Warning” (CW).

- Remediation Plan (RP) is given to a student who needs to improve performance of a clinical objective. An RP will be written by the clinical nursing faculty member. When a student receives an RP, the student has one week to remediate as per the remediation plan and shall be re-evaluated by the clinical nursing faculty member. If the student is not satisfactory following remediation, a clinical warning will be given. A written summary of this process is signed by both the clinical nursing faculty member and the student and forwarded to the faculty course coordinator.
- Clinical Warning (CW) is given to a student whose activity or lack of activity 1) does not meet acceptable standards of legal and ethical professional nursing practice, and/or 2) threatens the client’s safe, effective care environment, physiological integrity, psychosocial integrity or health promotion. A clinical warning indicates that the student does not have the necessary knowledge, skills and abilities for the established level of practice. A clinical warning will be given when the student is unable to perform a skill that was evaluated as satisfactory in the previous nursing course.

The clinical instructor shall inform the student of the first clinical warning and the student shall be removed immediately from clinical experience. Parameters, including a date to re-evaluate the student, will be set for the student’s future performance. A written summary of the clinical warning, signed by both the clinical nursing faculty member and the student, will be attached to the student’s clinical evaluation tool. The student shall not return to clinical experience until the student is evaluated by a nursing faculty member. The course teaching team shall be notified of the clinical warning.

If a student receives a second clinical warning, the process described above will occur and will be followed by a meeting between the student, clinical nursing faculty member (if s/he deems to attend), the faculty course coordinator and the

head of the nursing program (or her designee) to discuss the student's progress in the course. The course teaching team is notified of the clinical warning.

If a student receives a third clinical warning, the student meets with the faculty course coordinator, clinical nursing faculty member (if s/he deems to attend) and the head of the nursing program (or her designee). A third clinical warning indicates that the student does not have the necessary knowledge, skills and abilities for the established level of practice. The course teaching team is notified of the clinical warning. If the course teaching team determines that the student does not demonstrate the necessary knowledge, skills and abilities for the established level or practice, the course teaching team will assign a grade of unsatisfactory for clinical performance. The student will be removed from the nursing course and receive a grade of "F" for the course.

**Note – an asterisk (\*) next to an item indicates the semester in which a student must first receive a satisfactory assessment.**

**Please use the following legend at midterm:**

**S = satisfactory**

**MP = making progress (may need a remediation plan)**

**NI = needs improvement (requires a remediation plan/warning)**

**NO = not observed**

**Please use the following legend at the final evaluation**

**S = Satisfactory**

**U = Unsatisfactory**

**I. PROFESSIONAL ACCOUNTABILITY**

		<b>N101</b>	<b>N101</b>	<b>N132</b>	<b>N132</b>	<b>N231</b>	<b>N231</b>	<b>N232</b>	<b>N232</b>
		<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>
A	Attends clinical laboratory. List number of absences.  N101  N132  N231  N232		*						
B	Is punctual for clinical laboratory. List number of latenesses.  N101  N132  N231  N232		*						
C	Notifies the instructor and agency prior to any absence or lateness to facilitate safe reassignment of clients		*						



		<b>N101</b>	<b>N101</b>	<b>N132</b>	<b>N132</b>	<b>N231</b>	<b>N231</b>	<b>N232</b>	<b>N232</b>
		<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>
D	Dresses according to established CCP clinical uniform policy		*						
E	Maintains current CPR certification, health insurance, and liability insurance		*						
F	Adheres to nursing ethical guidelines		*						
G	Functions within legal parameters		*						
H	Adheres to all clinical agency policies and procedures		*						
I	Adheres to all CCP policies and procedures		*						
J	Behaves in a professional manner		*						
K	Maintains confidentiality of patient information		*						
L	Identifies own professional practice limitations		*						
M	Uses clinical time efficiently		*						

		<b>N101</b>	<b>N101</b>	<b>N132</b>	<b>N132</b>	<b>N231</b>	<b>N231</b>	<b>N232</b>	<b>N232</b>
		<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>
N	Participates actively in clinical learning		*						

**Comments (list course and year)**

## **II. PATIENT-CENTERED CARE**

		<b>N101</b>	<b>N101</b>	<b>N132</b>	<b>N132</b>	<b>N231</b>	<b>N231</b>	<b>N232</b>	<b>N232</b>
		<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>M/S</b>	<b>Final</b>	<b>M/S</b>	<b>Final</b>
						<b>Midterm</b>		<b>Midterm</b>	
A	Elicit patient values, preferences and expressed needs as part of clinical interview, implementation of care and evaluation of care.		*						
B	Communicate patient values, preferences and expressed needs to other members of health care team, i.e. Communicates with multidisciplinary team about diet, discharge planning, etc.				*				
C	Provide patient-centered care with sensitivity and respect for the diversity of human experience.		*						

		<b>N101 Midterm</b>	<b>N101 Final</b>	<b>N132 Midterm</b>	<b>N132 Final</b>	<b>N231 M/S Midterm</b>	<b>N231 Final</b>	<b>N232 M/S Midterm</b>	<b>N232 Final</b>
D	Assess presence and extent of pain and suffering, i.e. uses pain scales, etc.		*						
E	Elicit expectations of patient and family for relief of pain, discomfort or suffering, i.e. – Collaborates with client and family about pain management				*				
F	Use effective treatments to relieve pain and suffering in light of patient values, preferences, and expressed needs.						*		
G	Assess levels of physical and emotional comfort.								
H	Initiate requests for help when appropriate to situation.		*						
I	Remove barriers to presence of families and other designated surrogates based on patient preferences, i.e. Respects patient/family decision making, allow family participation with patient consent				*				

		<b>N101 Midterm</b>	<b>N101 Final</b>	<b>N132 Midterm</b>	<b>N132 Final</b>	<b>N231 M/S Midterm</b>	<b>N231 Final</b>	<b>N232 M/S Midterm</b>	<b>N232 Final</b>
J	Assess level of patient's decisional conflict and provide access to resources, i.e. Information, referrals, language barriers						*		
K	Engage patients or designated surrogates in active partnerships that promote health, safety and well-being and self-care management, i.e. patient/family teaching related to risks, etc.						*		
K	Recognize the boundaries of therapeutic relationships, i.e. Understand legal and ethical implications of patient centered care		*						
L	Facilitate informed patient consent to care.				*				
M	Assess own level of communication skill in encounters with patients and families, i.e. uses the process recording, etc.		*						
N	Participate in building consensus or								*

		<b>N101 Midterm</b>	<b>N101 Final</b>	<b>N132 Midterm</b>	<b>N132 Final</b>	<b>N231 M/S Midterm</b>	<b>N231 Final</b>	<b>N232 M/S Midterm</b>	<b>N232 Final</b>
	resolving conflict in the context of patient care, i.e. considers alternate solutions using evidence.								
O	Communicate care provided and needed at each transition in care, i.e. – written and verbal reports, etc.		*						

**Comments:(list course and year)**

### **III. TEAMWORK and COLLABORATION\***

		<b>N101 Midterm</b>	<b>N101 Final</b>	<b>N132 Midterm</b>	<b>N132 Final</b>	<b>N231 M/S Midterm</b>	<b>N231 Final</b>	<b>N232 M/S Midterm</b>	<b>N232 Final</b>
A	Demonstrate awareness of own strengths and limitations as a team member.				*				
B	Initiate plan for self-development as a team member, i.e. sets goals, uses resources						*		

		<b>N101 Midterm</b>	<b>N101 Final</b>	<b>N132 Midterm</b>	<b>N132 Final</b>	<b>N231 M/S Midterm</b>	<b>N231 Final</b>	<b>N232 M/S Midterm</b>	<b>N232 Final</b>
C	Act with integrity, consistency and respect for differing views.		*						
D	Function competently within own scope of practice as a member of the health care team.		*						
E	Assume role of team member or leader based on the situation.						*		
F	Clarify roles and accountabilities under conditions of potential overlap in team-member functioning, i.e. Delegating appropriately						*		
G	Integrate the contributions of others who play a role in helping patient/family achieve health goals, i.e. Uses the multidisciplinary team						*		
H	Communicate with team members, adapting own style of communicating to needs of the team and situation.		*						

		<b>N101 Midterm</b>	<b>N101 Final</b>	<b>N132 Midterm</b>	<b>N132 Final</b>	<b>N231 M/S Midterm</b>	<b>N231 Final</b>	<b>N232 M/S Midterm</b>	<b>N232 Final</b>
I	Demonstrate commitment to team goals, i.e. Aware of unit work, assist team members as needed		*						
J	Solicit input from other team members to improve individual, as well as team, performance, i.e. Debriefs with team about team functioning								
K	Initiate actions to resolve conflict.						*		
L	Follow communication practices that minimize risks associated with handoffs among providers and across transitions in care, i.e. Gives an accurate and timely report. Uses SBAR				*				
M	Assert own position/perspective in discussions about patient care.								*
N	Choose communication styles that diminish the risks associated with authority gradients among team members, i.e. student/faculty interactions								*

		<b>N101 Midterm</b>	<b>N101 Final</b>	<b>N132 Midterm</b>	<b>N132 Final</b>	<b>N231 M/S Midterm</b>	<b>N231 Final</b>	<b>N232 M/S Midterm</b>	<b>N232 Final</b>
O	Participate in designing systems that support effective teamwork.  i.e. Traces root cause of error or near miss.								*

**Comments: (list course and year)**

#### **IV. EVIDENCE-BASED PRACTICE\***

		<b>N101 Midterm</b>	<b>N101 Final</b>	<b>N132 Midterm</b>	<b>N132 Final</b>	<b>N231 Midterm</b>	<b>N231 Final</b>	<b>N232 Midterm</b>	<b>N232 Final</b>
A	Participate effectively in appropriate data collection and other research activities, i.e. discusses evidence for best practices				*				
B	Adhere to Institutional Review Board (IRB) guidelines, i.e. – Verbalizes value of need for ethical conduct in research								*
C	Base individual care plan on patient values, clinical expertise and evidence.				*				



		<b>N101</b>	<b>N101</b>	<b>N132</b>	<b>N132</b>	<b>N231</b>	<b>N231</b>	<b>N232</b>	<b>N232</b>
		<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>
D	Read original research and evidence reports related to area of practice, i.e. seeks new information related to care				*				
E	Locate evidence reports related to clinical practice topics and guidelines.				*				
F	Participate in structuring the work environment to facilitate integration of new evidence into standards of practice, i.e. identifies ways for students and staff to adapt best practices								*
G	Question rationale for routine approaches to care that result in less-than-desired outcomes or adverse events.				*				
H	Consult with clinical experts and evaluate the response before deciding to deviate from evidence-based protocols.								*

**Comments: (list course and year)**

**V. QUALITY IMPROVEMENT\***

		<b>N101</b>	<b>N101</b>	<b>N132</b>	<b>N132</b>	<b>N231</b>	<b>N231</b>	<b>N232</b>	<b>N232</b>
		<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>
A	Seek information about outcomes of care for populations served in care setting. i.e. Aware of quality indicators of care setting.		*						
B	Seek information about quality improvement projects in the care setting.				*				
C	Verbalize an understanding of the quality assurance process, i.e. Looks at unit data with regard to unit data collection.						*		
D	Participates in a root cause analysis of a sentinel event, i.e. identifies a problem and traces it to the inception								*
E	Use quality measures to understand performance, i.e. performs self evaluation, evaluates practices  i.e. Uses quality indicators or benchmarks – infection rates						*		
F	Identify gaps between local and best								*

		<b>N101</b>	<b>N101</b>	<b>N132</b>	<b>N132</b>	<b>N231</b>	<b>N231</b>	<b>N232</b>	<b>N232</b>
		<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>
	practice.								
G	Design a small test of change in daily work (using an experiential learning method such as Plan-Do-Study-Act)								
H	Practice aligning the aims, measures and changes involved in improving care.				*				
I	Use measures to evaluate the effect of change.								*

**Comments: (list course and year)**

### **VI. SAFETY\***

		<b>N101</b>	<b>N101</b>	<b>N132</b>	<b>N132</b>	<b>N231</b>	<b>N231</b>	<b>N232</b>	<b>N232</b>
		<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>M/S</b>	<b>Final</b>	<b>M/S</b>	<b>Final</b>
						<b>Midterm</b>		<b>Midterm</b>	
A	Demonstrate effective use of technology and standardized practices that support safety and quality. (electronic charting,		*						

	acuchecks)								
B	Demonstrate effective use of strategies to reduce risk of harm to self or others, i.e. siderails, lighting, fall risk, transferring and body mechanics		*						
C	Use appropriate strategies to reduce reliance on memory (such as, forcing functions, checklists, decision trees, organizations charts).		*						
D	Communicate observations or concerns related to hazards and errors to patients, families, and the health care team.		*						
E	Use organizational error reporting systems for near miss and error reporting. (incident reports)		*						
F	Participate appropriately in analyzing errors and designing system improvements. (revising plan of care)				*				
G	Engage in root-cause analysis rather than blaming when errors or near-misses occur. (tracing causes for problems through the system)						*		

H	Use national patient safety resources for own professional development and to focus attention on safety in care settings. (Uses Joint Commission, safe medication standards, ombudsmen)								*
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**Comments: (list course and year)**

**VII. INFORMATICS\***

		<b>N101 Midterm</b>	<b>N101 Final</b>	<b>N132 Midterm</b>	<b>N132 Final</b>	<b>N231 M/S Midterm</b>	<b>N231 Final</b>	<b>N232 M/S Midterm</b>	<b>N232 Final</b>
A	Seek education about how information is managed in care settings before providing care. i.e.completes computer training successfully in orientation		*						
B	Apply technology and information management tools to support safe processes of care. (Accuchecks)				*				
C	Navigate the electronic health record including documenting.		*						

		<b>N101 Midterm</b>	<b>N101 Final</b>	<b>N132 Midterm</b>	<b>N132 Final</b>	<b>N231 M/S Midterm</b>	<b>N231 Final</b>	<b>N232 M/S Midterm</b>	<b>N232 Final</b>
D	Employ communication technologies to coordinate care for patients. (call bells, getting help, use of cell phones)		*						
E	Respond appropriately to clinical decision-making supports and alerts. (IV pumps, etc, assessment data)				*				
F	Use information management tools to monitor outcomes of care processes. (Lab results)						*		
G	Use high quality electronic sources of healthcare information. (internet resources)								*

**Comments: (list course and year)**

### VIII. PSYCHOMOTOR SKILLS

		N101	N101	N132	N132	N231	N231	N232	N232
		Midterm	Final	Midterm	Final	Midterm	Final	Midterm	Final
A	Maintain standard precautions.		*						
B	Maintain medical and surgical asepsis (eg, change sterile dressing, maintain venous access lines, change tubing/bag peripheral line).				*				
C	Perform a complete physical, i.e. uses agency format for assessment								*
D	Perform a psychosocial assessment						*		
E	Perform health history and risk assessment, i.e. identifies client health risks and does teaching				*				
F	Assess (eg, I&O, vital signs, wounds, drainage, blood glucose).		*						
G	Perform treatment and procedures (eg, oxygen administration, dressing change).		*						
H	Administer medications safely (eg, po, parenteral, IV) in a timely manner.		*						

		<b>N101</b>	<b>N101</b>	<b>N132</b>	<b>N132</b>	<b>N231</b>	<b>N231</b>	<b>N232</b>	<b>N232</b>
		<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>	<b>Midterm</b>	<b>Final</b>
I	Dispose properly of hazardous materials.		*						
J	Identify drug pharmacokinetics, side effects, interactions with food, drugs and fluids.		*						
K	Perform invasive procedure (eg, urinary catheter, removal of NG tube, tracheostomy suctioning)				*				
L	Provide pre and post procedure care.				*				
M	Implement measures to manage potential complications. i.e. recognizes and acts on emergencies				*				
N	Demonstrate proficiency in math computation.		*						
O	Monitor functioning of therapeutic devices.				*				
P	Transfers client from chair to bed safely		*						

**Comments: (list course and year)**

\*Cronenwett *et al.* Quality and Safety Education for Nurses. Nursing Outlook. V 55, N 3, May/June 2007.



**EVALUATION COMMENTS**

**Midterm – Nursing 101**

**Student** \_\_\_\_\_ **J#** \_\_\_\_\_

**N101 FALL 200**\_\_

\_\_\_\_\_ The above named student is making satisfactory progress in meeting clinical objectives for the course at mid-semester.

\_\_\_\_\_ The above named student is not making satisfactory progress in meeting clinical objectives and needs to improve his/her performance on the following clinical objectives. The student has been given a Remediation Plan and/or Clinical Warning (refer to Evaluation Process) related to the following objectives: #

**Faculty Comments:**

\_\_\_\_\_

**Clinical Faculty Signature**

\_\_\_\_\_

**Date**

**Student Comments:**

\_\_\_\_\_

**Student signature**

\_\_\_\_\_

**Date**

**Final Evaluation – Nursing 101**

**Faculty Comments:**

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<b>Clinical Faculty Signature</b>	<b>Date</b>
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**Student Comments:**

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<b>Student signature</b>	<b>Date</b>
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**Midterm – Nursing 132**

**Student** \_\_\_\_\_ **J#** \_\_\_\_\_

**N132 SPRING 200\_\_**

\_\_\_\_\_ The above named student is making satisfactory progress in meeting clinical objectives for the course at mid-semester.

\_\_\_\_\_ The above named student is not making satisfactory progress in meeting clinical objectives and needs to improve his/her performance on the following clinical objectives. The student has been given a Remediation Plan and/or Clinical Warning (refer to Evaluation Process) related to the following objectives: #

**Faculty Comments:**

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**Clinical Faculty Signature**

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**Date**

**Student Comments:**

---

**Student signature**

---

**Date**

**Final Evaluation – Nursing 132**

**Faculty Comments:**

---

**Clinical Faculty Signature**

---

**Date**

**Student Comments:**

---

**Student signature**

---

**Date**

**Midterm – Nursing 231**

**Student** \_\_\_\_\_ **J#** \_\_\_\_\_

**N231 FALL 200**\_\_

\_\_\_\_\_ The above named student is making satisfactory progress in meeting clinical objectives for the course at mid-semester.

\_\_\_\_\_ The above named student is not making satisfactory progress in meeting clinical objectives and needs to improve his/her performance on the following clinical objectives. The student has been given a Remediation Plan or Clinical Warning (refer to Evaluation Process) related to the following objectives: #

**Faculty Comments:**

\_\_\_\_\_  
**Clinical Faculty Signature**

\_\_\_\_\_  
**Date**

**Student Comments:**

\_\_\_\_\_  
**Student signature**

\_\_\_\_\_  
**Date**

**Final Evaluation – Nursing 231**

**Faculty Comments:**

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**Clinical Faculty Signature**

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**Date**

**Student Comments:**

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**Student signature**

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**Date**

**Midterm – Nursing 232**

**Student** \_\_\_\_\_ **J#** \_\_\_\_\_

**N232 SPRING 200**\_\_

\_\_\_\_\_ The above named student is making satisfactory progress in meeting clinical objectives for the course at mid-semester.

\_\_\_\_\_ The above named student is not making satisfactory progress in meeting clinical objectives and needs to improve his/her performance on the following clinical objectives. The student has been given a Remediation Plan and/or Clinical Warning (refer to Evaluation Process) related to the following objectives: #

**Faculty Comments:**

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**Clinical Faculty Signature**

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**Date**

**Student Comments:**

---

**Student signature**

---

**Date**

**Final Evaluation – Nursing 232**

**Faculty Comments:**

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**Clinical Faculty Signature**

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**Date**

**Student Comments:**

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**Student signature**

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**Date**

**Revbmc1/05/09**

**SYSTEMIC PLAN**

<b>PROGRAM EVALUATION</b>					
<b>STANDARD 1</b>					
<b>MISSION AND ADMINISTRATIVE CAPACITY</b>					
PLAN				IMPLEMENTATION	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions
1.1 The mission/philosophy and outcomes of the nursing education unit are congruent with those of the governing organization.	100% of the faculty agree that the philosophy and core values are congruent with the College mission.  Concepts in the College mission are reflected in the philosophy and core values of the	Every 2 years of whenever there are revisions to the College mission.	Review of the College mission with comparison to the nursing unit philosophy and core values.	Spring 2008 – review of nursing unit organizing framework needed to be updated.  Review of College core values and those of department revealed synergy	Faculty chose to adopt core values and revise philosophy. Remains in congruency with College mission. (November 2009)  See chart comparing nursing unit philosophy and core values with College

	nursing program.			and congruence.	mission.
1.2 The governing organization and nursing education unit ensure representation of students, faculty, and administrators in ongoing governance activities.	<p>100% of the nursing unit faculty and administration participate on at least 2 college wide or nursing department committees annually.</p> <p>100% of the faculty attend at least 4 staff development programs annually.</p> <p>Two or more students from each class participate in college wide or department</p>	<p>Assessed annually.</p> <p>Assessed annually.</p> <p>Assessed annually.</p>	<p>Faculty complete questionnaire and self evaluation tool.</p> <p>Reported on faculty self evaluation tool each spring.</p> <p>Annual survey of students in program.</p>	<p>100% of faculty and administration serve on at least 2 department or college wide committees.</p> <p>100% of faculty attended at least 4 staff development programs in 2007, 2008, 2009, 2010.</p> <p>2007 – 4 students were CCP student Ambassadors, 3 students served as</p>	<p>Continue to encourage participation. Results displayed in chart in self study.</p> <p>Faculty report on committee activities at faculty meetings.</p> <p>Continue to inform faculty of available programs. Report of attendance in illustrated in chart.</p> <p>Continue to encourage students to be involved in life of the college.</p>



	committees annually.			college wide tutors. Eight students served as class representatives to team meetings.  2008 – 5 Students served as CCP Student Ambassadors, 10 students were inducted into Phi Theta Kappa, 8 students served as class representatives.  2009 – 5 students served as Student Ambassadors, 8 students served as class representatives.  2010- 4 students are Student Ambassadors, 8 students served as	
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	100% of the students in the nursing program are members of the Nursing Student Club.	Assessed annually in October	Use of class lists	<p>class representatives</p> <p>2007 all students participated in Student Day,</p> <p>2008 – all students participated in student day</p> <p>2009 – all students participated in student day</p> <p>2010 – all students participated in annual student development day</p>	
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1.3 Communities of interest have input into program processes and decision making.	A meeting of the Nursing Program Advisory Committee will occur once each semester.	Mid- November each year	Review of advisory committee list	<p>2007 – Advisory committee met in December and May – offered suggestions regarding issues related to interviewing</p> <p>2008- Advisory committee met in December and May – point of discussion was changing employment environments</p> <p>2009- Advisory committee met in December and May – discussed alternative job opportunities and issue of hospitals hiring only BSN</p>	<p>2007- faculty will continue to offer seminar on interviewing and consult with career center regarding resumes.</p> <p>2008- faculty will speak with students about employment options</p> <p>2009- continue to encourage students to enroll in BSN programs upon graduation. Also – some local hospitals are not hiring anyone without</p>

				graduates	experience and will consider associate degree grads with 1 year of experience.  2010 – Development of facebook page to allow for increased networking for graduates
1.4 Partnerships exist that promote excellence in nursing education, enhance the profession, and benefit the community	Established partnerships are maintained and new relationships fostered.	Assessed as needed upon development of new relationship.	Review of benefits to student learning experiences, community service and enhancement of profession. Advise sought from Advisory committee and interested parties.	2006- Hartford Grant  Advisory committee members reviewed annually	Continue as planned.
1.5 The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing.	The Head, Department of Nursing holds a graduate degree with a major in nursing.	Assessed as needed upon selection of department head.	Review of credentials of candidates.	New department head elected in December 2009. Holds a PhD in Nursing Education.	No action needed at this time.
1.6 The nurse administrator has the authority and	The Head, Department of Nursing has	Assessed annually and as needed.	Review of responsibilities, job description, etc.	Reviewed in 2009 prior to selection of new department	No action needed at this time.

responsibility for the development and administration of the program and has adequate time and resources to fulfill and responsibilities.	authority and responsibility for development and administration of the nursing program.			head.	
1.7 With faculty input, the nurse administrator has the authority to prepare and administer the program budget and advocates for equity within the unit and among other units of the governing organization.	100% of faculty will agree that the budget is sufficient for the administration of the program and meets educational needs.	Assessed annually in November	Review of budget requests	2006-2010 – budget adequate. Equipment purchases in resource section of report.	No action needed at this time. – Continue as planned
1.8 Policies of the nursing education unit are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing	The personnel policies of the nursing department are in congruence with the governing institution.  100% of faculty	Reviewed with CBA at time of contract expiration	Contract specifics are reviewed by CBA representatives.	Latest agreement - 2008  CBA expires August 2011	Negotiations are beginning for new contract

organization; differences are justified by the goals and outcomes of the nursing education unit.	will agree that personnel policies of the nursing department are in congruence with the governing institution.				
1.9 Records reflect that program complaints and grievances receive due process and include evidence of resolution.	100% of all complaints and grievances are processed using college and department policies.	Department policies are assessed annually in May.	Review of previous year's complaints and grievances along with existing policy.	2 grade appeals – #1 reviewed by VPAA – student will repeat course  #2 – Student dropped appeal – will repeat course	Continue to follow procedure as outline in College student handbook.
<b>PROGRAM EVALUATION</b>					
<b>STANDARD 2</b>					
<b>FACULTY AND STAFF</b>					
PLAN				IMPLEMENTATION	

Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions
<p>2.1 Full time faculty are credentialed with a minimum of a master's degree with a major in nursing and maintain expertise in their areas of responsibility.</p>	<p>100% of the faculty hold graduate degrees with a major in nursing.</p> <p>100% of the faculty are licensed in Pennsylvania.</p> <p>100% of the faculty will participate in at least one continuing education program related to their area of clinical expertise annually.</p>	<p>At time of hire</p> <p>At time of hire</p> <p>Annually through self evaluation</p>	<p>Review of applicant's credentials, official transcripts</p> <p>Verification on PA State Board of Nursing website</p> <p>Faculty complete self evaluation form that lists continuing education attendance</p>	<p>All faculty hired have at least a graduate degree in nursing</p> <p>All faculty have current licenses in PA</p> <p>2007 – all faculty attended at least one program</p> <p>2008- all faculty attended at least one program</p> <p>2009 – all faculty attended at least one</p>	<p>Continue to hire faculty with graduate degrees in nursing</p> <p>Continue to verify licensure on website</p> <p>Continue monitoring through self evaluation. Post conference brochures for faculty.</p>

<p>2.1.1 The majority of part-time faculty are credentialed with a minimum of a master's degree with a major in nursing; the remaining part-time faculty hold a minimum of a baccalaureate degree with a major in nursing.</p> <p>2.1.2 Rationale is provided for utilization of faculty who do not meet the minimum credential.</p>	<p>100% of the faculty hold graduate degrees with a major in nursing.</p> <p>100% of the faculty are licensed in Pennsylvania.</p> <p>Not applicable</p>	<p>At time of hire</p> <p>At time of hire</p>	<p>Review of applicant's credentials, official transcripts</p> <p>Verification on PA State Board of Nursing website</p>	<p>program</p> <p>2010 – all faculty attended at least one program.</p> <p>All faculty hired have at least a graduate degree in nursing</p> <p>All faculty have current licenses in PA</p>	<p>Continue to hire faculty with graduate degrees in nursing</p> <p>Continue to verify licensure on website</p>
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2.2 Faculty (full and part-time) credentials meet governing organization and state requirements.	100% of full and part time faculty meet the credentialing requirements of the governing organization and the state of Pennsylvania.	At time of hire	Review of credentials and licensure information by Human Resources	All full and part time faculty meet the credentialing requirements of the governing organization and state requirements in 2007, 2008, 2009, 2010	Continue to hire faculty who meet these requirements
2.3 Credentials of practice laboratory personnel are commensurate with their level of responsibilities.	100% of practice laboratory personnel have credentials that match their responsibilities	At time of assignment	Review of needs when making assignments	Lab faculty are all prepared with a graduate degree in nursing and recent clinical practice  Support staff have experience of 20 years in the skills lab	Continue to use appropriately prepared faculty and staff in the nursing skills lab.
2.4 The number and utilization of faculty (full and part-time) ensure that program outcomes are achieved.	100% of faculty will agree that utilization and number of faculty is adequate for achievement of program outcomes.	Annually or with changes in number of students admitted or transition of faculty.	Review of number of students, clinical sites needed, number of labs and seminars needed to accommodate students.	Full and part time faculty were asked to respond to the question – all agreed that we were adequately staffed.	Request full time positions as needed.  Hire part time faculty for additional clinical sites as needed –

	<p>The teaching load of the nursing faculty is in congruence with contractual agreements with the governing agency.</p> <p>The ratio of faculty to students is 10 students or less to one faculty member in the clinical setting.</p>	<p>With renewal or negotiation of union contract – every 3 years</p> <p>With each agency contract renewal and each semester with assignment of students</p>	<p>Review of faculty teaching load each semester.</p> <p>Faculty and agency evaluations</p> <p>Student evaluations of course</p> <p>Agency contracts</p> <p>Best practice literature for clinical supervision</p>	<p>2007-2010 – all faculty were assigned within parameters of contractual agreement. Average contact hours per semester for faculty was 17.</p> <p>2007- Based on contractual agreements – adopted a 1:8 ratio in acute care settings</p> <p>2008- continue this ratio.</p> <p>2009-2010 – continue ratio</p>	<p>2009 3 hired.</p> <p>Continue to assign within parameters of contract.</p> <p>Remains a criteria of agency contracts. LTC and community occasionally are at 1:9 ratio.</p>
2.5 Faculty (full and part-time) performance reflects	100% of faculty will demonstrate performance that reflects scholarship	Each year via self evaluation and documentation	Individual vitae, self evaluations reviewed with department head	2006-2010 – all faculty have attended at least one	Continue to inform faculty of programs. Offer faculty development

scholarship and evidence-based teaching and clinical practices.	and evidence-based teaching and clinical practices.	of CEU's for licensure in PA		program per year. HRSA grant activities 2007-2010	activities
2.6 The number, utilization, and credentials of non-nurse faculty and staff are sufficient to achieve the program goals and outcomes.	100% of faculty and staff agree that non-nurse staff are sufficient to achieve goals and outcomes.	As needed	Review of job descriptions and responsibilities.		No action needed
2.7 Faculty (full and part-time) are oriented and mentored in their areas of responsibilities.	Newly hired faculty will receive mentorship from experienced colleagues	In preparation for new faculty	Review of College faculty orientation plan  Assignment of faculty mentors	2010- Two full time faculty hired – assigned mentor. Are attending college programs	Continue as planned.
2.8 Systematic assessment of faculty (full and part-time) performance demonstrates competencies that are consistent with program goals and	100 % of faculty are evaluated by student evaluations each semester.  Faculty, as an aggregate, will rate at 3 or better on a 4	At the completion of each course	Faculty evaluation tools are supplied by the college	2006- aggregate of 3.4  2007 –aggregate of 3.52  2008- aggregate of 3.4  2009- aggregate of	Continue to follow college policy for faculty evaluation by students

outcomes.	point scale.			3.6 2010 – pending	
	100% of full time faculty participate in self/peer evaluation per the contractual agreement.	Annually in May or as needed for promotion or as new hire	Review of tool for peer evaluation every 2 years.  Self evaluation tool based on NLN Hallmarks	2008- peer tool reaffirmed by faculty  2007- Hallmarks adopted by faculty for self evaluation	Continue to encourage faculty to engage in evaluation process
2.9 Non-nurse faculty and staff performance is regularly reviewed in accordance with the policies of the governing organization.	Non –nursing staff are evaluated per contract	Annually as per CBA	Tool developed by Human resources.	Department Head for nursing evaluates the Technical Craft Specialist assigned to nursing.	Reviews have been favorable – continue as per contract

**PROGRAM EVALUATION**

**STANDARD 3**

**STUDENTS**

PROGRAM EVALUATION					
STANDARD 3					
STUDENTS					
PLAN				IMPLEMENTATION	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions
3.1 Student policies of the nursing education unit are congruent with those of the governing organization, publicly accessible, non-discriminatory, and consistently applied; differences are justified by the goals and outcomes of the nursing education	Policies are congruent with College and differences justified.	Annually or when new policies are enacted.	Review of department and college policies	<p>2007- using cohort study results – change admission GPA to 2.75</p> <p>2008- no changes</p> <p>2009- Seasonal flu vaccine mandatory at many clinical agencies. Some requiring H1N1</p> <p>2010 – Seasonal required at all agencies</p>	<p>Admission information revised.</p> <p>Notified all students to receive vaccine.</p> <p>Amended health requirements to include flu vaccine.</p> <p>Incoming students advised to receive vaccine.</p>

unit.					
3.2 Student services are commensurate with the needs of students pursuing or completing the associate program, including those receiving instruction using alternative methods of delivery.	Student services meet the needs of students enrolled in the nursing program	Annually or as the need arises.	Review of available services and student access.	<p>2007- services adequate. 2 students used Disability Center for testing</p> <p>2008- services sufficient – 2 students used Disability Center</p> <p>Students requested additional tutor in Learning Lab</p> <p>2009 – services adequate – 3 students used Disability Center</p> <p>2010 – services sufficient. Learning Lab tutor in place</p>	<p>Tutor specific for nursing hired in Learning Lab</p> <p>Tutor specific for nursing hired in Learning Lab</p>

					Continue with learning lab tutor
3.3 Student educational and financial records are in compliance with the policies of the governing organization and state and federal guidelines.	All student records are in compliance with policies	As needed	Responsibility of financial aid office	Report that they are in compliance.	No action needed
3.4 Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained.  3.4.1 A written, comprehensive student loan repayment	College is in compliance with regulations	As needed	Responsibility of financial aid office	Report they are in compliance. Students receive literature related to loans and obligations.	No action needed

<p>program addressing student information, counseling, monitoring, and cooperation with lenders is available.</p> <p>3.4.2 Students are informed of their ethical responsibilities regarding financial assistance.</p>					
<p>3.5 Integrity and consistency exist for all information intended to inform the public, including the program's accreditation status and NLNAC contact information.</p>	<p>All information is presented in a clear, concise and accurate manner.</p>	<p>Annually and as needed when policies or information changes</p>	<p>Review of sources of information for public – website, catalog, handbooks.</p>	<p>2007- admission changes revised</p> <p>2008 – no changes</p> <p>2009- Seasonal flu vaccine mandatory at many clinical agencies. Some requiring H1N1</p>	<p>Public information revised</p> <p>Notified all students to receive vaccine.</p> <p>Amended health requirements to include flu vaccine.</p>



				2010 – Seasonal required at all agencies	Incoming students advised to receive vaccine.  NLNAC information updated on website
3.6 Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.	All information is presented in a clear, concise and accurate manner.	As needed	Faculty and curriculum review of policies	Changes are posted on webpage, group site, handbook, announced in class, emails sent to students	Continue this method of informing students.
3.7 Orientation to technology is provided and technological support is available to student, including those receiving instruction using alternative	All students receive orientation to technology used in the nursing program	During planning for each course	Faculty review teaching strategies and technology related to the course	Each semester students are oriented to MyCCP, Webstudy and My Nursing Lab.  They are also shown how to access library resources.  Evaluated as	Continue with this orientation.

methods of delivery.				sufficient by students	
<b>PROGRAM EVALUATION</b>					
<b>STANDARD 4</b>					
<b>CURRICULUM</b>					
PLAN				IMPLEMENTATION	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions
4.1 The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning and program outcomes.	Program outcomes are clearly articulated	Annually in the spring	Review of standards from NCSBN, NLN, NLNAC  Review of outcomes  Review of NCLEX scores and graduate follow up surveys	Graduates report that outcomes are clearly stated.  2007-2010 – faculty agree that outcomes are based on competencies  2009- revised philosophy and developed core values based on QSEN	Continue to base outcomes on competencies and guidelines related to professional standards

				competencies	
4.2 The curriculum is developed by the faculty and regularly reviewed for rigor and currency.	Curriculum is current and rigorous	During planning for each course and annually in the spring	<p>Review of course evaluations</p> <p>Review of standards from NCSBN, NLN, NLNAC</p> <p>Review of current literature related to nursing education and nursing care delivery</p>	<p>2006 – Review of local and regional health concerns – Content redistributed to offer information related to chronic illness early in curriculum</p> <p>2007 –QSEN competencies presented and discussed by faculty.</p> <p>2008-New clinical tool piloted – stresses evidence based practice and collaborative activities</p>	<p>Heart disease and diabetes introduced in Nursing 101.</p> <p>Nursing 231 – stress families coping with chronic illness in the community</p> <p>Clinical evaluation tool modified to reflect QSEN competencies. Will be piloted in next school year.</p> <p>2008 – revisions to tool completed based on faculty comments. Students working with staff to identify quality indicators on units.</p> <p>All second year</p>

				<p>2009 – New knowledge related to care of older adults and use of simulation – Faculty inservice and implementation into courses</p> <p>2010 – Continued use of simulation- expanded to first year students</p>	<p>students took part in use of new simulators with case studies. Also experienced standardized patients. Will continue this mode.</p> <p>Care of older adults and use of ACES essential nursing actions</p> <p>Students evaluate use of simulation in a positive manner. All students had several opportunities to experience simulation. Additional equipment obtained to increase reality of the experience.</p>
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<p>4.3 The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.</p>	<p>Outcomes are used to direct all learning experiences</p>	<p>During planning for each course and annually in the spring</p>	<p>Review of program outcomes and course objectives.</p> <p>Review of QSEN competencies</p> <p>Review of Philosophy and Core Values.</p> <p>Review of learning activities for each course and student evaluation of course.</p> <p>Review of evaluation methods</p>	<p>2007 –QSEN competencies presented and discussed by faculty.</p> <p>2008- Critical thinking paper – re-evaluated – cohort study shows significance to success in course</p> <p>2009- Use of My Nursing Lab for review of pharmacology – students evaluate as helpful</p> <p>2007-2009 – use of Hesi Exit Test – voluntary but good</p>	<p>Student run conferences based on evidence based practice were evaluated as excellent learning experiences – will continue</p> <p>Will continue – good preparation for BSN</p> <p>Will continue to use- students have access for duration of program.</p>
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				predictor of passers on NCLEX	Continue to offer this activity – no grade attached – remediation plans are helpful to students.
4.4 The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, and global perspectives.	Diversity concepts are addressed in all aspects of the program	During planning for each course and annually in the spring	Review of course content and relationship to diversity – race, age, ethnicity, gender.	2007-2010- students represent a widely diverse group.  Content in seminar and class contain issues related to diversity – age related issues, etc.	Continue to include diversity issues in discussion.
4.5 Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of	A variety of methods will be used to evaluate student progress.	During planning for each course	Review of course evaluation strategies – tests, papers, presentations, etc.  Discussion of clinical experiences needed to meet objectives.	2007- Discussed inclusion of alternate form questions on each test	All four courses include at least 2 questions in alternate format.  Continue use of CTW paper and seminar in grading

<p>student learning and program outcomes.</p>				<p>2008- Discussion of math issues</p> <p>Use of Billings book to help students with NCLEX questions</p> <p>2009- Continue use of Billings book</p> <p>2010 – Continue as planned with NCLEX book, four multiple choice tests, papers and small credit for seminar</p>	<p>All tests will include at least 2 math questions. Continue with alternate question types as well</p> <p>Students get small amount of credit. Evaluate as a positive strategy – will continue</p> <p>Continue as planned.</p>
<p>4.6 The curriculum and instructional processes reflect educational</p>	<p>The program reflects educational theory, collaboration, innovation and best</p>	<p>Annually in the spring</p>	<p>Review of teaching strategies for each course</p> <p>Review of philosophy and core</p>	<p>2007- Discussion of introducing research</p>	<p>Introduced basic research concepts – article critique to assist students with selection of</p>

<p>theory, interdisciplinary collaboration, research, and best practice standards while allowing for innovation, flexibility, and technological advances.</p>	<p>practices.</p>		<p>values</p> <p>Review of evaluation methods</p> <p>Review of hybrid course issues</p>	<p>2008- EVP conference – worked well previous year – revise to include quality indicators</p> <p>Hybrid courses revised to be adjunctive to face to face. Increase # of seminars online as program progresses</p> <p>2009- Continue conference with presentations.</p>	<p>evidence based practice information</p> <p>Students collaborated with unit staff to identify quality indicators and then research best practices for meeting them. Well received by students and clinical agencies</p> <p>Continue as planned</p>
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				2010 – Continue to collaborate with agencies.	
4.7 Program length is congruent with the attainment of identified outcomes and consistent with the policies of the governing organization, state and national standards, and best practices.	Program length is congruent with outcomes and best practices.	Annually or as needed	Review of pre-requisite and co-requisite courses. Review of nursing courses.	<p>2006- no change</p> <p>2007- no change</p> <p>2008 – New general education requirements proposed by college. – Math 118, Sociology 101 and CIS 103 required of all students admitted beginning September 2009</p> <p>2009- all students admitted under new general education</p>	<p>Revised admission information including progression sheets</p> <p>Remove Psychology 101 as required course – can take as an elective.</p> <p>Inservice for advisors.</p>

				requirements  2010 – no changes	
<p>4.8 Practice learning environments are appropriate for student learning and support the achievement of student learning and program outcomes; current written agreements specify expectations of all parties and ensure the protection of students.</p> <p>4.8.1 Student clinical experiences reflect current best practices and nationally</p>	<p>All practice learning environments will have written agreements and provide an experience that reflects best practices.</p>	<p>During planning for each course.</p>	<p>Review of agency evaluation forms</p> <p>Review of course objectives and available clinical sites.</p>	<p>2006 – all agencies meet these requirements</p> <p>2007- all agencies meet these requirements</p> <p>2008- all agencies meet these requirements</p> <p>2009- all agencies meet these requirements</p> <p>2010 – all agencies meet these requirements</p>	<p>Continue as planned – Fox Chase – magnet status</p> <p>Lankenau Medical Center and Thomas Jefferson attained magnet status</p> <p>Hahnemann Hospital attained magnet status</p>

established patient health and safety goals.					4 of the hospitals used for clinical experience have magnet status
<b>PROGRAM EVALUATION</b>					
<b>STANDARD 5</b>					
<b>RESOURCES</b>					
PLAN				IMPLEMENTATION	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions

<p>5.1 Fiscal resources are sufficient to ensure the achievement of the nursing education unit outcomes and commensurate with the resources of the governing organization.</p>	<p>100% of faculty and staff will agree that fiscal resources for the nursing education unit are commensurate with the resources of the governing organization.</p>	<p>Annually when reviewing capital and operating budgets.</p>	<p>Review of budgets. Review of supplies needed Review of equipment acquisitions for the past year. Review of equipment needs Discussion with faculty and staff</p>	<p>2006- purchased catheterization simulators, Chester chest, and otoscopes.  2007- purchased bandaging simulator, infusion pumps  2008- new tables and chairs for West 2-17, trach simulators  2009- purchased 2 Vital Sim Mannequins, Micro sim soft ware, breast models  2010 – purchased 12 lead placement trainer, cardiac monitor , pulse oximeters</p>	<p>Continue to update equipment and supplies as needed  Continue to update equipment and supplies as needed  Continue to update equipment and supplies as needed  Continue to update equipment and supplies as needed</p>
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<p>5.2 Physical resources (classrooms, laboratories, offices, etc.) are sufficient to ensure the achievement of the nursing education unit and meet the needs of faculty, staff, and students.</p>	<p>100% of students, faculty and staff agree that physical resources are sufficient to ensure achievement of the nursing education unit goals and meet needs those concerned.</p>	<p>Twice yearly in planning for each semester</p>	<p>Review of class lists - # of students Review of equipment needed</p>	<p>Classroom, labs, offices are sufficient for need.</p>	<p>Continue as planned</p>
<p>5.3 Learning resources and technology are selected by the faculty and are comprehensive, current, and accessible to faculty and student, including those engaged in alternative methods of delivery.</p>	<p>Students and faculty will rate resources and technology as adequate to meet needs</p>	<p>At the end of each course via department evaluation tool</p>	<p>Review of evaluation results Discussion with faculty and students Discussion with librarian liason Collaboration with webstudy coordinators</p>	<p>2006- Meetings with webstudy coordinators to help faculty with format  2007 – Continue to revise webstudy activities.  2008- Library – requests review of texts.</p>	<p>Faculty received training on use of web study.  Two faculty assigned as webstudy collaborators  Nursing library rep – reviewed and removed outdated books</p>

				<p>2009- Nursing faculty requested Proquest data base to improve access to full text evidence based articles for student work.</p> <p>2010 – Proquest data base received</p>	<p>Will be discussed</p> <p>Faculty and students received inservice on use of new data base</p>
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**PROGRAM EVALUATION**

**STANDARD 6**

**OUTCOMES**

PLAN				IMPLEMENTATION	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions

<p>6.1 The systematic plan for evaluation emphasizes the ongoing assessment and evaluation of the student learning and program outcomes of the nursing education unit and NLNAC standards.</p>	<p>Systematic plan for evaluation will be used to track levels of achievement and actions for NLNAC standards and criteria</p>	<p>Annually in the spring and as needed</p>	<p>Review of plan and assessment methods.</p>	<p>2006-2008 – use plan 2008-2009- revised plan as a result of new organization of NLNAC Standards and Criteria 2010 – plan in place</p>	<p>Continue to use SEP as tool to track levels of achievement</p>
<p>6.2 Aggregated evaluation findings inform program decision making and are used to maintain or improve student learning outcomes.</p>	<p>Aggregated data is considered when making curriculum changes.</p>	<p>During planning for each semester</p>	<p>Review of student evaluations of courses. Agency evaluations</p>	<p>2007- Use of Hesi Exit exam – helped to pinpoint areas for remediation 2008- Improved NCLEX scores – will continue with plan 2009- Continue to improve 2010 – Change NCLEX book to Davis</p>	<p>Will continue to offer. Will require Billings book for each second year student with a required number of questions.  Students recommended book reviewed by faculty.</p>

<p>6.3 Evaluation findings are shared with communities of interest.</p>	<p>All evaluation findings are available to communities of interest</p>	<p>Annually in the spring</p>	<p>Review of findings  Creation of documents to share with students and communities of interest</p>	<p>2006- Students informed of NCLEX pass rate, etc  2007 Students informed of NCLEX pass rate, etc  2008- Students informed of NCLEX pass rate, etc  2009- Students informed of NCLEX pass rate, etc  2010- Will inform students at beginning of spring semester</p>	<p>Continue this plan which includes discussion with students about evaluation findings. Q &amp; A sessions</p>
<p>6.4 Graduates demonstrate achievement of competencies appropriate to role</p>	<p>Graduates will be rated at “at peer level” or above by responding employers</p>	<p>Annually in December</p>	<p>Employer satisfaction survey  Conversation with clinical educators and Nursing Advisory Committee</p>	<p>Employer satisfaction surveys were mailed to those identified in graduate follow-up studies for the years</p>	<p>Plan to continue to use the aggregate data model and expand to include long term care and community settings</p>



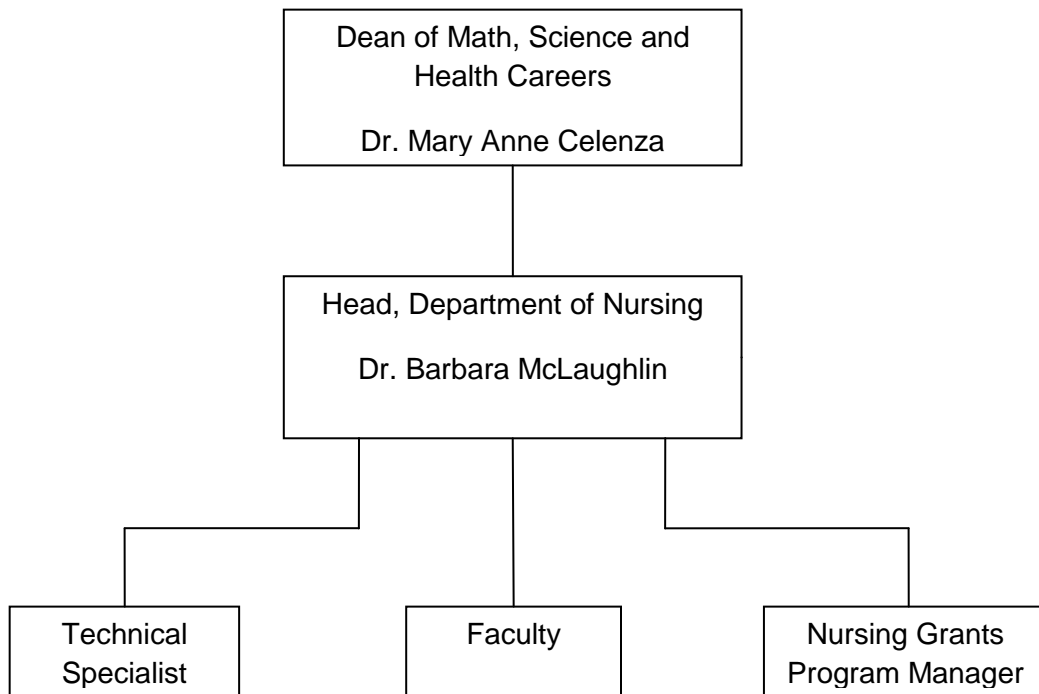
preparation.				<p>2006-2009 with no returns. In 2009, faculty decided to ask for aggregate data for graduates hired in the last 3 years. Surveys were sent to all agencies used by CCP for clinical and hospitals in the Philadelphia area – total of 60 sent. Nine (9) surveys were returned.</p> <p>Graduates were rated at peer or above peer level in all categories.</p>	that have a history of employing CCP graduates.
<p>6.5 The program demonstrates evidence of achievement in meeting the following program outcomes:</p> <p>- Performance on</p>					

<p>licensure exam</p> <p>-Program completion</p> <p>-Program satisfaction</p> <p>-Job placement</p> <p>6.5.1 The licensure exam pass rates will be at or above the national mean.</p>	<p>The percent of first time takes of the NCLEX-RN will be at or above 80% as required by the Pennsylvania State Board of Nursing (new rule beginning in 2009)</p>	<p>Assessed annually upon receipt of results</p>	<p>Review of results, review of HESI results, review of cohort study data</p> <p>Review of strategies employed to prepare graduates for exam</p>	<table border="1"> <thead> <tr> <th>Year</th> <th>CCP</th> <th>PA</th> </tr> </thead> <tbody> <tr> <td>2006</td> <td>82%</td> <td></td> </tr> <tr> <td>2007</td> <td>92%</td> <td>87%</td> </tr> <tr> <td>2008</td> <td>86.8%</td> <td>71%</td> </tr> <tr> <td>2009</td> <td>90.1%</td> <td>85%</td> </tr> <tr> <td>2010</td> <td></td> <td>87.2%</td> </tr> <tr> <td></td> <td>86.59%</td> <td>86.5%</td> </tr> </tbody> </table>	Year	CCP	PA	2006	82%		2007	92%	87%	2008	86.8%	71%	2009	90.1%	85%	2010		87.2%		86.59%	86.5%	<p>In fall of 2006 an action plan was developed which included having the second year students participate in S.W.A.T., Success With Academic Testing, and implemented a HESI Assess Test.</p> <p>2007- SWAT assessed based on NCLEX results and graduate input. Will continue to use.</p> <p>2008-2009- continue as planned.</p> <p>2009-2010 – continue as planned.</p> <p>Continue with supportive strategies</p>
Year	CCP	PA																								
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<p>6.5.2 Expected levels of achievement for program completion are determined by the faculty and reflect program demographics, academic progression, and program history.</p>	<p>70% of students entering the nursing program will graduate within 3 years (based on IPEDS)</p>	<p>Assessed annually following graduation in May</p>	<p>Review of cohort study data Review of course evaluations Review of admission, readmission, advanced placement, and progression criteria</p>	<p>2006-2010 – at least 70% complete each year</p>	<p>2006-2008 – used mailed questionnaire. Asking quantitative and qualitative questions.</p>
<p>6.5.3 Program satisfaction measures (qualitative and quantitative) address graduates and their employers.</p>	<p>Graduates responding to the follow-up study will rate the program at 4 or better on a 1-5 scale.</p>	<p>Annually in December</p>	<p>Graduate follow-up study Employer follow-up</p>	<p>2006 – met level 2007 – met level 2008- met level 2009- met level 2010 – awaiting results</p>	<p>2009- data collected via Facebook page. Questions revised to be in congruence with QSEN competencies as on clinical evaluation tool.</p>

<p>6.5.4 Job placement rates are addressed through quantified measures that reflect program demographics and history.</p>	<p>80% of graduates will secure full or part time employment within 6 months of graduation</p>	<p>December of each year</p>	<p>Graduate follow-up study Anecdotal reports from graduates Self reporting from graduates</p>	<p>2006- met level 2007- meet level 2008- 87% of respondents employed 2009 – 32% of respondents employed 2010 – awaiting results</p>	<p>Seeking advice of Advisory committee, use of Facebook to network about jobs</p>
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# Organizational Chart of Nursing Department



### COMMUNITY COLLEGE OF PHILADELPHIA - ADMINISTRATIVE ORGANIZATIONAL CHART

