

OREGON STATE BOARD OF NURSING
REPORT OF SURVEY VISIT
SOUTHWESTERN OREGON COMMUNITY COLLEGE (Coos Bay)
ASSOCIATE DEGREE NURSING PROGRAM
Review dates: May 1-3, 2017

The Southwestern Oregon Community College (SWOCC) Associate Degree Nursing Program survey was conducted May 1-3, 2017 by Joy Ingwerson, MSN, RN, CNE, Policy Analyst for Nursing Education and Assessment for the Oregon State Board of Nursing.

Southwestern Oregon Community College was founded in May of 1961. The Associate Degree program in nursing began in 1975 with the addition of a second year to the then existing practical nurse program. The program was initially approved by the Oregon State Board of Nursing in 1977. SWOCC is a full member of the Oregon Consortium for Nursing Education (OCNE), adopting the OCNE nursing curriculum in the first wave of schools. The program enrolls 24 students each year for the Coos Bay campus and 5 designated for the Curry Campus in Brookings. An additional 4 students are admitted every other year for the Coquille campus although these students typically attend classes and complete skills learning on the Coos Bay campus. At the time of the survey, the program had 55 students enrolled. Similar numbers are expected for next year depending on faculty numbers. The program works closely with healthcare entities in the area to determine the workforce needs related to nursing.

The program was last surveyed by the OSBN in 2012 and granted continuing approval for five years. One deficiency was identified at that time which was addressed and the correction was accepted by the Board at the November, 2012 meeting. There were no deficiencies identified during the 2017 visit.

Interviews were conducted with the following individuals/groups.

Administration and Support Services Representatives:

Patty Scott, President
Janet Pretti, Executive Director of Curry Campus
Jeff Whitey, Interim Vice President of Administrative Services
Ali McGeehan, Vice President of Instruction and Student Services
Cody Yeager, Dean of Career Technical Education (CTE)
Robin Bunnell, Institutional Researcher
Kathy Dixon, Executive Director of Business Services
Leigh Fitzhenry, Senior Staff Accountant
Matt Gilroy, Executive Director of Human Resources
Susan Walker, Director of Nursing/Allied Health
Noelle Ebert, Information Resources and Instructional Librarian
Alicia Mueller, Manager of Learning Resources
Carl Gerisch, Interim Executive Director of Integrated Technology Services
Avena Singh, Director of Financial Aid
Jennifer Silva, Registrar
Barbara Shreckengost, Admissions Representative
Tim Dailey, Dean of Students
Tom Nichols, Director of Enrollment

Nursing Faculty Members:

Robin Finney
Melissa Sperry
Pamela Wick

Students:

10 first-year students
2 second-year students

Clinical Facility Representatives:

Melissa Gordon, PCS Clinical Supervisor, Bay Area Hospital (BAH)
Melissa Coy, OR Clinical Manager, BAH
Tim Spanberger, ICU Manager, BAH
Jennifer Green, PSU Manager, BAH
Kera Hood, Resource/Float, House Supervisor, Psychiatric Services Manager (BAH)
Melinda West, MCU/REU Manager (BAH)
Julia Floyd, Clinical Manager Short Stay/PACU/Pre-Op (BAH)
Heather Aldrich, RN Clinical Educator (BAH)
Patrice Parrott, RN Clinical and Professional Development (BAH)

Barbara Van Duren, Chief Operating Officer, Coquille Valley Hospital (CVH)
Liz Cooper, Quality Director (CVH) Note: Also SWOCC faculty for Coquille group
Quinn Myers, Med/Surg/ED Manager (CVH)

Inspection of physical facilities included:

Classrooms, meeting rooms, and offices in the nursing department
College library
Skills and Simulation Laboratory

Based on the findings, the surveyor recommends:

that the Southwestern Oregon Community College Associate Degree Nursing Program be approved for up to eight (8) years, until May, 2025.

The report presents all standards for approval of schools of nursing from OAR 851-21-040 through 070. Each standard is evaluated as "met," or "partially met." The surveyor's comments are included for most standards and in every case when a standard was partially met.

Standards noted as partially met were deemed sufficiently met to merit the recommendation for approval. Recommendations are intended as advisory to the nursing program and college. "Advisory" means that the recommendations, or alternative means to meet the same standard, are intended to be implemented but do not require a formal report to the Board.

Summary from 2017 Survey Visit

Recommendations

1. Seek specific partnerships to support faculty recruitment efforts.
[OAR 851-021-0040(3)]
2. Continue and expand recruitment efforts to fill current faculty vacancies and plan for retirement losses.
[OAR 851-021-0045(1)]
3. Continue to audit faculty files for all required official transcripts including the highest degree held (per SWOCC policy).
[OAR 851-021-0045(2)]
4. Utilize the Annual Service Plan to formulate links between faculty development needs and planned development activities.
[OAR 851-021-0045(5)(a)]
5. Conduct performance reviews for faculty on timelines designated by the college.
[OAR 851-021-0045(5)(b)]
6. Ensure documentation on clinical evaluation tools shows completion of mid-term and final review with student and faculty signature/confirmation.
[OAR 851-021-0045(11)(d)]
7. Document decision-making process for implementation of new learning tools and allow time for needed planning and training of faculty before implementation.
[OAR 851-021-0045(11)(d)]
8. Include clear standards for how grades will be determined in each course syllabus with consistent calculation methods that allow students to track their progress.
[OAR 851-021-0045(11)(e)]
9. Work with Library to purge shelved holdings of nursing titles to the most needed and recent sources.
[OAR 851-021-0065(2)(b)]
10. Include requirement that clinical facilities hold appropriate accreditation or licensing in all clinical agreements.
[OAR 851-021-0065(5)(c)]
11. Capture clear documentation of analysis of data linked to the Comprehensive Plan for Evaluation and reasoning behind decision-making based on that analysis.
[OAR 851-021-0070(2)]

**Standards for Approval: Organization and Administration
851-021-0040**

- (1) *The controlling body shall be accredited by an appropriate regional or national accrediting association or agency and meet all current standards of the accreditor.*
- (a) *Institutions offering registered nurse programs shall be approved as a degree-granting institution of higher education in Oregon, and*
- (b) *Accredited by a regional association or national agency recognized by the Council on Higher Education Accreditation (CHEA).*

Standard: **Met**

Comments:

The college had their accreditation reaffirmed by the Northwest Commission on Colleges and Universities (NWCCU) in July of 2016. A survey visit will be conducted in 2020. The college is working on strengthening how learning outcomes are assessed and setting appropriate benchmarks. There were no specific concerns related to the nursing program and for these two areas, the nursing program is cited as a model.

- (2) *There shall be a description or organizational chart that clearly illustrates communication and decision making processes within the nursing program, and accountability and communication of the nursing program to the controlling body.*

Standard: **Met**

Comments:

The director of nursing/allied health reports directly to the Dean of Career and Technical Education (CTE) and next to the Vice President of Instruction and Student Services. At the time of the visit, this position had recently been filled and the new hire was in her first week. Communication between the nursing department and administration is frequent and various individuals can be accessed, as needed. Ms. Walker is considered in a management position rather than a part of the represented faculty group.

- (3) *There shall be adequate financial support for the development, implementation, stability and continuation of the program, including required prerequisite and support courses if applicable.*

Standard: **Partially Met**

Comments:

Funding for the nursing program has remained mostly stable over the last three years. Allocations were increased for 2016-2017 to allow for hiring two full-time nurse educators although recruitment has not been successful. Only two applications were received and one of the applicants was not qualified for the position. All involved administrators and nursing faculty readily recognized the challenges in recruitment of qualified nursing faculty. Some attempts have been made to make changes in the bargaining agreement to support incentives for these difficult-to-recruit positions but these efforts were not successful in the most recent negotiations. One of these positions may not be maintained moving forward due to the recruitment challenges.

Since the nursing program has openings for faculty and will have some retirements in the coming two years, it was recognized that recruitment or some other strategies to obtain faculty need to be explored. Areas for consideration may include seeking support from clinical partners for joint appointments or other collaborative arrangements since these facilities depend on the graduates of the program to fill their vacancies. Supporting tuition reimbursement for nursing faculty seeking higher degrees may also be an incentive to assist in recruitment. Without effective recruitment, the nursing program would likely need to reduce enrollments which is not a desirable outcome for the community. It was recognized that previously used recruitment strategies have not been effective

and that making changes to the bargaining agreement are not likely.

Recommendation:

Seek specific partnerships to support faculty recruitment efforts.

- (4) *The authority and responsibility for the direction of the program shall be vested in a qualified nurse administrator as specified in OAR 851-021-0045.*

Standard: Met

Comments:

The director of nursing/allied health position has been held by Ms. Susan Walker since 2008. See below for position responsibilities.

- (5) *The nurse administrator shall have institutional authority and administrative responsibility for the program, including:*
- (a) *Leadership within the faculty for the development, implementation, and evaluation of the program, including curriculum and instructional delivery;*
 - (b) *Creation and maintenance of an environment conducive to teaching and learning, including coordination and support of faculty assignments;*
 - (c) *Liaison with executive administrators and administrative and student service units of the institution;*
 - (d) *Participation in institutional policy and program decisions that affect teaching and learning within the nursing program;*
 - (e) *Participation in preparation of the budget;*
 - (f) *Administration of the budget;*
 - (g) *Facilitation of faculty and faculty member development;*
 - (h) *Participation in faculty member performance review;*
 - (i) *Recommendation for faculty member appointment, promotion, tenure and retention;*
 - (j) *Liaison with the Board related to the program's continuing compliance with the required elements of these rules.*

Standard: Met

Comments:

Ms. Walker works closely with the nursing faculty group and the Dean of CTE to accomplish the role. She is involved in all responsibilities listed above. Ms. Walker sits on key college committees and is involved in manager meetings. She is also a member of the OCNE Coordinating Council. Ms. Walker holds "Brown Bag" sessions each term for students to share their concerns directly with her and teaches some classes by choice to stay connected with the students. On this relatively small campus, connections with student support services is frequent and communication lines are open. The VP for Instruction and Student Services holds ultimate responsibility for full-time faculty performance reviews but Ms. Walker is always included as a participant in providing feedback. She conducts performance reviews for part-time faculty.

Ms. Walker participates in the budgeting process by collecting requests from faculty and submitting those requests through the appropriate administrator. Recent increases in dollars to support the high-fidelity simulation hardware were seen based on the needs expressed by the nursing program. There has been some discussion with the Foundation office to determine if any available funds there could assist in faculty support.

Nursing faculty are encouraged to seek professional development opportunities which is mainly through informal discussions rather than intentional planning. ***Working with the faculty to plan ahead for the more common and valuable national conferences (e.g. NLN Summit, QSEN conference, etc.) could be a part of end-of-year faculty meetings. This would allow time to plan for coverage since this is relatively small faculty group.***

Ms. Walker communicates with the OSBN Policy Analyst, as needed, regarding the Division 21 Oregon Administrative Rules and facilitates communication on these rules to faculty.

- (6) *The nurse administrator shall have sufficient time provided for carrying out administrative responsibilities. Instructional responsibilities and responsibilities for administration of other programs shall be consistent with the scope of the administrative responsibility for the nursing program.*

Standard: Met

Comments:

The nurse administrator is full-time administrative position although Ms. Walker does choose to teach some classes to maintain her contact with the students. The responsibilities for this role include the associate degree nursing program, the nursing assistant programs (NA1 and NA2), pharmacy technician certificate, phlebotomy training, and medical assistant certificate. At the time of the survey, Ms. Walker had strong program directors in place for the non-nursing programs which allows adequate time for nursing program responsibilities. Some smaller non-nursing programs are offered only every other year which also helps with the workload.

- (7) *Nursing education program policies and procedures shall be in written form, congruent with those of the institution, and shall be reviewed periodically.*

Standard: Met

Comments:

Nursing policies are congruent with college-wide policies and appropriately developed, as needed for the nursing program. Evidence of periodic review (at least every two years) and revision is seen in the policy manual and in nursing faculty meeting minutes. The majority of policies reviewed were updated in 2016. The Nursing Student Handbook includes many policies and had a major revision in 2015.

**Standards for Approval: Nursing Faculty
851-021-0045**

- (1) *The faculty shall include a sufficient number of qualified nurse educators and nurse educator associates to meet the identified learning outcomes of the nursing education program.*

Standard: Partially Met

Comments:

The program is currently seeking to recruit two full-time nurse educators. Current faculty are able to meet the teaching needs for the term through overload assignments. In response to recent position postings for faculty, only one qualified applicant was found. There are multiple openings in the community for nurses at the hospital, as well.

There are three full-time nurse educators, three part-time nurse educators, and four part-time nurse educator associates assigned to clinical teaching. Two faculty are tenured and one is in a tenure track. The program faces the possibility of two losses to retirement within the next couple of years. The college has put resources toward recruitment and are willing to continue to do so and to try additional approaches.

To continue meeting program outcomes, recruitment needs to continue and be successful or decisions need to be made about decreasing the size of the program. With the importance of the program to the community and healthcare providers in the area, the time may be right to seek various cooperative efforts such as joint appointments and sharing recruitment to the area. Looking at recruitment and educational support of those already in the community may be of assistance in finding individuals who can make a long-term commitment to the program.

Recommendation:

Continue and expand recruitment efforts to fill current faculty vacancies and plan for retirement losses.

- (2) *The nurse administrator and each nurse faculty member shall hold a current, unencumbered license to practice as a registered nurse in Oregon and be academically and experientially qualified for the position to which she/he is appointed.*

Standard: Partially Met

Comments:

Documentation of current licensure was validated through the OSBN website and is tracked through Human Resources as well as the nursing department. Human Resources personnel files were found to be largely in order. One part-time faculty file did not include the transcript for the master's in nursing degree but the baccalaureate nursing degree transcript was present. Since this individual is appointed as a nurse educator associate, the baccalaureate degree meets the minimum education requirement for the position. Human Resources policy is to have the highest degree awarded transcript, however. Transcripts were lacking from files in the last visit but this is not cited as a deficiency here since it was one file and the transcript applicable to the minimum requirements was present. There are processes in place in Human Resources to ensure files are complete.

Across this relatively small faculty group, expertise in multiple clinical areas is seen with the full-time faculty having broad ranging experience in nursing.

Recommendation:

Continue to audit faculty files for all required official transcripts including the highest degree held (per SWOCC policy).

- (3) *Faculty teaching in clinical settings shall also hold a registered nurse license to practice and meet requirements in the state in which the clinical experience is occurring.*

Standard: Not applicable – All clinical experiences are in Oregon

- (4) *Each non-nurse faculty member shall be academically and experientially qualified for his/her responsibilities.*

Standard: Not applicable – No non-nurse faculty teach nursing courses

- (5) *The nurse administrator and each faculty member shall demonstrate professional competence and continued development in nursing, nursing education, and assigned teaching responsibilities.*
- (a) *The nurse administrator and each faculty member shall periodically review assigned teaching responsibilities, evaluating and revising professional development plans as indicated.*
- (b) *The institution and nurse administrator shall support faculty in developing and maintaining competence in assigned teaching responsibilities.*

Standard: Partially Met

Comments:

Documentation of continuing education/development activities are found in nursing department files and in Human Resources faculty files for those with more than one year in their positions. Professional development includes areas related to client care/nursing expertise and teaching responsibilities. While there is tracking of completed continuing education, there is no clear planning for continuing education that links back to areas needing improvement as seen in performance reviews or student evaluations. The performance review process is to include an Annual Service Plan which could be the mechanism to look at needs for development and then plan accordingly for professional development appropriate to the need. The complete performance review process is less frequent for full-time faculty after three years in the position and for tenured faculty but the Annual Service Plan could be used for more frequent consideration of development needs. Faculty do have access to staff development funds to support continuing education and some Foundation funds may also be accessed.

Faculty files in Human Resources did not consistently include performance reviews per the schedule defined. Tenured faculty are to be reviewed annually for three years and then every three years. Other faculty are to be evaluated annually. Part-time faculty reviews were missing for three individuals. Some recent observations had been completed but the process of review was not completed. Faculty turnover has created some challenges in keeping up with timely reviews.

Recommendations:

Utilize the Annual Service Plan to formulate links between faculty development needs and planned development activities.

Conduct performance reviews for faculty on timelines designated by the college.

- (6) *Qualifications for practical nurse programs:*

Standard: Not applicable – RN program

- (7) *Qualifications for registered nurse programs:*
- (a) *The nurse administrator shall:*
- (A) *Hold at least a master's degree in nursing with documentation of preparation and/or experience in curriculum and teaching. In addition, for baccalaureate degree nursing programs, the nurse administrator shall hold an earned doctorate degree;*
- (B) *Have at least five years of nursing experience, of which three years shall have been in a nurse educator or administrative position in a nursing education program.*

Standard: Met

Comments:

Ms. Walker holds a master's degrees in nursing and has been an RN for over 40 years. She has held faculty or the program management position at SWOCC for the last 18 years. She has been the nurse administrator since 2008.

- (b) *Each nurse educator shall:*
- (A) *Hold at least a master's degree in nursing or a baccalaureate degree in nursing, and master's in a related field with a post-master's certificate in nursing from a program that is at least two semesters or three quarters in length;*
- (B) *Have at least three years of nursing experience.*

Standard: Met

Comments:

Six of the nurse educator level faculty hold master's degrees in nursing and have many years of experience in nursing.

- (c) *Each nurse educator associate shall hold at least a bachelor's degree in nursing with no less than two years of nursing experience.*

Standard: Met

Comments:

All nurse educator associates hold at least the baccalaureate degree in nursing and have multiple years of experience in nursing. The part-time faculty also hold nursing positions in healthcare agencies in the community which facilitates clinical learning for the students.

- (d) *Each clinical lab teaching assistant shall:*
- (A) *Hold at least the educational level of preparation for which students are being taught; and*
- (B) *Have at least two years of nursing experience.*

Standard: NA – no clinical lab teaching assistants

- (8) *Any exceptions to subsections (6)(a), (b), (c), (d), (e) and (7)(a), (b), (c), (d) of this rule shall be submitted in writing to the Board and shall include rationale for the request. The Board may grant exceptions for any of the following circumstances:*
- (a) *The education and experience qualifications are deemed equivalent to the requirements; or*
- (b) *The individual has a baccalaureate in nursing, a masters or doctorate in a related field, and relevant nursing experience. The background of the individual is related to the teaching assignment and is complementary to the faculty mix, or*
- (c) *Substantial effort has been made to recruit a qualified faculty member, and the appointed individual is pursuing the needed qualifications; or*

- (d) *Substantial effort has been made to recruit a qualified faculty member, and the individual without full qualification is appointed for one year. The exception may be extended for one year with documentation of either continued and unsuccessful recruitment for a qualified replacement, or a plan to establish eligibility under exception (c) above.*

Standard: Met

Comments:

In the recent past, there have been two appointments by exception but at the time of the survey, there were no appointments under exception.

- (9) *Special Provision for Nursing Faculty. Nurse administrators and faculty members employed as such in Oregon during the 1984-85 academic year may be appointed after September 1, 1985 without meeting new requirements under paragraphs 6(a)(A), (6)(b)(A), (7)(a)(A) and (7)(b)(A) of this rule.*

Standard: Not applicable – no faculty appointed under this exception

- (10) *Faculty Member/Student Ratio:*

- (a) *The number of faculty members appointed shall be not less than one faculty member to every eight students having experience in one or more practice sites at any given time. A lower ratio shall apply when nursing faculty determine that student/client safety and learning effectiveness warrant.*
- (b) *Factors to be considered in determining the faculty member/student ratio shall be:*
- (A) *Objectives to be achieved;*
 - (B) *Preparation and expertise of faculty member;*
 - (C) *Use of clinical teaching associates;*
 - (D) *Level of students;*
 - (E) *Number, type and condition of clients;*
 - (F) *Number, type, and location of practice sites; and*
 - (G) *Adequacy of the ratio for nurse faculty to:*
 - (i) *Assess students' capability to function safely within the practice situation;*
 - (ii) *Select and guide student experience; and*
 - (iii) *Evaluate student performance.*

Standard: Met

Comments:

A faculty to student ratio of 1:8 is typical for clinical courses with the ratio being 1:4 or 1:5 for clinical experiences in Brookings and Coquille. For the final integrative practicum the ratio varies from 1:4 to 1:12 depending on distance to the site and site capacity. There is a policy on faculty to student ratios which includes consideration of the key elements above as well as the limitations posed by smaller facilities with variable census.

- (c) *Clinical teaching associates may be used within the following guidelines:*
- (A) *There shall be a written plan for the clinical learning experience consistent with these rules;*
 - (B) *Clinical teaching associates shall be selected according to written criteria developed by faculty, and agreed to by responsible person(s) in the practice site;*
 - (C) *A faculty member shall be available to the clinical teaching associate(s) while students are involved in a the clinical learning experience;*
 - (D) *The faculty member shall confer with each clinical teaching associate and student (individually or in groups) regularly during the clinical learning experience;*
 - (E) *Use of clinical teaching associates does not modify the requirement for faculty member/student ratio, except that the ratio may be modified for final practica.*

Standard: Met

Comments:

While potential CTAs are selected by clinical facility representatives, faculty ultimately determine which CTAs are paired with students and work directly with clinical partners in reviewing CTAs that may be assigned. Integrative practicum guidelines clearly specify expectations, roles and responsibilities for the student, faculty member, and clinical teaching associates. CTA criteria include current Oregon license and two years of nursing experience. Clinical partners supported the application of these criteria to CTA selection.

The Nursing Program Integrative Practicum CTA Manual serves as the resource for this final, clinical course. ***The Manual was developed by OCNE and in some areas is written with information that isn't specific to this program (such as stating a range of total hours of clinical required). Unless there is a prohibition under the OCNE Agreement, the Manual could be revised to reflect only information specific to this program.***

(11) *Principal responsibilities of the faculty shall be to:*

- (a) *Develop, implement and evaluate the organizing framework and learning outcomes of the program;*
- (b) *Construct, implement, evaluate and revise the curriculum;*
- (c) *Develop, implement and evaluate policies and standards for the advising, selection, admission, advanced placement, progression and graduation of nursing students within the framework of the policies of the educational institution;*
- (d) *Develop, integrate and evaluate student learning experiences including selection of learning activities, appropriate use of emerging teaching and learning methodologies, assessment and guidance of the student and evaluation of client and student safety;*
- (e) *Develop, implement and evaluate policies for assessing student achievement in terms of course and program learning outcomes;*
- (f) *Evaluate student learning and performance, assign grades for courses according to policies, determine student progression within the program, and recommend successful candidates for the degree or certificate;*
- (g) *Develop, implement and evaluate policies and procedures necessary for the operation of the program;*
- (h) *Provide for student evaluation of teaching effectiveness;*
- (i) *Provide for evaluation of faculty members within the framework of the educational institution;*
- (j) *Orient and provide on-going guidance to nurse educator associates, clinical teaching associates, and nursing staff in practice sites related to the program goals, learning outcomes and expected competencies of the students;*
- (k) *Participate in review of the total nursing program;*
- (l) *Participate in determining academic policies and procedures of the institution;*
- (m) *Participate cooperatively with other nursing programs and agencies to develop appropriate and equitable access to practice sites; and*
- (n) *Provide mechanisms for student input into and/or participation in decisions related to the nursing program.*

Standard: Partially Met

Comments:

The position description for tenure track nursing educator does include all the elements listed above as faculty responsibilities. The position description for part-time clinical faculty is much more abbreviated since the majority of their time is spent in the clinical area. The position description does not identify an expectation that the part-time clinical faculty serve a role of collaborating with

and serving as liaisons to their clinical sites although the clinical site representatives described this happening on a regular basis.

Nursing faculty from SWOCC have been involved in development of the OCNE curriculum from the onset, and continue to serve on the OCNE committees. Two of the three full-time faculty serve on a college-wide committee, as well.

A variety of documents were reviewed that indicate faculty involvement with course and program development, determination of nursing program policies, and assessing student achievement. Progression decisions are frequently discussed by the faculty as a group and the full-time faculty provide advising to students. Students are encouraged to work with their advisor throughout the program to ensure progression.

In the Fall of 2016, a new learning resource was implemented to promote student skills in assessment and understanding of pharmacology. The reasoning behind adding this new resource and requiring completion of various virtual clinical scenarios was not well-documented in faculty meeting minutes. Students expressed concern over the amount of time the completion of the new activities took and the extended learning curve for students and faculty. Some students reported spending more than three hours a week to complete these activities. It was not clear that the amount of time dedicated to the use of this new resource was fully understood before implementation. Faculty are continuing to look at the portions of this resource that will be the most beneficial to promote meeting course outcomes. Medication administration tests are utilized in each of the first two terms of the program to promote safety in clinical assignments with medication.

Grades are maintained electronically in the eLearning platform and students are provided weekly feedback on clinical performance. Nursing program policy also defines that a mid-term and final clinical conference will be held. In a review of eight student clinical evaluation files, the completion of the mid-term and final conference was not clearly documented in five files. Student confirmation of seeing the weekly feedback was also sporadic. In the interview with students no concerns were expressed about timely feedback on clinical progress. Ensuring the required confirmation of review by the student and completion of the conferences defined in policy will be helpful should any question arise on clinical performance.

A variety of methods are used to evaluate student learning, including reflection, journaling, papers and projects, debriefing, and standardized testing. Test development and review processes are clearly outlined. The way grading will be conducted for each course was not found consistently in syllabi or in the eLearning system. Some courses did not include any specifics but referred students to the "Term Calendar" which included only dates of exams and when assignments were due. Some included lists of quizzes, exams, papers, etc, but with unclear information on the relative weight of each item (e.g, some were listed as points and some listed as percents). A standard format for the syllabus or eLearning platform would help students as they track their own progression and performance in courses.

Faculty and courses are evaluated each term with reports available to the program. Some challenges exist in the way reports are formatted due to team teaching for some courses but individual faculty results can be seen separately. The class has selected representatives to share concerns and ideas with faculty. Students generally noted the ease of seeking out faculty and addressing any concerns as they arise. They can also attend the Brown Bag sessions with Ms. Walker.

Faculty have the opportunity to respond to college policies and processes through committee work. The ability to orient and mentor new faculty has been challenging due to turnover and having open faculty positions. Ms. Walker carries the majority of responsibility in this area and works directly with the part-time faculty that are nurse educator associates.

Clinical placement coordination is carried out through the clinical agencies rather than through

direct contact with other programs. Clinical learning opportunities can be somewhat limited in a smaller community. Experiences with children are very limited although they are supplemented with simulation and case-based scenarios.

Recommendations:

Ensure documentation on clinical evaluation tools shows completion of mid-term and final review with student and faculty signature/confirmation.

Document decision making process for implementation of new learning tools and allow time for needed planning and training of faculty before implementation.

Include clear standards for how grades will be determined in each course syllabus with consistent calculation methods that allow students to track their progress.

(12) *Faculty Organization:*

- (a) *The nursing faculty shall participate through faculty meetings or other methods in developing, implementing and evaluating the program and curriculum and other responsibilities of the faculty;*
- (b) *Minutes of faculty and committee meetings, including actions taken, shall be recorded and available for reference;*
- (c) *Faculty participation in decisions related to developing, implementing, and evaluating the curriculum, and to establishing or modifying nursing program policies shall be documented.*

Standard: Met

Comments:

Discussions and actions taken during faculty meetings are documented in faculty meeting minutes although follow-through on issues was not found to be consistently reflected. The faculty meeting minutes do include discussion of topics of importance related to grading rubrics, testing, development of test blueprints, clinical issues, and policy updates. As noted in section 851-021-0070, additional documentation in minutes on analysis of data and conclusions reached would be a support to the work of program evaluation.

Part-time faculty are invited to meetings but are often unable to attend due to other part-time positions held. The faculty have tried meeting on different days and at various times of the day to be more inclusive. ***It may be helpful to consider providing communication such as a weekly update to part-time faculty in an abbreviated e-mail to help keep them informed of key issues.***

**Standards for Approval: Curriculum
851-021-0050**

- (1) *Curriculum shall:*
- (a) *Prepare the student to achieve the nursing competencies necessary for safe practice based on current standards of care;*
 - (b) *Reflect the identified mission, goals, and learning outcomes of the nursing education program; and*
 - (c) *Be consistent with the law governing the practice of nursing.*

Standard: Met

Comments:

SWOCC utilizes the competency-based curriculum of the Oregon Consortium for Nursing Education (OCNE) and has done so since 2006. The curriculum was developed from competencies identified by nurse leaders in Oregon, and is consistent with the Oregon Nurse Practice Act. The program outcomes link to the overall college outcomes, as required for the AAS degree.

Representatives from the nursing faculty have continued to participate in review and revision of the OCNE curriculum through involvement on committees with decision-making authority for the consortium.

Clinical partners expressed varying levels of understanding of the OCNE curriculum model and approaches to clinical learning. Since the program has used the OCNE curriculum for some time and personnel at clinical agencies has changed, it may be helpful to provide updates to these partners at Advisory Meetings or through written communication. Clinical partners would benefit from understanding the committees used to continually review and revise the curriculum, as well.

- (2) *Curriculum plan shall identify:*
- (a) *Competencies or learning outcomes at the course and program level;*

Standard: Met

Comments:

OCNE competencies are well developed, with rubrics to identify desired competency achievement for completion of each level (year) of the curriculum. Course outcomes that link to the program competencies/outcomes are identified in course outlines and clinical evaluation tools.

- (b) *Learning activities to develop identified competencies. Courses, learning activities and clinical practicum shall be organized in such a manner to have sufficient proximity in time to allow the student to form necessary links of theoretical knowledge, clinical reasoning, and deliberate practice;*
- (A) *Clinical practica shall include sufficient direct patient care hours to achieve identified competencies, course and program outcomes.*
 - (B) *All clinical practica shall be directed and supervised by a nurse educator or nurse educator associate.*
 - (C) *All programs shall include no less than six (6) contact hours of learning activities related to pain management.*

Standard: Met

Comments:

The OCNE curriculum model includes a focus on development of clinical judgment through the use of case-based learning, simulation, concept-based learning activities, and the provision of direct care. The clinical learning culminates with the Integrative Practicum experience in the final term.

Content related to pain management is included in acute and chronic nursing care courses as well as required pathophysiology and pharmacology courses. The pain management related content throughout the curriculum includes at least nine hours of dedicated content.

- (c) *Requirements of the educational institution for graduation; and*
- (d) *Total units required for graduation.*

Standard: Met

Comments:

The nursing curriculum, with prerequisites and electives, meets all institutional requirements for graduation as the associate degree level.

(3) *Practical Nurse Programs:*

Standard: NA – RN program

(4) *Registered Nurse Program:*

- (a) *Registered nurse curricula shall meet all institutional requirements for and culminate in the award of an associate, baccalaureate, masters, or doctoral degree.*

Standard: Met

Comments:

The nursing program culminates in the Associate of Applied Science degree. Students are co-enrolled at Oregon Health Sciences University (OHSU) on admission into the nursing program to allow for a smooth transition to continue to the baccalaureate degree.

- (b) *In registered nurse programs, the course content and clinical experience required shall be a minimum of 84 quarter units or 56 semester units including:*
 - (A) *Physical, biological, social and behavioral sciences and humanities: minimum of 36 quarter units or 24 semester units; and*
 - (B) *Nursing: minimum of 48 quarter units or 32 semester units of which no less than 24 quarter units or 16 semester units shall be clinical experience.*

Standard: Met

Comments:

The completion of the nursing curriculum requires a minimum of 140 quarter units including 50 quarter credits of pre-admission requisites and other credits encompassing physical, biological, social and behavioral sciences and humanities. Of the total required credits, 60 quarter units are nursing courses, including 27 quarter units of clinical experience. The program exceeds the minimum numbers of credits for a nursing program.

- (c) *The Registered Nurse program shall provide theory and faculty-supervised clinical practice in nursing to develop competencies at the registered nursing scope of practice related to:*
 - (A) *Creating and maintaining a safe environment of care;*
 - (B) *Demonstrating professional, ethical and legal behavior in nursing practice;*

- (C) *Using problem-solving skills, reflection, and clinical judgment in nursing practice;*
- (D) *Prescribing/directing, managing, delegating and supervising nursing care for individuals, families, or groups;*
- (E) *Providing safe, clinically competent, culturally sensitive, client-centered and evidence-based care to promote, restore and maintain wellness or for a palliation across the lifespan and settings of care;*
- (F) *Providing culturally sensitive and evidence-based teaching, counseling, and advocacy for individuals, families and groups;*
- (G) *Participating within and providing leadership for an interdisciplinary team;*
- (H) *Applying leadership skills to identify the need for and to promote change;*
- (I) *Using communication and information technology effectively and appropriately;*
- (J) *Applying and integrating principles of community health and community-based care into practice; and*
- (K) *Integrating concepts of resource utilization, quality improvement and systems to enhance care delivery.*

Standard: Met

Comments:

The adopted OCNE curriculum and curriculum threads can be tied to all of the above competencies in classroom and clinical learning settings. Students and faculty clearly articulate knowledge of and a focus on the identified OCNE competencies. Students noted a strong emphasis on assessment, planning, prioritizing, critical thinking, advocacy, and patient safety. Clinical outcomes have been linked to the Quality and Safety Education for Nurses (QSEN) competencies to enhance the focus on client safety. National patient safety goals are integrated into some cases and simulation scenarios.

Students noted that the gap in knowledge/experience between the students who had some healthcare background (e.g. as CNAs) and those with no healthcare experience was clearly observed during the first term. Students with no healthcare background stated they started out feeling behind although they were able to catch up during the first couple of terms. Input from students, faculty, and clinical partners regarding clinical “readiness” may be an appropriate item to add to the Comprehensive Plan for Evaluation with a focus on the first two terms of the program.

- (L) *Baccalaureate and basic masters or doctoral programs shall also include competencies related to.....:*

Standard: Not applicable – Associate degree program
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- (5) *Programs providing distance nursing education shall:*
 - (a) *Deliver the approved curriculum through learning activities designed to allow students to achieve stated learning outcomes or competencies;*
 - (b) *Provide learning activities that are sufficiently comprehensive to achieve stated program outcomes and competencies; and*
 - (c) *Support instructor-student interaction and meaningful student interaction.*

Standard: Met

Comments:

The program is not a distance program although students from the Curry campus and the Coquille campus may participate via videolink for some classes. The system has had some variability in functionality but does allow for visual and audio connection between the campuses.

- (6) *Programs that provide for advanced placement of students shall develop and use policies designed to assure that such students meet the equivalent of the program's current curriculum and competencies.*

Standard: Met

Comments:

Students who seek to re-enter have access to clear guidelines on what is required which includes auditing the nursing courses from the term before the re-entry point to ensure they are prepared to meet the outcomes of the course from that point forward. There is a well-defined process for LPNs to seek entry into the program after completion of pre-requisites and a transition course.

Standards for Approval: Students
851-021-0055

The program in nursing is accountable to students by providing that:

- (1) *Admission, readmission, transfer, progression, retention, dismissal and graduation requirements are available to the students in written form and are consistent with those of the sponsoring institution. Where necessary, policies specific to nursing students may be adopted if justified by the nature and purposes of the nursing program.*

Standard: Met

Comments:

Requirements for admission into, progression within, and graduation from the nursing program are clear and available to prospective students as well as enrolled students. Students reported that pre-nursing advising does not always provide consistent information but enrolled students described frequently accessing the nursing faculty and nursing program support staff for clarification. Nursing specific policies and procedures are consistent with those of the college and reflect unique aspects of the nursing program and OCNE requirements, when needed.

- (2) *Students are admitted without discrimination as to age, race, religion, gender, sexual preference, national origin or marital status.*

Standard: Met

Comments:

The non-discrimination statement found in multiple documents includes all the required elements. There was no evidence of discrimination related to students in the nursing program.

- (3) *Facilities and services of the program and its sponsoring institution are documented and available to students.*

Standard: Met

Comments:

Facilities and services of the program and the college are described in the catalog and on the website. New student orientation is offered on the first day of class. Students noted making use of various services such as tutoring and writing help. The First Stop Center provides information and access to a wide variety of services and students can be triaged to the most appropriate area for assistance. Students reported follow-up to questions on financial aid, registration, etc. within a day in most cases.

Since most students take non-nursing courses before entering the Fall term of the nursing courses, many are not considered full-time students as the nursing course for the term is nine credits. The impact on financial aid and scholarships varies but in many cases full-time enrollment is required. While this information is included in the FAQs which are part of the program application packet, more than one student stated they were not aware of this potential impact on financial aid. ***Exploration of specific advising about this issue or consideration of shifting nursing credits was suggested by students.***

- (4) *Distance Nursing education programs are effectively supported through accessible modes of delivery, resources, and student support.*

Standard: Met

Comments:

The program is largely campus-based with some synchronous connection to other campuses for theory courses. Integrated Technology Services staff are available, on request, to students when

questions on the eLearning platform arise. This system is used for posting of course information and communication rather than for course delivery for nursing courses.

- (5) *Student rights and responsibilities are available in written form.*

Standard: Met

Comments:

The Grievance Procedure is outlined in policy and includes informal and formal processes. Formal grievances are addressed to the Vice President of Administrative Services and the process includes specific timelines for responses. There have been no formal grievances from students in the nursing major for over two years. Grade appeals are the most common reason for students to follow the informal or formal grievance processes.

- (6) *Students are required to submit to a criminal background check to identify criminal convictions that may:*
- (a) *Pose a risk to public safety;*
 - (b) *Preclude the ability to complete required clinical practicum; or*
 - (c) *Result in Notice to Deny Licensure on application for initial licensure in Oregon.*

Standard: Met

Comments:

All entering students are required to submit to and pass a criminal background check and drug screen prior to entry into the nursing courses. An outside vendor is used for the background check processes with the director of nursing/allied health reviewing any positive findings. A positive urine drug screen prevents a student from entering the nursing major. An extensive checklist/tracking sheet is used to ensure all required elements are in place before starting nursing courses including immunizations, background check, drug screen, etc.

- (7) *There is a signed agreement for the articulation of program graduates into the next level of nursing education:*
- (a) *Programs leading to a certificate or degree in practical nursing shall have an agreement with an Oregon-approved program preparing candidates for licensure as a registered nurse;*
 - (b) *Programs leading to an associate degree in nursing shall have an agreement with an Oregon-approved program leading to a baccalaureate or higher degree in nursing.*

Standard: Met

Comments:

SWOCC is a member of OCNE which allows students to transition to the OHSU baccalaureate of science with a major in nursing degree program.

Standards for Approval: Records
851-021-0060

- (1) *Program records - A system of records shall be maintained and be made available to the Board representative and shall include:*
- (a) *Data relating to accreditation by any agency or body;*
 - (b) *Course outlines;*
 - (c) *Minutes of faculty and committee meetings;*
 - (d) *Reports of standardized tests; and*
 - (e) *Survey reports.*

Standard: Met

Comments:

All needed materials were retrievable during the visit and mainly accessible through electronic means. Shared drives and the eLearning system provide storage for most items.

- (2) *Record(s) shall be maintained for each student, available to the Board representative, and shall include:*
- (a) *Student application;*
 - (b) *Student transcript, which must be maintained indefinitely;*
 - (c) *Current record of achievement; and*
 - (d) *Other records in accordance with state or federal guidelines, program or institution policy, record retention schedule or statute of limitations.*

Standard: Met

Comments:

More than one electronic system is used to maintain student information along with some hard copy retention of materials. Staff were aware of the policies related to record retention.

- (3) *The program shall make provisions for the protection of student and graduate records against loss, destruction and unauthorized use.*

Standard: Met

Comments:

Official student files, including college and nursing admissions information and transcript, are maintained indefinitely in a secure, fire-resistant location. Electronic files are backed up off site continuously. Records of current achievement and clinical progress are maintained in locked files in the nursing department.

- (4) *Information describing the curriculum shall be published in the college catalog, maintained in archives, and made available upon request.*

Standard: Met

Comments:

The college catalog is maintained indefinitely with archived versions back to the 1961-1962 academic year available through the college website.

**Standards for Approval: Facilities and Services
851-021-0065**

- (1) *Educational facilities shall include:*
- (a) *Classrooms, laboratories and conference rooms adequate in number, size and type according to the number of students and educational purposes for which the rooms are used;*
 - (b) *Offices and conference rooms available and adequate in number and size to meet faculty needs for individual student counseling and faculty meetings;*
 - (c) *Space provided for secretarial staff, files, storage and equipment; and*
 - (d) *Telephones, computers, equipment and support adequate in number and capacity to conduct program business.*

Standard: Met

Comments:

Educational facilities are adequate to meet the needs of students. The main nursing classroom is large enough for the nursing students and has tables that can be configured to facilitate group work. The program has a dedicated skills laboratory with adequate storage. There is an adjacent, two-bed simulation laboratory with a control room between the two rooms. The college is well on the way to planning for a major remodel/reconstruction on another building that will house science classrooms on the first floor and allied health on the second floor. The faculty have been involved in planning for the new space which will have more usable skills lab and simulation lab spaces.

Full-time faculty have private offices near the nursing classrooms in Sumner Hall. There is space for part-time faculty in an adjacent building but most are clinical faculty and are on-campus for limited amounts of time. These spaces include phones and computers.

The director of nursing/allied health and the program assistant have private office spaces near the faculty and classrooms. Faculty use the classroom spaces in the building for meetings.

- (2) *Educational services and resources shall include:*
- (a) *Adequate secretarial services;*
 - (b) *Adequate library services, holdings, and electronic learning resources;*
 - (c) *Adequate student support services such as academic advising, financial aid advising, and academic bookstore services;*
 - (d) *Adequate technology to support teaching and learning.*

Standard: Partially Met

Comments:

Students report overall satisfaction with college services such as advising, tutoring, admissions, and financial aid. A full-time administrative assistant provides support to nursing and allied health faculty and administrators.

The library is centrally located on the campus. Reference materials are readily available for use in the library. Computer workstations are available in the library and students can access electronic holdings from any internet connection. The collection has gradually moved toward increasing electronic resources, and students report that they largely rely on electronic resources for research. The librarian is new to the role and will be exploring the best ways to provide orientation and resource guides to the students. The budget for adding to the collection is under the Library with opportunities for faculty to make requests. While shelved holdings are not used frequently, several titles older than five years were on the shelf (medical-surgical, pharmacology references). The Comprehensive Plan for Evaluation includes reference to a five year limit on titles and the Librarian

expressed this as an appropriate cut off unless sources are considered essential and no newer titles are available. Ensuring the shelved holdings are the most needed and current should be scheduled for the coming year.

Databases are available and include CINAHL with full text. The Library is part of more than one inter-library loan program. Students report needed materials are accessible in a timely way. A few nursing journal titles are carried as subscriptions to round out the collection.

Recommendation:

Work with Library staff to purge shelved holdings of nursing titles to the most needed and recent sources.

- (3) *Institutions offering distance nursing education programs shall provide ongoing and appropriate technical, design, and production support for faculty members and technical support services for students.*

Standard: Met

Comments:

The program is largely a campus-based program with a learning management system used mainly for course materials and communication to students. The Integrated Technology staff assist faculty and students with access and questions and assistance is available to faculty that would look at designing a distance course.

A video conferencing system is used to connect the various campuses for some courses and/or meetings. During the visit, the connection was not a problem for some meetings and for others, it was challenging to connect the parties. It was not clear if this was due to user error on either side or system problems. Faculty and students were aware of the appropriate support staff to contact for connection issues.

- (4) *Selection of practice sites shall be based on written criteria established by faculty.*

Standard: Met

Comments:

There is a system in place to review clinical sites before use for the capability to provide learning experiences linked to the course outcomes. The presence of required accreditations and/or licenses is a part of the review but is not something consistently monitored. There is a nursing policy defining essential criteria to consider in selecting clinical sites.

- (5) *There is a written agreement that is in effect between the authorities responsible for the educational program and the nursing service or other relevant service of the practice site. The agreement shall include but not be limited to provisions that:*
- (a) *Ensure that faculty members have authority and responsibility to select appropriate learning experiences in collaboration with practice site; and*
 - (b) *Clearly specify whether or not clinical teaching associates will be provided by the site, and how they will be selected and function.*
 - (c) *The practice sites shall be fully approved by the appropriate accreditation, evaluation or licensing bodies, if such exist.*

Standard: Partially Met

Comments:

A random review of six clinical affiliation agreements as well as the agreements for the clinical sites

visited during the survey showed them to be current and fully executed. One site is in the process of developing a new agreement template. The agreement with Bay Area Hospital does not include language about the agency being fully approved/accredited. This was a missing element found during the 2012 survey but is not listed as a deficiency here as only one agreement had the missing element. This agreement is the facility's own template which creates challenges in making edits or additions. The facility does hold appropriate accreditation. The college can explore with this one facility if a letter of agreement can be developed to address the required accreditation. As noted above, the criteria reviewed in vetting a clinical site does include a review of the current approval/accreditation status.

Recommendation:

Include requirement that clinical facilities hold appropriate accreditation or licensing in all clinical agreements.

Standards for Approval: Evaluation
851-021-0070

- (1) *There is a comprehensive plan for evaluation of the nursing education program that includes systematic assessment and analysis of:*
- (a) *Compliance with the OSBN Standards for Approval for nursing education programs;*
 - (b) *Internal and external measures of Graduate achievement of identified program competencies and learning outcomes;*
 - (c) *NCLEX pass rate data, trends, and contributing factors;*
 - (d) *Curriculum design, including nursing and other required courses, course sequencing and scheduling;*
 - (e) *Effectiveness of instructional strategies and methodologies;*
 - (f) *Faculty sufficient in number, preparation, experience and diversity to effectively achieve course and program outcomes and maintain client and student safety; and*
 - (g) *Resources, including human, physical, and financial resources to support the number of enrolled students, instructional delivery and achievement of program learning outcomes.*

Standard: Met

Comments:

The program has a Comprehensive Plan of Evaluation that shows revisions were made in 2011, 2013 and 2016. The plan includes all the above elements divided into major segments such as mission/governance, curriculum, and educational effectiveness. Each area to be evaluated includes a description of the measures used and the frequency of assessment. ***In several instances, additional measures may need to be included to be more comprehensive and consider more sources of data. For example, budget is evaluated by monitoring budget expenditures. Adding assessment of faculty perceptions of adequacy of equipment, student feedback on adequacy of equipment and/or supplies would provide a more complete picture upon which to base any needed changes.***

Of note, there is a calendar that defines when each element of the Comprehensive Plan will be reviewed spread over the academic year. This tool is used to keep the faculty on track in reviewing the elements of the plan.

- (2) *There is evidence that the comprehensive plan for evaluation is being implemented and that evaluative data is used for ongoing program improvement.*

Standard: Partially Met

Comments:

While the current evaluation plan covers many pertinent areas for faculty consideration, the documentation of review and analysis of the data is not consistent. Faculty meeting minutes did not always include the topics as defined in the schedule on the calendar and some items were presented but limited description was provided with the conclusions the faculty made and any action to be taken. For example, the Faculty meeting minutes include sharing the results from the Mountain Measurement NCLEX® reports. Areas that were lower or higher than other programs were listed but no comments were made on the significance of these or whether any action should be taken. Some changes made in the last year were not linked back to faculty analysis of data so the basis for the change was not clear.

The column in the current plan labeled "Decisions/Actions" does capture some actions but doesn't provide rationale for changes made and doesn't always link up with the Faculty meeting minutes. Faculty did describe various changes made and rationale for these changes. The format used in either the Faculty meeting minutes or Comprehensive Plan should allow for capturing the key points of data reviewed, faculty analysis/conclusions, and decisions made for follow-up.

Recommendation:

Capture clear documentation of analysis of data linked to the Comprehensive Plan for Evaluation and reasoning behind decision-making based on that analysis.

Evidence reviewed for Southwestern Oregon Community College ADN Program Survey 2017:

Letter from the Northwest Commission on Colleges and Universities (NWCCU) affirming continued accreditation status 2016

Mid-Cycle Evaluation Report to NWCCU

Organizational Chart 2016-2017

Adopted budget 2016-2017 and historical budget documents

Position Description – Director of Nursing

Nursing Program Policies:

- Classroom and Online Postings

- Clinical Evaluation of Students

- Clinical Injury and Incident

- Clinical Make-up

- Clinical Teaching Associate/Preceptor Selection

- Criteria for Clinical Instructor to Student Ratio

- Guiding Principles & Norms

- Health Clearance Release for In-Program Nursing Students

- Invasive Procedures/Consent for Physical Contact & Invasive Procedures

- Medication Administration Policy

- Medication Errors

- Nursing Care Plan Preparation

- Policy on Policies

- Selection of Clinical Practice Sites

- Student Petition

- Student Registration and Enrollment Verification

- Student Refusal of Vaccination, Statement of Declination

- Test Review

Clinical Practice Site Selection Forms for Current Clinical Agencies

Clinical Affiliation Agreement Tracking Sheet

Faculty Evaluations – Full-Time Process

Faculty Development Plan and Portfolio Instructions

Faculty Evaluation Timelines

Performance Evaluation Process Flowchart

Tenure Review Process Flowchart

Faculty Files

Collective Bargaining Agreement

Faculty Handbook 2016-2017

Position Description: Nursing Educator Tenure Track

Position Description: PT Clinical and Lab Faculty

Student Handbook 2016-2017

Procedure #9.070 – Grievance Procedure

Nursing Program Student Handbook

Nursing Program Integrative Practicum Clinical Teaching Associate Manual

Nursing Program Integrative Practicum Student Manual

OCNE Competency Rubrics and Benchmarks

Nursing Program Testing Blueprint

SWOCC Catalog 2016-2017

Course Syllabi

LPN Advanced Placement Information Packet

Nursing Program Information Packet

OCNE Intergovernmental Agreement

College Policy: APP 4090 Records Retention

College Policy: APP 4021 Archiving Guidelines for Faculty

Clinical/Practicum Agreements

Comprehensive Plan for Evaluation

Schedule for Comprehensive Plan for Evaluation 2014 to present
Student Evaluations of Clinical Agency/Sites
Course Evaluations 2015-2016
Employer Survey Forms and responses 2014-2016
Mountain Measurement Reports 2014-2016
Nursing Faculty Meeting Minutes 2015-2017
Pacific Research and Evaluation: Year 2 Student Focus Group Report
Nursing Advisory Committee Meeting Minutes 2015 and 2016
OCNE/EBI 6th Term Survey 2016