

## SVCC CTE Program Review Template

**This program review template will be used to review the following program and courses.**

**Program (degree and related certificates):** A.D.N.- A.A.S. 052

**Related program courses:** NRS 128, NRS 130, NRS 133, NRS 230, NRS 232, NRS 234, NRS 235, NRS 237, NRS 239

### CTE Program Objectives

**Prompts:** *What are the objectives of this program and the courses related to this degree/certificate?*

**Response to prompts:**

#### **GENERAL OBJECTIVES OF ASSOCIATE DEGREE NURSING PROGRAM**

Upon completion of the Associate Degree Program, the student will be able to:

1. utilize principles and concepts from the humanities and social, biological, and physical sciences to assist the individual, family, and community in seeking solutions to health problems through application of the nursing process. This will be assessed through written exams, care plans, case studies, clinical competency exams, ATI Comprehensive Predictor and NCLEX exams.
2. demonstrate the skills needed to give patient care as an entry level practitioner of nursing on the health team in accordance with the rules and regulations of the Illinois Nurse Practice Act for registered professional nurses. This will be assessed through written exams, care plans, case studies, clinical competency exams, ATI Comprehensive Predictor and NCLEX exams.
3. demonstrate an awareness of the dignity and worth of all persons. This will be assessed through clinical evaluations.
4. develop a professional relationship with others through use of therapeutic communications skills. This will be assessed through written papers and exams, clinical evaluations, ATI Comprehensive Predictor and NCLEX examinations and other interactions.
5. demonstrates accountability when providing or delegating nursing care. This will be assessed through clinical assignments, clinical evaluations, written exams and paperwork. (Examples of paperwork would be assigned homework and charting in the electronic health record.)
6. recognize the need for continued learning in order to be an effective nurse in a dynamic society. This will be assessed through clinical evaluations and written exams.

Students who have completed the required courses, achieved the required grade point average, and displayed nursing competence will receive an Associate in Applied Science degree and be eligible to wear a school pin.

The graduate of this program will be able to give the patient care as an entry level practitioner on the health team, having been prepared with a specific body of knowledge and technical skills to provide nursing care utilizing the nursing process. The graduate will have the basis to grow in competency as she/he gains experience and will have the opportunity to participate in further learning experiences.

The graduate will be eligible to apply to take the NCLEX-RN Examination for licensure as a Registered Professional Nurse, either in Illinois or in the state in which she/he expects to practice.

The members of the nursing faculty recognize our obligation to evaluate the student, the program, the graduate and to use such evaluation as the basis for curriculum study.

Rev. 5/04; 4/05; 6/10; 5/14

## CTE Program Need

**Prompts:** *Is there a need for this program? Is the array of courses offered for this program appropriate to meet the needs of students? Are high quality jobs available for graduates of this program?*

**Possible topics to discuss:** Program enrollment, class enrollment, program/class enrollment by ethnic group, number of declared majors (total and by ethnic category), number of completions (total and by ethnic category), quality and number of jobs available to graduates.

**Data sources:** Table 1A, Table 1B, Table 2, Occupational Follow-up Survey data

For local data on wages use Illinois Department of Employment Security: find at [http://www.ides.illinois.gov/LMI/Pages/Occupational\\_Employment\\_Statistics.aspx](http://www.ides.illinois.gov/LMI/Pages/Occupational_Employment_Statistics.aspx)  
Use region #6 (NW) or by individual county.

For local data on occupational outlook use IDES: find at [http://www.ides.illinois.gov/LMI/Pages/Employment\\_Projections.aspx](http://www.ides.illinois.gov/LMI/Pages/Employment_Projections.aspx)  
Use LWA #4.

National data on wages and occupational outlook can be found at the U.S. Bureau of Labor Statistics. Use this link: <http://www.bls.gov/oooh/home.htm>. Select occupational group and determine entry level education. Then select occupation.

**Response to prompts (identify strengths and challenges):** In your narrative, please refer to the data sets or evidence you have chosen to support your case.

Program enrollment has remained stable over the past 5 years. The variability that does exist from year to year is most likely due to LPN's returning for their RN or ADN degree and students needing to repeat various courses. Class size has increased slightly with the decrease of one section, which can be considered a cost effective change. The number of completions is acceptable at 80%. The Accreditation Commission for Nursing Education (ACEN) expects 70 - 75% completion rates. Course grades are a clear bell curve the first semester of the program. The second semester shows the bell curve moving to more of the B/C range. This is consistent with the level of difficulty in the content increasing. The third semester of the program is the point in time when students are not as successful. The curriculum moves more rapidly at this time and adjustment to the change is difficult for many of students. In curriculum revision, we will be looking at implementing more balanced or leveling of program content as the semesters progress. The leveling will be reflected in course outcomes with the new curriculum that is being developed.

Students of varied ethnic backgrounds meet with more success in this program than the general college population according to the data tables provided in the ethnicity tab. This is most likely reflective of the selective admission criteria students meet to earn placement into the program.

The occupational demand is significant at least for the immediate future. The Robert Wood Johnson Foundation (RWJF) predicted a 22% increased need in the nursing workforce by 2018 with the 2.6 million jobs in the US increasing to 3.2 million. The aging nursing workforce is also referenced in this data stating that only 30% of nurses were below age 40 in 2008. The U.S. Nursing Workforce: Trends in Supply and Education report created by HRSA in April 2013 stated that 1/3 of the nursing workforce is older than 50. The average age of the RN population in the US is currently 44.6 years of age according to the HRSA report. However, trends are shifting that more young people are entering the profession, which is encouraging news. Men account for 9% of the current nursing workforce. 17% of the US population live in a rural environment. 24% of the LPN employment and 16% RN employment is noted as the national trend for rural areas. While we don't have tracking of data for our region specifically, this is reasonable information for us to consider. This HRSA report also notes there is an increased demand for nursing due to aging populations and increased patient acuity. Link to the April 2013 HRSA report: <http://bhpr.hrsa.gov/healthworkforce/reports/nursingworkforce/nursingworkforcefullreport.pdf>

Nursing and the nation have responded to the shortage issue and 2014 reports are now noting that if current trends continue we may not have the nursing shortage anticipated. The December 2014 HRSA report titled "The Future of the Nursing Workforce: National-and State – Level Projections 2012 – 2015" discusses this different picture. The number of new RN's more than doubled from 2001 to 2013 on a national level. If that growth trend in supply continues, we will have 33% more supply than demand for RN's by 2025. Imbalances will still be present at the state level, but Illinois is not one of the states with a projected deficit. In fact, the report states that all Midwest states growth supply is expected to exceed demand. The HRSA report reflects on the fact that it is making several assumptions as a predictive model must. One of the assumptions is that the delivery of health care will remain unchanged and there is no change in retirements. The report also cautions that it is not considering nursing

specialty areas or sites of practice. However, with the amount of nursing education seats that have been generated in the State of Illinois over the past 5 years it is possible that the deficit will not emerge. A 10% decrease in graduates and a change in nurses retiring early will result in a shortfall as was predicted in 2013.

December 2014 HRSA report link;

<http://bhpr.hrsa.gov/healthworkforce/supplydemand/nursing/workforceprojections/nursingprojections.pdf>

August 2014 blog posting by Robert Wood Johnson Foundation link:

[An Unexpected Growth in the Nursing Workforce - Robert Wood Johnson Foundation](#)

The Institute of Medicine “Future of Nursing: Leading Change, Advancing Health” recommends higher levels of education in nursing. The recommended goal they have set is for 80% of the nursing population be BSN prepared by 2020. The HRSA report states that 34% of RN’s in rural areas hold a BSN or higher degree. Employment opportunities for LPN’s are shifting to nursing home/long term care, home health care and outpatient care centers instead of hospitals and physicians offices. Anecdotal information would offer our agreement with these trends or shifts in employment in our area. The goal of BSN preparedness for 80 % of the nursing population set by IOM has been well published and it most probably is most likely a factor in the slight increase of AS degrees awarded at our college.

The Illinois WIA 4 outlook referenced at

[http://www.ides.illinois.gov/LMI/Pages/Employment\\_Projections.aspx](http://www.ides.illinois.gov/LMI/Pages/Employment_Projections.aspx)

Projects a 14.76% increased need for RN’s and 6.68% increase for LPNs from 2010 – 2020.

The Bureau of Labor Statistics projects a nationwide increased need for RN’s of 19% and 25% increase of LPN’s by 2022.

All of this data supports the program need.

The Illinois Department of Employment Security: found at

[http://www.ides.illinois.gov/LMI/Pages/Occupational\\_Employment\\_Statistics.aspx](http://www.ides.illinois.gov/LMI/Pages/Occupational_Employment_Statistics.aspx)

for the NW Region Number 6 lists wages as follows:

**LPN**

Entry - \$29,906/year

Median - \$38, 563/year

Experienced - \$42,895/year

**RN**

Entry - \$39,000

Median - \$51, 952

Experienced - \$61, 240

The wages are reflective of an excellent ‘living wage’ option for program graduates. All graduate in the past 5 years that chose to pursue employment in nursing have secured positions in the field.

The nursing program is in the beginning stages of curriculum revision and accreditation. NCLEX pass rates over this 5 year period met or exceeded the national and state of IL pass rates for 4 out of 5 years. The SVCC 2014 RN pass rate at 83% is reflective of the NCLEX exam increasing in difficulty to be a significant variable. The National Council State Boards of Nursing (NCSBN) is the organization that creates and administers the exam. Every three years NCSBN does an analysis of current practice for new graduates. The examination increased in difficulty April 2013 quadrupling instead of doubling, which is the customary increase, as more performance in practice is needed and expected of the graduate nurse. This increased performance demand needed by the employer and ACEN’s Standard 4.1 that program outcomes be consistent with contemporary practice drive this change towards a new curriculum.

The change is also being done as accreditation, if available to the discipline, is an expectation. Accreditation fosters quality and evaluation of processes. Accreditation is becoming necessary to be competitive. Twenty six of the 43 ICCB schools had accredited nursing programs in November 2013. Four additional schools had applied to be accredited in the spring of 2013. All nursing programs in our NW Illinois region are accredited or are seeking accreditation except for one. Accreditation will benefit our students with working toward BSN completion, along with scholarship options and federal employment opportunities; such as with the Veteran’s Administration. Our workforce partners will benefit from the continuous improvement in new graduate competency and cost effective assistance to their employees with BSN completion. ACEN accreditation would also benefit the college. The nursing department could apply for more state and federal grant dollars and more scholarship opportunities would be available to nursing faculty.

### CTE Program Cost Effectiveness

**Prompts:** *Is the program cost effective? What steps can be taken to offer courses more cost effectively? Does the program need additional resources?*

**Possible topics to discuss:** Has the program remained within its allocated budget? Is the budget adequate to supply necessary services? Is the program’s net income positive or negative? Does the program need additional resources? If so, what resources are needed?

**Available Data Sources:** Table 3A, Table 3B

**Response to prompts (identify strengths and challenges).** In your narrative, please refer to the data sets or evidence you have chosen to support your case.

The program has been within its allocated budget during this program review period. We have been able to meet program needs of disposable supplies despite no increase in the budget over the last 5 years by bulk ordering of supplies and movement towards simulation experiences in all labs.

FY 13 data tables show a significant change in the apportionment awarded. Apportionment dollars decreased by \$63,963 dollars from the preceding year. The number of students did not decrease, so review lends itself to believe this decrease must be from changes in support from the State of Illinois. This is a reasonable thought as the trend has been for a loss of state funding in all areas. The reason for this drop in apportionment dollars is not known to the nursing department so it is an assumption only. The loss of this funding has created the variance to a negative fund balance between revenue and expenditure. Program salary costs have decreased due to the loss of three tenured faculty in this program review period.

The program equipment is functional and current due to institutional support, workforce partner donations and exploration of high fidelity manikins being shared in the hospital setting. \$19,000 towards equipment expenses over these past 5 years is a minimal investment related to durable medical equipment and technology prices. ACEN accreditation Standard 5 requires evidence that fiscal resources are sustainable, sufficient and commensurate with the resources of the governing organization. Up to date technology and faculty development support are part of this criterion or standard as well. The program utilizes a wide array of web based materials and testing. Devices to access these in the classroom and lab environment are a desire.

### CTE Program Quality

**Prompts:** *Do the program and the program's courses provide quality and pertinent educational opportunities for students? What steps, if any, need to be taken to update or improve the program or the program's courses? Describe any programmatic achievements including any accreditation, certifications, and licensures.*

**Possible topics to discuss:** Fulltime to part-time faculty ratio, amount of overload, class sizes, communication practices between full-time and part-time faculty (including dual credit), professional development of faculty, grade distributions, success of students in classes with prerequisites, course scheduling (sequencing), convenience of class schedule (day, evening, hybrid, online course availability), relevance of equipment. Any irregularities between ethnic groups or gender could be noted for many of the categories above.

The types of and quality of materials and equipment could also be discussed here along with facility quality.

**The following topics MUST be discussed in this section to satisfy ICCB and HLC guidelines:** retention rates, degree completion rates, proportion of faculty participating in assessment (FT and PT including dual credit) and the impact of academic assessment on the program.

**Available Data Sources:** Student surveys, Table 1A, Table 1B, Table 2, Table 4A, Table 4B, Table 5A, Table 5B, Table 6, Assessment Data Base, College Dashboard, Graduate follow-up data, program surveys, focus groups, interviews, etc.

**Response to prompt (identify strengths and challenges).** In your narrative, please refer to the data sets or evidence you have chosen to support your case.

The mean retention rate for the past 5 years at 70.9% is within the national and accrediting body's expectation. However, the program certainly would like to see our students successfully complete at a higher rate if possible. The planned curriculum revision includes review of data for admission criteria. Changes in admission criteria are expected for entry into the program. This may assist towards a trend increase in retention and completion. The new curriculum will be developed towards higher level thinking earlier in the programming.

Admission standards are not expected to be the only opportunity to improve retention. Student support has increased through a grant funded new part time position of health professions retention specialist in FY 14 (Feb 2014 start date) and FY 15. This role supports not only individual students and classroom activities, but has provided assistance with enhanced use of technology via our charting system, ATI testing and remediation software and textbook support materials. The retention specialist collaborates with the Academic Advising offices and works toward student satisfaction and engagement via the Health Career Club and organizing student attendance at professional venues or conferences. In the fall 2014 semester alone, the retention specialist provided services to 305 students. 173 students received information or assistance in a group setting, 67 students through the Health Career Club and 65 individual students for specific academic assistance or interventions. This role is vital to retention in this discipline as the special knowledge an educated nurse has in regards to programming is needed for student advisement.

The data tables generated do not register the number of part time faculty. This most likely is due to adjunct faculty teaching in the lab and clinical setting rather than the classroom as listed on Banner. The RN program has 5 full time faculty that teach course content and 13 – 14 adjunct instructors teach the lab and clinical components. This ratio can continue to be supported and sustained. The level of mentoring for lab and clinical faculty is extensive and time consuming. Full time faculty orient adjunct faculty and communicate with them on a weekly basis. We have identified that further support of adjunct faculty in a more formal process is needed to assure consistent communication to the students regarding course expectations. Lack of consistent adjunct faculty is a major issue that increases the time commitment for orientation and mentoring for the department.

All full time faculty participated in assessment activities during this 5 year program review period. Adjunct faculty provided assessment by evaluating student performance in the lab or clinical settings. Full time faculty consistently record data, but did not always speak to interventions for change or improving student performance. The department will need to review use of the SVCC assessment tool with new faculty towards opportunities for improvement. The SVCC assessment tool has led the department to verification of anecdotal thoughts or recognition of our student population strengths and weaknesses. A major issue for our students at both the ADN and LPN level is to accurately reference in APA format the resources used. We have also identified that LPN's returning for their RN need assistance in areas that the generic ADN student do not. An orientation and mentoring program is being set up for this population the summer of 2015 to see if we can assist students with the LPN to ADN transition. Accreditation will require us to create additional assessment methods. Our clinical evaluation tools need more specific criteria to enhance communication of student

performance expectations. It was noted that 97-98% of the RN students meet the capstone objectives and yet only 88% would be recommended for hire. Soft skills and professional demeanor definitions need to be redefined and measured for example.

Focus groups were completed in the fall 2014 semester with current students, graduates and workforce partners. The information received will be considered as the curriculum revision moves forward. The current students offered that the program needs to define course expectations more clearly and provide more lab time. They pointed out a lack of consistency between adjuncts and full time faculty and strongly recommended electronic devices be used in the classroom, lab and clinical environments. They do not appreciate online course programming and recommended the medical surgical classes the final year of the ADN program be 16 weeks in length instead of 8 weeks. Students also recommended competency exams not be pass/fail and any issues noted through this exam be dealt with by remediation. Graduates informed us that care plans are not of value, but Virtual ATI (an individualized NCLEX preparation program) is. Graduates also noted we need to provide more experiences with non-verbal patients. The employer's recommendations lent themselves more to current practice issues: preventing readmissions, infection control, patient education, customer service, technology, political activism, cost effectiveness and professional communication.

### **Focused Questions from the Administrative Review Team (ART)**

Question 1. Explain the decrease in declared majors since 2010.

Response to question 1 (please refer to any data sets or evidence to support your case):  
The declared majors for the AAS 0052 degree and the AS 825 transfer degree were reviewed. The AAS 0052 numbers are more useful from a percentage calculation as the numerical values from 331 in FY 10 to 155 in FY 14 (47% decrease) are numbers of more significance. The Robert Woods Johnson Foundation and Institute of Medicine report with the goal set for 80% of nurses to have their BSN by 2020 should be considered to be the significant driver behind this shift. BSN programs have increased the number of seats dramatically in the public and private sectors of the university setting. According to the Illinois Department of Financial and Professional Regulation (IDFPR), two new BSN programs were established at WIU and Dominican University. Four new proprietary ADN programs were developed that would not have ICCB residency restrictions and 14 of the 29 BSN programs in the state increased the number of seats for admission. BSN program admission increases were as much as double. Chamberlain College of Nursing had the most dramatic increase. Chamberlain's completers went from 36 in FY 10 to 531 in 2014. Chamberlain has a high attrition rate of 45% as evidence by IDFPR information published under the Illinois Center for Nursing – Education Opportunities tab. FY 14 Chamberlain admitted 1101 students and graduated 493. The public are not the best consumers of educational options as we all know. Chamberlain has a strong marketing presence which is obviously effective. Mennonite College of Nursing developed an accelerated BSN program that has increased admissions by the hundreds with low completion rates in the past 3 fiscal years. Robert Morris University ADN program admitted 79 with 8 completing in FY 14 is another example from the IDFPR program pass rate web information.

Our area employers hire BSN prepared graduates as their preference. This information is part of the public perception and would influence students on their educational choices. It is



important to note that our local employers are not unhappy with SVCC graduates. They are just doing their part in trying to meet the 80% national goal that has been set.

We believe these points are the reason behind this decrease. The program dean and all members of the nursing faculty speak to our cost effective programming that fluidly leads to BSN completion at every opportunity, but this may not be enough. Dual enrollment with universities is a step that needs to be discussed in the near future.

Question 2. As the Nursing Program looks toward accreditation, how might the restructuring of the program's required and recommended classes affect other College departments, specifically the biology and chemistry areas?

Response to question 2 (please refer to any data sets or evidence to support your case):  
Credit hours will be required to be no greater than 64 and the trend from the federal government is to have 60 credits. 60 credits is what the curriculum revision hopes to meet. Our current program is at 73 credit hours. Accreditation also requires no more than 5 semesters be involved for the student. Our curriculum currently is at 7 semester hours with admission requirements considered. Any admission requirement that greater than 50% of the applicants have to complete is considered as part of that 5 semesters.

We have also been a part of the ICCB Deans/Directors statewide curriculum discussions for ADN and BSN completion standards. The proposed standard curriculum at the ADN level includes 8 hours of anatomy and physiology; 4 hours of microbiology, general and developmental psychology, English and speech. Our curriculum consultant that met with us in June 2014 recommended 6 hours of communication (ENG 101, 103 or SPE 131); 3 hours of transferrable math (MAT 121 or 240). MAT 106 does not transfer and will need to be eliminated. The pre-requisites of our anatomy and physiology of CHE and BIO need to be eliminated due to credit hours and the 5 semester issue. BIO 105 as an admission requirement has yet to be determined. The consultant recommended removal NRS 132 and PSY 200.

We have already determined that CHE and nutrition will no longer be requirements. We are leaning towards the 12 semester hours of A& P and microbiology being maintained. PSY 200 may also be eliminated with the lifespan psychology being integrated with the nursing content.

Question 3. How will the accreditation process affect the admission requirements for students?

Response to question 3 (please refer to any data sets or evidence to support your case):  
CNA can still be used as an application criteria, but we will have to use the certification only as the credit hours would affect total program hours. We may choose to go with bonus points for CNA certification and re-implement the 1 credit hour NRS 129 class. We withdrew NRS 129 in 2007 when we made CNA a requirement for admission. Re-implementation of NRS 129 would provide the CNA knowledge base and skill set needed if we decide to eliminate the CNA admission requirement or make it bonus only. ELA requirements will most likely need to be increased and MAT will definitely have to be increased. Test of Essential Academic Skills (TEAS) by Assessment Technology Inc. (ATI) comprehensive score points will be changed based on data collection. CHE will no longer be an admission criteria.

Question 4. How will the accreditation process affect students that have already applied to the program, but not yet been admitted into the program?

Response to question 4 (please refer to any data sets or evidence to support your case):  
Admission requirements for the program have changed on a regular basis as any change in college criteria effects this application. ELA and changes in the MAT curriculum are the most recent examples that have influenced nursing admissions. It has been our practice to allow at least one year of accepting either the previous criteria or one year of time before it goes into effect towards nursing admission to allow the students to make necessary alterations to meet the current requirements.

**Responses to Program Challenges.** Every program has challenges it must overcome. This program review process allows Sauk employees to identify those challenges and then create a plan to overcome those challenges. Please describe the program's challenges and the purposed response below. These responses will be added to the Operational Planning matrix found below.

**Response to Challenges:**

Curriculum and admission standards revision: The program has developed a new mission, philosophy statement and student/graduate learning outcomes. We continue to finalize admission criteria. Data from ATI and the SVCC IR office are being used to determine recommendations that will foster student success. We are currently working towards leveling of course outcomes based on the detailed NCLEX test plan. Our goal is to present our product to the SVCC Curriculum Committee in September 2015.

Resources: Web access in the classroom, lab and clinical settings will continue to be pursued.

Formalized mentoring program for adjunct faculty: A detailed plan and check list will be created for use in FY 16.

Assessment follow up:

- Revisit SVCC assessment data for NRS.
- Assure recommended interventions for improvement are documented and re-measured.
- Create detailed clinical evaluation form. Define soft skills and all expectations clearly.
- Develop LPN to ADN orientation and mentoring program for bridging students

ATI data use and policy review: Remediation policy for student completion to be instituted.

Simulation: Continue simulation focus in nursing labs. Assure performance skills are developed and skill decay doesn't occur.

Faculty: Continue professional development in curriculum, test item analysis, test blueprinting and accreditation standards.

Test item analysis/Test blueprinting: Develop plan with accreditation criteria.

**Program Bookkeeping Tasks**

| <b>Task List</b>            | <b>Description of Task</b>  | <b>Is the task complete?</b>                                     |
|-----------------------------|---|--|
| <b>Course outlines</b>      | Please review all course outlines for the courses listed at the top of this document and send it to Curriculum Committee for approval. ALL outlines must go through Curriculum Committee even if no or few changes were made. | Not complete. Will submit new curriculum                         |
| <b>Catalog descriptions</b> | Please review catalog descriptions of the program. If there are changes to the program description, please send it to the Curriculum Committee for approval.  | Yes. No changes will be made until new curriculum moves forward. |
| <b>Course descriptions</b>  | Please review course descriptions found in the catalog that are listed at the top of this document. If there are changes to the course descriptions please send them to the Curriculum Committee for approval.                | No changes.  |

**Reviewer's Final Recommendation**

| <b>Recommendation</b>             | <b>Check only one</b>               | <b>List program name (if more than one is being reviewed or make additional copies of this table for each program)</b> |
|-----------------------------------|-------------------------------------|--|
| Continued with minor improvements | <input type="checkbox"/>            |  |
| Significantly modify the program  | <input checked="" type="checkbox"/> |  |
| Discontinued/Eliminated           | <input type="checkbox"/>            |  |
| Other, please specify:            | <input type="checkbox"/>            |  |

|                       |                                   |  |
|-----------------------|-----------------------------------|--|
| <b>Signature/Date</b> | <b>Program Review Team Member</b> |  |
|-----------------------|-----------------------------------|--|

**A.D.N. - A.A.S. 052**

|  |             |        |
|--|-------------|--------|
|  | Janet Lynch | Chair  |
|  | Amy West    | Member |
|  | Kim Cole    | Member |

**A.D.N. - A.A.S. 052**

**Program Review.** Items from the program review will be entered here. *After this program review is complete and approved, transfer (paste and copy) the items below to your FY 2016 Operational Plan.*

*\* Use the origination code PR 2015.*

| <b>Origination Code*</b> | <b>Date Activity was Added to this OP (MM/DD/YYYY)</b> | <b>Name(s) of Individual(s) Responsible</b> | <b>Description/Purpose/Justification of Proposed Activity</b> | <b>Goal/Desired Result from Activity (measurable and under department's control)</b> | <b>Target Completion Date for This Activity (MM/DD/YYYY)</b> | <b>Actual Results from this Activity</b> | <b>Actual Completion Date for this Activity (MM/DD/YYYY)</b> |
|--------------------------|--|---|---|--|--|--|--|
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| <b>Comments:</b>         |  |   |   |  |  |  |  |

## CTE PROGRAM REVIEW SUMMARY REPORT

### Required ICCB Program Review Report

Sauk Valley Community College (506)

Academic Year 2014 - 2015

**Program Identification Information (only one CIP per template)**

|                    |         |
|--------------------|---------|
| <b>6-digit CIP</b> | 51.3801 |
|--------------------|---------|

|   |  |
|---|--|
| <b>Career Cluster</b>                   | <b>Career Pathway</b>  |
| Health professions and related programs | Registered Nursing, Nursing Administration, Nursing Research and Clinical Nursing. |

|                                     |   |
|-------------------------------------|---|
| <b>Program of Study</b>             | <b>SVCC's Program Title</b>             |
| Registered Nursing/Registered Nurse | Associate Degree in Nursing, A.A.S. 052 |

| Degree or Certificate Type                          | Check only one |
|---|----------------|
| 03 – AAS  | <b>X</b>       |
| 20 – Occupational Certificate of 30-50 credits      |                |
| 30 – Occupational Certificate of 29 or less credits |                |

**SVCC Action**

| Possible Actions                  | Check only one                      |
|-----------------------------------|-------------------------------------|
| Continued with minor improvements | <input type="checkbox"/>            |
| Significantly modified            | <input checked="" type="checkbox"/> |
| Discontinued/Eliminated           | <input type="checkbox"/>            |
| Placed on inactive status         | <input type="checkbox"/>            |
| Scheduled for further review      | <input type="checkbox"/>            |
| Other, please specify:            | <input type="checkbox"/>            |

**Need, cost-effectiveness & quality.** Create a short summary paragraph for each question below.

*Need: Is program enrollment sufficient to justify this program? Are the majority of students in this program completing degrees or certificates? Are the students within this program marketable and employable?*

Program applications have remained stable over the past five years for the RN AAS degree. The occupational demand is significant at least for the immediate future. All graduates that choose to become employed rather than moving directly to BSN completion become employed. The Robert Wood Johnson Foundation (RWJF) predicted a 22% increased need in the nursing workforce by 2018 with the 2.6 million jobs in the US increasing to 3.2 million. The aging nursing workforce is also referenced in this data stating that only 30% of nurses were below age 40 in 2008. The U.S. Nursing Workforce: Trends in Supply and Education report created by HRSA in April 2013 stated that 1/3 of the nursing workforce is older than 50. The average age of the RN population in the US is currently 44.6 years of age according to the HRSA report. However, trends are shifting that more young people are entering the profession, which is encouraging news. Men account for 9% of the current nursing workforce. 17% of the US population live in a rural environment. 24% of the LPN employment and 16% RN employment is noted as the national trend for rural areas. While we don't have tracking of data for our region specifically, this is reasonable information for us to

consider. This HRSA report also notes there is an increased demand for nursing due to aging populations and increased patient acuity. Link to the April 2013 HRSA report:

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Nursing and the nation have responded to the shortage issue and 2014 reports are now noting that if current trends continue we may not have the nursing shortage anticipated. The December 2014 HRSA report titled “The Future of the Nursing Workforce: National-and State – Level Projections 2012 – 2015” discusses this different picture. The number of new RN’s more than doubled from 2001 to 2013 on a national level. If that growth trend in supply continues, we will have 33% more supply than demand for RN’s by 2025. Imbalances will still be present at the state level, but Illinois is not one of the states with a projected deficit. In fact, the report states that all Midwest states growth supply is expected to exceed demand. The HRSA report reflects on the fact that it is making several assumptions as a predictive model must. One of the assumptions is that the delivery of health care will remain unchanged and there is no change in retirements. The report also cautions that it is not considering nursing specialty areas or sites of practice. However, with the amount of nursing education seats that have been generated in the State of Illinois over the past 5 years it is possible that the deficit will not emerge. A 10% decrease in graduates and a change in nurses retiring early will result in a shortfall as was predicted in 2013.

December 2014 HRSA report link;

<http://bhpr.hrsa.gov/healthworkforce/supplydemand/nursing/workforceprojections/nursingprojections.pdf>

August 2014 blog posting by Robert Wood Johnson Foundation link:

[An Unexpected Growth in the Nursing Workforce - Robert Wood Johnson Foundation](#)

The Institute of Medicine “Future of Nursing: Leading Change, Advancing Health” recommends higher levels of education in nursing. The recommended goal they have set is for 80% of the nursing population be BSN prepared by 2020. The HRSA report states that 34% of RN’s in rural areas hold a BSN or higher degree. Employment opportunities for LPN’s are shifting to nursing home/long term care, home health care and outpatient care centers instead of hospitals and physicians offices. Anecdotal information would offer our agreement with these trends or shifts in employment in our area. The goal of BSN preparedness for 80 % of the nursing population set by IOM has been well published and it most probably is most likely a factor in the slight increase of AS degrees awarded at our college.

The Illinois WIA 4 outlook referenced at

[http://www.ides.illinois.gov/LMI/Pages/Employment\\_Projections.aspx](http://www.ides.illinois.gov/LMI/Pages/Employment_Projections.aspx)

Projects a 14.76% increased need for RN’s and 6.68% increase for LPNs from 2010 – 2020.

The Bureau of Labor Statistics projects a nationwide increased need for RN’s of 19% and 25% increase of LPN’s by 2022.

All of this data supports the program need.

*Cost-effectiveness: Is the program cost effective? Does the program require additional resources?*

The program is very cost effective. The RN AAS degree costs including everything from tuition and fees to physicals, immunizations and NCLEX application is approximately \$14,000. Students/graduate can secure all general education courses for the next level of education and save themselves additional funds. Exploration of neighboring university tuition and fees show a range of approximately \$400 - \$ 650 per credit hour. So, savings of \$20,000 is reasonable to expect with AAS degree completion here and transferable general education credits at SVCC as well to progress to the same level of credential and licensure.

It is critical that the program maintain the Health Professions Retention Specialist, lab assistant and number of full time faculty as we move forward with curriculum revision and accreditation application with the Accreditation Commission for Education in Nursing (ACEN).

*Quality: Describe any program improvements since the last program review. What steps need to be taken to update or improve instruction or the program as a whole? How does the program work with local businesses to meet their needs? How does the program faculty remain up-to-date with their professional training and/or certification?*

The nursing department has been working on a complete curriculum revision that we plan to submit to our SVCC Curriculum Committee and ICCB in Fall 2015. The goal of the revision is to create a more accelerated path for critical thinking and nursing judgment as the workforce needs and demands.

The program conducted a focus group with our local business partners in December 2014 for curriculum direction. We meet annually as a workforce council with our vocational training center, major employers and graduates. The dean has at least quarterly contact with the vice presidents of nursing at our local hospitals and the faculty have started to attend unit meetings at the hospital sites to enhance communication even further.

All nursing faculty assure continuing education is met on an annual basis. One faculty member will secure her doctorate degree on May 16, 2015. Another faculty member has completed her Master's degree in Nursing this academic year and our lab assistant is completing course work for BSN. We also all work to stay current with website and literature review as well as staying abreast of statewide initiatives. |



| <b>Program Review Committee Recommendations</b>   |                                     |
|---|-------------------------------------|
| <b>This Program Review is considered complete.</b>  | <input checked="" type="checkbox"/> |
| <p><b>The following are the recommendations from the Program Review Committee:</b><br/>                     These nursing program recommendations are for all degrees and certificates. The same recommendations will be found in each program review.</p> <ol style="list-style-type: none"> <li>1. Work with the Marketing Department to create a new brochure/campaign to focus on quality of the program (high retention rates, high success rates on NCLEX, and high job placement). This is in response to increased competition for students.</li> <li>2. Continue with preparation for the Med Tech certificate (an add-on to CNA).</li> <li>3. Anticipate the addition of a B.S.N. in the next five years.</li> <li>4. As accreditation preparation continues and requisite and prerequisite courses are examined for applicability to the nursing programs, create an impact study on social and natural science enrollment.</li> </ol> |                                     |
| <b>Signature of the Program Review Committee Chair</b>  | Dr. Steve Nunez                     |

| <b>Dean of Academics and Student Services Recommendations</b>                                 |                          |
|---|--------------------------|
| <b>The Program Review has been reviewed.</b>  | <input type="checkbox"/> |
| <p><b>The following are the recommendations from the Dean:</b><br/>                      </p> |                          |
| <b>Dean's Signature/Date</b>  | Dr. Jon Mandrell         |

| <b>President's Recommendation</b>  |                          |
|--|--------------------------|
| <b>The Program Review has been reviewed.</b>   | <input type="checkbox"/> |
| <p><b>The following are the recommendations from the President:</b><br/>                      </p> |                          |
| <b>President's Signature/Date</b>  | Dr. George Mihel         |

**A.D.N. - A.A.S. 052**

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