SITE VISITORS' REPORT
El Camino Community College
Torrance, CA

Program Type: Associate
Purpose of Visit: Continuing Accreditation
Date of Visit: February 22-24, 2011

GENERAL INFORMATION

Nursing Education Unit
Nursing Department
16007 Crenshaw Blvd.
Torrance, CA 90506

Governing Organization
El Camino Community College
16007 Crenshaw Blvd.
Torrance, CA 90506

Nurse Administrator
Kim Baily, PhD, RN
Interim Director
Telephone: (310) 660-3282
Fax: (310) 660-3439
Email: kbaily@elcamino.edu

Chief Executive Officer
Tom Fallo, EdD, MBA, BA
Superintendent/President
Telephone: (310) 660-3111
Fax: (310) 660-6067
Email: tfallo@elcamino.edu

State Board of Nursing Approval Status
Agency: California Board of Registered Nursing
Last Review: March 23-24, 2009
Outcome: Continued Approval
Next Review: 2017

Accreditation Status (Program)
Agency: NLNAC
Last Review: Spring 2003
Outcome: Continuing Accreditation
Next Review: Spring 2011

Accreditation Status (Governing Organization)
Agency: Western Association of Schools and Colleges
Last Review: October 7-9, 2008
Outcome: Report accepted, warning removed, accreditation reaffirmed
Next Review: 2014; Report requested October 15, 2010
SITE VISIT INFORMATION

I. INTRODUCTION

Site Visit Team

Chairperson
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Associate Professor of Nursing
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Indian River State College
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Ft. Pierce, FL 34981
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Member
Judith Cordia, EdD, RN
Director of Nursing and Allied Health
Nursing Department
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Kathy Wells, MSN, RN
Director
Nursing Program
Central Wyoming College
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Member
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NLNAC Criteria Used: 2008

Program Demographics:

Year nursing program established: 1962

Faculty:
Number of faculty teaching full-time in the associate nursing program: 21
Number of faculty teaching part-time in the associate nursing program: 34

Students:
Total enrollment: 344
Full-time: 344
Part-time: 0

Length of program:
74.5 units; one (1) semester (four (4) units of nursing) prior to acceptance and four (4) semesters after acceptance.

Locations:
Crenshaw Campus, Torrance, CA (main campus), visited by team
Compton Education Center, Compton, CA, 10 miles from main campus, visited by team
Third Party Comment:
The nursing unit had a reasonable process for soliciting third party comments. The methods used to announce the accreditation visit to the program’s communities of interest included notices on the College website, flyers at clinical agencies, and an announcement at an Advisory Committee meeting.

Third party comments were received in response to the solicitation. A mother and daughter attended thinking that the meeting was an informational meeting for the nursing program. They made the following comments:
- “Students are not doing good. There are lots of people working hard and can’t get in. I don’t know anyone who was in the program, that is just what I hear around.”
- “Students are dropping out, and instructors are frustrated.”
- “No one wants to go to Compton, but I don’t know where that is.”

Interviews:
Individual Conference:
Thomas Fallo, EdD, MBA, BA, Superintendent/President
Kim Baily, PhD, RN, NSN, Nursing Administrator
Maria Elena Dominguez, MSN, RN, CNS, Financial Aid Advisor

Group Conferences:
Rory Natividad, MEd, BA, Dean, Health Science and Athletics
Kim Baily, PhD, RN, Nursing Administrator
Wanda Morris, MS, BS, RN, Dean, Health and Human Services
Monica Gross, MSN, BS, RN, Assistant Director, Nursing
Pat McGinley, MSN, BSN, RN, FNP, Assistant Director, Nursing

Support Personnel (Crenshaw)
Esther Gravis, MSN, RN, Student Opportunities for Success (SOS) Coordinator
Dipte Patel, MA, BA, Director, Special Resource Center
Regina Smith, EdD, MA, BA, Dean, Counseling and Student Services
Janice Ishikawa, MA, BA, Lead Nursing Counselor
William Mulrooney, MBA, BS, Director, Admissions and Records

Support Personnel (CEC)
Lessie Barber, MPA, BS, Student Opportunity for Success (SOS) Coordinator
Patricia Bonacic, MS, BA, Director, Special Resource Center
Keith Curry, EdD, BA, Dean Counseling and Student Services
Essie French-Preston, EdS, EdD, MA, BA
Henry Ross, BA, Financial Aid Specialist
Gerald Sequeira, BS, Director, Admission and Records
Edna Willis, MS, BS, N255 Preceptorship, SOS Coordinator

General Education Faculty (Crenshaw)
Jean Shankweiler, PhD, BS, Dean, Natural Sciences
Thomas Lew, MA, BA, Dean, Humanities
Gloria Miranda, PhD, BA, Dean, Behavioral and Social Sciences
Donald Goldberg, PhD, JD, MA, BA, Dean, Mathematical Sciences

General Education Faculty (CEC)
Fazal Aasi, MD, BS, Assistant Professor, Anatomy
Ali Abbas, MA, BS, Associate Professor, Mathematics
Susan Dever, PhD, MA, BA, Dean, Academic Programs
Vanessa Hayes, MA, BA, AA, Associate Professor, Counseling
Rodney Murray, MBA, BS, Dean, Career Technical Education
Saul Panski, MA, MLS, BA, Professor, History
Ablodun Osanyinpele, MS, BS, Assistant Professor, Life Science
Chelvi Subramaniam, MA, BA, Professor, English/Speech Communication
Toni Wasserberger, MA, BA, Professor of English

College Administration
Rory Natividad, MEd, BA, Dean, Health Science and Athletics
Wanda Morris, MS, BS, RN, Dean, Health and Human Services
Lawrence Cox, PhD, CEO, CEC
Barbara Perez, MS, BS, Vice President, Academic Affairs, CEC
Jo Ann Higdon, MPA, BS, Vice President, Administrative Services
Susan Dever, PhD, MA, BA, Dean, Academic Affairs, CEC
Keith Curry, EdD, BA, Dean, Student Affairs, CEC
Rodney Murray, MBA, BS, Dean, Career Technical Education CEC

Nursing Faculty (Crenshaw)
Monica Gross, MSN, BS, RN
Pat McGinley, MSN, BSN, RN, FNP
Esther Gravis, MSN, RN
Peggy Kidwell-Udin, MEd, MSN, BSN, BA
Teresa Martinez, MSN, BSN, RN
Mary Moon, MSN, RN-C
Victoria Orton, EdD, MSN, BSN, FNP
Octavia Hyacinth, MSN, RN, FNP-C, CCRN
Kathleen Rosales, MSN, RN
Maria White, BSN, ACNP, RN
Karen Hellwig, MN, RN-BC, PHN
Kathy Morgan, MN, RN
Susan Zareski, MN, RN, CCRN, CNS
Joan Gahan, MSN, BSN, RN

Nursing Faculty (CFC)
Meta Simmons, MS, BS
Renita Scott, MS, BS
Saundra Bosfield, MS, BS
H. Frances Hayes-Cushenberry, EdD, MS, BS
Ann Sweeney, MS, BS
Deborah Hemming, MS, BS
Zenaida Mibu, MA, BS
Renee Johnson, MS, BS
Edna Willis, MS, BS
Jameelah Harris-Mims, MS, BS, RN
Lessie Barber, MPA, BS, RN

Nursing Students
Crenshaw Nursing Students, n=109
First year ADN students, n=68
Second year ADN students, n=41

CEC Nursing Students, n=35
First year ADN students, n=27
Second year ADN students, n=8
Classes Attended:
N250 Intermediate Nursing Process and the Family, Crenshaw
N150 Beginning Nursing Process and Fundamentals - Skills Lab, CEC
N154 Intermediate Nursing Process and Mental Health, CEC

Clinical Agencies and Facilities Visited:
Kaiser Permanente South Bay Medical Center
Suzy Kyurkchyan, RN, Director, Workforce/Academic Relations
Ema Kishita, MSN, RN, CNS, Clinical Educator
Laura Lazarek, RN, ECC Graduate
Jasmin Roman, RN, ECC Graduate
Angela Gonzalez, RN, ECC Graduate

Providence Little Company of Mary
Susan Rivero, RN, MSN, CCRN, New Grad Specialty Program Coordinator
Benjamin Venegas, RN, ECC Graduate
Visesh Mohan, RN, ECC Graduate

St. Francis Medical Center
Denesha Bivens, RN, ECC Graduate, Charge Nurse
Ji Youn Kim, Student
Mary Jane Briz, Student
Brenda Hernandez, ECC LVN to RN graduate

Documents Reviewed:
Catalog/Handbook/Manuals
College Catalog, 2011
Faculty Handbook, 2011
Student Handbook, Spring 2011

Department of Nursing Minutes
Associate Degree Nursing Faculty Organization Minutes, 2005-2011
Committee Meeting Minutes Binder, 2005-2011
  Curriculum Committee Minutes, 2005-2011
  Evaluation Committee Minutes, 2005-2011
  Bylaws Committee Minutes, 2005-2011
  Resources Committee Minutes, 2005-2011
  Testing Committee Minutes, 2005-2011
  Admission, Transfer, and Progression Committee Minutes, 2005-2011
Team Meeting Minutes Binder, 2009-2011
Simulation Committee Minutes, 2008-2010
Pre and Post Affiliation Meeting Minutes Binder, 2005-2011
Hospital Advisory Meeting Minutes Binder, 2000-2011
  Hospital Advisory Committee Meeting Minutes (November 30, 2011)

External Constituencies
State Board of Nursing Report, 2009
Governing Organization Accrediting Agency verification of accreditation, 2009 and 2011
Agreement between El Camino College and Compton
BRN Letter about NCLEX Scores at the Compton Center
Directors Letter to the BRN
California Board of Registered Nursing BRN documents – EDP-P-05a and EDP-P-06
Nursing/Institution Documents
Budget Details (Crenshaw and Compton), 2008-2009, 2009-2010
Current Agency Contracts
Student Records (current and recent graduates)
Faculty Curriculum Vitae (for all faculty, full- and part-time)
Class and Clinical Schedules for current semester
Nurse Executive 36 Competencies
Curriculum Evaluation Tool Binder
Hybrid Pharmacology Survey
N 158 documents
Compton Simulation Documents
Crenshaw Simulation Documents
Geriatric Log
Preceptor Resumes and Preceptor Manual
Student Introductory Letter to Preceptor
Sample Contract
Student Insurance Coverage for Clinical
Design Plans for the New Building on the Crenshaw Campus
Media at the Compton Campus
Media at the Crenshaw Campus
Exit Form Draft
Continuing Education in Technology Documents
College Student Learning Outcomes Assessment Reports
Course Evaluations Binder
  Crenshaw, 2008-2010
  Compton, 2007-2010
Compiled Program Evaluation Binder, 2009-2010
Crenshaw and Compton N150 Student Comparison Report
Attrition Rate Table for Crenshaw Cohorts and Compton Program
Student Forum Program
Admission Packets
General Nursing Orientation Sessions
El Camino College ADN Enrollment Criteria
Syllabus Disability Statement
Letter from the Department of Financial Aid, Hortense Cooper
Revisions to the Student Handbook with Student Signature Page
Pre Nursing Readiness Plan
Success Opportunities for Students
Institute for Nursing Success
Compton Center Improvement Plan
Guidelines and References for Writing Test Questions
Names of Students Participating in Committees
Organizational Chart
ADNFO Bylaws
Clinical Contact Form
Kathy Harren RN, MHA, CNE Presentation
Program Evaluation Forms
Proposal for Development of Collaborative Track Nursing Program
Dr. Baily’s Curriculum Vitae and Description of the Assistant Director of Nursing Position
Assistant Director’s Curriculum Vitae and Description of the Assistant Director of Nursing Position
Faculty Evaluation Forms for Both Campuses
Student Grievance Resolution
Course Materials
Course Syllabi
Clinical Evaluation Tools
Clinical Improvement Plan
Samples of Student Assignments - Patient Care Plans and Formal Papers
   Teaching Plan N.153
Sample Tests
Course Learning Activities
Instructional Materials
Sample of Evidence-Based Practice Implementation

Faculty and Staff Information
Faculty Information Binder Crenshaw
Faculty Information Binder Compton
Utilization of Faculty/Calculation of Loads
Position Description Instructor
Educational Specialist Job Description
Sim Tech Job Description and Resume
Math Tutor Resume
Level I and II Administrative Job Description
Senior Administrative Assistant and Instructional Assistant Job Description
Flex Requirement
Facilitator Program
Committee Participation Evaluation Tool
II. EVALUATION OF THE STANDARDS AND CRITERIA

STANDARD 1
Mission and Administrative Capacity

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.

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

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

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

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

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

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

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.

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.

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

For nursing education units engaged in distance education, the additional criterion is applicable:

1.10 Distance education, as defined by the nursing education unit, is congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit.

Commentary:

The mission and philosophy and outcomes of the nursing education unit are congruent with those of the governing organizations. The mission of the nursing education unit states: “The associate degree nursing program supports the mission of El Camino Community College (ECCC). The program offers quality, comprehensive educational opportunities and services to its diverse community, specifically those individuals aspiring to obtain the knowledge, skills and attitudes required of a registered nurse.” This mission statement is closely aligned with the mission statement of the governing organization by its focus on building the community through quality and comprehensive educational programs. The mission of the governing organization states: “El Camino College offers quality, comprehensive educational programs and services to ensure the educational success of students from our diverse community” (SSR, p. 22).
The philosophy of the nursing education unit is congruent with that of the governing organization. The associate degree nursing program at ECCC is based on a unifying theme that offers a model from which the curriculum is organized. This unifying theme identifies the nursing process as its organizing structure and is integrated with the concept of the basic human needs, wherein each individual is believed to be a biopsychosocial being with a set of basic human needs. Incorporated within the concept of basic human needs is the belief that each individual is unique due to structural variables specifically related to society, nursing, and teaching. The philosophy of ECCC states that “everything El Camino Community College is or does must be centered on its community. The community saw the need and valued the reason for the creation of El Camino College. It is to our community that we must be responsible and responsive in all matters educational, fiscal, and social.”

The nursing education unit’s mission and philosophy statements have not always been congruent with those of the governing organization. The Bylaws Committee of the nursing unit convened to review and revise the philosophy statement. The revision was approved during their June 2010 meeting. A record of this meeting and agenda was verified. However, evidence was not found that the philosophy statement has been submitted to the governing organization’s curriculum advisor for inclusion in the 2011-2012 College Catalog as outlined in the SSR.

The governing organization and nursing education unit ensure representation of students, faculty, and administrators in ongoing governance activities. Nursing students have the opportunity to participate in the nursing governing activities; evidence was found to support the efforts of the nursing education unit to include students in decision-making. For example, 17 students were listed as members of the following Committees: Simulation, Appeals, Curriculum, Bylaws, Evaluation and Testing, and Learning Resources. There was evidence of increased participation by Committee roster. Although information in the SSR reflects the participation of 31 students on Committees, documentation showed that only 17 students participated as listed on the roster. In review of Committee minutes and attendees, all students listed as members of the aforementioned Committees do not actively participate. Documentation includes attendance at the meetings on October 2010, May 2010, April 2010, and March 2010. There was no evidence that students participate at the governing organization level. This was confirmed through discussions with the Deans and Vice Presidents. The Dean of Student Services at CEC verbalized participation of students at the governing organization level on the CEC Campus. However, the Dean did not submit documentation.

Nursing faculty participate in the nursing education unit governance. Evidence supports the faculty’s active involvement in the following Committees: Curriculum; Evaluation; Test Development; Acceptance, Transfer, and Progression; Bylaws; Learning Resources; Student Affairs; and Simulation. A review of Committee meeting minutes and attendance reflected faculty participation throughout the year. Documentation was not provided to verify faculty representation at the governing organization level. As reflected in the SSR, each person listed as a participant in governance at the organization level has the title of Assistant Director, Director, or Dean. The SSR reflects that Dr. Kim Baily, the nurse administrator, participates in College governance by advocating for the Nursing Department in various College bodies. The College President expressed the need and welcomed the opportunity to have nursing faculty participate in College governance activities.

Communities of interest were defined by the nursing education unit as representatives to the Hospital Advisory Committee. Other communities of interest included the California State Board of Nursing (CBRN), nurse educators, and administrators at clinical facilities. Documentation did not support that the identified communities of interest have ongoing input into program processes and decision-making.

In June 2010, the nursing education unit established and implemented an initiative to increase the input of communities of interest into program processes and decision-making. The Bylaws Committee created a clinical contact form that was used to collect the contact information on any clinical nurse expert from the clinical site. Contact information for 15 clinical nurse experts was acquired. Of those 15, ten (10) new
members of the communities of interest (Advisory Board) were secured. The first meeting of the Advisory Board including these new members was held in November 2010. Twenty people were in attendance with nine (9) from communities of interest.

Partnerships exist between the nursing education unit and other entities to promote nursing education, enhance the profession, and benefit the community. The nursing education unit has benefited from two (2) partnerships that promote nursing education and the nursing profession and benefit the community, Providence Little Company of Mary Medical Center (PLCMMC) and Department of Health Services Tutoring and Mentoring Program (DHSTMP). The PLCMMC provided funding for additional faculty for instruction and clinical supervision of extended Campus students. The funding provided extended Campus accommodations for 24 additional students each semester for a period of five (5) years. This partnership concluded with the final class graduating Fall 2010.

The purpose of the partnership with the DHSTMP was to offer personalized academic and clinical support for nursing students. The program was designed to improve study skills and enhance the overall learning process. The program provides additional supportive seminars and/or workshops on topics such as written and oral communications, academic advisement, stress management, study skills, pharmacology reviews, clinical remediation, competency, and math computation. A description of completed and active partnerships can be found in the SSR (pp. 28-31).

Dr. Kim Baily is the Director of the nursing education unit. She has obtained a baccalaureate of science in nursing, a master’s of science in nursing education, and a doctor of philosophy degree. The Director’s credentials were verified by review of the administrative file. Dr. Baily is documented as the Director with authority and responsibility for the development and administration of the nursing education unit. She has adequate time and resources to fulfill the role responsibilities. The Director has two (2) Assistant Directors who are fully involved in the nursing education unit teaching courses, assisting in administrative duties, and performing as Chairs of Committees.

The Director provides leadership and direction in the development, evaluation, and revision of the curriculum and serves as Chair of the Associate Degree Nursing Faculty Organization. The Director also coordinates courses, clinical agency placements, and faculty assignments. She is responsible for the two (2) pre-licensure programs and one (1) post-licensure certificate program. The two (2) pre-licensure programs, certified nursing assistant and home health aide, are offered each semester, and the basic perioperative nursing is a post-licensure class that is offered twice per academic year. Administration of these programs is part of the Director’s responsibilities. However, since the acquisition of Compton Community College, she has not sustained full authority and responsibility for the nursing education unit.

On August 26, 2006, El Camino College entered into an agreement with the Compton Community College District (CCCD) to provide for the continued education of students of Compton Community College, now known as the Compton Education Center (CEC). CEC is an extension of ECCC. The nursing program at CEC is not considered a separate entity from the program on the main Campus of ECCC but is part of the ECCC nursing education unit. ECCC promotes and provides details that both campuses/locations operate as one nursing program.

Overwhelming evidence supported that the program does not function or operate as a single nursing program. Evidence reviewed by the site visitors showed that there are distinct differences in the budgeting process and approval, faculty evaluation, and overall leadership of the two locations. CCC maintains the position of Dean of Nursing and Childcare. Wanda Morris, MSN, RN, is the current Dean. Dr. Baily, Ms. Morris, and the President verified that Ms. Morris has full authority for the budget at CEC. Ms. Morris’s authority is also outlined in the contract between ECCC and CCCD. The Director does not even have approval authority for the CEC budget.
The Director and the Dean of Nursing and Childcare at CEC stated that they communicate often, meeting weekly to discuss the program and any concerns necessary to address. There was no documentation of the meetings. Both verbalized the use of email to communicate with one another. The Dean stated that she visits the Crenshaw location for meetings but could not confirm the frequency of visits to CEC by the Director. Site visitors reviewed an organizational chart that indicated Dr. Baily as Director of Nursing; however, there was no depiction of who reports to Dr. Baily.

Faculty verbalized and verified that their original evaluation processes continue unchanged. The faculty at ECCC and CEC verbalized a distinct difference in the persons involved in their evaluation process, providing evidence that the Director is not fully responsible and involved in the evaluation of all faculty. In discussions with the faculty, there was clear information that Ms. Morris performs evaluations of faculty at CEC, and Dr. Baily performs faculty evaluations at the Crenshaw Campus location. There is no documented evidence to support the Director's involvement in all faculty evaluations. Faculty also stated that it is difficult to have a Director as the administrator of the nursing unit when there is a Dean in an Assistant Director role at the CEC location. In actuality, the discrepancy in the titles precludes Dr. Baily from having full authority for the nursing program.

The Director has adequate resources for the nursing education unit. Despite the shortfall in funding from the State of California budget for community colleges, there are sufficient fiscal resources available. The Director typically attends two (2) conferences a year, and the College provides $300 towards attendance. The cost for attendance at the two (2) meetings was nearly $2,000. The difference is covered by the ECCC Foundation and grant monies. For the CEC location, travel is an integral part of the fiscal year budget. All required conference attendance is paid for at a per diem rate according to the procedure of the District. Typically, conferences are not to exceed $1,500 for required travel costs. Ms. Morris attends administrative conferences.

The Director does not have full authority to prepare and administer the budget. As stated, there is documented evidence to support the fact that the Dean of Nursing at the CEC location has full authority and responsibility for the budget and processes at CEC.

Faculty were able to articulate the process that is used for providing their input into the budget process. At the beginning of the academic year on the main Campus, the College allots a budget to the Nursing Department to cover expenses that include faculty and administrative salaries and benefits. The College currently supports 13 full-time nursing faculty on the ECCC Crenshaw location.

Through the Director's leadership and direction, in addition to salaries and benefits, funds are also included in the budget to cover instructional and non-instructional materials. The Director utilizes faculty input to determine what instructional supplies and materials to purchase. The Department maintains a wish list of equipment and software, and as funds are available, purchases are made for the Department. On occasion, outside agencies contract with the College to use the simulation laboratory, and some of the resulting funds are used to maintain and replace laboratory equipment. At the time of the visit, two (2) new intravenous pumps were being purchased to replace obsolete pumps.

Policies of the nursing education unit are comprehensive and provide for the welfare of faculty and staff. Policies such as academic rank, salary, benefits, and grievance procedures are consistent with the governing organization and have been approved by the Board of Trustees, El Camino Community College District, and the El Camino College Federation of Teachers, Local 1388, AFT, AFL-CIO. All College policies are delineated in the contract and are available. There are several policies of the nursing education unit that are not consistent with the governing organization. The table below provides the name of the policy and the difference as specified in the SSR (p. 34).
### Specific Nursing Education Unit Policies That Differ From Other Policies On Campus

<table>
<thead>
<tr>
<th>Policy</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Load</td>
<td>Fifteen lecture hours or 20 laboratory hours are required per contract. However, nursing faculty have many additional hours required in clinical preparation and meetings that are necessary for bringing students to the clinical facilities. Faculty estimated that it takes an additional 40 hours of preparation each year to get students cleared, and faculty prepared to enter the clinical facilities.</td>
</tr>
<tr>
<td>Qualifications</td>
<td>A California Teaching Credential is required for most faculty positions but is not required for nursing. The Board of Registered Nursing delineates nursing faculty qualifications. An MSN is required for all full-time faculty and all faculty teaching theory. Faculty in the clinical setting must hold a minimum of a BSN plus two (2) years of relevant clinical experience.</td>
</tr>
<tr>
<td>Conferences</td>
<td>The College makes $200 available per year. Additional conference monies are available through the Madden Fund. For the 2010-2011 academic year, $7,000 is available to pay for nursing conferences. At the Compton Center, funds can be obtained through professional development as available.</td>
</tr>
<tr>
<td>Medical Exam</td>
<td>Tuberculosis screening is required (utilizing skin test or chest X-ray) every four (4) years for College faculty. Nursing faculty must fulfill clinical facilities extensive health requirements annually.</td>
</tr>
<tr>
<td>Clinical Proficiency</td>
<td>Requirements for nursing faculty include a registered nursing license, BCLS certification, ACLS and PALS, demonstration of skills, demonstration of proficiency in use of electronic medical record, and other facility requirements.</td>
</tr>
</tbody>
</table>

In addition to the above policies, there are some differences between policies on the Crenshaw Campus and CEC locations. This is due to the fact that each Campus is governed by its own contract. Differences related to faculty evaluations are as noted. There is also a difference in remuneration. Compton full-time faculty receive a $5,000-per-year stipend that faculty teaching at Crenshaw do not receive. This was not mentioned by any faculty member.

There is a written policy and procedure to provide due process for review and resolution of student grievances. Records of program complaints on the Crenshaw Campus are kept in the Student Development Office under the direction of Carolee Vakil-Jessop. Records from that Department show that from 2007 to the present, one (1) grievance has been filed. This grievance was forwarded to the Human Resources Department. Records indicate that grievances are resolved in a timely manner. A review of a grievance submitted by a student shows that the policy was followed and the grievance resolved appropriately. There was one (1) formal complaint at the CEC location; evidence regarding the grievance at CEC was requested but not provided by the end of the visit.
Summary:

Compliance:

The program is not in compliance with the Standard as Criteria 1.2, 1.3, 1.6, and 1.7 are not met, as evidenced by:

- There is a lack of representation and participation of students and faculty in ongoing governance activities at the governing organization level.

- There is a history of communities of interest having minimal involvement in providing input into the nursing education unit. There is no established process for ensuring continuation of involvement by communities of interest.

- The nurse administrator does not have full authority and responsibility for the development and administration of the program.

- The nurse administrator does not have authority to prepare and administer the program budget.

With the following area needing development:

- Implement strategies to improve the relationship between the two locations of the nursing program to ensure program goals and student learning outcomes are met.
STANDARD 2
Faculty and Staff

Qualified faculty and staff provide leadership and support necessary to attain the goals and outcomes of the nursing education unit.

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.

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.

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

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

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

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

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

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

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

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

For nursing education units engaged in distance education, the additional criterion is applicable:

2.10 Faculty (full- and part-time) engage in ongoing development and receive support in distance education modalities including instructional methods and evaluation.

Commentary:

<table>
<thead>
<tr>
<th>Number of Faculty</th>
<th>Doctoral Nursing</th>
<th>Non-nursing</th>
<th>Master’s Nursing</th>
<th>Non-nursing</th>
<th>Baccalaureate Nursing</th>
<th>Non-nursing</th>
<th>Associate Nursing</th>
<th>Non-nursing</th>
<th>Other Nursing</th>
<th>Non-nursing</th>
</tr>
</thead>
</table>
Faculty narrative reported in the SSR for Standard 2 (pp. 35-44), as well as in the faculty profiles included in Appendix B (pp. 125-130), was based on the number of faculty in the Fall 2010 Semester and was not current at the time of the site visit. The Director of Nursing provided updated faculty information based on the number of faculty currently on contract for the nursing program. There are a total of 55 full- and part-time faculty in the nursing program at El Camino College. All 21 full-time faculty hold a minimum of a master’s degree with a major in nursing; three (3) full-time faculty also hold doctoral degrees in education. These credentials were verified onsite by a review of official transcripts housed in the faculty files securely located in the nursing office on the Crenshaw Campus.

As reported in the SSR (pp. 35-36) and verified in the faculty interviews, faculty maintain expertise in their areas of responsibility through professional development, educational conferences, and maintaining clinical practice. Although not described in detail in the SSR, the faculty files contain a comprehensive profile form for each member, which is prepared for the California Board of Registered Nursing verifying of credentials and areas of clinical expertise. These forms list areas of current clinical experience and evidence of meeting required annual clinical facility competencies, as well as faculty publications in nursing journals, coursework toward the next degree, professional presentations to peers, and ongoing continuing education and professional development. Review of data indicated that four (4) full-time master’s-prepared faculty are currently working on their doctorate degrees. Two (2) full-time master’s-prepared faculty have completed doctoral coursework toward a doctorate in nursing practice or doctorate in nursing education.

Twenty of the 34 part-time faculty hold a master’s degree with a major in nursing. One (1) part-time faculty member who is routinely assigned to skills laboratory instruction and the faculty mentoring program holds a doctorate in education. This results in 62% of the part-time faculty holding at least a master’s degree in nursing. Twelve of the remaining 13 part-time faculty hold a baccalaureate degree in nursing. Instructional responsibilities of the baccalaureate-prepared faculty consist of clinical and laboratory instruction according to the documents reviewed onsite and confirmed in the faculty interviews. According to the faculty profile forms verified onsite, three (3) of the 12 baccalaureate degree part-time faculty are currently working toward a master’s degree in nursing.

As reported in the faculty profile located in Appendix B of the SSR (p. 127) the remaining part-time faculty member holds an associate degree in nursing and is assigned skills laboratory duties. The position held by the associate degree-prepared nurse is titled Educational Specialist. The job description for this position was reviewed onsite and is consistent with the duties identified in the SSR. According to the systematic program evaluation plan located in Appendix C (SSR, p. 140), the action plan set in Spring 2010 indicated that the associate-prepared faculty must obtain a baccalaureate degree. However, review of faculty profile forms located in the faculty member’s files did not indicate any coursework completed by this faculty member toward the baccalaureate degree.

The California Board of Registered Nurses identifies three (3) classifications of faculty credentialing: an instructor must hold a minimum of a master’s degree in nursing; an assistant instructor must hold a minimum of a baccalaureate degree in nursing; and a clinical teaching assistant can be a registered nurse with a minimum of one (1) year of direct patient-care experience. Based on these requirements, all current faculty meet the requirements set by the California Board of Registered Nursing and have been approved for their corresponding faculty roles based on their clinical expertise. This approval, communicated in a letter from the California Board of Nursing to the Director of Nursing, was confirmed onsite during review of faculty files for all current faculty. According to the SSR, in August 2008, the El Camino Community College District set a requirement of a baccalaureate degree plus two (2) years of appropriate clinical experience for laboratory instructors (pp. 36-37). Based on this governing organization requirement, the associate degree faculty member does not meet this requirement. However, the faculty member was hired at El Camino College in 2002, six (6) years prior to the implementation of this requirement.
As reported in the SSR, practice laboratory personnel at El Camino College are responsible for “monitoring student skills practice, maintaining equipment, coordinating the purchase of equipment and supplies, setting-up equipment for skills lab classes and assisting with student skills check-offs” (p. 37). To clarify routine role expectations of skills laboratory personnel, the faculty verified that these individuals complete student skills performance evaluations, assign grades, and provide procedure instructions in the laboratory setting on the Crenshaw Campus. Compton Center faculty verified that these roles are performed by master’s-prepared faculty in the skills and simulation laboratories. Although two (2) of the three (3) laboratory personnel at the Crenshaw Campus are identified as holding baccalaureate degrees, meeting the requirements of the governing organization, the California Board of Registered Nursing, as well as the NLNAC, the associate-prepared skills laboratory personnel engages in the teaching and evaluation of students and does not meet the NLNAC Criterion requirements.

Per the SSR and as verified in interviews with students and faculty, the number and utilization of faculty, both full- and part-time, are adequate to ensure that program outcomes are met. The SSR indicates that the program’s benchmark identified in the systematic plan is to have at least 75% of instruction assigned to full-time faculty (pp. 38-40). Although the data indicate that the program is not currently meeting this benchmark, both the Crenshaw Campus and Compton Center locations have increased their numbers of full-time faculty. The SSR outlines how faculty instructional load is calculated; this information was updated for the Spring 2011 Semester faculty complement onsite. Only one (1) faculty member is currently assigned overload; this faculty member has 10% release time for participation on the Evaluation Committee and is currently five (5) load units over the maximum full-time load. The full-time load stated in the SSR is consistent with faculty loads in other disciplines at El Camino College, as verified in interviews with the Director, Deans, and faculty. Students verified that the faculty were available for academic consultation when on campus, and are “always right there” when in the clinical setting.

Faculty articulated that they teach evidence-based practices throughout the curriculum. The SSR describes the recent integration of the Quality and Safety Education for Nurses (QSEN) Competencies into each course. The Curriculum Committee is systematically evaluating all courses to implement the QSEN Competencies and other concepts supported by evidence-based practice. Documents reviewed onsite demonstrated a student learning activity to evaluate the presence of evidence-based practices in the clinical setting. During student interviews, they were asked to give an example of what evidence-based practice was and how it was integrated into their courses. Students were able to clearly express how the faculty incorporated evidence-based practices and the QSEN Competencies into classroom activities as well as clinical.

During the onsite interviews with the Director, Assistant Directors, and the faculty, site visitors determined that there are several non-nurse staff for the nursing program. At the Crenshaw location, there is one (1) full-time senior administrative assistant and two (2) administrative assistants, one (1) full-time and one (1) part-time. There is also one (1) simulation laboratory technician, who is responsible for maintaining the audiovisual components and other technical equipment of the simulation laboratory. Job descriptions for non-nurse staff reviewed onsite demonstrated consistency with the duties reported in the SSR and were confirmed by the Director. At the Compton location, non-nurse staff include a full-time senior administrative assistant to the Dean of the Health and Human Services Department and two (2) full-time instructional associates who assist in maintaining laboratories. Students and faculty indicated that the non-nurse staff is helpful and supportive.

Faculty orientation and mentoring in their areas of responsibility are not consistent between the Crenshaw Campus and the Compton Center locations. According to the SSR, new faculty hired at the Crenshaw Campus receive a formal orientation through the “New Faculty Learning Academy” sponsored by the Staff Development Department (p. 44). This program is not offered for faculty at the Compton Center. As reported in the SSR, the Nursing Department has a mentoring facilitator program, which provides a mentor for the various aspects of the faculty role. The part-time faculty mentor schedules weekly seminars for nursing faculty from both locations. However, in contrast with the information reported in
the SSR, the faculty teaching at Compton verified that they do not participate in this program. They indicated that there is no formal mentoring that occurs for nursing faculty assigned to teach at the Compton Center.

As reported in the SSR and verified onsite, systematic assessment of faculty performance occurs based on competencies identified by the institution. The evaluation tool used as the guide for faculty tenure assessment was reviewed via the link provided in the SSR (p. 44). Although there is evidence that faculty performance is routinely evaluated, faculty interviews confirmed that the process is not equitable between the faculty groups at each site. The Crenshaw faculty reported that their evaluation occurs based on their contract status and includes student evaluations and goal-setting with the Director of Nursing. Compton faculty indicated that their process includes colleague feedback from Crenshaw nursing faculty (usually a Chairperson of Department Committees) as well as from interdisciplinary colleagues teaching at the Compton Center, student evaluations, and a review of instructional materials. These data are compiled and reviewed between the faculty and the Assistant Director at the Compton Center. The Compton nursing faculty clearly expressed their concern regarding the expectation that they were to be evaluated with input from the nursing faculty at the Crenshaw Campus, but they did not have the opportunity to provide evaluation input regarding the Crenshaw faculty performance.

Summary:

Compliance:

The program is in compliance with the Standard with the following areas needing development:

- Ensure that the credentials of practice laboratory personnel are commensurate with their level of responsibilities.

- Ensure a consistent orientation and mentoring program for all faculty.

- Ensure that assessment of faculty performance is systematic and consistent.
STANDARD 3
Students

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

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.

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.

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

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 program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.

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

3.5 Integrity and consistency exist for all information intended to inform the public, including the program's accreditation status and NLNAC contact information.

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

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

For nursing education units engaged in distance education, the additional criterion is applicable:

3.8 Information related to technology requirements and policies specific to distance education is clear, accurate, consistent, and accessible.

Commentary:

Student policies of ECCN Nursing Department are congruent with the governing organization. The nursing unit complies with student policies of the governing organization.

Student policies are publicly accessible through several media including the ECCN Catalog (published 2010-2011 edition), ECCN class schedule, CEC class schedule, Nursing Program Handbook, and course syllabi. The Student Handbook is updated at the end of each academic year by the Student Affairs Committee, and any changes are made public at the annual student forum which is held at the beginning of the academic year; at student association meetings; in individual courses; and on the nursing unit's website. Policy information was verified in course syllabi. Students were able to articulate the different methods that the nursing unit uses to provide up-to-date policy information.

Student policies are non-discriminatory. The governing organization has a non-discriminatory policy in effect that states that the ECCN District is committed to providing equal opportunity in which no person is subjected to discrimination on the basis of ethnic group identification, national origin, religion, age,
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sex, race, color, ancestry, sexual orientation, physical or mental disability, or retaliation. There is a mixed representation of ethnic groups admitted or matriculating through the nursing unit: 25% African-American, 18% Hispanic, 8% Asian, 19% Caucasian, 24% Filipino, and others. About 21% of the students are male, and 79% are female. Age groups are analyzed by identifying those students that are older or younger than 30. About 51% are under 30, and 49% are over 30.

Differences in policy between the nursing unit and governing organization are justified by the goals and outcomes of the nursing unit. General student policies that are different from the governing organization are necessary to meet the outcomes of the nursing unit. Websites for College and nursing program policies can be found in the SSR (p. 47).

Admission:
ECCC has an open admission policy. The nursing program is open to all applicants, but those applicants must meet certain criteria to ensure that they have the necessary knowledge base upon which to build nursing concepts. Admission criteria can be found in the SSR (p. 48) and the websites (p. 49).

Attendance:
ECCC students who miss the first class meeting or who do not attend class regularly may be dropped by the instructor. Students whose absences exceed 10% of scheduled classes may be dropped by the instructor. The nursing unit expects all admitted nursing students to be present for all didactic and clinical sessions.

Uniform Guidelines/Dress Code:
According to the Student Handbook, students must dress in the approved clinical uniform by the nursing unit. The nursing unit approved the clinical uniform attire for all clinical experiences. This includes clinical time spent in the skills and simulation laboratories. Students must wear their name badges at all times while in the Nursing Department and clinical settings. Course instructors and/or clinical faculty may mandate alterations in these guidelines in order to comply with agency dress code requirements. Various locations for student policies can be found in the SSR (pp. 52-53).

The students of ECCC and the nursing unit have many diverse services available. Student services are commensurate with the needs of the students pursuing or completing the associate degree program. Department services are available to assist the diverse demographic of students enrolled in the nursing unit. Student services using varied and alternative methods of delivery are available to nursing students.

Counseling services are made available to assist students with career and academic guidance. Services are particularly intended to assist students in clarifying career and life goals and in developing an appropriate course of study based on the student’s goal, aptitude, and interests. Counseling may be specific to the student’s program of study. Those students who are eligible to declare a major are highly encouraged to seek advice.

The Career Center offers extensive exploration and evaluation of interests, aptitudes, skills, and other characteristics related to vocational and pre-professional planning. The Career Center has information, including books, Internet career resources, career pamphlets, video, occupational files, and a computerized career information system describing thousands of jobs and providing information on local, state, and national job markets.

The Learning Resource Center (LRC) offers academic support services and resources including tutoring, instructional software and media materials, and individualized instruction in basic reading and math. Services are provided by faculty and graduates of ECCC.

Health services are provided for students 18 or older who pay the mandatory health fee. Students have the option to pay the fee each semester to cover the operation, supervision, programs, and services of the
Student Health Services. The health center is staffed by nurse practitioners, registered nurses, physicians, clinical psychologists, and a chiropractor. The Health Center provides health examination services to students at a nominal fee and helps nursing students complete the physical examination, immunizations, and titers necessary for entry into the nursing program and ongoing clinical placement. The Health Center is located on the Crenshaw Campus, but it is available to students at CEC who pay the appropriate fee.

Not all students were able to articulate the services available to the student body. Students expressed concern about services being available on the main Campus and not on the CEC Campus. The travel time between Campuses poses a problem for many students who have the desire to utilize student services, but are unable to do so because of travel time. Additional services are described in the SSR (pp. 54-59).

Nursing student records contain admission and advisement information, clinical evaluations, and other information related to progression in the nursing program. These records are kept and stored in compliance with the California Education Code, section 76230 – 76234; the Family Educational Rights and Privacy Act (FERPA); and the Health Insurance Portability and Accountability Act (HIPAA) at both the Compton and Crenshaw Campuses. All education records, including financial records, of students who enroll at ECCC are kept in accordance with the provisions of FERPA.

The Director of Financial Aid and Scholarship is responsible for maintaining Title IV eligibility and certification requirements. Financial aid staff attend state and federal workshops and training to increase their level of competence and practice related to maintaining and providing appropriate financial aid information to students. The training helps to increase their levels of competence, refresh their knowledge, and reinforce good practices.

The Director of Financial Aid and Scholarship confirmed that the Financial Aid Department is in compliance with the Higher Education Reauthorization Act Title IV regarding eligibility and certification requirements. In addition, the Director of Financial Aid and Scholarship at the Compton Center confirmed that the Center is in compliance with the Higher Education Reauthorization Act Title IV. Students from the Crenshaw and Compton Campuses have the option to receive a debit card in place of a check to access their financial aid.

Information regarding all methods of financial aid is posted on the ECCC website. Instructions for applying for financial aid are provided. A video orientation and lessons describing the process for securing loans and other forms of financial aid are available on the website. Students may also use Twitter to obtain updated information. In addition, the Financial Aid Office publishes the Financial Aid Reference Handbook for all students requesting loan information on the governing organization’s website.

ECCC participates in the Federal Family Education Loan Programs (FFELP). Student loan information is accessible on the National Student Loan Database System (NSLDS). First-time borrowers are required to complete a loan counseling session before a loan can be processed. After a loan application is submitted to the Financial Aid Office, information regarding loan eligibility and loan entrance interviews will be mailed to the student. During the loan entrance interview session, students are required to take and pass a test on materials contained in the student loan application packet. In accordance with federal loan regulations, all loan checks for nursing students are disbursed when the second module begins.

Because of the large number of student borrowers who fail to repay their student loans, a loan management session is required prior to receiving the second disbursement. In addition, students are required to complete an exit counseling session, during which students are informed of their rights and responsibilities as borrowers. Conditions for canceling all or parts of their loan, deferment and forbearance, and loan repayment by plan amount are also discussed. Students were able to verbalize the requirements that must be fulfilled to receive financial aid. The nursing unit submitted in the SSR that the current default loan rate is less than 10%. However, the default rate was confirmed to be 12.8%.
Students are informed of their ethical responsibilities regarding financial assistance. Students receive information about their ethical responsibilities regarding financial assistance during the loan counseling sessions that includes information on the repayment of loans. The Financial Aid Reference Handbook includes a typical monthly repayment chart for students who obtain a loan, and therefore accept the responsibility for the repayment. Students were able to articulate the steps that are taken to inform them of their financial obligation regarding educational loans and resources. The students also expressed the availability of counseling by financial aid advisors/counselors.

The nursing unit provides the public with truthful and consistent information. Information is provided to the public through the ECC Catalog, course schedules, admission requirements packet, upward mobility program packet, Nursing Student Handbook, and nursing syllabi, and websites. This information includes the accrediting organizations, their contact information, and accreditation status.

The nursing program clearly and consistently communicates policy, procedure, and program information to students in a timely manner. Changes in policy are communicated to the students through email, announcements in class, postings on information boards, and at the student forum at the beginning of the semester. The students were able validate this information.

All students from both locations are required to attend information technology orientation sessions. Students in Nursing 150 receive an orientation to Assessment Technologies Incorporated (ATI) from an ATI representative and are required to attend a simulation laboratory orientation. Students in Nursing 145 must attend an information technology orientation for the Library Media Technology Center.

Most clinical facilities require students to utilize electronic documentation during clinical sessions. Students are required to complete the training on the facilities’ electronic documentation system. The training has evolved from instructor-guided to providing online training accessed from the convenience of the student’s home or from a Campus computer lab. Faculty are available for student support by phone or MyECC. Additionally, online chat with technology support personnel is available to students and faculty on the ECC Portal.

Summary:

Compliance:

The program is in compliance with the Standard with the following area needing development:

- Ensure that students are aware of and have accessibility to student services provided at both program locations.
STANDARD 4
Curriculum

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

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

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

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

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

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

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.

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.

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.

4.8.1 Student clinical experiences reflect current best practices and nationally established patient health and safety goals.

For nursing education units engaged in distance education, the additional criterion is applicable:

4.9 Learning activities, instructional materials, and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes.

Commentary:

The curriculum of the ECC associate of science nursing program was developed from national standards, guidelines, and competencies. The material is presented using a basic-needs approach with the nursing process as the unifying theme. An explanation of basic needs related to the nursing process can be found in the Associate Degree Nursing Program Student Handbook (pp. 5-7) and the SSR (pp. 120-124). Faculty were able to explain the curriculum and the relationship between basic needs and the nursing process. The curriculum was granted continuing approval by the California Board of Registered Nursing in a letter dated June 15, 2009, and another letter of approval of a minor curriculum change dated May 20, 2010.

As explained in the SSR, the curriculum is based on the NLN Educational Competencies for Graduate Associate Degree Nursing Programs (2000) and the Nurse Executive Thirty-six Competencies for Entry Level Registered Nurses (2008) (p. 62). These competencies were utilized as a framework for building
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the leveled Student Learning Outcomes (SSR, pp. 63-64). These are clearly articulated and explained by faculty. They are also available to students in the Nursing Student Handbook (pp. 8-9). Program outcomes are included in the SPE (SSR, pp. 170-174). The SSR contains a table comparing ECCC's six (6) core competencies with the nursing program's Student Learning Outcomes and one (1) of Program Outcomes (pp. 23-24).

In September 2010, the Curriculum Committee agreed to integrate QSEN Competencies into the curriculum. The curriculum will be examined for deficiencies related to QSEN and include new material according to the following schedule: Safety in Fall 2010; Teamwork and Collaboration and Quality Improvement in Spring 2011; and Patient-Centered Care and Informatics in Fall 2011.

The curriculum was initially developed by faculty at the Crenshaw Campus and then adopted by faculty at the Compton Center. Faculty explained that after a course is taught, faculty teams from both campuses assigned to the course will evaluate it and make changes as needed. A Curriculum Evaluation Tool was developed in 2009 and is utilized annually by nursing faculty to evaluate courses in relation to NLNAC Criteria 4.1, 4.3, 4.4, 4.5, and 4.8.1. Site visitors found that the tool does relate to these Criteria and has been utilized. However, the SPE for 2009-2010 (SSR, pp. 149-154) does not contain aggregated results. It is stated in the table that the criteria were met, but there are no actual results related to courses.

Site visitors initially met with the faculty teaching at the Crenshaw Campus and the Compton Center separately. It was difficult to discern faculty input into the curriculum and the SSR due to multiple initial complaints that the "other faculty" did not help achieve a smooth transition or provide input into the SSR. The site visitors asked the faculty to meet together, and better information was obtained. The meeting allowed site visitors to determine that faculty understand the curriculum, and all faculty contribute to it.

ECCC has adopted a new program called CurricUNET, which will assist with evaluation of curriculum. Faculty are currently being educated in the use of this program. The College requires that all courses be evaluated every four (4) years, and Table 18 (SSR, p. 66) illustrates the schedule for course review through 2014.

Student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress. The philosophy and conceptual framework serve as a unifying theme throughout all courses and are evident in student learning outcomes, course objectives, clinical objectives, and evaluation tools. Review of course syllabi and evaluation tools indicated that basic needs theory and the nursing process are interwoven throughout each course and evaluation tool. The outcomes are clear and progressive as demonstrated in the SSR (pp. 63-64, 72).

Evidence of cultural, ethnic, and socially diverse concepts is included in each course as was verified in a review of course syllabi. They were also a component of evaluation tools. The diverse ethnicities and cultures of Southern California are evident in the students, faculty, and patients, which leads to discussions related to these topics. One (1) of the observed classes began by the instructor asking students to identify themselves and their cultures. There were 11 different cultures in a group of approximately 30 students. The discussion then progressed as the students related the daily topic to their culture. Nursing 153 requires students to write a teaching plan utilizing cultural concepts in the education of a preoperative patient. Student work was reviewed by the visitors.

The evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes. Students are required to achieve a 75% in all theory courses and a satisfactory grade in clinical and laboratory. The grading scale is consistent for the nursing program but higher than general education courses at ECCC. If a final grade is unsatisfactory in any part of a nursing course, the student cannot advance in the program. Evaluations are based on program and course outcomes. The students stated that they were aware of the evaluation
process and tools. A review of the tools verified progression. Tables 19 and 20 demonstrate didactic and clinical evaluation methodologies (SSR, pp. 69-71).

A review of course materials illustrated that the outcomes include the cognitive, psychomotor, and affective domains as they apply to the classroom, clinical, and laboratory settings. The outcomes for the first nursing course are focused, specific, and basic. Outcomes increase in complexity, and in the last class are more encompassing of the overall program outcomes. Student work was reviewed by site visitors that verified that different methodologies are utilized to achieve the outcomes. A review of course examinations indicated an increase in difficulty as the student progresses in the program. Examinations were different at the two (2) locations.

Clinical evaluation tools measure established professional and practice competencies and are formative and summative. Student learning outcomes are progressive and clearly stated. The tool is completed weekly so the student is well informed of whether performance is unsatisfactory. If performance is unsatisfactory, the instructor initiates a clinical improvement plan detailing what the student needs to do to improve performance. The student must be rated satisfactory in all areas by the end of the term to receive a passing grade. A review of student files indicated that not all evaluations had been submitted for the past term. Some were submitted, but did not contain student signatures.

A final evaluation methodology is the successful completion of the ATI-RN Comprehensive Predictor Examination. Students must pass the examination to receive a passing grade in the course. If a passing grade is not achieved, remediation must be completed before a second attempt can be made. Table 23 shows the correlation between the ATI score and a class grade (SSR, p. 74).

In Fundamentals at the Compton Center, laboratory skills are taught by full-time faculty. However, both locations have laboratory personnel with ADN or BSN degrees who also evaluate students' skills.

The faculty explained that they introduce national standards, technological advances, and best practices into the curriculum wherever possible. Human patient simulation is included in every course at both sites. For each scenario, students receive an orientation, participate in the scenario, debrief, evaluate the scenario, and resume the scenario with revisions, if necessary. Faculty are being educated in the use of course management software to allow students to upload course materials electronically. Turnitin.com was utilized for the first time in Fall 2010. There are additional advances being implemented such as clickers in the classroom, conference calling for faculty meetings and student-instructor contact, and electronic health records software.

Research is reflected in the curriculum. Faculty frequently attend conferences and review journals, then introduce the material into the curriculum where appropriate. Students are required to review a research article and write a paper to explain whether the findings are integrated into nursing practice. Faculty currently attending doctoral programs are either involved in research or will be in the future. Interdisciplinary collaboration is evident in discussions with nursing faculty and general education faculty on both campuses. A drug calculation course was developed by the Math Department in response to students having difficulty mastering this concept. It continues to be taught by math faculty. A program teaching academic strategies was developed in the humanities area with the cooperation of nursing faculty. One (1) section each semester is devoted to nursing students. At the CEC, general education faculty are involved in annual and tenure evaluations.

The National Patient Safety Goals are incorporated into each course. Table 27 provides examples of discussion on this topic in the curriculum (SSR, pp. 81-82). Table 28 illustrates the use of evidence-based practice in the curriculum (pp. 82-83).

The ECCC associate degree nursing program is 74.5 units; 17 units of general education are to be completed prior to entering the program; 12 units of general education that can be completed while
enrolled in the nursing program, and 45.5 units of nursing. Table 24 is incomplete (SSR, p. 79). Correct information regarding curriculum units can be found on the web at http://www.elcamino.edu/academics/healthsciences/nursing/curriculum.asp. The curriculum on page 79 in the SSR does not include the 17 units required prior to admission. The curriculum follows the guidelines set forth by the California Board of Registered Nursing. The program is four (4) semesters once a student has been admitted to the program; however, four (4) nursing units and 17 general education units are required prior to admission.

General education courses are flexible and allow for day or evening classes. Most also have blended or online components. There are currently no online nursing courses. There is an Upward Mobility Option available for LPNs, Licensed Psychiatric Technicians, and transfer students from accredited programs. These students have the same admission requirements but also must pass a mobility examination. If students fail, they can retake after one (1) semester, but if still unsuccessful, they must apply to the generic program. Once the mobility examination is passed, students complete a shorter nursing curriculum (SSR, p. 80). Information regarding this program differs between the College Catalog, the College website, and the SSR.

There is also a 30-unit option available mandated by the CBRN. Students complete a portion of the nursing courses (SSR, p. 81), and microbiology and physiology and are then qualified to sit for the NCLEX-RN examination. They do not earn a degree. Only one (1) student has chosen this option at ECCC.

Practice learning environments are appropriate and reflect current best practices and nationally established patient health and safety goals as evidenced by their accreditation status. The review of affiliation agreements showed that they are current, and practice occurs in acute-care facilities, extended-care facilities, and home health agencies. Student and faculty evaluations of the clinical setting can be found in the SSR (pp. 84-85).

Classroom Observation:
Site visitors observed a session of N250 Intermediate Nursing Process and the Family on the Crenshaw Campus. Third semester students present were encouraged to ask questions as they followed the outline for the class. Course objectives were being followed, and students were aware of the information being presented.

Visitors also observed N150 Beginning Nursing Process and Fundamentals Skills Lab at the CEC Campus. Although the students were only in their second day, the lab was very interactive. Students were learning isolation technique and frequently asked questions as they practiced donning equipment. The instructor was following course objectives and learning outcomes as she discussed the purpose of isolation, types of isolation, and purpose of protective equipment and demonstrated its use. She asked questions, requiring the students to answer, indicating that students had prepared for the class.

Site visitors observed N154 Intermediate Nursing Process and Mental Health at the CEC Campus. There was much discussion related to the day’s topic in this lecture class. The instructor utilized several teaching methods including PowerPoint, interactive discussion, real-world examples, question and answer, and specialty integration from maternal-child health and medical-surgical. The classroom was spacious. Each student had a large table desk with a detached chair. The students were highly engaged and interactive.

Classes and laboratories observed were taught by full-time faculty.
Clinical Observation:
The clinical facilities visited were St. Francis Medical Center, Kaiser Permanente South Bay Medical Center, and Providence Little Company of Mary. Visitors spoke to students, graduates, charge nurses, educators, and administrators. All indicated that there is a good relationship with the program. All stated that the students were aware of their responsibilities and prepared for clinical. Students were observed assessing patients or performing skills with their instructor or preceptor. Each was engaged and functioned appropriate to their level. Students stated they were well aware of the daily objectives and if they perform satisfactorily for the day.

Summary:

Compliance:
The program is in compliance with the Standard with the following areas needing development:

- Ensure all materials related to the curriculum contain accurate and consistent information.
- Ensure the timely submission of student clinical evaluations that are complete and signed.
STANDARD 5
Resources

Fiscal, physical, and learning resources promote the achievement of the goals and outcomes of the nursing education unit.

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.

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.

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.

*For nursing education units engaged in distance education, the additional criterion is applicable:*

5.4 Fiscal, physical, technological, and learning resources are sufficient to meet the needs of faculty and students and ensure that students achieve learning outcomes.

Commentary:

The fiscal resources for the nursing program at ECCC are sufficient to ensure the achievement of the goals and outcomes of the program. According to the SSR, the majority of the faculty report that the fiscal resources are sufficient to meet the instructional, remediation, and laboratory needs of the Department. This was confirmed by all faculty present in the interview sessions as well as with the Director of Nursing. Although the College budget supported by the state was cut for the 2009-2010 academic year, no cuts were made to funding for the 2010-2011 year. The administration at the College expressed some concern that there is not a more finalized budget projection for the upcoming year, but they indicated that they are confident the College will be fiscally stable. The budget management for the nursing program is quite complex with contractual requirements for a separate budget for each location. The funding for academic programs at the Compton Center comes from student enrollments for that location; the location is under the umbrella of a different Community College District than that of the Crenshaw Campus of ECCC. The separate budgets are identified in the SSR (pp. 88-90) and were confirmed to be accurate by the Director of Nursing. Although state funding has decreased, grants have been secured to supplement the Department budget for both locations. Students confirmed during interview sessions that they have adequate supplies, equipment, and learning resources to meet course and program outcomes.

According to the SSR, the faculty indicated that they do not feel that physical space is adequate to meet the instructional needs at the Crenshaw Campus. They reported a need for additional restroom facilities for students, as well as additional classroom and skills laboratory space. During the visit, the first semester students were frequently in the skills laboratory areas working on nursing procedures, and general observation confirmed the faculty opinion that space is tight. However, the students appeared to be navigating their areas adequately. Faculty stated that they feel the classrooms are just adequate for the current student enrollment. Crenshaw students were questioned about the skills laboratory facilities during the interview session. They reported that they have adequate space to meet the learning outcomes, but are excited to experience the new building. Campus tours at each location confirmed that physical resources other than skills laboratories at the Crenshaw Campus are adequate for current student enrollments.
Two (2) and, at times, three (3) faculty share offices with space identified for part-time faculty at both locations. As reported in the SSR, the Compton Center nursing facilities were damaged in a flood (pp. 91-92). The College, specifically the administration, faculty, and staff at the Compton Center, demonstrated support for the program by giving-up instructional space to allow nursing courses to have adequate facilities for student instruction. The renovation of the damaged facilities is scheduled to be completed in 2012. The Crenshaw Campus is currently building a 105,000-square-foot Mathematic, Business, and Health Sciences Building scheduled to be completed Fall 2011 with occupancy in Spring 2012. Department faculty and the Director had input in the building layout and design. Architect renderings as well as the construction site were viewed onsite and are consistent with the description provided in the SSR. Although there are varying opinions of the adequacy of physical resources, both locations have an active plan in place to improve instructional spaces.

Classrooms are equipped with multimedia instructional equipment such as computer, document camera, projectors, and screens. The skills laboratories at both locations have a variety of low-fidelity practice mannequins, electric hospital beds, equipment and treatment carts, various infusion pumps, and supply storage areas. Each site has a simulation room with high-fidelity simulation mannequins, audiovisual recording equipment, and debriefing areas. Each location has adequate Library facilities, student access to computers, and a full range of student support services.

A review of the Library holdings on the Crenshaw Campus was completed during the tour; no outdated references were noted. There were some outdated references noted in the Library of the Compton Center. Orientation to the online and electronic Library databases occurs in the first semester of the nursing curriculum, and students verified that they received adequate support and guidance in using these resources during interview sessions.

Learning resources are selected by the faculty as verified in faculty interviews. Documents listing current multimedia holdings were reviewed onsite; available titles are comprehensive across the curriculum. Students verified in the interview sessions that access to Campus computers is very adequate. The Student Nurses Association generates a list of learning resource and technology needs that is reviewed by the faculty. As stated in the SSR, there is a process in place for reviewing the multimedia titles and removing older copies, maintaining current resources.

**Summary:**

**Compliance:**

The program is in compliance with the Standard with the following area needing development:

- Ensure that Library resources at the Compton Center are current.
STANDARD 6
Outcomes

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.

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.

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

6.3 Evaluation findings are shared with communities of interest.

6.4 Graduates demonstrate achievement of competencies appropriate to role preparation.

6.5 The program demonstrates 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.

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

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

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

For nursing education units engaged in distance education, the additional criterion is applicable:

6.6 The systematic plan for evaluation encompasses students enrolled in distance education and includes evidence that student learning and program outcomes are comparable for all students.

Commentary:

The SSR states that the nursing program has a systematic program evaluation plan (SPEP) that emphasizes the ongoing assessment and evaluation of student learning outcomes (SLO) and program outcomes. The plan identifies the component, expected level of achievement, frequency of assessment, assessment methods, results of data collection and analysis, and actions taken for program development, maintenance, or revision. A new SPEP was written during the spring and summer of 2009 and was implemented starting in September 2009.

Since Fall 2009, the nursing program has been utilizing a faculty committee structure to address the six (6) standards of the SPEP. Starting in Fall 2009 through Spring 2010, Department Committees collected and analyzed data and presented findings to the program faculty. Prior to this time, most data were not systematically collected or analyzed, thereby limiting the program in its efforts to effectively understand
the strengths and weaknesses of the program and to make changes based on aggregation and trending of data.

The SPEP sections regarding the expected levels of achievement (ELA) were clearly stated in some instances (1.2) but not clearly stated in others. For example, component 1.3 states, "communities of interest have input into program processes and decision-making." The ELA for this component refers to attendance at the Hospital Advisory Committee meetings rather than addressing presence of input. A second example where the ELA does not match the Criterion is 1.4. This Criterion states that partnerships "exist that promote excellence in nursing education, enhance the profession, and benefit the community." The ELA does not address partnerships between the program and other agencies that promote excellence in nursing education, the profession, and benefit the community. The ELA, instead, focuses on faculty membership in professional nursing organizations and faculty involvement in community service. The SSR clearly discussed partnerships that exist between the nursing program and partnerships in the community (pp. 28-31). These partnerships were not incorporated into the SPEP.

Assessment methods for many of the criteria frequently do not identify how the program would contact assessments to confirm that the ELA has been met. For example, using again the 1.3 component that "communities of interest have input into program processes and decision-making," the assessment method was to examine minutes of the Hospital Advisory Committee. It was unclear whether the assessment method was to examine who was present at the meeting (relating back to the ELA) or whether the assessment method was somehow designed to measure the degree of input by the Hospital Advisory Committee into program processes and decision-making.

Aggregated evaluation findings were not available for each of the six (6) Standards. The SSR recorded findings for the 2009-2010 academic year only (pp. 99-108). It is noted that Tables 38-42 describe issues and solutions. However, the issues and solutions concerned the 2009-2010 year only and did not show aggregated and trended findings for the previous four (4) years.

At the time the SSR was written, evaluation findings were not shared with communities of interest. The SSR stated that the results of the NCLEX-RN pass rates, graduate and employer surveys, and attrition rates will be shared with members of the Advisory Board at the next scheduled meetings during the spring and fall terms (p. 108).

The SSR addresses Criterion 6.4, which states, "Graduates demonstrate achievement of competencies appropriate to role preparation" (p. 108). The report stated that the clinical evaluation tool, created in Summer 2009, serves as a measure that graduates achieve competencies appropriate to role preparation. Upon examination, the clinical evaluation tool reflects the student learning outcomes and serves as a beginning measure of achievement of competencies appropriate to role preparation.

The program’s ELA for performance on the licensure examination is 90% for first-time takers. Results for the Crenshaw Campus have been above the benchmark for the years 2006-2007 through 2009-2010 except for 2007-2008. The results for the Compton Center have been below the benchmark of 90% for each year from 2007-2008 through 2009-2010. The aggregated NCLEX-RN pass rate for the total program has been below the ELA for the years 2007-2008 through 2009-2010.

A study was initiated during Summer 2009 to identify causative factors that might help explain the differences in the first-time NCLEX-RN pass rates between the Crenshaw and Compton locations. A number of factors were identified that included differences in student preparation, failure rates in science prerequisite courses, a variance in clinical experiences, and full-time to part-time faculty ratios between the two (2) sites. At this time, the aggregated findings of the NCLEX-RN first-time pass rates are unknown for 2009-2010 and forward. The program did initiate a policy in Spring 2010 to require students on each campus to pass the ATI Comprehensive Predictor Examination at a predetermined percentage.
The SSR states that the ELA for program completion is determined by the faculty and reflects program demographics, academic progression, and program history (pp. 112-113). The SSR documented that the program did not achieve the ELA for either the Crenshaw or the Compton sites. During Fall 2007, an effort commenced to examine possible causative factors and to initiate strategies to improve the program completion rates. These initiatives include new admission criteria, tutoring programs known as Student Opportunities for Success (SOS), and Assessment Technologies Institute (ATI). At the time of the visit, it was unknown how effective the initiatives are in addressing the issue of program completion.

The SSR documents that program satisfaction is measured using a survey administered to students at the completion of the program, a survey sent to students approximately six (6) months after graduation, and a survey sent to employers of the graduate within the first year of employment (pp. 114-115). The SSR documented that the end of program survey results recorded by students were “always satisfied” with all aspects of the program.

While a graduate survey return rate of 57% was achieved for June 2007 graduates, the return rate for December 2007 graduates through December 2009 graduates ranged from 19% to 39%. A less favorable return rate was achieved for the Employer Survey. Data recorded showed a return rate of 0%-14%. The actual number of employer surveys that were mailed ranged between seven (7) and nineteen (19), and the actual number of surveys returned ranged between zero (0) to thirteen (13). Of note is that for three (3) consecutive collection timeframes, only one (1) survey was returned each time. The SSR did not record any concern related to the low return rate for the two (2) surveys nor did it propose a plan to increase the return rate for either survey.

The program measures job placement rates based on information from the returned graduate surveys. The job placement rates have significantly diminished for 2008 graduates. The SSR noted that “it appears” the June and December 2008 graduates from the Compton site were not employed six (6) months after graduation. The SSR did not provide information regarding development of a plan to determine possible reasons for this occurrence.

The following tables are incomplete due to the sparse data available for review.

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<thead>
<tr>
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<td>Current Year 2009 - 2010</td>
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<td>Program Satisfaction (employers)</td>
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<table>
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## Program Outcomes - Aggregated

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### Summary:

### Compliance:

The program is not in compliance with the Standard as Criteria 6.1, 6.2, and 6.5 are not met, as evidenced by:

- The evaluation plan does not consistently identify specific or relevant expected levels of achievement related to the component being addressed.

- The evaluation plan does not consistently utilize assessment methodologies that would provide evidence-based data for program improvement.

- There was a lack of documentation of consistent evidence-based decision-making, implementation, and evaluation of the criteria.

- There was a lack of aggregated and trended evaluation findings for making program improvements.

- There were insufficient data to analyze, aggregate, and trend employer and graduate satisfaction rates and job placement rates.

- Licensure examination pass rates are not at or above the national mean.

- Job placement rates have not been consistently assessed.
III. RECOMMENDATION FOR ACCREDITATION STATUS:

Recommendation:

Continuing Accreditation:

Continuing accreditation with conditions as the program is in non-compliance with two Accreditation Standards. Follow-Up Report due in two (2) years. Next visit in eight (8) years if the Report is accepted by the Board of Commissioners.

Standard 1 Mission and Administrative Capacity, Criteria 1.2, 1.3, 1.6, and 1.7:

- There is a lack of representation and participation of students and faculty in ongoing governance activities at the governing organization level.

- There is a history of communities of interest having minimal involvement in providing input into the nursing education unit. There is no established process for ensuring continuation of involvement by communities of interest.

- The nurse administrator does not have full authority and responsibility for the development and administration of the program.

- The nurse administrator does not have authority to prepare and administer the program budget.

Standard 6 Outcomes, Criteria 6.1, 6.2, and 6.5:

- The evaluation plan does not consistently identify specific or relevant expected levels of achievement related to the component being addressed.

- The evaluation plan does not consistently utilize assessment methodologies that would provide evidence-based data for program improvement.

- There was a lack of documentation of consistent evidence-based decision-making, implementation, and evaluation of the criteria.

- There was a lack of aggregated and trended evaluation findings for making program improvements.

- There were insufficient data to analyze, aggregate, and trend employer and graduate satisfaction rates and job placement rates.

- Licensure examination pass rates are not at or above the national mean.

- Job placement rates have not been consistently assessed.