ANTELOPE VALLEY COLLEGE ADVISORY COMMITTEE MEETING

JUNE 11, 2009

PRESENT: Vickie Beatty Antelope Valley College

Paularita Bossier Antelope Valley College Cathi Breckner Antelope Valley Hospital

Susan Burke Westside Unified School District

Stirlie Cox

Bonnie Curry

Denise Dedrick

Terri Fiske

Melodie Francovilla

Antelope Valley College

Antelope Valley College

Antelope Valley College

Antelope Valley Hospital

Antelope Valley Hospital

Denise Goodwin Antelope Valley College/Antelope Valley Hospital

Linda Harmon Antelope Valley College
Dawn Hughes Antelope Valley Hospital
Sandra Hughes Antelope Valley College

Mary Hults Antelope Valley College/Antelope Valley Hospital

Elizabeth Johnston
Sara Marton
Ingrid Merrill
Diane Morrow
Antelope Valley Hospital
Lancaster Community Hospital
Lancaster Community Hospital
Lancaster Community Hospital

Orlana Munson Antelope Valley Hospital

Anthony Pine Lancaster Community Hospital

Betty Price Antelope Valley Hospital
Sandra Robinson Antelope Valley College
Denise Scott Antelope Valley Hospital
Casey Scudmore Antelope Valley College
Marianne Stewart Antelope Valley College
Elizabeth Sundberg Antelope Valley College

Lisa Van Maanen Lancaster Community Hospital

The meeting convened at 9:07 a.m.

Welcome and introductions

In Dr. Cowell's absence, Elizabeth Sundberg welcomed everyone and thanked them for participating in the nursing advisory committee meeting. Introductions took place.

Community partner updates and issues

Elizabeth asked the community partners if there were any issues they would like to discuss. The following input was received:

 Cathi Breckner and Elizabeth Johnston: It is highly recommended that the students park in the dirt section of the parking lot at AVH (by Kmart). The patient satisfaction surveys frequently focus on parking issues.

Orlana Munson:

- Peceives frequent calls from the AVH security office about students from AVC and other schools violating the parking policies. She explained that if individuals are issued too many parking tickets they get a boot placed on their vehicle. If employees violate the policies, the security office informs their director; however, they do not notify the schools for student violations. Elizabeth Sundberg commented that students are encouraged to park in the back on the dirt and Casey Scudmore said that some faculty members encourage students to park at the college and car pool to the hospital. Vickie Beatty suggested that the faculty could discuss doing a random check of the parking lot to determine if any students are violating parking policies.
- ➤ Listens to staff and students and would like the students to understand that CEUs are not about renewing their licenses but about life long learning. When they come to the facility the expectation is that they will come to classes because they are eager to learn. She also wants them to understand that they are active members of the community and they need to get involved by attending staff meetings, serving on committees, and not being afraid of nursing management.
- Nurses are part of a multi-disciplinary team and the expectation is that nurses will be professional and respectful of all members of the team, and not treat any of them horribly. Students need to learn to work on stress management and anxiety skills. Often people vent and the students need to understand and not get upset because it is part of the environment.
- > Increased computer skills are necessary because all nurses are expected to understand that computerized charting is here.
- New graduates need to self-monitor themselves by doing the right thing, even if they observe an experienced nurse not doing so.
- > NPO does not just mean nothing by mouth, but nothing in the stomach.
- Classes on IV skills will be offered to new graduates. Elizabeth Sundberg stated that the IV module is started early in the curriculum, i.e., at the beginning of the second semester.
- > New graduates will continue to learn and they need to understand that the people around them are there to support them to elevate their practice.
- ➤ When AVH goes to the new computer system they will be offering four-hour training sessions, three times a day for five weeks. The training sessions will begin at the end of September or early October, and the clinical instructors are encouraged to attend, but no students will be offered training because there are over 2300 employees who need to go through it. The training will include a walk through of the computer applications the nurse is expected to know.

Cathi Breckner:

- > Encouraged all faculty to attend one of the hospital's annual skills competencies days, either August 13 or August 14. Faculty should meet on 2 East in room 258.
- > Stated that graduates coming out of the program are very task orientated and the hospital staff is trying to get away from that. The graduates need to be less task oriented and more patient oriented, and they also need to work on time management.

• Melody Francis: Michelle Nowicki feels that prioritization, organization and time management need to be the focus prior to graduation. Elizabeth Sundberg commented that time management is the number one problem for new graduates across the country and if anyone has specific suggestions on how to resolve the issue, the faculty would appreciate hearing them.

Terri Fiske:

- New graduates become overwhelmed when they see all the tasks the nurses have to do, but with all the regulatory policies, they must refocus because doing the tasks is going to provide a better outcome for the patient. The administration is trying to get the staff on board, but it is often hard for them to maintain a positive attitude. Sandra Hughes stated that students assess but do not monitor and they are more task and less assessment and patient focused.
- > Has had nothing but positive comments about the students, and they provide an extra source of communication for the patient.
- > One of the biggest initiatives is hourly rounding, which will be enforced very strongly. Elizabeth Sundberg responded that this has been included in the curriculum.
- Newer nurses rely on each other as a resource, but that they need to seek information from more experienced nurses. Diane Morrow commented that the managers need to act as mentors and provide an environment that encourages new graduates.

Melody Francis:

- > There are issues with hand off report; trying hard to get the staff to understand.
- > Sees students spend lot of time at the nurses' station desk and they need to spend more time in the patients' rooms. Students also need to get patients involved in their care. Conversations are not adequate and students need to talk more to patients, especially when they have only 1-2 to spend a lot of time with.

Elizabeth Johnston:

- At a recent meeting with convalescent hospital and Lancaster Community Hospital staff, it was evident that they are seeing more drug resistance and the AVH infection control staff has contacted Ann Peterson about offering a lecture. She stated that hand hygiene must be stressed to students. Elizabeth Sundberg stated that the faculty have started scenarios on standards of care and the first three things covered are hand washing, introductions and identifying the patient.
- ➤ The infection control and quality management areas are more regulated than ever before with national standards and core measures and she has been working with staff to incorporate them into the system. Any input is welcome on the summary of regulatory changes.
- Critical thinking comes up a lot and support is offered from a quality perspective.
- Betty Price: During new graduate orientation is finding that new graduates know about core measures but do not apply them, time management is an issue, and they are petrified about team leading.

- Elizabeth Sundberg responded that she found this interesting because the faculty changed the
 curriculum based on input from the hospitals and now it appears that AVH is going back to team
 leading. Terri Fiske stated that the problem is that there are not enough RNs to do primary care
 across the board.
- Anthony Pine: Commented how well the students interact with the staff and patients and the staff really enjoys having students at LCH. Students add value to the facility's patient care efforts, but one suggestion would be to remind students about the customer service component of care, i.e., allaying the fears of the patients.

Lisa Van Maanen:

- > Students need more critical thinking skills and there appears to be a lot of anxiety.
- > Stressed the need for students to go back to basics and to understand the responsibility for what they are doing, i.e., do not check the medications against the chart but against the name band, because patient identification needs to be one of the basics.
- Lancaster Community Hospital is still offering the "Adopt-A-Student" program.

Sara Marton:

- Loves the students and thinks the program is great.
- There seem to be a lot of issues with critical thinking but this is common among both the nursing staff and the students. A lot of the problem is making staff understand that they have to step up to the plate and be there for new graduates, and that they must keep thinking "outside of the box". She commented that everyone must continue to work together in the right direction.
- Diane Morrow: Has no complaints about the students and appreciates what the faculty are doing
 and welcomes input from them. Believes it is key that new graduates are assigned to a mentor
 nurse so that they know exactly who they can go to.
- Susan Burke: Students do a fantastic job and are flexible in adapting to the new environment at the school sites. Sandra Hughes stated that the role of the school nurse has expanded tremendously with the integration of special needs children into the general population, and she is impressed with the care and services the children get in school. Elizabeth Sundberg commented that students value the community experience because it gives them a different perspective.

Medications to newborns

Casey Scudmore said she would defer discussion on the medications to newborns issue because there was no staff present from the obstetrical area.

RN curriculum update

Elizabeth Sundberg reported that AVC is in the top 10 out of 73 registered nursing programs for admissions and graduates, which has been possible because of grant funding from the State. The good news is that the NCLEX success rates have been maintained with the increased number of graduates.

Unfortunately, the anticipated grant funding for 2008-09 will be cut and a reduction of between 14 and 62 percent is expected for 2009-10. Elizabeth explained that Dr. Cowell is hoping that the cut for next year will not be that bad, but that any cuts will definitely have an impact on the program.

The ADN program is three semesters into the new curriculum and professional nursing content has been integrated across the curriculum. Some of the topics dealt with are professionalism, the Nurse Practice Act, expanded roles of the nurse, communication with the physician, documentation, leadership, management and delegation. Core measures are also taught, and a DVD has been purchased on patient satisfaction success.

Sandra Hughes stated that the faculty face a dilemma because they have to teach to a standard not to a specific clinical facility, but the faculty will try to get all components into a format to teach to the students that can be used wherever they go.

Vickie Beatty stated that in an effort to standardize experiences, we are moving to 12-hour days for clinical experience in the hospitals. All clinical groups in second semester will have 12-hour rotations in the spring.

Elizabeth Sundberg stated that the fourth semester students are also doing 12-hour shifts, and three patients are assigned per student. The students do total patient care in the hospital, with one rotation having an emphasis on critical care. She complimented the hospital staff for allowing the students to give report. Orlana Munson commented that until there are enough RNs to support total patient care, a component of team will always be there.

RN program update

Elizabeth Sundberg reported that the RN program completed a BRN program approval visit in December 2008, and she extended her appreciation to the community partners for sharing their observations with the consultants. The BRN consultants offered positive feedback and quite a few compliments. There were just two recommendations:

- 1. Increase amount of administrative staff. This has been accomplished with Elizabeth, Bonnie Curry and Sandra Hughes being granted release time. Elizabeth is the assistant director/department chair and Bonnie and Sandra are assistant directors. Bonnie is responsible for program evaluation, tracking NCLEX scores, new employee surveys, tracking graduate surveys, course evaluations and student evaluations of faculty, which all drive changes in the curriculum. Sandra is responsible for contact with the clinical facilities, contracts, TEAS® and predicted probabilities of success (PPS) calculations on student applications. Elizabeth explained that the TEAS® and PPS are both being used as preadmission criteria for admission to the program.
- 2. Hire a full-time simulation lab position. This recommendation cannot be met at this time due to budget issues.

Elizabeth stated that it may not be possible to fund the nursing skills lab at the current level due to the State budget cuts, and the faculty feel that the open lab is critical to student success.

An estimated 80-90 students have indicated that they want to precept this summer. Sandra Hughes remarked that she encourages the second semester students to complete work experience in a medical-surgical area, and not a specialty area, so that they develop critical thinking skills and become more competent at assessments. Vickie Beatty acknowledged the hospital staff for placing students.

Integrating simulation into the curriculum

Full-time simulation cannot be funded because of budget issues. Faculty are working more with the SimMan in an attempt to enhance student experiences in a non-threatening environment and software has been purchased from Laerdal, which allow the faculty to pick different scenarios to share with their students. Orlana Munson commented that AVH uses the SimMan for competency check-offs. Denise Scott said she was glad to hear that the faculty are incorporating more skills with simulation because some new graduates do not know how to perform certain skills. Denise Dedrick stated that all fourth semester students participate in a two-day skills day on campus at the beginning of each semester.

Student retention

Elizabeth reported that the attrition rate for students completing the program in four semesters is 45 percent and the State wants us at about 25 percent. We have done a tremendous amount to try and help students, including hiring Stirlie Cox as the student success counselor, working with the Learning Center, using the early alert program for "at risk" students, and implementing the TEAS® as a measurement of predicting student success. Elizabeth stated that the faculty really appreciates having Stirlie in the division.

Stirlie stated that she is committed to helping students, and the students enrolled in the different semesters have varying needs. Many of the students she sees have issues with time management, stress, anxiety and testing taking skills. They also have external factors such as family problems, living conditions, childcare and finances that they are dealing with. She refers students to services on campus such as the Office of Students with Disabilities, the Learning Center and the Counseling Office (for both academic and personal advising).

Stirlie distributed an article titled "In the Shelter of Each Other – Respite Care for Students as a Partnership Model" which Dr. Cowell requested community members to read.

Planning for admissions for 2010 and 2011

Elizabeth reported that the number of generic students admitted into the program from spring 2010 will be dependent on grant funding, and that it may be necessary to reduce admissions to 60 students. She added that Dr. Cowell is committed to allowing as many LVNs to enter into the third semester as is possible.

Vickie Beatty reported that the LVNs admitted into NS 200 (Nursing Transition) are performing better than they were previously, which is attributed to the introduction of the TEAS®.

Nursing informatics in health care

Denise Goodwin announced that she and Orlana Munson recently attended a conference on nursing informatics in health care. She distributed a handout covering the main topics covered and gave an explanation of the information obtained at the conference. The topics included:

- Background
- The TIGER (Technology Informatics Guiding Education Reform) Initiative
- The Seven Pillars TIGER Vision
- Nine Collaborate TIGER Teams

- The TIGER Goals
- Nursing Workforce
- TICC TIGER Informatics Competencies Collaborative
- Competencies Model
- Basic Computer Competencies
- Basic Computer Skills
- Information Literacy
- Information Management
- New Administration
- Setting the Bar
- NLN, AACN, ACN and California BRN

Denise indicated that there have been informal discussions regarding the nursing students and AVH is trying to gather as much information as possible to do the right thing for the hospital, the college and health care.

Mary Hults asked if there had been any move so that the students can pull up their own labs. Denise responded that there had been no discussion about changing the process in phase one, which the facility will implement starting on November 1.

Sara Marton stated that LCH is trying to get the students on to the electronic charting system. There will be big changes with the new hospital but right now they are already doing what AVH is planning to implement.

Vocational nursing program update

Elizabeth Sundberg reported that the vocational nursing (VN) program will be admitting 30 students in the fall and there are currently 40 students who are eligible for graduation in August. There is one student who has already completed the prerequisites for the RN program and plans to enter the program within a year. The VN program is now 12 months in length, and the curriculum will be revised in fall 2009. The new curriculum will have fewer hours in pediatrics and obstetrics.

Students enrolled in AVC's VN program are often confused with students enrolled in other programs. To avoid some of the confusion, the color of the uniform the VN students wear has been changed so that it is the same as what the RN students wear.

On behalf of the VN faculty, Elizabeth thanked the clinical facilities for the valuable experiences the students receive.

Nurse aide/home health aide course update

Elizabeth reported that the nurse aide course is usually offered twice a year; in the intersession and summer sessions, and the enrollment has been cut back to 15 students because of the limited availability of qualified faculty and the student/faculty ratio. Unfortunately, due to the state budget cuts, the course will not be offered in summer 2009 or intersession 2010.

Adjournment

The meeting adjourned at 11:18 a.m.

ANTELOPE VALLEY COLLEGE NURSING ADVISORY MEETING JUNE 7, 2010

PRESENT:

Vickie Beatty Antelope Valley College Cathi Breckner Antelope Valley Hospital Lvnn Cambria Hoffman Hospice Kaiser Permanente Arnoldo Casillas Dr. Karen Cowell Antelope Valley College Antelope Valley College Stirlie Cox Antelope Valley College Bonnie Curry Denise Dedrick Antelope Valley College Debra Dickinson Antelope Valley College Jeffrey Fairchild Antelope Valley Hospital Palmdale School District Julie Ferebee Linda Harmon Antelope Valley College Antelope Valley College Sandra Hughes Susan Lippman Antelope Valley Hospital Annmarie Marotta Antelope Valley Hospital Pat McClendon Lancaster Community Hospital Orlana Munson Antelope Valley Hospital Antelope Valley College Sandra Robinson Antelope Valley College Susan Snyder Marianne Stewart Antelope Valley College Antelope Valley College Elizabeth Sundberg Denise Walker Antelope Valley College

Welcome and Introductions

Dr. Cowell called the meeting to order at 9:07 a.m. and thanked everyone for attending. She stated that it is important to get advice from the hospital staff on the nursing programs and that she and the faculty appreciated the input because advisory committee input is crucial in order to obtain federal funding. Introductions took place.

Registered Nursing Program Update

Elizabeth Sundberg reported the following:

Curriculum Update

Updating the curriculum has been a work in progress since the new curriculum was introduced and the faculty will be looking at the course outlines of record in the fall to see if everything is being covered and meeting the needs of the students. There has been a lot of input from the students and the instructors, and the NCLEX scores are being looked at.

Integrating Simulation into the Curriculum

The goal of the faculty is to run students through simulation scenarios to coincide with what they are studying in theory. Dr. Cowell wrote another grant to fund the new SimMan 3G and Debra Dickinson will take over as simulation coordinator in the fall. Debra explained that the simulator is a lot more realistic than the previous simulators we have purchased, and has an internal compressor and he has many advanced functions. Debra offered to give a demonstration at the conclusion of the meeting. Elizabeth stated that students have to identify the patient, wash their hands and go through all the standards of care. Some students do not perform well in simulation and this makes their classmates think about their responses and do a lot of self-reflection.

Debra said that she is excited to be coordinating the simulation and that it will be introduced in the first semester and built up through the program. It is hoped that starting simulation early in the program will allow the students to be more comfortable in the clinical facilities.

Dr. Cowell announced that the SimNewB simulator has been ordered and it will be shared between the respiratory care and registered nursing programs. This simulator will provide training for the neonate. In addition to SimMan 3G and SimNewB, the simulators that are used are SimMan, Noelle and SimBaby.

Orlana Munson asked if Dr. Cowell could assist her with grant writing, because she believes simulation is valuable in the hospital setting also and makes for a better environment for learning. Dr. Cowell responded that she has been successful in writing grants since 1989 and has secured \$1.2 million for the registered nursing program. She suggested that Orlana contact Georgetown University regarding the three-day grant writing seminar that they offer and said that she would be happy to review any grants that are written. She added that if the simulators are not in use all the time, the two hospitals might want to partner with AVC.

Orlana commented that she would like her staff to work with Debra on simulation.

Electronic Charting and i>Clickers

One of the ways that the faculty are integrating more technology into the program is with the introduction of i>clickers. The i>clickers make it more interactive for the students during lectures, and give the faculty feedback on what knowledge the students have gained. Elizabeth gave a demonstration.

Elizabeth announced that another form of technology that will be introduced is electronic record keeping for the students. The software for electronic hospital-like documentation, which is molded to the educational environment, is available through Elsevier. The purchase of the software was possible because of funding available through the Carl Perkins Act.

Orlana Munson stated that Antelope Valley Hospital will be introducing a bar coding system and the intention is that the students and instructors will have access. All charting will be done in the system and it is anticipated that implementation will be complete by the end of 2011. The instructors will be responsible for confirming that the information that the students put in the system is correct. Training will be offered.

Preceptor Program

Susan Snyder announced that approximately 90 students would be precepting at both hospitals during the summer and the faculty appreciates the assistance of the directors in helping get the students placed. The program was moved to the Community Services Department due to the State budget cuts, and each student has to pay \$225 to participate. Dr. Cowell added that work experience for all areas was taken out of the college budget.

Students who have opted to precept will work on both the day and night shifts, and must complete a minimum of 60 hours in a 10-week period. Some students have indicated that they want to get as much experience as possible. Susan, Debra Dickinson and Casey Scudmore will be working with the students and will be the contacts for the hospitals. Their telephone numbers will be provided to Annmarie Marotta and Sara Marton.

NCLEX Scores and Program Evaluation

Bonnie Curry reported the following:

- The ADN Program Evaluation and Planning Committee meets twice a year and the purpose of the committee is to perform a complete evaluation of the program and to validate the data that is collected each semester. Some of the data that is reviewed includes student demographics, ethnicity, age, course evaluations, objectives, student evaluations, textbooks, methods of teaching, utilization of campus resources and comments made by students. At the conclusion of each course, students complete course and faculty evaluations, and at the end of two years they evaluate the program. The SurveyMonkey tool is used for course and program evaluations.
- The clinical formative evaluations have been changed from task to evidence based practice.
- The State would like us to be at a 15 percent attrition rate, and although attrition has improved, it is not at 15 percent yet. Attrition rates are determined by the number of students who begin in first semester and graduate in four semesters.
- The last group of graduate surveys that were sent out resulted in a return of 32 percent, which is the best response for a number of years. The surveys indicated that 27 percent of graduates were enrolled in a RN-MSN or BSN program, and of those who responded that they were not currently working towards an advanced degree, 75 percent planned to advance their education in the near future.
- New graduate surveys are also sent to employers to obtain feedback on entry level registered nurses. None of these surveys were returned in 2009 and the surveys for 2010 will be sent out within the next two weeks. Orlana Munson suggested that the surveys be sent to the educators.
- The faculty seeks input from charge nurses, directors and staff in the clinical facilities during an exit survey at the end of each rotation. The faculty has discussed ways to improve consistency with clinical groups in the facilities.
- Stirlie Cox is the student success counselor and she works very closely with the students. Faculty members identify students that need assistance and refer them to the various resources on campus, including Stirlie.

- NCLEX results are reviewed and AVC is consistently at or above the national and state pass rates. The latest results for AVC reflected a 95.38 pass rate. Elizabeth Sundberg commented that the passing standard was raised again in April.
- The analysis that takes place in the Program Evaluation and Planning Committee drives curriculum changes because discussion and action continue in the ADN Curriculum Committee.

Cathi Breckner inquired whether the students have problems with math and Bonnie Curry responded that since the TEAS assessment was introduced, students do better on math in the program. She added that the students must pass a math examination at the beginning of each semester in order to continue in the program.

Grant Funding

Dr. Cowell announced that AVC has been awarded \$203,687 for 2010-2011 and the same amount for 2011-2012 through State grants. The funding will be used to fund Debra Dickinson's position, staff open skills lab hours, purchase more simulators, fund TEAS® assessments, and allow opportunities for staff training in simulation and other areas. Last year grant funding allowed 11 adjunct and full-time faculty members to attend the Mosby nursing educator conference in San Diego, and Dr. Cowell received excellent feedback from those who attended. Some of the staff nurses who work for AVC as adjunct faculty indicated it was the first professional conference they had attended. Next year's conference will be held on the east coast, which will be costly to fund, but funding may be available for the conference scheduled on the west coast for January 2012.

Vocational Nursing Program Update

Dr. Cowell reported that the vocational nursing program has undergone a total re-write of its curriculum this year and the faculty are still waiting to hear from the BVNPT consultant regarding approval of the changes. She commented that AVC's vocational nursing program has a great partnership with Lancaster Community Hospital and she appreciated the help that Antelope Valley Health Care Center has provided with clinical placements.

Dr. Cowell stated that the program serves several purposes:

- 1. Although some hospitals prefer not to hire LVNs, correctional facilities are hiring.
- 2. The program can prepare students who do not do well on the TEAS® and give them a basic education to prepare them for entrance into the RN program. One student who completed the vocational nursing distance learning program several years ago entered the advanced placement program and was pinned last night, and two students who completed AVC's vocational nursing program are coming into the program next spring.
- 3. The vocational nursing program provides a back-up for students who are interested in becoming LVNs and entering the third semester of the RN program.

Annmarie Marotta asked if the bridge class was being offered and Dr. Cowell responded that there is a funding issue this summer, and in addition so many generic students are successful in their progression from the second to the third semester for the fall that we do not have space to enter any LVNs. Thirty LVNs will be admitted next spring, after they have completed the transition course in the winter intersession 2011.

Partnership with CSU Bakersfield

Dr. Cowell announced that there is an increased demand from students to obtain their BSN. For years, AVC has had a great partnership with California State University, Bakersfield (CSUB), and every course the students take as part of AVC's registered nursing program transfers to the CSUB curriculum. When students enter CSUB they receive independent study credit for passing the NCLEX, and that covers most of the junior year. Counselors from the university will be in attendance at the first semester orientation in August.

Community Partner Updates and Issues

- Cathi Breckner announced at the Antelope Valley Hospital skills days for instructors will be held on August 5 and August 13. Faculty need to attend only one day.
- Jeffrey Fairchild said he was glad to see so much simulation being incorporated into the curriculum. He stated he has been searching for grants; however, there are not available to hospitals. Dr. Cowell suggested that he put the spin of a partnership in the application and stated that Kaiser has done this very successfully.
- Orlana Munson asked the person in charge of new student orientation at Antelope Valley Hospital what types of issues she is seeing in new graduates and she said there are generational issues, such as text messaging. The level of acuity of patients has risen quite a lot and the hospital is now a Trauma II center. They are currently hiring experienced nurses instead of new graduates. She suggested that while the students are at the hospital, they make it a goal to make an impression on the staff and management. Cathi Breckner said that precepting is important and that graduates should put this experience on their employment applications. Sandra Hughes asked if hiring for the Women and Infants Pavilion (WIP) goes through the main hospital and Orlana responded that she is working with the directors of the WIP.
- Susan Lippman urged the faculty to stress upon graduates that there is so much more to do
 once they are hired, so that they don't have the attitude that they do not need to learn more.
- Pat McClendon said that she is still acclimatizing to the Antelope Valley community/culture and her role as the chief nursing officer at Lancaster Community Hospital (LCH). She said that she is very supportive of students and new graduates, is very familiar with integrating them into the hospital environment and has found that new graduates can become leaders in 1-2 years. She has been very impressed by the students at AVC. At LCH her main focus will be on the move but she is enjoying the people tremendously. LCH is working on building up its education department and growing leadership. Sixteen new graduates have been hired this month in addition to the eight that were hired in early spring. The new facility will have a six bed NICU and will increase its capacity in the emergency department from eight to 35 beds. The hope is to retain patients who currently go out of the area for health care.
- Julie Ferebee reported that the Palmdale School District has experienced school closures, staffing reductions and other budget issues, which have decreased their capacity to accommodate students. Most of the nurses in the district are masters prepared and the minimum is a bachelor's degree with a credential in public health nursing. They do a lot of case management and education to students and their families. She requested the faculty to provide positive feedback so she can forward it to the nurses. Sandra Hughes stated that she and Debra Dickinson schedule the students for their community rotations and they receive excellent feedback about their experiences at the Palmdale School District, Kaiser and Hoffman Hospice.

- Annmarie Marotta stated that she has had the opportunity to work with new graduates and has been impressed with them for the last two semesters. She reported that AVH is trying to staff with RNs only and LVNs are being moved off the floors and into the float pool. LVNs will not be replaced due to attrition. The facility has mostly task based nurses and the emphasis should be on encouraging a therapeutic environment. Bonnie Curry commented that the professional role is being integrated into the curriculum.
- Orlana Munson announced that to date about 50 nurses have gone through the program developed by Marie O'Rourke, which focuses nurses on a professional model. She stated that newly hired nurses are reluctant to report in the patient's room and this needs to happen because care is centered around the patient and the nurse must do the right thing for the patient. Pat McClendon commented that patient confidentiality becomes an issue if the patient is sharing a room or family members are in the room. Dr. Cowell asked Orlana if the process had been run through their legal department and she responded that it had. Orlana added that report needs to be in the room and that she can try to develop a tool to differentiate what is acceptable and unacceptable to talk about when other people are present in the patient's room. Dr. Cowell commented that it would be helpful for the instructors and students to have such a guide.
- Susan Lippman stated that bedside reporting involves the patient with their own care and establishes the communication process from the beginning. Sandra Hughes stated that introducing the different levels of the team and establishing the plan of care for the day is a good thing, but she does not believe the nurses need to share the whole report at the bedside. Dr. Cowell shared that on recent visits to UCLA she observed that every person who came into the patient's room introduced themselves, explained their role and plan of care, and asked if they could do anything else before exiting the room.
- Arnoldo Casillas said he was very impressed with the program.

Faculty Concerns and Clarifications

- Debra Dickinson observed that new graduates are being hired into specialty units and feels they would be better starting on a medical-surgical unit before moving into a specialty area. She said that she has only received one call in the past year requesting a reference for a graduate.
- Dr. Cowell said that she would appreciate information being shared with the faculty when JCAHO visits are made.

Adjournment

The meeting adjourned at 11:18 a.m.

ANTELOPE VALLEY COLLEGE NURSING ADVISORY MEETING JUNE 8, 2011

PRESENT:

Elvie Ancheta Antelope Valley Hospital
Hilda Barkate Antelope Valley College
Victoria Beatty Antelope Valley College
Laura Benesch Antelope Valley Hospital

Diane Bite Antelope Valley Community Clinic

Paularita Bossier Antelope Valley College

Mordia Bryan-Salmon Palmdale Regional Medical Center James Cook Antelope Valley Community Clinic

Dr. Karen Cowell
Stirlie Cox
Bonnell Curry
Antelope Valley College
Antelope Valley College

Kelsey David Antelope Valley College (Student)

Debra Dickinson Antelope Valley College

Daisey Dorotheo Palmdale Regional Medical Center

Jane Frye
Denise Goodwin
Sandra Hughes
Marcey Jorgenson
Krista Lamers
Candace Martin
High Desert Medical Group
Antelope Valley Hospital
Antelope Valley Hospital
Antelope Valley College
Antelope Valley College

Sara Marton Palmdale Regional Medical Center
Diane Morrow Palmdale Regional Medical Center

Antelope Valley Hospital Orlana Munson Antelope Valley Hospital Gloria O'Dell High Desert Medical Group Kelly Reichert Antelope Valley Hospital Linda Robinson Sandra Robinson Antelope Valley College Antelope Valley College Casey Scudmore Susan Snyder Antelope Valley College Philip Sta Agueda Antelope Valley Healthcare Marianne Stewart Antelope Valley College Elizabeth Sundberg Antelope Valley College Barbara Tenneson Antelope Valley Hospital

Mary Thomas Antelope Valley College/Antelope Valley Hospital

Lisa Van Maanen Palmdale Regional Medical Center

Denise Walker Antelope Valley College

Lyndi Vela Antelope Valley College (Student)

Marcia Weldon Antelope Valley Healthcare

The meeting convened at 9:02 a.m.

Welcome and Introductions

Elizabeth Sundberg welcomed everyone for attending and introductions took place.

RN Program Update

Curriculum update

Elizabeth Sundberg reported that the faculty have been working on a revised curriculum plan and outlined the changes, as follows:

- 1st semester
 - The professional course will be combined with the fundamentals course.
- 2nd semester

Obstetrical nursing and medical-surgical nursing will remain in the second semester (two eight-week courses), but the clinical component for the medical-surgical course will increase to 24 hours per week.

- 3rd semester
 - Mental health and medical-surgical nursing (two eight-week courses). The medical-surgical course will increase to 24 hours of clinic per week.
- 4th semester
 - Pediatrics and medical-surgical nursing (two eight-week courses). The community experience will be moved into the fourth semester because feedback that has been received from the students indicates that they do not have the background that they need to complete the experience in the third semester.

Elizabeth gave an opportunity for feedback. None was given.

Integrating simulation into the curriculum

Elizabeth announced that AVC has been fortunate in obtaining Carl Perkins funding to purchase equipment for the simulation labs, including SimMan Essential, SimJunior and SimNewB. The faculty has been integrating simulation into the curriculum and the simulations are correlated with the area that is being studied in a particular course. The scenarios that are used for the simulations are a combination of those developed by the faculty and NLN series that has been purchased. Some of the equipment is shared with the respiratory care program.

Debra Dickinson explained that simulations are run in every course and the scenarios become more complex as the semesters progress. She gave examples of the types of simulations and said that students are usually given an opportunity to do a simulation twice, but the scenario is changed slightly to improve student learning. Most of the full-time faculty have been trained in their content area to work on the simulators.

Debra stated that she is very excited to be working with the students on simulations and she is able to give feedback to the lead instructors on how each group of students respond and any concepts the students do not understand. The goal is to ensure that all students get a consistent experience in the simulation lab because this does not always happen in the clinical facilities.

Elizabeth stated that Debra takes half of the students out of their clinical group for the simulation labs, while the other half remain with the instructor in the clinical facility, and that the students receive a lot of good experiences on things that they do not always get an opportunity to see in the hospital. The students are very excited about the experiences that they have in the simulation lab.

Dr. Cowell announced that the new Health and Science Building, which is scheduled to open in fall 2012, would have a simulation suite.

Preceptorship program

Debra Dickinson announced that she has been working on the placement of students for the summer. Because the college budget no longer allows the preceptorship program to be offered as a credit course, it is now offered through Community Services and the students pay \$225 for the experience. This summer there are 75 students who are signed up and the majority will complete their experiences at Antelope Valley Hospital, with some in Ridgecrest. There are 85 preceptors because some students have requested to work in two different areas. Debra thanked Antelope Valley Hospital for their assistance in setting up the preceptorship program for the summer.

Debra stated that the faculty believes that precepting is a very valuable experience, and they see the benefits to the students who have the opportunity to precept one-on-one with the RNs. The students complete a minimum of 60 hours, but last summer some did as many as 264 hours.

Because Antelope Valley Hospital is going live with their new charting system on July 11, it would not be conducive to student learning to have students at the facility during this period; therefore, they will be encouraged to complete their assignment by July 11, or not precept during the two-week period following July 11.

Casey Scudmore reported that the set of preceptorship guidelines was recently updated, and the students are responsible for writing their own learning objectives.

Jane Frye said she would be interested in reviewing the preceptorship guidelines because there may be some RNs in the Urgent Care who would be interested in precepting students.

NCLEX scores and program evaluation

Bonnie Curry explained that the Board of Registered Nursing mandates that each RN program has a Program Evaluation Committee. The committee meets twice a year to examine data that has been collected from a variety of sources throughout the semester and the data drives changes to the curriculum. Examples of the data that is collected are:

- At the end of each course, the students have an opportunity to complete a course survey, which includes the evaluation of course objectives, textbooks, resources, clinical sites and instructors. At the end of the program, the students complete a program evaluation. The surveys are conducted using SurveyMonkey.
- The faculty members conduct exit interviews with hospital personnel at the end of each semester to gain feedback.
- Surveys are sent out to graduates 6-12 months post graduation. Graduates are asked to evaluate the program objectives and provide information about their employment. The employment situation has changed in that in the past 94 percent of students had jobs within one year of graduation and the majority of those employed worked in acute care, with telemetry and medical-surgical being the most common, and a lesser number were employed in maternity, emergency room and ICU. The faculty have noticed an increase in the number of graduates finding employment in home health and long-term care.
- Feedback from employers on the performance of new graduates.
- Attrition (students who are not successful) per course and overall in the program. Dr. Cowell reported that the attrition rate for the spring semester, 2010 was 31.9 percent, down from 41 percent in the previous semester. The attrition rate is determined by students who do not graduate in four semesters. The goal is to graduate the majority of students within four semesters.

- NCLEX results for first time takers. For 2009-10, AVC's pass rate was 94.5 percent. Sixty of the 63 students who graduated in fall 2010 passed the NCLEX on their first attempt.
- An assessment test (HESI) is given at the end of each course. The faculty believe it is a reliable standardized test and that there is a good correlation between the results students receive on the test and their predicted probability of success on the NCLEX. The tests have alternate format questions, which mirror the NCLEX, and the faculty are incorporating these types of questions on their examinations.

Elizabeth Sundberg noted that because the HESI is a computerized test, it enables the students to become familiar with this type of testing before they take the NCLEX.

Electronic Medical Records (Student Access)

Elizabeth Sundberg asked for feedback from the hospital personnel regarding whether students will have access to electronic medical records. Sara Marton responded that Cerner would be phased in at Palmdale Regional Medical Center in the near future, and she would check into whether student access could be available in the fall semester. Debra Dickinson stated that the students have limited access to medical records at the present time, and the information and labs that they obtain are very helpful.

Jane Frye stated that High Desert Medical Group uses NextGen and to date students have not been granted access, but she will check whether this is a possibility.

Gloria O'Dell announced that valuable training would be offered to the faculty on the Horizon Expert documentation system being introduced at Antelope Valley Hospital. The training will be offered August 15-18, and the faculty will be required to attend two eight-hour classes. Training will also be required for the students and the faculty agreed to provide dates when this can be scheduled. Vickie Beatty inquired if training would be required only once while students are enrolled in the program and Gloria responded affirmatively.

Orlana Munson commented that the computer is a tool; however, there needs to be an emphasis on patient interaction. She added that Antelope Valley Hospital will be going live with medication administration in all areas except the Emergency Room, and with clinical documentation in the medical-surgical areas, critical care and pediatrics, but care plans are not included yet.

Debra Dickinson announced that students have an opportunity to work with electronic charting at AVC. Elizabeth Sundberg explained that Nurse Squared was purchased for one year with Carl Perkins funding, but it is not web based and there have been some access issues. The program looks very similar to the electronic charting seen in the hospital and is a good tool to get students moving towards becoming familiar with medical record keeping.

Vocational Nursing Program Update

Candace Martin gave a program update, as follows:

- The fourth class to complete the 12-month program will graduate in August.
- A new curriculum has been implemented to adjust to the 12-month program. The curriculum content has not changed too much, but over 1,000 objectives were updated and submitted to the Board of Vocational Nursing and Psychiatric Technicians for approval. The program is now very rigorous and challenging, and because of this, the faculty anticipates a lower completion rate.

- AVC should have an excellent pass rate on the NCLEX this year.
- The lectures are being podcast and put on iTunes for the students to download. Carl Perkins funding was awarded to purchase MP3 players, which the students can check out to utilize the podcasting service.
- Students must take a mandatory HESI test after the first semester and another test at the end of the program. Candace acknowledged that this places more stress on the students but the faculty will be implementing more critical thinking into the program, which should be reflected on the test scores.
- Students enrolled in the vocational nursing program are in class an average of 35 hours per week. Candace has received feedback recently that the graduates who come from AVC's program have very good success in the RN program. This can be attributed in part to the fact that there has been an effort to gear the vocational nursing program towards the RN program by using the same format for care plans and also because both programs use the same fundamentals textbook.

Partnership with CSU Bakersfield

Dr. Cowell announced that AVC has been working on a partnership with California State University, Bakersfield (CSUB), Antelope Valley campus, with their RN-BSN program. The students who are enrolled in the program only need to leave the Antelope Valley for the community public health experience. She encourages AVC's students to work with CSUB to line up their curriculum so that their transition into the BSN program can be easily achieved after graduation. CSUB accepts all of the general education and nursing courses from AVC, but students have some additional general education courses that they need to complete. Motivated students can complete the RN-BSN program within a year. Vickie Beatty noted that AVC's graduates also enroll in other programs to obtain their BSN.

AVC will be exploring the feasibility of admitting students concurrently to complete their BSN program. This would allow AVC to be more selective in their admission process. The community health and public health rotations have to be completed in a Public Health Department facility in Los Angeles County and the ratio of students to instructor is 10:1.

Elizabeth Sundberg commented that the faculty encourage students to get their BSN after completing the registered nursing program. Sandra Hughes commented that Diane Bite is to be commended because she is a graduate of AVC and has completed a nurse practitioner program. Elvie Ancheta stated that Laura Benesch recently completed her master's degree.

Community Partner Updates and Issues

Orlana Munson stated that she would like the opportunity to speak with the students about informatics because she wants them to understand that there is more than bedside nursing and believes it is important to have more informatics nurses. Bonnie Curry stated that she talks about the expanded roles of nurses, including informatics, in her lectures.

Laura Benesch discussed the following:

• Inquired whether scripting is taught and Sandra Robinson responded that it is introduced during check offs in the first semester. Vickie Beatty added that scripting is also built into the simulations. Bonnie Curry stated that the faculty have observed changes in student interaction that appear to be generational, i.e., the younger students are missing how to communicate face-to-face.

- The importance of patient satisfaction was stressed and the faculty were requested to educate the students about the relationship between patient satisfaction and their role. The biggest issues are awareness of noise levels and the need for students to present themselves as professional and caring individuals because the patients are looking to trust them. Elizabeth Sundberg responded that the content is covered in the professional courses and Bonnie Curry noted that patient satisfaction is introduced in the first semester of the program and is reiterated to the students during their clinical rotations.
- The faculty were reminded that the hospital has a policy of no cell phones in the hallways or patient rooms and that there is nothing that a student needs to access from a cell phone that has been approved by the facility. Laura explained that there is a concern that if a patient sees a student on a cell phone, they will perceive it as a personal call. There is scripting for phones that are carried by hospital personnel. Dr. Cowell asked if patients are permitted to use cell phones and Laura responded that they are not encouraged but usage by patients and family members is too hard to enforce.
- Items such as drug books or clipboards cannot be left in wallaroos.

Mordia Bryan-Salmon inquired whether the curriculum addresses multi-generations in the work place. She said that there has been significant discussion on how to incorporate this topic, the types of challenges and how to maneuver through them. Teaching nurses how to interact with older and younger patients is a big part of the transition of new graduates into the workplace. Dr. Cowell stated that the issue is addressed in the curricula of the first and fourth semesters, but that she has a problem with putting people in boxes based on age. Mordia clarified that part of the transition is the comfort level that takes place in being in the work place after graduation and wonders how their education helps them to achieve this, i.e., how much more effective they are in providing care based on their understanding of the needs of multi-generations. Vickie Beatty stated that the goal setting or understanding of care is mutually negotiated with the patient, and students are given guidelines on how each patient is to be individually addressed and whatever care is being given is understood by the patient. Sandra Hughes stated that in the second semester professional course, she covers the readiness of the patient to learn, the modality for teaching, the need to address the patient by their name, and the need to be respectful and sensitive.

Denise Walker said that the third semester students participate in an aging simulation, where the students work with one another and are able to transfer information.

Linda Robinson expressed the view that a prerequisite course in interpersonal communication, rather than public speaking, might help students who enroll in the nursing program. Elizabeth Sundberg explained that public speaking is not a requirement for the program, but students take a communications course, which includes small group communication and interpersonal communication, as a graduation requirement.

Elvie Ancheta said that she has been doing research on the gap between nursing practice and nursing education and it is well established that there is a gap, and highlighting some of the areas is communication, conflict resolution and system thinking. She stated that a meeting like this can help identify the gap by faculty listening to what the service facilities are saying. She said she was glad to see that more medical-surgical nursing has been added into the curriculum, instead of in the specialty areas.

Faculty Concerns and Clarifications

Dr. Cowell said that she makes clinical visits each semester; some announced and some unannounced, and she has noted how influenced students are by the staff on the floor. The students are required to wear uniforms and shoes that look professional and are appropriate for the floor; however, the clothing worn by some of the staff does not appear to be appropriate. Dr. Cowell feels that standards can be transmitted from the staff to the students at both hospitals.

Dr. Cowell stated that during a recent clinical visit she observed Candace Martin's students going around each patient's room to ask what the patient thought about the care the students gave during the day, and thought this was good feedback about patient satisfaction for the instructor to hear.

Vickie Beatty reported that this semester she learned about ambassador rounds on 4 Tower at Antelope Valley Hospital, and she was able to get feedback on how her students were doing. She said she would appreciate receiving feedback on a regular basis so that this could be provided to students. Marcey Jorgenson stated that there are certain expectations of consistency that are expected in the practice environment and believes that it is good for the students to get feedback. Vickie inquired where rounding should be documented and Laura Benesch responded that there is a clipboard in every room. Elizabeth Sundberg asked whether students should sign and Laura said they should.

Elizabeth Sundberg thanked everyone for attending and said that their comments and input were appreciated.

The meeting adjourned at 10:31 a.m.