



ANTELOPE VALLEY COLLEGE

NURSING ADVISORY MEETING

Date and Time: June 6, 2012, 9 a.m.

Location: APL 115, Antelope Valley College

Participants/Attendees:

Name	Title	Affiliation
Linda Alexander	Adjunct Instructor	Antelope Valley College
Victoria Beatty	Instructor	Antelope Valley College
Diane Bite	Registered Nurse	Antelope Valley Community Clinic
Larry Coomes	Chief Executive Officer	Palmdale Regional Medical Center
Yesenia Cota	Adjunct Instructor	Antelope Valley College
Dr. Karen Cowell	Dean, Health Sciences	Antelope Valley College
Stirlie Cox	Student Success Counselor	Antelope Valley College
Bonnell Curry	Instructor	Antelope Valley College
Debra Dickinson	Instructor	Antelope Valley College
Christine Fransen	Student, 2 nd Semester RN	Antelope Valley College
Linda Harmon	Instructor	Antelope Valley College
Phyllis Heintz	Director, RN-BSN Completion Program	CSU, Bakersfield
Pat Hoover	Educator	Palmdale Regional Medical Center
Sandra Hughes	Instructor	Antelope Valley College
Sara Marton	Director of Education	Palmdale Regional Medical Center
Berna Mayer	Board Member	Antelope Valley Hospital
Diane Morrow	Director of Critical Care and PCU	Palmdale Regional Medical Center
Gloria O'Dell	Magnet Coordinator	Antelope Valley Hospital
Elsa Ramirez	Nurse Practitioner	AVORS Medical Group
Melissa Renfro	Student, 3 rd Semester RN	Antelope Valley College
Brynn Schock	RN-BSN Program Advisor	CSU, Bakersfield
Casey Scudmore	Instructor	Antelope Valley College
Susan Snyder	Instructor	Antelope Valley College
Marianne Stewart	Instructor	Antelope Valley College
Elizabeth Sundberg	Instructor	Antelope Valley College
L. Denise Walker	Instructor	Antelope Valley College
Lyndi Vela	Student, 4 th Semester RN	Antelope Valley College
Christine Williams	Nurse Educator	Palmdale Regional Medical Center

Welcome and Introductions:

Elizabeth Sundberg welcomed everyone and thanked them for being part of the advisory committee meeting. Introductions took place.



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Registered nursing program update:

Board of Registered Nursing visit – fall 2012

Elizabeth announced that the ADN program will be having an interim visit by the Board of Registered Nursing (BRN) on September 26. It will be a one day visit, which will not require a report to be submitted by the faculty. The consultant will meet with the director, faculty and students, review documentation, and discuss curriculum changes.

Budget update

Dr. Cowell reported that we get over 99 percent of our funding from the state, so as the state budget declines, so does AVC's budget. There is a possibility we will receive a \$164,000 grant for student success but the legislature is thinking about giving the money to colleges as block grant funding instead of dedicating the money to nursing. The governor will be placing a ballot in the fall and although it will not bring additional money directly to AVC, it will stop the current cycle when the State decides to defer payments, which are 4-5 months in arrears, resulting in AVC having to borrow money.

Health and Sciences Building move

The Health Sciences Division is on schedule to move to the new building. Offices are smaller but the faculty are looking forward to the move. There will be three simulation rooms; obstetrics, pediatrics and critical care.

The dedication of the new building will be held at 9 a.m. on September 27, 2012. Dr. Cowell extended an invitation to everyone on the advisory committee to attend the dedication. There will be additional activities scheduled throughout the week.

Registered nursing program evaluation:

NCLEX-RN Scores

Bonnie Curry reported that twice a year the ADN faculty looks at program evaluation using a variety of data to see how we are doing overall and how changes can be made. At the end of each course, student evaluations are reviewed to see if the objectives have been met and reports from the community (exit reports) are discussed to see how the clinical rotations went and if any changes are necessary. Students also evaluate the instructors at the end of each course.

External assessment examinations are taken at the end of each course. The vendor for the assessment has been the HESI; however, a change will be made to Kaplan beginning in the fall. The assessment gives a predicted probability of students' success on the NCLEX and there is a good correlation with the course assessment.



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The NCLEX scores are reviewed and classes are tracked as they graduate. The BRN looks at first time takers and the report received in March indicates a pass rate of 97 percent. The pass rate for 2010-11 published on the BRN website for 2010-11 reflects a lower pass rate, but the passing standard was increased during this period, so all schools took a hit and overall the scores were lower.

Student learning outcomes

Bonnie stated that an important part of the evaluation process is looking at student learning outcomes (SLOs), which have already been established and are reviewed at the end of each course. Examples of SLOs include whether a student is able to develop a plan of care for a patient, safely care for a patient, or do a teaching plan. Findings are based on criteria as to whether students are meeting outcomes. A major problem we are having is that we still have high attrition. It is expected that students who are admitted should graduate in four semesters; however, we currently have an attrition rate of 30-40 percent, although most students eventually graduate. The State wants us to be at a 15 percent attrition rate. The reason that students can meet the SLOs but the program still has a high attrition rate is attributed to personal issues, finances and lack of support, which are areas that the faculty has no control over. Bonnie stated that Stirlie Cox, student success counselor, has been very effective but the faculty are also looking at offering workshops on managing stress, how to take nursing examinations and test taking strategies.

Some of the things that the faculty hopes will help with attrition are the change from HESI to Kaplan for the nursing assessments, which will include case studies for the NCLEX review course, and the possibility of using clinical assistants to assist faculty. If the grant is allocated, it is possible that the ratio of instructor to students for the bridge program (LVN-RN) will be reduced to 1:5 in the clinical area.

Program learning outcomes

Program learning outcomes (PLOs) are completed at the end of the program and encompass what the students are expected to know. The exit exam taken in the fourth semester includes questions on obstetrics, pediatrics and mental health so the faculty have to take into consideration that the students had this content in the second and third semesters, but it gives students an idea of what to focus on for the NCLEX.

Bonnie stated that surveys are sent out one year after graduation and the latest responses indicate that 80 percent are employed one year out of school, but not necessarily in areas they want to work in. There has been an increase of over 50 percent of students who are enrolled in a bachelor's or master's program, and other graduates indicated that they plan to enroll within five years.

Berna Mayer asked about the selection process. Dr. Cowell responded that there is State legislative criteria used for admission, which requires that students have a cumulative GPA of 2.5 for the core science courses, an overall GPA of 2.4, a GPA of 2.0 for all college level English courses, and repeat no more than one of the core science courses. The State criteria does not allow AVC to choose the students admitted, so any students who make the cut score must be admitted. AB 1559 would allow AVC to use a multi-criteria screening process to evaluate applicants for admission. If this screening process was used, we would be required to use criteria such as whether a student could speak more than one language and give a higher priority to displaced homemakers and veterans.



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Dr. Cowell commented that we are seeing more personal problems interfere with the ability of students to succeed. Berna added that the expectation of the student is that they can put the same amount of time into nursing as they do with other courses.

Registered nursing curriculum update:

Philosophy, QSEN, evidence based

Elizabeth Sundberg stated that the faculty are always looking at the curriculum in relation to what is expected of new graduates and the changes are taking place in health care. The faculty all agree that there is a need to get more medical-surgical nursing back into the curriculum and will move forward with getting the curriculum developed in the fall. The philosophy is also being reviewed and may be changed from Orem.

Statewide model curriculum

AB 1295, which was passed in October 2009, addresses the nursing degree pathway between California Community Colleges and the California State University (CSU) system and mandates that there cannot be any repetition of prerequisites. Therefore, it is necessary for the community colleges to articulate with the CSU to allow an easy transition. The Institute of Medicine (IOM) report recommends that the proportion of nurses with baccalaureate degrees should be increased to 80 percent by 2020.

SB 1440

SB 1440, which was passed in September 2010, is not specific to nursing, but allows for an easier transition from a community college to the CSU by establishing a transfer associate degree. The CSU should not require students to repeat courses and a degree from a community college should transfer to the CSU. Nursing is facing problems because of the requirements of Board of Registered Nursing.

Phyllis Heintz from CSU Bakersfield said that there is agreement philosophically that the ADN-BSN program is attainable in one year, and she will be meeting with Dr. Cowell and some of the faculty after the advisory committee meeting.

Simulation and new equipment

Debra Dickinson reported that each course incorporates simulations into the curriculum and she sets up and runs many of the simulations, which range from low to high fidelity. She shared a recent incident where a student attributed being able to assist in a life-saving measure at a local fitness center because of the knowledge she had learned in the simulation lab earlier in the semester.

Christine Williams shared another incident involving a student who had assisted a patient in the parking lot at PRMC.



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Debra stated that we have been able to purchase new equipment in the past year, including Sim NewB which is used in the obstetrics class, and we will be getting an updated Noelle, which delivers a baby. We also have SimJunior, an 8-year-old child simulator, SimMan Essential, which was recently updated, and SimMan 3G who is wireless. The simulations are introduced in the first semester for assessment of lung sounds, CPR review, use of the ambu-bag and code procedures.

The college was also able to purchase Med-Dispense, which is being integrated into some of the simulations and will be used in the first semester skills lab for medication passes. An electronic charting system is also being purchased.

Casey Scudmore is doing her dissertation on clinical simulation and its correlation with the reduction of medication errors in the second and fourth semesters.

Skills lab

Open skills lab hours are utilized by students to practice or by those students who have been referred by instructors. Students are also required to pass IV insertion/management check offs and IV push check offs during the designated open lab hours. Debra said she believes that the simulations and availability of open lab have attributed to the students' higher level skills and critical thinking.

Registered nursing clinical experience:

EMR access

Elizabeth Sundberg said that she has not received any feedback from Antelope Valley Hospital regarding student charting and asked Gloria Odell if she had any input. Elizabeth stated that it is now more difficult to look at the student charting so she is concerned about missing something. Gloria said that she would have someone contact Elizabeth to give her feedback. Elizabeth said that the faculty appreciated the fact that every student has access to the system. Gloria noted that the computerized charting has improved hospital outcomes.

Student computer charting feedback

Sandra Hughes stated that her students on the Pediatrics Unit enjoyed reading the sticky notes and said that it was important to individualize to the patient and that the students are able to give more detail in the I&O chart. She added that students enrolled in some courses go to the hospital the night before to get assignments and if they did not have the ability to log in it would make it difficult to access the information they need to be prepared for the next clinical day. Berna Mayer commented that the matter of students using the system was a huge issue and the decision to give students access did not come easily. There was general agreement that the students picked up the computer charting very quickly.

Denise Walker inquired if nurses and instructors should be using narrative charting at the end of the shift and Gloria Odell responded that it was a personal choice.



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Sara Marton announced the introduction of computerized charting at Palmdale Regional Medical Center (PRMC) has moved back to October 7. A two-day class will be offered for the students and instructors, but the schedule has not been finalized. Students will not be permitted at the facility when the system goes live in October. Sara reported that the system is being introduced in all UHS owned facilities and implementation was started two years ago on the east coast. The super users have been attending the "go live" events at other facilities so they have had a lot of exposure, which should make the transition go well. There will be computers in every room and a mobile RX. Christine Williams stated that the physicians in the emergency room will be going live at the same time as nursing documentation. Gloria Odell said that the Cerner system is very intuitive and she will be interested to see how the implementation at PRMC goes.

Pyxis access

Elizabeth Sundberg stated that the fourth semester students have access to the Pyxis at Antelope Valley Hospital and there had been some talk about getting access for the third and possibly second semester students. Gloria Odell agreed to speak with the nursing leadership.

Sara Marton stated that PRMC does not plan to change their current practice regarding student access, but it may be reconsidered after implementation of the new system. She noted that there had been no student medication errors in the past year. Debra Dickinson said that the students cannot get into the bins and Christine Williams responded that this can be resolved easily.

Registered nursing preceptorsip program:

Debra Dickinson announced that there are three instructors coordinating the preceptor program for the summer; Debra, Casey Scudmore and Susie Snyder. The program is offered through the college's Corporate and Community Services Department and students pay a fee of \$225. Students complete their preceptorships at Antelope Valley Hospital, High Desert Medical Group, Ridgecrest Regional Hospital and Bishop and the faculty see very good results from the students who participate. Casey Scudmore has volunteered for students to follow her at Palmdale Regional Medical Center for exposure; however, students will not be able to do patient care. Seventy-five percent of the students who are eligible to precept have signed up.

There are 110 nurses precepting students, with some students sharing preceptors. The students complete a minimum of 60 hours, with the average student completing 120 hours. One student completed 410 hours during the intersession 2012. One graduate provided feedback that the reason she was hired was because of her participation in the preceptorship program. Half of the students sign up for more than one area and there is positive feedback from the students about the experiences and the faculty have seen the benefits of precepting.



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Elsa Ramirez asked how the students are matched with their preceptors and Debra responded that the faculty work with the directors and the students also request certain nurses, particularly if they observe a “nice” nurse. Elsa stated that her husband is a nurse and he has shared that the students do a great job.

Christine Williams announced that if there are openings, PRMC opens up its ACLS and PALS certification classes to students and several of the fourth semester students and new graduates have taken advantage of the opportunity. Obtaining these certifications prior to, or soon after, graduation can be helpful when applying for a job. Debra Dickinson said that she encourages students to take any classes that are available, and that the students who attended the CNSA conferences bring back information about what employers are looking for. Some students enroll in BSN programs after graduation if they are not able to find employment.

Vocational nursing program update:

BVNPT program reapproval report

Dr. Cowell explained that she is the director of both the registered nursing and vocational nursing programs. The reapproval packet for the vocational nursing program was recently submitted to the Board of Vocational Nursing and Psychiatric Technicians (BVNPT).

Curriculum update

Dr. Cowell announced that the BVNPT is short of Nursing Education Consultants so it took longer than anticipated to get word on the program approval, but it was reapproved on May 31, 2012. In July 2010 the faculty updated the curriculum and it is more demanding than before.

NCLEX-PN scores

We had one year when the students did not do well on the NCLEX-PN but have since improved to a 77 percent pass rate. The graduates from the program are having difficulty finding jobs; however, most of the graduates do not aspire to be LVNs and view the program as a back door into the registered nursing program.

Many of the students enrolled in the program come from academically weak backgrounds and need to have more time and more intensity. We have been fairly successful in accommodating the LVNs who want to be RNs and the next bridge course is tentatively scheduled for intersession 2013, with anticipated enrollment of 20 students.

The LVNs are very likely to do poorly on the TEAS® and if they are unsuccessful there is a remediation plan that they need to complete before retaking the TEAS® for a second and final time. The faculty have decided to increase the rigor of the remediation plan to include math and ethics.



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Student learning outcomes and program learning outcomes

The vocational nursing students do very well on the student learning outcomes after the first semester, with most students achieving at the 80-90 percent level. In the first semester there is an attrition rate of approximately 50 percent.

The program learning outcomes are achieved at 90-92 percent in the final semester.

The graduates from AVC's vocational nursing program tend to make a smooth transition into the third semester of the registered nursing program, although they sometimes struggle in the fourth semester.

Dr. Cowell expressed her appreciation to Antelope Valley Hospital for allowing the students to complete their obstetrics and pediatrics experiences at the facility, and to Palmdale Regional Medical Center for giving the students an opportunity to complete their medical-surgical rotations at their facility. It is especially important for the students to gain experience in the acute care setting because if they had to remain in the long-term care facility they would not be prepared for the third semester of the registered nursing program. The faculty finds that LVNs who bridge into the RN program without any acute care experience do not do as well.

Vickie Beatty stated that last year there were 20 students enrolled in the bridge course and only two had acute care experience. The number of hospital hours in the course has been increased, but she noted that there is only so much that can be done in the course to prepare the students for transition into the registered nursing program.

Community partner/faculty comments and updates:

Debra Dickinson: She appreciates the opportunities the clinical facilities afford to the students, both for the preceptorship program and the regular courses.

Sandra Hughes: The pediatrics and obstetrics courses are going well. Six clinical days were lost in pediatrics this semester due to low census, but the students were able to participate in simulations on campus.

Diane Bite: Has enjoyed having the students. The community clinic has hired additional nurse practitioners.

Phyllis Heintz: Appreciated being included on the advisory committee.

Christine Fransen: The second semester students appreciated the staff at Antelope Valley Hospital sharing their experiences and being willing to teach them.

Brynn Schock: One of the issues she has with students transferring from the ADN to BSN program is general education. She encourages students to complete their general education and transfer course work before graduating from the ADN program to allow for a smooth transition to the BSN program.



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Linda Harmon: Appreciated being able to take the students to Palmdale Regional Medical Center and the staff has been good at ensuring the students get as many clinical experiences as possible.

Melissa Renfro: Has had clinical at Antelope Valley Hospital and Palmdale Regional Medical Center and the staff has been wonderful at both facilities. She asked about the earn to learn program that used to be offered. Sara Marton responded that PRMC abandoned their "Adopt-A-Student" program in favor of offering sign-on bonuses with a contract that requires new hires to stay with the facility for a minimum of two years. PRMC has already looked at its staffing needs and identified how many new graduates will be hired. She encouraged graduates to look at the website.

Diane Morrow: There are a large number of applicants for any positions that open up. Sara confirmed that during a 72 hour period, PRMC received 3,000 applications.

Berna Mayer: Antelope Valley Hospital is not hiring any nurses because the census is at 180 for the first time in years. She said she was a graduate of AVC, in the same class as Debra Dickinson, and she appreciated the wonderful faculty. She is concerned because the area of acute care is narrowing, and in her opinion future nurses will have to have a bachelor's degree and there is a need to make the pathway from ADN to BSN easier. The problem remains that doctors do not feel like they are part of the community and they must be made accountable because nurses have done as much as they can. Antelope Valley Hospital has eliminated LVNs and done everything they can do to improve patient satisfaction scores and better performance. Registered nurses with an associate degree must get a bachelor's degree to achieve success. Vickie Beatty stated that AVC faculty does not have any influence on getting established staff to move onto an advanced degree and the hospitals may need to offer incentives and be more direct as to why staff need to pursue an advanced degree. Berna acknowledged this, but said that the faculty can act as mentors in encouraging their graduates to continue their education.

Vickie Beatty: With the drop in census we may need to look at doubling up clinical groups on floors as a short-term solution when floors are closed. The faculty and students feel respected by the staff.

Marianne Stewart: Several faculty members are already mentoring students enrolled in bachelor's and master's degrees. In the fourth semester professional classes, she does cover the advanced degrees. She is currently mentoring a bachelor's degree student from Kaplan. Vickie Beatty added that a student enrolled in the master's program at CSU, Dominguez Hills, recently finished a five-week medical-surgical internship with her. Marianne thanked the staff at PRMC, and in particular Diane Morrow, for the great experiences for the students. She said that the nurses were nurturing to the students and enjoyed teaching. They often pulled the students into the experiences in the ICU that they would not get in a medical-surgical nursing area. She said she is going back to the ICU at AVH in the fall and is looking forward to that.

Debra Dickinson: Implemented bringing back graduates to assist with simulations and playing roles or help run some of the simulations. Some of the graduates are using the volunteer experience as part of their resume.



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Susan Snyder: Has been taking her students to AVH for seven years and has found the nurses assist the students.

Casey Scudmore: Students are only allowed to precept at PRMC in an observation role and can perform non-invasive procedures. She can have students shadow her at the facility when she is working over the summer.

Bonnie Curry: Appreciated working with the staff at PRMC. There was a good relationship between the instructors and nurses and the nurses and students. The only issue was the bins.

Christine Williams: Being on both ends, she feels very fortunate for faculty. Is a former graduate and encourages students to embrace their education. PRMC has been involved in the community this past year, including going out to the local schools to promote health care.

Gloria Odell: Believes that everyone in attendance offers a great resource because they are nurses and professionals first.

Sara Marton: Loves having the students. One change that PRMC has made is that the vocational nursing students will be assigned to the evenings, which will open up more opportunities/options during the day for the registered nursing students. The census at the facility is not growing as quickly as anticipated so fewer floors have been open, and this has impacted the facility considerably.

Linda Harmon: The students love participating in the TB and fit testing. Sara Marton responded that the staff love it too.

Diane Morrow: Stated that she believes the instructors are warriors in the way they build students into professionals and she commends every one of them. She particularly commended Marianne Stewart for being such a great mentor.

Pat Hoover: Enjoys having the nursing students and thanked Linda Harmon and Casey Scudmore for bringing the students to the emergency room. The staff are very happy with the students' involvement in the TB testing and fit testing.

Elsa Ramirez: Said she appreciated being invited to participate and thanked all the instructors for being mentors to the students.

Denise Walker: Thanked both hospitals for allowing the students to complete their clinical experiences and said that the students had pleasant experiences at both locations. She appreciated the assistance of the staff with the transition to WOW.

Stirlie Cox: Clinical experience was appreciated by the students.

Yesenia Cota: Thanked the instructors. Works at AVH and there was an issue with the WOWs, but IT can bring the WOW over to where it is needed.

Linda Alexander: Thanked AVH and PRMC. She stated that nursing is changing into more caring theories and she is excited to see this because the heart of nursing is care giving.



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Adjournment:

Dr. Cowell thanked everyone for attending.

The meeting adjourned at 11:04 a.m.