**Nursing Advisory Meeting**

**Thursday, May 4, 2017 – 2:00 – 4:30 p.m.**

**Hospice of Humboldt (Conference Room B)**

Present: **Tammy Bark, Angie Beeson, Ben Carmichael, Roberta Farrar, Brenda Goosby, Sandy Jones, Michelle Lamarr, Victoria Looper, Laura Meyer, Robert Pitts, Janice Polas, Alison Pritchard, Shoshanna Raybin, Katie Schoenfield, Nancy Sesson, Jude Stromberg, Sally Urban, Connie Wolfsen**

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| Agenda Item | Discussion |
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| Program Statistics | **NCLEX Pass Rate** – 2015-2016 – 93.3%; as of this date 76.9% (2016-17).  **Graduated Students** – (2016) 32 generic students/17 LVN/Paramedic – RN students (49 total).  This was an exceptionally large LVN/Paramedic – RN group. There are 10 seats available for transition students, but extra seats were available because some second semester students did not go forward to the third semester.  **Applications Received** (2017) - 105 generic student/15 LVN/Paramedic – RN.  All students who submit a complete application to the RN Program must pass the TEAS exam with a score of 62 or above (state chancellor’s office set score). The TEAS exam is a basic aptitude test designed to identify students who would succeed in nursing school. It is comprised of a reading, mathematics, science, and English and Language Usage sections.  Of those 105 generic who applied; 78 were qualified/77 passed TEAS exam.    **Wait List** – 130 RN students; 20 – LVN/Paramedic – RN students on waitlist.  It is a two year waitlist-most programs do have waitlists in the state.  In the Fall semester, 44 students are admitted to the RN Program and 10 students are admitted to the LVN/Paramedic – RN program.  Benchmarks – post graduation – 10 months satisfaction 91.4%; employer – 86.1% satisfied – only 3 people responded. Please complete surveys. These surveys are sent between February – April. |
| Department of Nursing Program Handbook | Nursing Program Handbooks were distributed. The Handbook is updated every year and is also posted on the nursing program web page. Admission/Progression/Graduation policies are located on pages 19-23. Questions on how students are admitted or return to the program were discussed. Other areas such as social/electronic media, attendance policy, clinical evaluation policies, student health policy, guidelines to call clinical instructors, and behavior policies were reviewed. |
| Clinical Staffing Challenges | It is a time consuming and challenging job to recruit nurses to teach in our program. California Community colleges have requirements mandated by the state which restrict the amount of money the College can pay our clinical teaching staff. The salary a nurse can make working in the hospital is far greater than what the College is able to pay them. We are not permitted to pay stipends or sign on bonuses. Therefore, it is difficult to hire nurses and even more difficulty to keep them working with us.  The following suggestions were made:   * Advertise in the newspaper/Craigslist/flyers at facilities. * Other incentives (have to adhere to state hourly wage). * Reclassifying (union/or chancellor’s office issue). * Partner with a facility to share the payment of associate faculty. * Offer some kind of perks or have social events. |
| Curriculum Revision Update | A concept-based curriculum will be implemented Fall 2018. The new curriculum contains 43 major nursing concepts that will be taught across the curriculum. Important points:   * Decreases content saturation across the curriculum. * Concepts will be taught in an active learning format, which mandates student preparation. * Raises the level of critical thinking/decision making skills. * Allows for teaching at a deeper level * Transition from lecture to active learning may be challenging * Curriculum is BRN and Chancellors office approved. * Challenges: teaching out one curriculum while implementing another: acclimating returning students who experienced retired curriculum and style of learning * Clinical schedules won’t change, but what happens in clinical will change to better connect clinical with classroom learning * Clinical faculty will be oriented to new ways of teaching and new student learning expectations. * LVN curriculum will also be revised. Curriculum is in BVNPT approval process. |
| HSU’s RN-BSN Fit with Associate Degree RN Program | Laurie Judson California State/LA is developing the curriculum for the HSU RN-BSN program. Two probably pathways: integrated and 2 plus 2  HSU is actively working to get a program thru their Chancellor’s office in the spring. Fall 2018 is the target start time for this program. However, the timeline is tight. Need to get the word out to the community that this program is a post licensure degree, not a prelicensure degree. |
| Other Discussion | **Preceptor Experience:** Not all students get to have this experience. Students apply for preceptor positions. Students self-select for the program. Strong recommendations from clinical faculty are needed to participate. The first part of the clinical, with faculty, is held two weeks before the semester begins to provide experience prior to the preceptorship portion which occurs mid-semester. During the preceptor portion, students follow the schedule of their preceptor. There is a clinical group of 11 students at St. Joseph. At this time, there is not a preceptor group at Mad River Hospital.    Preceptors receive a CEU certificate. Others at the meeting suggested other forms of appreciation (i.e. special pin recognition, thank you get together, etc.) to encourage preceptors to continue in this roll or to recruit others.  Congratulations were given to our faculty who worked on the curriculum revisions.  **St. Joseph Rehab as a clinical site:** Jude Stromberg requested we consider adding this to our clinical experiences for students. Katie Schoenfield will work with Jude to implement.  **Crestwood as a clinical site for LVNs:** Robert Pitts requested we add this to clinical experiences for LVN students. Faculty will explore. |

Meeting Adjourned: 3:20 P.M.

Submitted By: Janet Humble