

UNIVERSITY OF HAWAII COMMUNITY COLLEGES
ANNUAL INSTRUCTIONAL PROGRAM REVIEW
PROCEDURES, COMPONENTS, AND MEASURES

Practical Nursing

Introduction: The mission of the Certificate of Achievement in Practical Nursing is to provide a continuous and adequate supply of licensed practical nurses for employment in the health care delivery system of Hawaii County, the State of Hawaii.

Program Learning Outcomes

Upon completion of the Practical Nursing Program:

- 1) The graduate will be prepared for employment as a Licensed Practical Nurse.
- 2) The graduate will be prepared to take and pass the NCLEX-PN licensing exam.
- 3) The graduate will demonstrate knowledge, skills and behaviors essential for successful practice as a Licensed Practical Nurse.
- 4) The graduate will use critical thinking to plan and deliver safe, effective nursing care to individuals and families with common, well-defined health problems.
- 5) The graduate will integrate and apply nursing knowledge in the delivery of safe, effective nursing care in structured health care settings.
- 6) The graduate will use oral and written communication to accurately and effectively communicate with patients, families, and members of the health care team.
- 7) The graduate will use therapeutic communication techniques to develop client-centered relationships.
- 8) The graduate will take into consideration cultural values, health beliefs and healing practices of individuals, families and communities when providing nursing care.
- 9) The graduate's practice of nursing will demonstrate caring and compassion while delivering competent client-centered care.
- 10) The graduate will provide nursing care according to accepted standards of safe practice, with attention to prioritizing patient needs and respecting individual and family rights to dignity and privacy.
- 11) The graduate work as a member of a health care team within the scope of practice and legal requirements for Licensed Practical Nurses as outlined in the Nurse Practice Act of the State of Hawaii.

- 12) The graduate will exhibit ethical behaviors consistent with the Nurses' Code of Ethics while providing patient care.
- 13) The graduate will be able to use technology in the provision of effective nursing care.
- 14) The graduate will assume responsibility for ongoing professional growth and life-long learning.

Part I. Quantitative Indicators for Program Review

	AY 04-05	AY 05-06	AY 06-07
PRCN			
1. Annual new and replacement positions in the State	2715	2715	2715
2. Annual new and replacement positions in the County	55	55	55
3. Number of majors	31	40	40
4. Student Semester Hours for program majors in all program classes	117	117	260
5. Student Semester Hours for Non-program majors in all program classes	20	0	0
6. Student Semester Hours all program classes	137	117	260
7. FTE Program enrollment	9.13	7.8	17.33
8. Number of classes taught	3	1	1
9. Determination of program's health based on demand (Health, Cautionary, or Unhealthy)	Cautionary	Cautionary	Cautionary
10. Average Class Size	5	9	20
11. Class fill rate	25%	90%	100%
12. FTE of BOR appointed program faculty	2	2	2
13. Student/Faculty ratio	15.5:1	20:1	20:1
14. Number of Majors per FTE faculty	31	45.98	45.98
15. Program Budget Allocation (Personnel, supplies and services, equipment)	\$49,310.00	\$43,039.10	\$45,187.10
16. Cost Per Student Semester Hour	\$359.93	\$367.86	\$173.80
17. Number of classes that enroll less than ten students	2	1	0
18. Determination of program's health based on Efficiency (Healthy, Cautionary, or Unhealthy)	Healthy	Healthy	Healthy
19. Persistence of majors fall to spring	70.97%	60%	72.5%
20. Number of degrees earned (annual)	0	0	0
21. Number of certificates earned (annual)	12	7	11
22. Number of students transferred (enrolled) to a four-year institution in UH	2	0	0
23. Perkins core indicator: Academic Attainment(1P1)	90.00%	90.00%	85.71%
24. Perkins core indicator: Technical Skill Attainment (1P2)	80.00%	90.91%	100.00%
25. Perkins core indicator: Completion Rate (2P1)	50.00%	75.00%	71.43%
26. Perkins core indicator: Placement in Employment Education, and Military (3P1)	50.00%	40.00%	50.00%
27. Perkins core indicator: Retention in Employment (3P2)	100.00%	100.00%	100.00%
28. Perkins core indicator: Non Traditional Participation (4P1)	6.12%	16.67%	6.06%
29. Perkins core indicator: Non Traditional Completion (4P2)	.00%	57.14%	10.00%

30. Determination of program's health based on effectiveness (Healthy, Cautionary, Or Unhealthy)	Healthy	Healthy	Healthy
31. Determination of program's overall health (Healthy, Cautionary, or Unhealthy)	Healthy	Healthy	Healthy
32. Number of FTE Faculty	1	0.87	0.87

Part II. Analysis of the Program

Strengths and weaknesses in terms of demand, efficiency, and effectiveness based on analysis of data.

According to the data, the interest in licensed practical nurses is not increasing. Students are not as interested in the Practical Nursing program as the A.S. Nursing program leading to registered nursing. Some of the students who enter the PN program actually have becoming an RN as their goal. After completing the PN program they immediately enter the RN program and may not even take the NCLEX-PN licensure exam. This decreases the number of graduates actually entering the workforce as licensed practical nurses.

The agency demand for licensed practical nurses is small but steady. Long term care, home care, clinics and medical offices continue to use LPNs. Acute health care facilities do not. Informal agency requests for LPNs coming through the Nursing and Allied Health Division seem to have increased during 2007 indicating that there are more positions open for LPN's than previously. In addition, outlying areas of the island have requested an onsite PN program. The demand for LPNs it is not well understood. The Hawaii Center for Nursing is reportedly gathering workforce data regarding L.P.N.s that may clarify the future need for LPNs and provide direction for planning for the future of the program.

Ten students were admitted in fall 2004 and 2005. A faculty was hired into the empty PN position for fall 2006 and twenty students were admitted. With a class size of ten only one faculty is assigned to the program. The full time PN faculty are assisted by faculty assigned to the RN program. During the summer the program is taught by two 11 month faculty assigned to the RN program during the rest of the year. Workload for nursing faculty is not based on credit hours but contact hours. In addition to theory hours each class has clinical hours. One clinical/lab credit equals 3 clinical contact hours. Per Board of Nursing rules and regulations the maximum faculty to student ratio is 1:10 with 1:8 preferred. It is difficult to extract anything meaningful from the workload data provided in the Quantitative Indicators for Program Review. However, the program is labor intensive. According to that data provided cost per student semester hour decreased with the increase in the size of the class. The efficiency of the program is healthy especially when 20 students are admitted.

Most students who enter the PN program graduate on time. The average on time graduation rate for graduates of 2003-2005 was 87%. In addition, students who fail or withdraw from a course are allowed to repeat the course once and may proceed on to graduation which increases the overall graduation rate. The average NCLEX-PN pass rate for graduates of 2004-2006 was 92%. Therefore, the effectiveness of the program is healthy.

Significant Program Actions: How 2006 Action Plan Items Were Addressed

The number of Practical Nursing students admitted in fall 2007 was decreased to 10. One faculty continued to teach the PN courses. The other PN faculty was reassigned to teach the non-credit Nurses' Aide course and the ARCH courses. The great community demand for Nurses' Aides dictated this action.

A survey was developed and mailed to graduates during summer 2007 that attempted to measure satisfaction with the program and employment patterns. The average return rate on the surveys sent to the graduates of Summer 2005 and 2006 was 44%. The results revealed that the respondents were employed and working in non acute care settings. The satisfaction with the program was high.

A way to accurately predict the demand for licensed practical nurses was not developed by faculty. However, the Hawaii Center for Nursing is reported to be collecting such data. Results are not yet available.

Part III. Action plan 2007

1. Hire a replacement for the PN faculty who was hired in August 2006 and will not be returning for Fall 2008. Continue to utilize the other PN faculty to teach and coordinate the non credit Nurses' Aide and ARCH courses.
2. Continue to admit 10 students for the 2008-2009 AY.
3. Continue to survey graduates regarding employment and program satisfaction and work with the institutional researcher to improve the process.
4. Utilize workforce data gathered by the Hawaii Center for Nursing to determine the future need for licensed practical nurses on the island of Hawaii and whether any modifications in the offering of the program need to be made.
5. Meet with health agency representative regarding requests for onsite PN programs in outlying communities of the island.
6. With the addition of new modular facilities on the Manono campus for a High Tech Simulation Center and Clinical Nursing Learning Lab scheduled to be ready fall 2008, the current Nursing Learning Resource Center on the upper campus will be converted into a facility devoted to the Practical Nursing program, Nurses' Aide training and new Medical Office Receptionist program. Planning for staffing of all three facilities will need to occur.

Part IV. Resource Implications (physical, human, financial)

1. Funding for recruitment and hiring of a new PN faculty will need to continue. Increased time and energy of the faculty and Division Chair will need to be devoted to the hiring and orientation of a new faculty.
2. Time to improve and administer the graduate survey will need to be devoted by the Division Chair and institutional researcher.

3. Time to analyze workforce data and plan for the future of the PN program will need to be devoted by the faculty ,Chair and Nursing and Allied Health Advisory Council.
4. Time to meet with agency representatives and determine the viability of their requests will need to be devoted by the faculty and Chair.
5. Additional time will be needed to convert the current NLRC into a facility devoted to the purposes listed in # 6 above will be needed. Reallocation of current funding, revision of the NLRC Instructor/Coordinator job description and/or additional funding will need to occur to insure adequate staffing of all three facilities.