

HAWAI‘I COMMUNITY COLLEGE PROGRAM ANNUAL REVIEW (APR)

Certificate of Achievement in Practical Nursing PRCN

January 16, 2018

**Review Period
July 1, 2016 to June 30, 2017**

Initiator: Laura Hill
Writer(s): Laura Hill

Program/Unit Review at Hawai‘i Community College is a shared governance responsibility related to strategic planning and quality assurance. Annual and 3-year Comprehensive Reviews are important planning tools for the College’s budget process. This ongoing systematic assessment process supports achievement of Program/Unit and Institutional Outcomes. Evaluated through a college-wide procedure, all completed Program/Unit Reviews are available to the College and community at large to enhance communication and public accountability. Please see <http://hawaii.hawaii.edu/files/program-unit-review/>

Please remember that this review should be written in a professional manner. Mahalo.

PART 1: PROGRAM DATA AND ACTIVITIES

Program Description (required by UH System)

<p>Provide the short description as listed in the current catalog.</p>	<p>The Certificate of Achievement in Practical Nursing Program prepares students to take the National Council Licensure Examination for Practical Nursing (NCLEX-PN) to become Licensed Practical Nurses (LPNs). Licensed Practical Nurses work in a variety of health care settings under the supervision of a physician or registered nurse. More information about Licensed Practical Nursing can be accessed at www.onetonline.org/crosswalk</p> <p>The Certificate of Achievement requires 14 semester credits of non-nursing support courses and 30 semester credits of nursing courses; 44 semester credits in all. The program is 40 weeks long and includes 2 semesters and a summer session.</p>
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Comprehensive Review information (required by UH System)

<p>Provide the year and URL for the location of this program's last Comprehensive Review on the HawCC Program/Unit Review website: http://hawaii.hawaii.edu/files/program-unit-review/</p>	
<p>Year</p>	<p>2013</p>
<p>URL</p>	<p>http://hawaii.hawaii.edu/files/program-unit-review/docs/2012-2013_pn_comprehensive_program_review.pdf</p>
<p>Provide a short summary of the CERC's evaluation and recommendations from the program's last Comprehensive Review.</p> <p>Discuss any significant changes to the program that were aligned with those recommendations but are not discussed elsewhere in this report.</p>	<p>This review is being written by the new program director hired June 2017. The CERC recommendations for this AY are just being reviewed, therefore, no changes were made that align with the CERC recommendations.</p> <ul style="list-style-type: none"> • Many incomplete sections • "Vaguely written without much data or supportive material". • Can the program accept more students (cap at 10)? <p>The LPN program cannot increase enrollment due to limited clinical space for AS-NURS and PRCN students' clinical practice. The ARPD data for AY 16-17 indicates a Demand Health Call as "Healthy". New and Replacement positions=12/Certificates awarded 7= 1.71.</p> <p>We can do more to improve attrition, related to academics, and successfully graduate all 10. The new program director will be working with faculty to review and revise the curriculum to best facilitate optimal student outcomes.</p>

ARPD Data: Analysis of Quantitative Indicators (required by UH System)

Program data can be found on the ARPD website: <http://www.hawaii.edu/offices/cc/arpd/>

**Please attach a copy of the program's data tables
and submit with this Annual Program Review (APR).**

a) If you will be submitting the APR in hard copy, print and staple a copy of the data tables to the submission; the icon to print the data tables is on the upper right side, just above the data tables.

OR

b) If you will be submitting the APR in digital form (WORD or PDF), attach a PDF copy of the data tables along with the digital submission; the icon to download the data tables as a PDF is in the upper right of the screen, just above the data tables.

Analyze the program's ARPD data for the review period.	
Describe, discuss, and provide context for the data, including the program's health scores in the following categories:	
Demand	For AY 16-17, the PRCN program has received a Demand Health Call of Healthy (1.71). Updates to the scoring rubric have resulted in a more accurate indicator.
Efficiency	For AY 16-17, the PRCN program has received an Efficiency Health Call of Healthy . Our PRCN program has a mandated enrollment capacity and therefore % of program capacity is used for measure. ARPD data shows 83.8% fill rate.
Effectiveness	For AY 16-17, the PRCN program has received an Efficiency Health Call of Cautionary . According to the scoring rubric, a 5% increase in degrees awarded per year is the benchmark. We do not have the clinical space to increase enrollment. Our number of degrees awarded will remain static. Our max capacity is 10 PRCN students of which, taking into consideration attrition, we retain to completion approximately 80%.
Overall Health	For AY 16-17, the PRCN program has received an Overall Health Call of Healthy .
Distance Education	The PRCN program has one DE class. The ARPD data is in error reporting 6 DE courses taught. The fill rate for our one course is 100% of the students in the cohort.

Perkins Core Indicators (if applicable)		Perkins IV Core Indicators	AY 16-17
	1P1	Technical Skills Attainment	Met
	2P1	Completion	Met
	3P1	Student Retention or Transfer	Met
	4P1	Student Placement	Not Met
	5P1	Nontraditional Participation	Not Met
	5P2	Nontraditional Completion	Not Met
	<p>Indicator 4P1-Not Met: Graduates have been getting jobs in long-term care and community settings. Job placement will be affected if a graduate does not pass NCLEX-PN or if they do not seek employment and continue on with the nursing ladder (RN-BSN).</p> <p>Indicator 5P1 & 2-Not Met: Participation of men in nursing is increasing overall. The numbers will fluctuate by cohort. On average, 20% are male. We inform and recruit for men in nursing by attending various high school career day events. For our current male students, we are working on getting them involved in the American Association for Men in Nursing (AAMN) organization, which provides leadership and comradery for men in nursing.</p>		
Performance Funding Indicators (if applicable)	N/A		
What else is relevant to understanding the program's data? Describe any trends, internal/external factors, strengths and/or challenge that can help the reader understand the program's data but are not discussed above.	<p>The LPN level of practice is questionable in today's health care model. The landscape for our Associate Degree Nursing-RN graduates is changing. Acute care facilities (i.e. hospitals) are moving to hire only BSN graduates by 2020. This means that AS-NURS/ RN graduates could be competing with PRCN graduates for positions in long-term and community based care settings. This is a potential issue for the LPN level of practice and job acquisition.</p>		

PROGRAM ACTIVITIES

Report and discuss all major actions and activities that occurred in the program during the review period, including the program's meaningful accomplishments and successes. Also discuss the challenges or obstacles the program faced in supporting student success and explain what the program did to address those challenges.

For example, discuss:

- Changes to the program's curriculum due to course additions, deletions, modifications (CRC, Fast Track, GE-designations), and re-sequencing;
- New certificates/degrees;
- Personnel and/or position additions and/or losses;
- Other changes to the program's operations or services to students.

No curriculum changes or resequencing during this time period.

Division leadership has been in flux with various "interim" program directors. A new director has been hired and started June 1, 2017.

Division faculty has also been unstable, four FT Faculty positions are in various stages of recruitment.

PROGRAM WEBSITE

Has the program recently reviewed its website? Please check the box below that best applies and follow through as needed to keep the program's website up-to-date.



Program faculty/staff have reviewed the website in the past six months, no changes needed.



Program faculty/staff reviewed the website in the past six months and submitted a change request to the College's webmaster on _____ (date).



Program faculty/staff recently reviewed the website as a part of the annual program review process, found that revisions are needed, and will submit a change request to College's webmaster in a timely manner.

Please note that requests for revisions to program websites must be submitted directly to the College's webmaster at

<http://hawaii.hawaii.edu/web-developer>

PART 2: PROGRAM ACTION PLAN

AY17-18 ACTION PLAN

Provide a detailed narrative discussion of the program's overall action plan for AY17-18, based on analysis of the Program's AY16-17 data and the overall results of course learning outcomes assessments conducted during the AY16-17 review period. This Action Plan should identify the program's specific goals and objectives for AY17-18, and must provide benchmarks or timelines for achieving each goal.

The overall action plan presented in this report is based on the new program director's assessment. The new program director began her role on June 1, 2017. No AY 16-17 program review or course assessments were reported by previous director/chair.

ACTION ITEMS TO ACCOMPLISH ACTION PLAN

For each Action Item below, describe the strategies, tactics, initiatives, innovations, activities, etc., that the program plans to implement in order to accomplish the goals described in the Action Plan above.

For each Action Item below, discuss how implementing this action will help lead to improvements in student learning and their attainment of the program's learning outcomes (PLOs).

Action Item 1: Stabilize Division Faculty

Work with existing faculty to create a cohesive team of educators to support our students. Provide faculty with the tools to be successful through professional development and mentoring.

Fill all open faculty positions for Fall 2017. Train and mentor new faculty so that they feel comfortable in their new position and encourage them to bring their uniqueness to the division.

Action Item 2: Review ASN/PN curriculum for currency and adequacy in meeting End-of-Program Student Learning Outcomes.

The Division Curriculum Committee will begin review of curriculum to assure that it is current and relevant. Faculty will be working on revising and aligning PLOs with CLOs.

Facilitate data analysis and action plans for End-of-Program PLOs/CLOs.

Curriculum changes are expected, however not immediately.

Action Item 3: Decrease Attrition: Increase “on-time” completion (goal 90%)

Student support and remediation practices will be reviewed and revised to best meet student’s needs and support student success.

Historical data will be reviewed to examine reasons for non-completion.

Find funding for ATI Comprehensive Assessment and Review Program (CARP).

Action Item 4: Improve NCLEX first time pass rates: Expected Level of Achievement=95%

Review current practices for preparing students for NCLEX.

Address issue of having only one testing site in Oahu. This proves costly for students and delays testing date.

RESOURCE IMPLICATIONS

NOTE: General “budget asks” are included in the 3-year Comprehensive Review. Budget asks for the following three categories only may be included in the APR: 1) health and safety needs, 2) emergency needs, and/or 3) necessary needs to become compliant with Federal/State laws/regulations.

Provide a brief statement about any implications of or challenges due to the program’s current operating resources.

The nursing program is in dire need of replacement high-fidelity mannequins. These mannequins are used as part of our simulation program, an integral part of our curriculum and instruction. We also need professional development funds for faculty to attend national conferences. Changes in healthcare are rapid and nursing education ever evolving.

Grant funding opportunities are being pursued.

BUDGET ASKS

For budget ask in the allowed categories (see above):	
Describe the needed item(s) in detail.	None
Include estimated cost(s) and timeline(s) for procurement.	
Explain how the item(s) aligns with one or more of the strategic initiatives of <u>2015-2021 Strategic Directions</u> : http://hawaii.hawaii.edu/sites/default/files/docs/strategic-plan/hawcc-strategic-directions-2015-2021.pdf	

PART 3: LEARNING OUTCOMES ASSESSMENTS

For all parts of this section, please provide information based on CLO (course learning outcomes) or PLO (program learning outcomes) assessments conducted in AY16-17.

Evidence of Industry Validation and Participation in Assessment (for CTE programs only)

Provide documentation that the program has submitted evidence and achieved certification or accreditation (if applicable) from an organization granting certification/accreditation in the program’s industry/profession. If the program/degree/certificate does not have a certifying body, you must submit evidence of the program’s advisory committee’s/board’s recommendations for approval of, and/or participation in the program’s assessment(s).

Please attach copy of industry validation for the year under review.

Courses Assessed

List all program courses assessed during AY16-17, including Initial and “Closing the Loop” assessments.			
Assessed Course Alpha, No., & Title	Semester assessed	CLOs assessed (CLO#s)	PLO alignment (PLO#s)
No course assessment reported for AY 2016-17; see Assessment Action Plan for AY17-18.			

Assessment Strategies

<p>For each course assessed in AY16-17 listed above, provide a brief description of the assessment strategy, including:</p> <ul style="list-style-type: none">• a description of the type of <u>student work or activity assessed</u> (e.g., research paper, lab report, hula performance, etc.);• a description of <u>how student artefacts were selected for assessment</u> (e.g., the assessment included summative assignments from all students in the course, <u>OR</u> a sample of students’ summative assignments was randomly selected for assessment based on a representative percentage of students in each section of the course);• a brief discussion of the <u>assessment rubric/scoring guide</u> and the criteria/categories and standards used in the assessment.
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Expected Levels of Achievement

<p>For each course assessed in AY16-17 listed above, state the standard (benchmark, goal) for student success for each CLO assessed AND the percentage of students expected to meet that standard for each CLO.</p> <p><i>Example: “CLO#1: The standard for student success is that students will answer 80% of the questions on the final exam related to CLO#1 correctly. The expectation is that 85% of students will meet this standard for CLO#1.”</i></p> <p><i>Example: “CLO#4: The standard for student success is that students will be able to perform skills associated with CLO#4 with 80% proficiency. The expectation is that 75% of students will meet this standard for CLO#4.”</i></p>
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Results of Course Assessments

<p>For each course assessed in AY16-17 listed above, provide:</p> <ul style="list-style-type: none">• a statement of the quantitative results;• a brief narrative analysis of those results.
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Other Comments

Include any additional information that will help clarify the program’s course assessment results, successes and challenges.

N/A

Discuss, if relevant, a summary of student survey results, CCSSE, e-CAFE, graduate-leaver surveys, special evaluations, or other assessment instruments that are not discussed elsewhere in this report.

N/A

Next Steps – ASSESSMENT ACTION PLAN for AY17-18

Describe the program’s intended next steps to improve student learning, based on the program’s overall AY16-17 assessment results.

Include any specific strategies, tactics, activities or plans for improvement to program or course curriculum or instructional strategies, or changes in program or course assessment practices.

No course assessments were reported for AY 16-17. Under new leadership, nursing program faculty have been provided instruction and assistance with course assessment. We have created a course assessment schedule for AY 17-18 and will have all initial course assessments completed by the end of Spring semester.

PART 4: ADDITIONAL DATA

Cost Per SSH (to be provided by Admin)

Please provide the following values used to determine the total fund amount and the cost per SSH for your program:

General Funds = \$ _____
Federal Funds = \$ _____
Other Funds = \$ _____
Tuition and Fees = \$ _____

External Data*

If your program utilizes external licensures, enter:

PN first-time pass rates	1/2015-12/2015	1/2016-12/2016
# of PN First Time Test Takers	6	8
Haw CC PN First Time Pass Rate	5/6 83.33%	6/8 75.00%
NCSBN National Pass Rate for NCKEX-PN First Time Test Takers	81.89%	83.73%

Number sitting for an exam _____

Number passed _____

***This section applies to NURS only.**

Effectiveness Indicators		Program Year			Effectiveness Health Call
		14-15	15-16	16-17	
17	Successful Completion (Equivalent C or Higher)	84%	96%	72%	Cautionary
18	Withdrawals (Grade = W)	4	1	15	
19	*Persistence Fall to Spring	64.1%	70%	69.2%	
19a	Persistence Fall to Fall	34.4%	30.4%	11.7%	
20	*Unduplicated Degrees/Certificates Awarded	7	10	7	
20a	Degrees Awarded	0	0	0	
20b	Certificates of Achievement Awarded	7	10	7	
20c	Advanced Professional Certificates Awarded	0	0	0	
20d	Other Certificates Awarded	0	0	0	
21	External Licensing Exams Passed	100%	N/A	0%	
22	Transfers to UH 4-yr	2	3	2	
22a	Transfers with credential from program	0	0	0	
22b	Transfers without credential from program	2	3	2	

Distance Education: Completely On-line Classes		Program Year		
		14-15	15-16	16-17
23	Number of Distance Education Classes Taught	5	1	6
24	Enrollments Distance Education Classes	87	10	117
25	Fill Rate	73%	100%	84%
26	Successful Completion (Equivalent C or Higher)	77%	100%	64%
27	Withdrawals (Grade = W)	4	0	14
28	Persistence (Fall to Spring Not Limited to Distance Education)	63%	0%	48%

Perkins IV Core Indicators 2015-2016		Goal	Actual	Met
29	1P1 Technical Skills Attainment	92.00	100.00	Met
30	2P1 Completion	51.00	70.00	Met
31	3P1 Student Retention or Transfer	81.00	81.82	Met
32	4P1 Student Placement	63.87	45.45	Not Met
33	5P1 Nontraditional Participation	22.00	10.53	Not Met
34	5P2 Nontraditional Completion	22.00	14.29	Not Met

Performance Measures		Program Year		
		14-15	15-16	16-17
35	Number of Degrees and Certificates	7	10	7
36	Number of Degrees and Certificates Native Hawaiian	3	6	1
37	Number of Degrees and Certificates STEM	Not STEM	Not STEM	Not STEM
38	Number of Pell Recipients ¹	17	8	4
39	Number of Transfers to UH 4-yr	2	3	2

*Data element used in health call calculation

Last Updated: October 29, 2017

¹PY 16-17; Pell recipients graduates not majors