

EXECUTIVE SUMMARY

NLNAC SELF-STUDY REPORT

For Spring 2010 Site Visit

General Information:

1. Minnesota West Community and Technical College is seeking accreditation for the Associate Degree Nursing Program located in Worthington, Minnesota. The self-study report has been prepared for the Spring 2010 accreditation cycle after receiving Candidacy Status in the Fall of 2008.
2. The Minnesota West Community and Technical College (hereafter referred to as Minnesota West) is the governing organization for the Associate Degree Nursing Program. The Associate Degree (AD) Nursing Program is based from the Worthington Campus. Three other Minnesota West campuses offer lab courses and/or ITV courses: Granite Falls campus, Jackson campus, and the Pipestone campus.

Minnesota West Community and Technical College
Worthington Campus
1450 Collegeway
Worthington, MN 56187

Granite Falls Campus
1593 11th Avenue
Granite Falls, MN 56241

Jackson Campus
P.O. Box 269
Jackson, MN 56143

Pipestone Campus
P.O. Box 250
Pipestone, MN 56164

3. The Chief Executive Officer of the Minnesota West Community and Technical College is Dr. Richard G. Shrubbs, President, Ph.D.

4. The Higher Learning Commission, a commission of the North Central Association of Colleges and Schools, has reviewed and granted accreditation in 2001-2002. The next anticipated comprehensive evaluation will be in 2011-2012.

5. The Associate Degree Nursing Program is based on the Minnesota West Worthington Campus located at:

1450 Collegeway
Worthington, MN 56187

6. The Nursing Administrator of the Associate Degree Nursing Program is Ruth Van Heukelom, MSN, RN, Director of Nursing – Associate Degree Program.

(507)372-3421 – direct office phone

(507)372-5801 – fax number

email: ruth.vanheukelom@mnwest.edu

7. The Associate Degree Nursing Program is granted approval by the Minnesota Board of Nursing (MBN). The MBN's most recent action was program approval in February 2004 after a site visit in December 2003. The next state program review will be in 2011. Contact information for the MBN follows:

Sharon Ridgeway
Assistant Director for Education
Minnesota Board of Nursing
2829 University Avenue SE
Minneapolis, MN 55414-3253
Sharon.ridgeway@state.mn.us
(612) 617-2294 phone
(612) 617- 2190 Fax

8. The self-study report is written to the 2008 NLNAC Standards and Criteria.

Introduction:

The Associate Degree (AD) Nursing Program at Minnesota West is an LPN to RN mobility program offered in rural southwest Minnesota. The full-time program delivered over 10 months (two semesters) offers up to 96 students the opportunity to graduate each year. The majority of graduates are employed in the Minnesota West service area.

Minnesota West is a merged comprehensive two-year institution of higher education. It is a family of five campuses and four centers in a geographical area that encompasses 19

southwestern Minnesota counties. The geographical distances between campuses and each campus' unique community, history, traditions, philosophies and culture distinguish Minnesota West from other colleges in the state. The merger and resultant establishment of Minnesota West occurred January 1, 1997. Minnesota West is the only public community and technical college in southwest Minnesota serving a large rural region. With a combined surface area of more than 20,500 square miles, Minnesota West's territory exceeds that of every New England state except Maine (the combined areas of Connecticut, Massachusetts, and Rhode Island is only about 14,000 square miles; that of New Hampshire and Vermont is only about 18,000 square miles). The shortest route from Granite Falls to Canby is approximately 40 miles, from Canby to Pipestone is 60 miles, from Pipestone to Worthington is 60 miles, from Worthington to Jackson is 30 miles, and from Jackson to Granite Falls is 105 miles.

Worthington, the oldest institution of all five campuses, began admitting students in 1936 as a junior college. In 1964, Worthington Junior College was transferred to the State Junior College Board and was renamed Worthington State Junior College. The name was changed to Worthington Community College in 1973. The college was placed under the jurisdiction of the Minnesota Community College System where it remained until becoming a member of Minnesota State Colleges and Universities (MnSCU) in 1995 at which time it was named Minnesota West Community and Technical College. MnSCU is the largest provider of higher education in the state of Minnesota.

The Worthington campus is located in the northwest corner of Worthington on the north shore of Lake Okabena. The Worthington is the county seat of Nobles County and has a population of nearly 12,000 citizens. In the past decade, Worthington has become one of the most culturally and ethnically diverse communities in greater Minnesota. In addition to agriculture, the community's major industries include food processing, manufacturing of mobile homes and plastic products, and research and development of veterinary medicines. The Worthington campus provides and oversees most liberal arts courses for all campuses of Minnesota West Community and Technical College via on campus, interactive television (ITV) and online delivery.

AD Nursing Program students enter the nursing program as Licensed Practical Nurses (LPNs). Acceptance to the program occurs annually with an application deadline of February 15

and a fall start date. AD Nursing Program graduation occurs in May with the Associate of Science Degree.

In addition to the Associate of Science Degree, Minnesota West offers two Practical Nursing (PN) Programs, each offering a diploma. PN programs are located on the Worthington and Pipestone campuses. A majority of students from the PN programs apply to the AD Nursing Program. A pre-nursing option, offered as the Three Year Nursing Plan, is available at Minnesota West. The first year of the Three Year Nursing Plan allows students to complete general education and prerequisite courses before beginning the nursing specific coursework. Students accepted into the Three Year Nursing Plan only progress to the PN or AD program by meeting the standards of each program. A part-time program is not currently offered at Minnesota West.

The AD Nursing Program is strongly supported by faculty and administration of Minnesota West. There is congruence of system, college, and program in mission, vision, values, and philosophy statements (see Table 1A for governing organization mission/vision congruency).

Table 1A. Governing Organization Mission/Vision Congruency

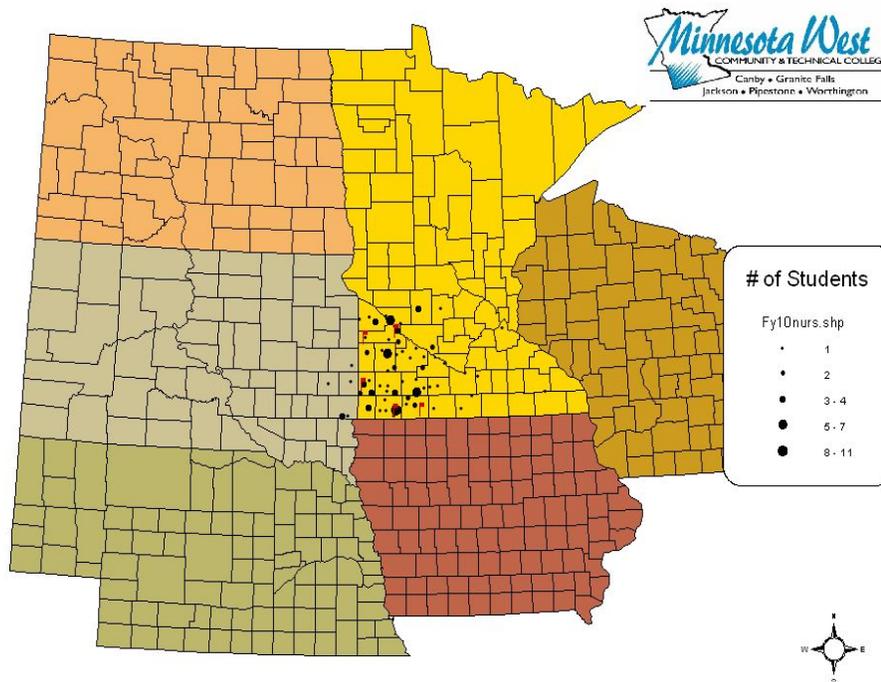
Minnesota State College and University System Vision	Minnesota West Associate Degree Nursing Program Mission
The Minnesota State Colleges and Universities will enable the people of Minnesota to succeed by providing the most accessible, highest value education in the nation.	The Minnesota West Associate Degree Nursing program is dedicated to provide nursing education using a variety of affordable, accessible, delivery methods to a diverse population with the goal of preparing graduates who practice safe, entry level professional nursing.
Minnesota West Community and Technical College Mission	Minnesota West Associate Degree Nursing Program Mission
Minnesota West Community and Technical College is dedicated to serving the varied educational needs of our diverse populations in affordable, accessible and supportive settings.	The Minnesota West Associate Degree Nursing program is dedicated to provide nursing education using a variety of affordable, accessible, delivery methods to a diverse population with the goal of preparing graduates who practice safe, entry level professional nursing.

Strong support to design and deliver an *accessible* AD Nursing program has been demonstrated by MnSCU and Minnesota West as funds have been dedicated to sabbatical leaves for online nursing course development and by expanded campus lab construction.

Upon conception of the AD Nursing Program, the program primarily served students located around Worthington. To enhance accessibility to the Minnesota West service area, and in congruence with the college and program missions, didactic courses were brought to the Pipestone campus via interactive television (ITV) from the Worthington campus. As online nursing courses were developed, the distance learning component expanded. Lab courses were delivered to four campuses and clinical locations were added. At this time, several students have home locations outside of the Worthington area. A sample of the home locations of AD nursing students is in the following figure, Figure 1A.

Figure 1A. Home Location of FY10 AD Nursing Students

Location of FY 2010 Associate Degree Nurses



The AD Nursing Program has clinical space for 96 students each semester. Student numbers in the program are dependent upon student success in courses each semester. Students that are not successful in one course in the Fall Semester may follow a petition process (due process) to continue in the program at a slower pace the following academic year. This slower pace serves as an informal part-time option, as a formal part-time option is not offered. Students that are not successful in more than one course are encouraged and advised to reapply to the program when appropriate. The AD Nursing Handbook discusses progression through the program and can be located at www.mnwest.edu/nursing.

The two PN programs have a maximum of 96 combined student numbers. The 96 student maximum allows for potential acceptance of all Minnesota West PN Program graduates to the AD Nursing Program, dependent upon success in the PN Programs and LPN licensure. Minnesota West PN Programs students must submit an application to the Department of Nursing by February 15 of each year to be eligible for AD Program acceptance. This process is the same for any LPN applicant to the program. Application forms are located in the Resource Room and can be accessed online at http://www.mnwest.edu/fileadmin/images/programs/w_nursing/2010-2011_Nursing_Application_Packet_Final-2.pdf.

The number of accepted students (including those on the wait list), students starting fall classes and graduates since 2006 are listed in the following figure, Figure 3A.

Figure 3A. AD Nursing Program – Student Numbers and Graduates

Year (Fall start)	<u>05-06</u>	<u>06-07</u>	<u>07-08</u>	<u>08-09</u>	<u>09-10</u>
Acceptances (+ wait list)	92	114	101	132	126
Number Who Started ADN Nursing Classes The Fall of That Year	70	97	92	89	108
Total Starts	70	97	92	89	108
Grads	80	90	76	63	TBD

Minnesota West and the AD Nursing Program are proud of nursing faculty dedicating time and talents to nursing students each year. The AD Nursing program has one full-time faculty member and seven part-time faculty members. The full-time faculty member holds a master's degree in nursing. Four of the part-time faculty members hold master's degrees in nursing. Two part-time faculty are working towards master's degrees in nursing, with one anticipating graduation in May, 2010. One part-time clinical adjunct instructor is nearing

retirement and is retained because of her exceptional clinical expertise and strong relationship with the Mayo Health System.

The AD Nursing Faculty Profile includes a report of educational history, supportive nursing professional achievements, academic teaching, and areas of responsibility in the program. See Appendix 1.1, found on page 165, for Faculty Profiles.

History:

1. The Minnesota West AD Nursing program was granted initial approval from the Minnesota Board of Nursing in April 1996. Prior to that time, the AD nursing program was delivered via distance from Willmar Community College, now Ridgewater College. The Minnesota Board of Nursing visited the Minnesota West nursing program in December 2003 and granted continued approval for a period of 10 years.
2. The AD Nursing program is a 10 month program that prepares the LPN for professional nursing practice. After acceptance to the program (either as a continuing student from Minnesota West's Practical Nursing Programs or a LPN coming from the workforce), the student must attend an orientation in April in order to have adequate time to prepare and plan for the program. A transition class is held in May for accepted LPNs that have been away from the educational setting for a year or more and those who graduated from nursing programs other than Minnesota West. Next, the student completes the two semesters of didactic course work, skills labs (including high and low fidelity simulation), and clinical experiences. The nursing program outline and nursing course descriptions are found in the AD Nursing Student Handbook at www.mnwest.edu/program-sites/worthington/nursing/handbook. Please note: the Minnesota West College Catalog is published every two years (this includes the online version). The most current AD nursing course descriptions are located in the AD Nursing Student Handbook.

Advanced Standing is granted for each student entering the AD Nursing Program. Advanced Standing is a requirement by the MBN for PN mobility programs to grant credits of achievement for practical nursing coursework. Together with advanced standing and prerequisites, a PN student earns 24-26 credits. Next, the two semesters of AD Nursing Program combine general education credits and nursing program specific credits for 36-38 total program credits. The student earning the Associate of Science Degree in Nursing completes 60-64 credits.

3. Minnesota West AD Nursing Program admitted the first class in fall of 1996. Since 1996, a cohort of AD Nursing students started each Fall Semester. A rural health care grant allowed for two Spring Semester starts in 2004 and 2005.

In congruence with the theme of accessibility, and due to increased interest in nursing education and vast geographical distances of the service area, nursing faculty began to explore alternate delivery options and curricular revisions. In the spring of 2002, one faculty member took a sabbatical leave to develop classes for online delivery. Since 2002, all didactic courses are available online. Lab and clinical courses are enhanced using the Desire to Learn (D2L) online platform. Minnesota West has met the same challenge and now offers all general education credits required for the AD Nursing Program online.

Four nurse administrators have provided leadership for the AD Nursing Program. The first nurse administrator developed the program and served as administrator for five years. The second nurse administrator served as the Dean of Allied Health and Director of Nursing until retirement in 2006. The third nurse administrator serves as the Worthington Campus CEO and Director of the Practical Nursing programs at Minnesota West. The current nurse administrator serves as the Director of the Associate Degree Nursing Program and holds authority and responsibility for the administration of the program.

4. Minnesota West is seeking accreditation with NLNAC. Minnesota West's AD Nursing Program had previously been accredited by the NLNAC, but is not at this time.

5. Minnesota West's AD Nursing Program has only one curriculum for all students accepted to the program. There is not a differentiated educational program.

6. In meeting the mission/vision of the system, college, and program addressing accessibility, all didactic courses are offered online. Not all students prefer or learn effectively via online classes. For those students, classes are offered either face to face or via ITV studios on the Granite Falls, Pipestone, and Worthington campuses. ITV space is available on the Jackson campus, but there has been minimal interest secondary to close proximity to the Worthington campus. Faculty teach from ITV locations at three campuses to maintain personal connections with the students. Faculty teaching didactic courses serve as clinical instructors in distance locations if feasible. Faculty members are available by phone or email.

Distance education has become a reality for the Minnesota West AD Nursing Program. The academic requirements, nursing curriculum, and clinical expectations are identical for the

land-based program and distance program. The support services for distance learners, although provided differently, are the same as for land-based learners.

7. As an AD nursing program, no other national accreditations in nursing are available. However, Minnesota West's AD Nursing Program holds membership with the National League for Nursing, participates in the National Organization for Associate Degree Nurses, the Minnesota Chapter of the National Organization for Associate Degree Nurses, and participates in the Minnesota Associate Degree Nursing Program Directors membership to continue meeting standards within the governing organizations.

Summary of Standards and Criteria:

1. Mission and Administrative Capacity

The mission statements of MNSCU, Minnesota West, and the AD Nursing Program are congruent, demonstrating accessibility as a common theme. The governing organization has faculty and nurse administrator participation in collegiate governance and community activities.

Annual advisory committee meetings allow community health facility representation and participation in decisions regarding the curriculum and program objectives. Community relationships with area Workforce Centers and high school counselors allow for input in Minnesota West's nursing educational programs.

The nurse administrator holds a master's degree in nursing. An additional degree, Doctorate of Nursing Practice, is anticipated in May 2010. Continued education each year supports the nurse administrator's role and serves to maintain Minnesota RN licensure. Minnesota West administration is supportive of the nurse administrator and allows, with faculty input, the dedication of budgets and resources to fulfill responsibilities, execute policies, and respond to students.

2. Faculty

The nursing faculty consists of eight members. Five of the faculty members have master's degrees in nursing. Two faculty members have plans established to complete a master's in nursing program with one completing in May 2010. Minnesota West continues to partner with area health facilities to locate quality RNs with an interest in nursing education. Successful relationships with area facilities have yielded new master's prepared faculty since the Fall of 2008. Searches for master's prepared faculty continue, complimented by a mentoring faculty

environment for adjunct and part-time faculty as they seek master's degrees in nursing. Faculty credentials as established by MnSCU and Minnesota West governing standards are met.

Nursing faculty, serving as educators, facilitate achievement of program outcomes for student learning, and serve as role models for professional nursing in area communities. Veteran faculty mentor novice faculty to develop evidence-based clinical practice environments. Workloads are adjusted to include mentoring and support, e.g. Clinical Coordinator position (see appendix 11.4 on page 189 for position description). The faculty-student ratio in the clinical environment is 1:8; in the classroom and online, 1:35; and in the skills laboratory, 1:16. Ratios are consistent among the college with the exception of the 1:8, which is mandated by clinical facilities. The faculty-student ratios are supported by the governing organization. The nurse administrator and support staff are adequate and are allotted appropriate time to conduct and organize the program.

Faculty evaluations occur with the same criteria and frequency as other faculty at the college. Full-time and part-time faculty are evaluated every three years following a two-year probationary period which includes evaluations every semester. The faculty and nurse administrator utilize the IDEA evaluation system for both online and in-classroom instruction. An example is found at www.theideacenter.org. The nursing program support staff and nurse administrator are evaluated annually per college staff and administrator policy.

Faculty and the nurse administrator continue to annually attend a health educator conference within the state of Minnesota. This conference focuses on learning methodologies and modalities.

3. Students

The nursing program has more stringent policies, progression, and clinical safety expectations than the general college. Nursing program policies are consistently and non-discriminately enforced. The college student code of conduct is upheld by the nursing program. Variations to standard college policies are explicated in the AD Nursing Student Handbook.

Student services support the academic and personal development of students. Qualified, dedicated staff provides student services. Distance delivery students have access to student services at other Minnesota West campuses. Student educational and financial records are maintained according to the governing organizational guidelines. Financial Aid offices are available to students for financial questions and conform to necessary regulations regarding

student repayment and responsibilities. Policies concerning educational and financial records are in compliance with the Minnesota Government Data Practice Act, located at <http://www.house.leg.state.mn.us/hrd/pubs/dataprac.pdf>.

It is the goal of the Minnesota West AD Nursing Program to provide clear and consistent information about the status of the NLNAC. Program changes in policies and / or procedures are communicated to students in a timely manner.

Technology is important to the nursing program. Orientation is provided to the Desire2Learn (D2L) learning platform for all students, including on-campus and distance learners. Orientation to electronic communication methods is provided.

4. Curriculum and Instruction

The organizing framework was revised in 2008 to closely align with current associate degree nursing practice and the *Educational Competencies of Associate Degree Nursing Programs* (NLN, 2000). Students have copies of the program organizational framework. See Appendix 5.1, on page 175, for the AD Nursing Program Organizational Framework and the visual depiction of the AD Nursing Program Organizational Framework. The nursing program website contains program information for all incoming or potential students, community members, and any person interested in the program.

The nursing program meets all the requisites for an associate degree set forth by MnSCU and all the requirements set forth by the Minnesota Board of Nursing. The Minnesota Board of Nursing “Abilities Book” is the document used to verify a student has met the abilities and thus will meet the state requirements of an Associate Degree nursing program. A copy of the “Abilities Book” is in the document room.

Faculty developed the curriculum along with collaborative community input. The faculty conduct ongoing review of the program for rigor and currency. Various assignments are used within specific courses (e.g. case studies, care plans) to meet student learning outcomes.

The curriculum includes concepts regarding cultural, ethnic, and socially diverse groups along with integration of Jean Watson’s caring theory. Simulation (high and low fidelity) is used in the program to achieve educational objectives and to prepare students for transition to practice.

Student practice learning environments reflect best practices and nationally established patient health and safety goals. The Joint Commission National Patient Safety Goals (hospitals) are introduced at orientations and then experienced at the clinical locations/environments.

The program length meets the requirements provided by MnSCU and Minnesota West. A statewide initiative addressing credit length limits for all programs (nursing and non-nursing) is in progress. A faculty member has participated on the task force to explore credit lengths of AD Nursing Programs.

5. Resources

Minnesota West Administration is supportive of the nursing program and provides resources necessary to achieve program goals. The program budget is adequate to meet the needs of the nursing program. Additional equipment and technology resources are available annually to support student and faculty needs in the program.

The nursing program is able to provide tutoring services for distant learning and on-campus students through the Library and Academic Resource Center (LARC). A software program specific to nurses, *Software for Nurses*, is available and free to students from off campus locations and can be accessed at <http://www.softwarefornurses.com>

Support services are available for land-based and distance learning students. Minnesota West has a LARC on each campus. Current nursing and research articles are available at campuses and through online database services.

The Information Technology (IT) staff assists students and faculty with technological challenges. The IT staff is available via the online Help Desk, email, and phone consultation.

There are dedicated classrooms and skills labs for the nursing students. All faculty and the nurse administrator have private offices. Adjunct faculty have available office space on the nearest campus.

6. Outcomes

A written plan for systematic evaluation of nursing programs that reflects the NLNAC standards and criteria has been developed.

Communities of interest such as the Nursing Advisory Committee assist with the program decision-making and provide input to improve curriculum and student learning outcomes.

Graduation rates range from 84 percent to 92 percent since the Fall of 2005. The goal standard identified by faculty is 85 percent. Faculty are tracking and reviewing retention /

attrition issues. Students who are not successful complete a Directed Plan of Study to identify barriers that could limit success. Students work with the faculty member to develop and implement a plan for success. The Directed plan of Study is found in the AD Nursing Student Handbook at www.mnwest.edu/nursing

The AD Nursing Program strives to be at or above the state and national average on NCLEX-RN pass rates. The year-to-date NCLEX-RN pass rate for 2009 is 93%. The stated program goal of 85 percent NCLEX-RN pass rate is monitored closely. A 2007/2008 decline in NCLEX-RN pass resulted in a modification of curricular emphasis and course grading criteria. See Appendix 6.1, pages 176-177, NCLEX-RN Education Reports, for results from the Minnesota Board of Nursing on state and national averages in 2009 and from 2005-2008, including Minnesota West AD Nursing Program pass rates.

Post graduation employment has exceeded the 85 percent goal. On the most recent survey in 2007-2008, graduates indicate 86.7 percent employment in professional nursing positions.

Analysis and Summary of Strengths and Areas Needing Development:

Organizational support and goals congruent with the governing bodies have resulted in multiple program strengths:

- program continues to develop a strong distance learning environment
- program faculty and nurse administrator have strong community relationships
- policies of program are congruent with the governing organization
- nurse administrator has experience in nursing and nursing education
- faculty years of service bring consistency to the program
- all students are evaluated by master's prepared faculty
- technology compliments the program
- student services and resources aid the student experience
- collegial relationships among nursing faculty are strengthened through mentorship
- non-nursing faculty, staff, and college administration demonstrate support for the program

- distance learning students must achieve the same program standards as land based students
- distance learning students receive consistent instruction, evaluation, and support
- Clinical Coordinator position strengthens relationships and partnerships with clinical facilities
- NLN accreditation is supported by the governing organization
- strong support for continuing development of simulation experiences
- ongoing development of student service learning projects

Throughout development of the NLNAC self-study report, review of college and program surveys (i.e IDEA, Noel Levitz), NCLEX-RN pass rates, HESI exam review, student / employer evaluations, and advisory board input, identified areas that may benefit from further development and modification include:

- continue MSN-prepared goals for part-time faculty
- program length may need modification based on upcoming statewide agreements
- continue / grow online advising
- increase summative HESI scores
- response rate increase on graduate surveys
- response rate increase on employer surveys
- continued evaluation of student attrition
- continued evaluation of time required by some students to complete the program

Future plans for the AD Nursing Program include ongoing program evaluation, continuous thoughtful student outcomes assessment, a potential part-time program option, and a review of a dual start program (Fall and Spring semester start).

STANDARD 1

Mission and Administrative Capacity

The nursing education unit's mission reflects the governing organization's core values and is congruent with its strategic goals and objectives. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified outcomes.

1.1 The mission/philosophy and outcomes of the nursing education unit are congruent with those of the governing organization.

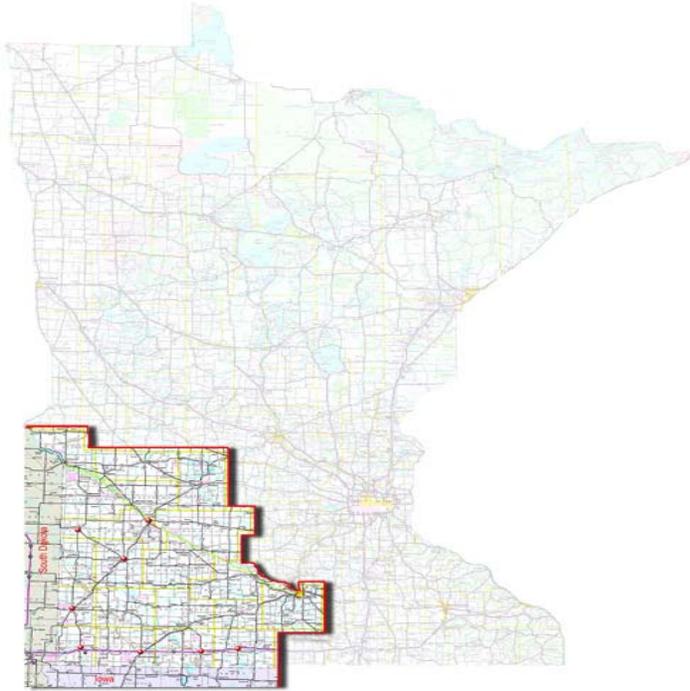
The Minnesota West Community and Technical College Associate Degree Nursing Program (hereafter referred to as Minnesota West and the AD Nursing Program) is based at the Worthington campus. Minnesota West is a merged comprehensive two-year institution of higher education. It is a family of five campuses and four centers in a geographical area that comprises nineteen southwestern Minnesota counties. The geographical distances between campuses and each campus' unique community, history, traditions, philosophies and culture, also distinguish Minnesota West from all other colleges in the state. The merger and resultant establishment of Minnesota West occurred January 1, 1997. Minnesota West is the only public community and technical college in southwest Minnesota and thus serves a large rural region. With a combined surface area of more than 20,500 square miles, Minnesota West focuses on a common theme or thread in the governing organization missions/vision namely, accessibility to education. The liberal arts campus is at Worthington and the technical campuses are located at Jackson, Pipestone, Canby, and Granite Falls. Nursing labs are located on the Worthington, Pipestone, Granite Falls, and Jackson campuses. Minnesota West Community and Technical College is a member institution of Minnesota State Colleges and Universities (MnSCU). The mission/philosophy and outcome statements of the AD Nursing Program, the college, and MnSCU are congruent. The supporting evidence includes the mission statements for MnSCU, Minnesota West, and the nursing educational unit.

Figure 1C (Map of Minnesota West Campuses and Centers) and Figure 1B (Minnesota West Service Area by County) describe the college.

Figure 1C. Map of Minnesota West Campuses and Centers



Figure 1B. Minnesota West Service Area by County



Mission and Vision Statements:

MnSCU - Minnesota State Colleges and Universities System

The Minnesota State Colleges and Universities is a system of distinct and collaborative institutions that “offers higher education that meets the personal and career goals of a wide range of individual learners, enhances the quality of life for all Minnesotans and sustains vibrant economies throughout the state” <http://www.mnscu.edu/about/index.html>. The vision of the Minnesota State Colleges and Universities “will enable the people of Minnesota to succeed by providing the most accessible, highest value education in the nation”

<http://www.mnscu.edu/about/index.html>.

The Minnesota State Colleges and Universities system of diverse institutions offers unequalled breadth, variety, and quality of educational opportunities across the state.

Collectively, and in partnership, the system offers learning opportunities for a technologically sophisticated world that results in:

- Contributing and empowered citizens
- Active participants in a democratic society
- Educated, skilled, and adaptable workers

- Innovative lifelong learners
- Practical research and development

Minnesota West Community and Technical College

“Minnesota West Community and Technical College is dedicated to serving the varied educational needs of our diverse populations in affordable, accessible and supportive settings.”

<http://www.mnwest.edu/about-minnesota-west/mission>

Mission Goals:

1. To provide pre-professional and liberal arts courses which lead to Associate of Arts (A.A.) or Associate of Science (A.S.) degrees. The courses are designed to transfer to a four year college or university and will apply toward a baccalaureate degree.
2. To provide certificate, diploma, and Associate of Applied Science (A.A.S.) degree courses for students working to develop and enhance occupational or technical competence leading toward employment or further education.
3. To provide learning opportunities for people of varying ages, backgrounds, and abilities with a particular focus and commitment to retraining and lifelong learning.
4. To provide continuing education, management education, and customized training for professions, businesses, and industries.
5. To provide facilities for programs, activities, conferences, teleconferences, and courses to meet community needs.
6. To provide extended educational opportunities by means of flexible scheduling and delivery.
7. To provide effective and efficient use of resources through partnerships with agencies, other educational institutions, businesses and industries.
8. To provide continuous improvement processes via assessment, evaluation and upgrading of programs and services, and to support the professional development of college personnel.
9. To provide the resources to meet the contemporary standards of facilities, informational resources, technology and teaching strategies to insure quality educational outcomes.

During the course of program development and ongoing program evaluation, the faculty examined the nursing philosophy in relation to the Minnesota West and MnSCU mission/vision statements. The goals and objectives of the nursing unit are consistent with those of MnSCU and Minnesota West, primarily in the area of accessibility. Other common themes include: life-long learning, ease of transition between levels of learning, the diverse needs of students, and teaching strategies necessary to meet goals. The following table (Table 1.1) demonstrates the congruency between the statements of mission/vision and philosophy outcomes of the nursing unit and mission statement of Minnesota West and MnSCU.

Table: 1.1 Congruency of Mission/Vision Statements and Philosophy Outcomes

Minnesota State College and Universities	Minnesota West Community and Technical College	Minnesota West Associate Degree Nursing Program
Vision	Mission	Mission
Provides diverse citizens the benefit of high-quality, accessible, future oriented higher education	Minnesota West Community and Technical College is dedicated to serving the varied educational needs of our diverse populations in affordable, accessible, and supportive settings.	Minnesota West Associate Degree Nursing Program is dedicated to provide nursing education using a variety of affordable, accessible delivery methods to a diverse population with the goal of preparing graduates who practice safe, entry level professional nursing.
Outcomes	Outcomes	Outcomes
<ul style="list-style-type: none"> - contributing and empowered citizens - educated, skilled, and adaptable workers 	<ul style="list-style-type: none"> - to provide pre-professional and liberal arts courses - enhance occupational or technical competence 	<ul style="list-style-type: none"> - the empowerment of individuals and families - place high value on caring and respect for human

<ul style="list-style-type: none"> - innovative lifelong learners - successful communities 	<p>leading toward employment or further education</p> <ul style="list-style-type: none"> - commitment to retraining and lifelong learning - training for professions, businesses, and industries - meet community needs <ul style="list-style-type: none"> - provide extended educational opportunities - effective and efficient use of resources - continuous improvement process <ul style="list-style-type: none"> - provide resources - to insure quality educational outcomes - comprehensive student services 	<p>beings, and on interpersonal relationships in nursing</p> <ul style="list-style-type: none"> - preparing safe, competent practitioners who value lifelong learning - physical, emotional, psychological, spiritual, social and cultural dimensions of individuals and community create a whole that is greater than the sum of its parts.
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AD Nursing Program

The Minnesota West Associate Degree Nursing Program Mission states, “The Minnesota West Associate Degree Nursing program is dedicated to provide nursing education using a variety of affordable, accessible, delivery methods to a diverse population with the goal of preparing graduates who practice safe, entry level professional nursing.”

<http://www.mnwest.edu/program-sites/worthington/nursing/handbook>

The following is not intended to be a comprehensive statement of the philosophy of the faculty of the Minnesota West Associate Degree Nursing Program. Rather, it sets forth those beliefs and values that have high priority for the faculty and will, therefore, have a strong influence upon the nursing program and the manner in which it is implemented.

Figure 2A AD Nursing Program Philosophy

Associate Degree Nursing Program Philosophy

Nursing draws on a broad and integrated knowledge base. It is a unique discipline in and of its own and is both an art and a science

We believe the essence of nursing and nursing education involves therapeutic relationships, priority setting, critical thinking, and the valuing of individuals with unique needs. Physical, emotional, psychological, spiritual, social and cultural dimensions of individuals and community create a whole that is greater than its parts.

We place high value on caring and respect for human beings, and on interpersonal relationships in nursing – the interaction between nurse and client, between student and faculty, and among members of the health care team.

We enthusiastically support health promotion and the empowerment of individuals and families across the lifespan to meet their own health needs.

We believe faculty are responsible for designing, directing, and guiding learning of students. Faculty role-model process skills which include ethical decision making, critical thinking, problem solving, communication, creativity, and self-care. Faculty advocate mutual understanding and respect between scopes of practice and commit themselves to preparing safe, competent practitioners who value a life of learning.

We believe students are responsible for their own learning and must be actively engaged in the learning process.

Further detail explicating the abbreviated statement of philosophy that is found in the student handbook follows:

Beliefs about people and society

We, the faculty of the AD Nursing Program at Minnesota West, believe the focus of nursing is the person within the context of his or her cultural, familial, and social environment. The person, in our view, is holistic, and greater than the sum of physical, emotional, psychological, spiritual, and social parts. We believe that humans are interactive beings who have varying levels of dependence on a health care system.

We believe that people have similar and at the same time, greatly dissimilar characteristics and health care needs. Changes in societal conditions and trends require flexibility in health care. The faculty believe that competent nursing care within a cost effective health care system is the right of every individual. We believe that a professional goal of nursing is to be politically and socially active to improve health care and to foster growth in professional nursing.

We believe that health involves physical, social, emotional and spiritual well being as defined by the person. Health occurs on a continuum from high level wellness to death. We

perceive wellness as the ability to function at one's highest potential. We also believe that as health care professionals, we have an obligation to respect the health beliefs of others.

Beliefs about nursing

We believe that caring lies at the core and encompasses all nursing competencies. The goals of nursing are achieved through transpersonal caring, the process of caring between people. This caring is conscious and intentional and occurs between health professionals as well as between patients and nurses. We believe that caring is the highest level of commitment that we can to others (Watson, 1989). Caring can be actualized through clinical decision making, teaching, nursing intervention, communication and the management of care.

We believe that nursing draws on a broad and integrated knowledge base. Nursing is a unique discipline of its own and is both an art and a science. Nursing practice is the diagnosis of human responses and the treatment of those responses through independent, interdependent and dependent nursing interventions.

We place high value on respect for human beings and on interpersonal relationships in nursing, those relationships between nurse and patient and among members of the health care team. We are enthusiastically in accord with the nursing profession's increasing emphasis on health promotion and empowerment of people to meet their own needs. At same time, we are committed to nursing's historical responsibility to the ill, injured and disabled. We believe nursing occurs in all settings including acute care, long term care, schools, homes and the community.

Beliefs about nursing education

The faculty of the Minnesota West AD Nursing Program envision education as a lifelong process. We believe students should have the opportunity to make smooth transitions from one level of education to the next, and have the opportunity to enhance their practice at a given level.

We believe that caring is learned, in part, through caring relationships between faculty and students. We believe every student should receive strong support and encouragement in achieving their individual potential and that the special needs of the non-traditional learner should be considered when developing and implementing the nursing curriculum. We believe faculty must be sensitive to the individuality of students. We strongly believe that respectful concern about the personal growth of each student and positive reinforcement of achievements are a foundation for the teaching learning process.

We believe that learners must ultimately assume responsibility for their own learning and need to be actively engaged in the learning process. In light of the knowledge explosion and ongoing changes in the healthcare delivery system, faculty must encourage the development of process skills along with a solid base of essential bedside skills. Process skills include ethical decision making, critical thinking, decision making, problem solving, communication skills and creativity. Faculty members believe that critical and creative thinking skills are mandatory for lifelong learning, and that active learning modes that engage the intellectual efforts of both students and faculty are necessary to develop those skills.

While students are ultimately responsible for their own learning, we believe that faculty assume the responsibility for designing, directing and guiding the learning experience of students. We believe it is the responsibility of faculty to create learning environments and experiences that facilitate the development of skills necessary for safe, effective and caring nursing practice.

Evaluation of student performance and progress is a responsibility shared between students and faculty. Faculty assume responsibility for formative and summative evaluation with the goal of enhancing each student's chance of success in program accomplishment, the licensure exam, and in the student's performance as a caring, competent professional nurse. We believe students learn during the process of self evaluation and that such a requirement encourages a pattern of self reflection and continual growth.

Faculty believe there are different levels of practice for entry into the nursing profession. We value clear role descriptions and objectives as the foundation for education at respective levels. Nursing faculty advocate mutual understanding and respect among different levels of practice. Faculty believe the goal of associate degree nursing education is to prepare graduates to provide safe and competent care, with an emphasis on the competencies as described the National League for Nursing (2000) within a context of caring and respect.

The AD Nursing Program faculty at Minnesota West believe that program philosophy is a statement of beliefs. Closely tied to the program philosophy is the organizing framework. The nursing program's organizing framework and visual depiction of the framework follows and is located in Appendix 5.1, page 175.

The AD Nursing Program educational objectives are designed around the program competencies. The program competencies have been adapted from the nursing faculty as

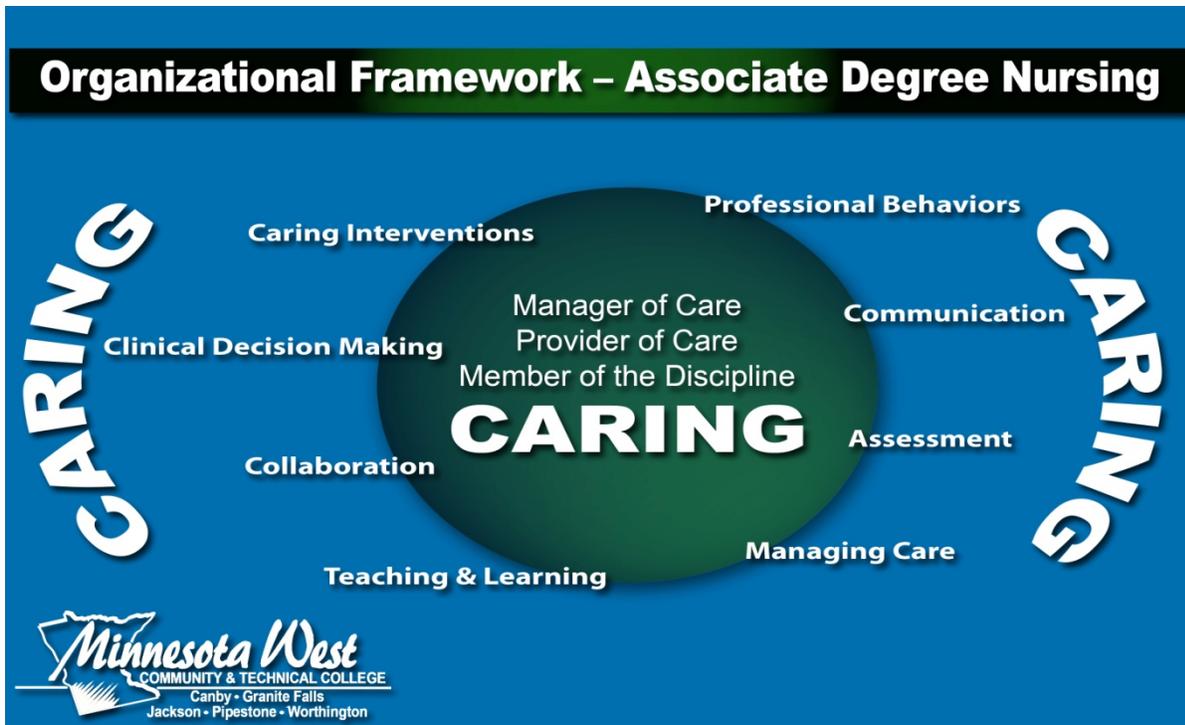
developed by NLN (2000). The visual depiction of the organizing framework is distributed to students to assist in student understanding of the organizational framework.

Organizational Framework - Associate Degree Nursing Program

Caring	Roles/Competencies
<p>Selected assumptions from Jean Watson:</p> <ul style="list-style-type: none"> • Human caring in nursing is not just an emotion, concern, or attitude, but a personal response • Effective caring promotes health and individual or family growth • Caring promotes health more than does curing • Caring responses accept a person not only as they are now, but also for what the person may become • A caring environment offers the development of potential while allowing the person to choose the best action for self at a given point in time • Caring occasions involve action and choice by the nurse and client. • Human caring involves values, a will and commitment to care, knowledge, caring actions and consequences • The ideal and value of caring is a starting point, a stance, an attitude that has to become a will, an intention, a commitment and a conscious judgment that manifest in concrete acts • Caring for ourselves is a prerequisite to caring for others 	<p>As described by the NLN (2000)</p> <p>Provider of care</p> <ul style="list-style-type: none"> • Communications • Assessment • Clinical decision making • Caring interventions • Teaching and learning <p>Member of the Discipline</p> <ul style="list-style-type: none"> • Professional behavior <p>Manager of Care</p> <ul style="list-style-type: none"> • Collaboration • Managing care

Jean Watson as cited in Berman, A., Synder, S.J., Kozier, B., Erb, G., 2008, p. 47 and 48.

Organizational Framework – Visual Depiction



1.2 The governing organization and nursing education unit ensure representation of students, faculty, and administrators in ongoing governance activities.

The nursing administrator and nursing faculty strive to be active in the governance of the college. Governance activities in which the nursing faculty and the nurse administrator are involved included in Table 1.2

Table 1.2 Participation on Committees of the Governing Organization

Committee/Council of the Governing Organization	Faculty / Students	Term	Comments
Curriculum Committee (Worthington Campus)	Ruth Van Heukelom	2003 to present	Committee representative for nursing programs
Shared governance (college)	Diane Vangsness	2002 to present	MSCF Committee assigned per academic year
Academic Administrators Meeting	Ruth Van Heukelom	2009 to present	Administrator position – Deans/Directors
Academic Team Meeting	Ruth Van Heukelom	2009 to present	Administrator position – Dean/Directors/Campus Managers/CEOs
Search Committee	Ruth Van Heukelom Diane Vangsness	1998 to present 2000 to present	Director of Nursing Worthington Campus CEO

	Students	annually /as needed	Worthington Campus Advisor
Safety Committee	Ruth Van Heukelom	2009 to present	Ongoing committee – represents safety concerns of campus
	Students	annually	
Nursing Program Advisory Committee	All Nursing Faculty Ruth Van Heukelom Mitz Diemer, nursing support staff Advisory Committee Members Students – AD and PN Program specific	Annually	Ongoing committee for faculty, nurse administrator, communities of interest, and students
Allied Health Division Chair	Karen Wiltout	2009 - present	Division Chair is elected annually
Academic Affairs Council	Karen Wiltout	2009 - present	Division Chairs serve on Academic Affairs Council
Student Senate	Nursing students have the opportunity to serve on the Student Senate and are elected annually. AD Nursing students are not holding elected position in 2009-2010.		

Faculty serve on nursing program committees. Full and part time faculty are valuable players who share unique insights and perspectives as committee members. Equal responsibility is held by all full-time and part-time faculty when “All Faculty” is listed. Table 1.3 identifies nursing educational unit specific committees.

Table 1.3 AD Nursing Program Faculty Committee Work

Associate Degree Nursing Program – Faculty Committee Work

Committee	Committee Chair	Faculty Members
<u>Nursing Program Faculty Meeting</u>	Ruth Van Heukelom, DON – AD Program	All faculty
<u>Allied Health/Nursing Division Team Meeting</u>	Division Chair, Karen Wiltout	All faculty
<u>Orientation Committee</u> (organize the orientation program and clinical orientation program)	Diane Vangsness	Erika Freking, Karen Wiltout
<u>Pinning Committee</u> (work with students to coordinate Pinning ceremony at Worthington campus)	Diane Vangsness	Erika Freking, Karen Wiltout
<u>Lab Preparedness Committee</u> (responsible for lab inventory checklist and related lab duties)	Karen Wiltout	Diane Vangsness, Erika Freking
<u>Online and Simulation Committee</u> (integrate new techniques and ideas, attend seminars, etc)	Karen Wiltout	Diane Vangsness, Erika Freking

<u>MBN Abilities Committee</u> (faculty preparedness annually, prepares for program approval)	All Faculty	All Faculty
<u>AD Program Handbook</u> (language revision, updating information, etc)	All Faculty	All Faculty
<u>Applicant Screening Committee</u> (review nursing applications for acceptance to nursing program)	Diane Vangsness	Erika Freking, Karen Wiltrout

The nursing faculty has the opportunity to be active in the Minnesota Community College Faculty Association (MSCF). Article 8 of the *Master Agreement between State Colleges and Universities Board of Trustees and MSCF* recognizes that faculty has a direct interest in College issues including, but not limited to, long and short range planning, priorities in the deployment of financial resources, institutional self-study, marketing, public relations, and recruiting activities. The contract can be located at <http://www.finance.mnscu.edu/contracts-purchasing/contracts/forms/index.html>. A copy of the master contract is in the resource room.

The faculty has opportunities to belong to the college wide committees of Shared Governance Council and the Academic Affairs Council. One faculty member, Diane Vangsness, currently serves as the MSCF Faculty Grievance Representative. Karen Wiltrout, serves as the Allied Health Division Chair and on the Academic Affairs Council. Various opportunities exist from the MnSCU governing organization for faculty of programs to provide input in statewide goals. During the 2007-2008 academic year, one of the faculty sat on a MnSCU task force which had the charge to examine the upcoming statewide program credit limits for the MnSCU institutions.

Students are encouraged to be active in the campus activities and organizations such as student senate or student ambassadors. Student senate members and student ambassadors may serve on staff/faculty search committees, and appeal process (due process) committees, and have served on technology, scholarship, and campus leadership committees. Recently, nursing students have not been active in student organizations. Many nursing students are “non-traditional” students who live at a distance, with varied responsibilities such as families and jobs. Students are encouraged to be active in the governance of the nursing unit. Representative students attend the nursing advisory committee meetings (Advisory Committee Meeting minutes are available in the document room.) Student representatives are elected by the students for planning projects such as a pinning ceremony.

1.3 Communities of interest have input into program processes and decision making.

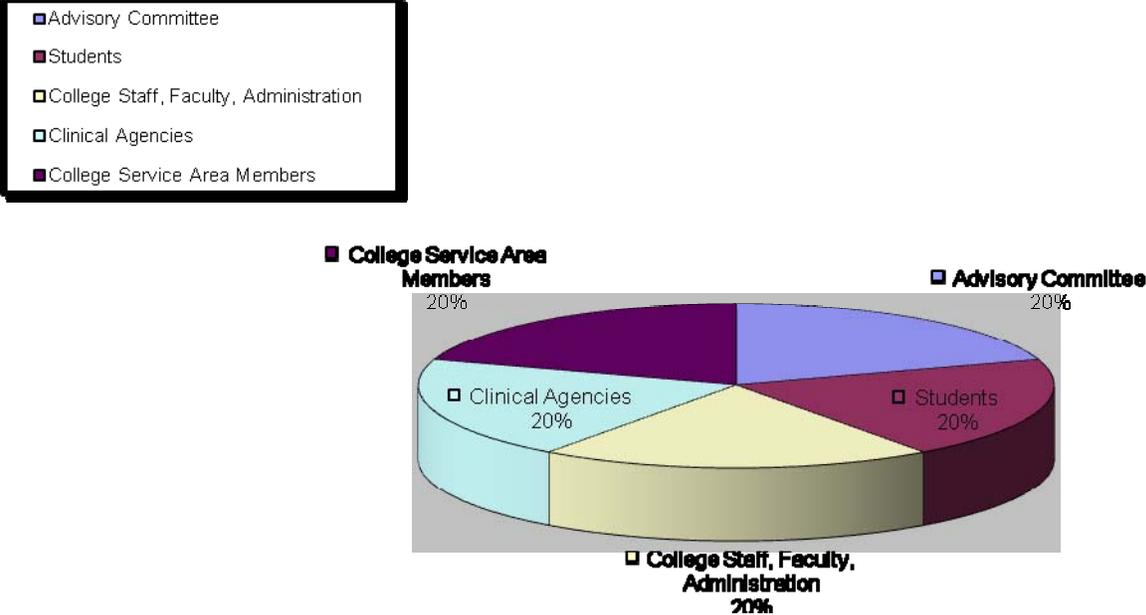
Minnesota West believes that the input from advisory committees is an invaluable tool to assist with continuous quality improvement. The AD Nursing Program prides itself on the support received from advisory committee members. Meetings are convened at least once a year to discuss the trends in education, employment and individual needs of institutions that are represented. College service area facilities are invited to send a representative to the advisory committee meetings. Usually the representative is the chief nursing administrator or a designee. The advisory committee includes students from the Practical and AD Nursing programs. Usually students who attend have been elected by the nursing student population and represent classroom, online and ITV learners. The advisory committee is attended by Minnesota West’s administration. Attendance of administrators assists in building partnerships with the facilities and allows for in-depth dialogue between Minnesota West and represented facilities. Faculty members from other disciplines at the college are invited to attend advisory committee meetings. These faculty members assist the AD Nursing program to plan the appropriate liberal arts classes that will ensure a well-developed curriculum. A list of Minnesota West AD Nursing Program Advisory Committee members is found on site in the document room. Additional communities of interest are listed in Table 1.6.

Table 1.6 Communities of Interest – Value to AD Nursing Program

Community of Interest	Input – Value to Minnesota West’s AD Nursing Program
Participation in Advisory Committee Meetings by participating area health care professional.	Advisory Committee Members meet and provide input at annual Advisory Committee Meetings. Participation is strong and active.
Students have formal and informal input into decision-making and program processes.	Students offer formal or informal suggestions, concerns, and input into program processes or decisions.

<p>College staff, faculty, and administrator participate in Advisory Committee Meetings to demonstrate support of the program and curricular changes.</p>	<p>Administration, staff, and faculty of the college participate along with the nurse administrator, nursing support staff, and nursing faculty (both AD and PN) in the program and curricular changes.</p>
<p>Area community members in the college service area provide input informally to program processes and decision-making.</p>	<p>Community members offer formal or informal (most frequent) input on program processes.</p>
<p>Clinical agencies offer input – informally or formally regarding program processes, students, and/or curriculum.</p>	<p>Clinical agencies offer verbal and written feedback on program or student concerns.</p>

Figure 1D. Communities of Interest - Input Value



Communities of interest are all equally valued committees/groups/etc to the Minnesota West AD Nursing Program. With valuable feedback from all units, program growth, decision-making, and processes can evolve collectively.

1.4 Partnerships exist that promote excellence in nursing education, enhance the profession, and benefit the community.

The AD Nursing Program has many contracts with regional health care institutions. Table 1.4 lists hospitals and treatment facilities in which AD Nursing students complete clinicals that are directly supervised by nursing faculty.

Additional contracted facilities enhance learning opportunities through preceptorships and community health experiences.

Table 1.4 List of Clinical Agencies

List of Clinical Agencies

Clinical Facility	Address	Experiences available
Avera McKennan Hospital and University Health System	800 East 21st St. PO Box 5045 Sioux Falls, SD 57117	Medical, surgical, pediatrics, OB
Sanford Regional Hospital, Worthington	1018 6th Ave Worthington, MN 56187-2202	Medical, surgical, pediatrics, OB, ER, mental health
Avera Marshall Regional Medical Center	300 S Bruce St Marshall, MN 56258	Medical, surgical, pediatrics, OB, ER, mental health
New Ulm Medical Center	1324 Fifth North Street New Ulm, MN 56073	Medical, surgical, pediatrics, OB
Chippewa Montevideo County Hospital	824 N 11th St Montevideo, MN 56265-1629	Medical, surgical, pediatrics, OB, ER
Fairmont Medical Center – Mayo Health System	800 Medical Center Drive Fairmont, MN 56031	Medical, surgical, pediatrics, OB

New Life Treatment Center	PO Box 38 Woodstock, MN 56186-0038	Mental health
Project Turnabout	PO Box 116 Granite Falls, MN 56241-0116	Mental health

The faculty believe students need various opportunities to enhance their educations. Students are required to experience at least two different clinical sites during the AD Nursing Program education (one exception to that policy occurred this academic year at a facility request secondary to the implementation a new electronic documentation system that required extensive orientation time). Students receive clinical experiences at hospitals, treatment facilities and at community health organizations. Without the cooperation of facilities and organizations, students would not have the opportunity for varied clinical experiences. The nurse administrator and faculty are invited to collaborative annual or biannual nursing leader and education partners meetings from area clinical facilities. Most recently, the Professional Nursing Education and Clinical Rotation Collaborative Modeling taskforce has been developed by Avera McKennan Hospital and University Health System. The nurse administrator has participated to enhance the clinical experiences for Minnesota West.

The nursing shortage is not foreign to this rural area. Nursing is considered to be an occupation with the greatest need in all of Minnesota, including the 19 county service area where Minnesota West is located. Since 1987, Minnesota West has increased enrollment in the Associate Degree program from 24 to 96 students admitted per year. It should be noted that the average salary for nurses in the 19 county is just over \$62,000 (Minnesota Department of Economic Development, <http://www.iseek.org/careers/careerDetail?id=1&oc=100179>), making registered nursing one of the better paying occupations/professions in southwest Minnesota.

The nursing faculty believe that lifelong learning is an essential value nurses must embrace. Faculty encourage students to continue their educational endeavors by seeking higher degrees in nursing. Minnesota West has articulation agreements with all Minnesota State College and University institutions so that students may easily transfer credits between institutions. Minnesota West has an articulation agreement with one private institution, Presentation College. Minnesota West continues to seek articulation agreements with institutions of higher learning, both within Minnesota and surrounding states. South Dakota

State University in Brookings, South Dakota, has indicated an interest in obtaining an articulation agreement once accreditation is received from NLNAC.

Minnesota West and the AD Nursing Program are supportive of ongoing educational goals and support the faculty and director in community participation/volunteering endeavors. A listing of community and volunteer activities are included on faculty resumes and can be found in the resource room.

1.5 The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing.

Ruth Van Heukelom, MS, RN, is a member of the administration team at Minnesota West and is titled Director of Nursing – Associate Degree Nursing Program. Van Heukelom holds a Masters in Nursing from South Dakota State University, and a Bachelor of Science in Nursing from Graceland College. (See Appendix 8.1 for the resume for the nurse administrator). Van Heukelom is a licensed Registered Nurse in Minnesota, Iowa, and South Dakota. Van Heukelom has been with Minnesota West AD Nursing Program in the nurse administrator role since October 2009. This appointment follows her faculty experience at Minnesota West in the AD Nursing Program since 1991.

The Director of Nursing - Associate Degree Nursing Program is an administrator level position that adheres to standards from the agency Minnesota Board of Nursing (<http://www.state.mn.us/portal/mn/jsp/home.do?agency=NursingBoard>) and NLNAC standards.

1.6 The nurse administrator has authority and responsibility for the development and administration of the program and has adequate time and resources to fulfill the role responsibilities.

Van Heukelom holds a position with the administrative team at Minnesota West. As such, the director has the authority to direct, supervise, and manage the nursing department. A job description for the Director of Nursing is found in Appendix 9.1 on page 183. This position is comparable to that of other AD directors in the MnSCU system. The AD Director of Nursing position is located on the Minnesota West's organizational chart. (See Appendix 10.1, found on page 187, for the Minnesota West's Organizational Chart).

The nursing director is responsible for making classroom and clinical teaching assignments. Full-time faculty are assigned an average 30 annual credits in the program. The

director has the authority to assign the workload/assignments for full-time and part-time faculty. The AD Program utilizes one full-time faculty and seven part-time faculty positions for classroom, skills lab, and clinical teaching. The part-time faculty meet the pro rata basis of semester credits and assist in the rural nature and large expanse of the clinical locations for the AD Program in Worthington, Sioux Falls, Marshall, New Ulm, Montevideo, and Fairmont. The nurse administrator has the authority to seek and employ part-time and part-time adjunct faculty that are experts in specific facility and discipline areas. The nurse administrator is able to complete faculty workloads/assignments and has adequate time and resources to fulfill the program responsibilities.

Role responsibilities of the nurse administrator, in addition to faculty assignments, include all day-to-day operations of the AD Nursing Program with current and incoming students, ongoing college wide communication to staff and administrators, meeting with the Nursing Programs Advisory Committee, leading AD faculty meetings and/or joint nursing program meetings (PN and AD faculty and programs meet together for continuity of programs), evaluations of clinical faculty, and coordination of ongoing approvals and responsibilities with the MBN. Van Heukelom's nurse administrator role may include a teaching assignment when needed. However, the primary focus of the nurse administrator is to fulfill the role responsibilities as noted above. A teaching assignment of 4 credits in a semester would be usual for the nurse administrator in a typical semester. Priority is to maintain development and administration of the AD Nursing Program.

1.7 With faculty input, the nurse administrator has the authority to prepare and administer the program budget and advocates for equity within the unit and among other units of the governing organization.

As within the Director of Nursing job description, the nurse administrator, with faculty input, has the authority to prepare and defend a budget with the direct supervisor, and administer the budget in advocacy for the nursing educational unit. At Minnesota West, the nurse administrator reports to the Vice President of Instruction, Dr. Jeff Williamson, who allows for negotiation and discussion regarding budgets and resources with all directors. Program needs are prepared and reviewed annually.

Additional budget items are established through other resource opportunities such as the campus funding budgets of technology and equipment. When resources are needed by faculty members, they bring the need forward for discussion at faculty meetings. The nurse administrator submits requests on behalf of the nursing faculty to the Vice President of Instruction.

Non-nursing faculty submit requests to the Vice President of Instruction in the same manner. Additional items may be requested in campus technology and equipment budgets for all programs and educational units. Equity in the budget request process is demonstrated for all educational units at Minnesota West.

1.8 Policies of the nursing education unit are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the goals and outcomes of the nursing education unit.

The nursing and non-nursing faculty members follow the same governing organization policies and guidelines. Workload /assignment guidelines are the same for nursing faculty and non-nursing faculty, based upon the MSCF contract.

Policies for college faculty are found on the website in the Minnesota West Faculty Handbook at: www.mnwest.edu/fileadmin/images/academics/Faculty_Handbook08-09.pdf. Nursing faculty adhere to additional policies as required by clinical affiliations, for example, remaining current in CPR, immunization guidelines, etc.

Policies of the nursing educational unit are established with faculty and nurse administrator collaboration. Student related policies specific to nursing are reflected in the AD Nursing Program handbook, which is reviewed at the beginning of the program each fall. After review, students are quizzed on specific items referring to nursing program policy, nursing program progression, and course requirements.

College wide student policies and the Student Code of Conduct are found in the 2009-2010 Minnesota West Student Handbook and are accessible via the website to all Minnesota West enrolled students at www.mnwest.edu/student-handbook. AD Nursing program policies are consistent with the governing organization's policies, yet follow more stringent program

specifics where applicable. AD Nursing program policies are found in the AD Nursing student handbook at <http://www.mnwest.edu/program-sites/worthington/nursing/handbook>

1.9 Records reflect that program complaints and grievances receive due process and include evidence of resolution.

Students providing program complaints or grievances follow due process. The route of steps within due process at Minnesota West is explained to students within the Student Code of Conduct Handbook, which can be found at: <http://www.mnwest.edu/student-handbook/student-complaintgrievance/>.

Progression in the AD Nursing Program is dependent upon student success in courses each semester. Students who are not successful in one nursing course in a semester may follow a petition process (due process) to continue in the program at a slower pace by taking the course one additional time the following academic year. Each student must complete a Petition Form and a Directed Plan of Study to be eligible for entrance into the repeated course. These documents are then approved/denied by the faculty and nurse administrator. Students must identify barriers to their own learning and develop a plan to address those barriers prior to continuation in the program. Students who are not successful in a course twice cannot progress in the program unless they are readmitted. The AD Nursing Handbook discusses progression through the program. Students have access to the AD Nursing Program Handbook via the Minnesota West website at www.mnwest.edu/program-sites/worthington/nursing/handbook

The nurse administrator has access to administrators with experience and training in following due process. MnSCU Investigative Trainings www.hr.mnscu.edu/training_and_development/documents/Executive_Dev_SU_Sum.pdf is available to ensure that the due process is provided for students at a time of needed resolution of a conflict. Students are able to access the procedure of due process of grade appeals and appeals of other nature from the Minnesota West website. Other administrators have also received the MnSCU Investigative Training and assist with due process for Minnesota West to achieve unbiased and fair due process for all students.

1.10 Distance education, as defined by the nursing educational unit, is congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit.

Minnesota West and the AD Nursing Program offers components of the nursing program at a distance to increase accessibility in congruency with the governing organization and nursing educational unit mission statements.

Minnesota West AD Nursing Program was granted approval for online delivery from the Higher Learning Commission in 2001. The Minnesota Board of Nursing (MBN) also reflects extended campuses from the Worthington-based program for distance learning on the MBN website at:

<http://www.state.mn.us/portal/mn/jsp/content.do?contentkey=Minnesota Approved Professional Nursing Programs 033103111608&contenttype=EDITORIAL&subchannel=null&sc3=null&sc2=null&id=-536893080&agency=NursingBoard> .

Students have the option of taking nursing theory courses face to face, online, or via ITV. These courses include NURS 2120, NURS 2220, NURS 2230, and the theory (didactic) portions of NURS 2240. Laboratory courses NURS 2140, and portions of NURS 2240 must be taken face to face. Faculty members travel to Minnesota West lab sites to provide accessible learning for students.

Nursing clinical courses, NURS 2180 and NURS 2280, are offered in Worthington, Fairmont, Marshall, New Ulm, and Montevideo (all in Minnesota) as well as in Sioux Falls, South Dakota. Clinical sites are chosen for quality of clinical experience (including patient census, variety of discipline areas, and facility support of students). An overall goal is to have appropriate learning environments that are accessible for students.

Academic requirements, nursing curriculum, and clinical expectations are the same for the students who take advantage of distance education modalities. Delivery of laboratory and clinical courses at a variety of sites throughout the service area increases accessibility for students.

STANDARD 2

Faculty and Staff

Qualified faculty and staff provide leadership and support necessary to attain the goals and outcomes of the nursing education unit.

Faculty Resumes are located in the Resource Room

2.1 Full-time faculty are credentialed with a minimum of a master's degree with a major in nursing and maintain expertise in their areas of responsibility.

The AD Nursing Program employs one full-time faculty member, Diane Vangsness. Vangsness hold a master's degree in nursing and has recently completed post graduate nursing education courses with a focus on curriculum and program design, and instruction and evaluation. Vangsness holds a RN license and completes 24 continuing education units (CEUs) every two years to maintain licensure by the MBN and expertise in the faculty nursing role. See the Faculty Profile in Appendix 1.1 (page 165).

2.1.1 The majority of part-time faculty are credentialed with a minimum of a master's degree with a major in nursing; the remaining part-time faculty hold a minimum of a baccalaureate degree with a major in nursing.

The majority of the part-time faculty are credentialed with a minimum of a master's degree in nursing. One part time faculty will complete a master's degree in nursing in May of 2010, and has committed to joining Minnesota West on a full-time basis beginning in August, 2010. For the Spring 2010 semester, based on credits offered on workload assignments, 69.1 percent of the program is taught by master's degree in nursing prepared faculty. With the exception of one adjunct clinical instructor, remaining faculty are enrolled in a master's degree in nursing program. Faculty who have not completed a master's degree in nursing are mentored by master's prepared faculty. The primary instructor for all courses is master's prepared. Every effort is made between the fall and spring semesters for master's prepared faculty to evaluate

students in the clinical setting. See the Faculty Profile for part-time AD Nursing Program faculty in Appendix 1.1 (page 166-168).

2.1.2 Rationale is provided for utilization of faculty who do not meet the minimum credential.

Several factors prevent the Minnesota West program from employing all master's prepared faculty. Due to the rural demographics of Southwest Minnesota, it has been difficult to recruit master's prepared nurses. Minnesota West experienced four failed employment searches for master's prepared nurses. Competition from the public and private sector for full-time master's prepared nurses limits the availability of advance practice nurses willing to employ with Minnesota West. Minnesota West cannot compete with the salaries offered to the master's degree in nursing prepared nurses by health care providers in Southwest Minnesota.

Part-time clinical faculty are hired based on clinical expertise and clinical location familiarity. Several recent examples correlate nurse educator familiarity with a clinical facility often yields a more successful experience (The Advisory Board Company, 2008). It is the faculty and nurse administrator's belief that the program can excel with the right person and guidance/mentorship. The goal of the Minnesota West Nursing Program administrator is to hire faculty who are willing to dedicate their time to facilitate student outcomes and program outcomes, and work towards a master's degree in nursing.

Significant time is dedicated to the ongoing efforts to mentor and guide nursing faculty who do not meet the credential of a master's degree in nursing. The afore mentioned factors (competition, limited numbers of master's prepared nurses, and inability to match salary scales) has forced Minnesota West to adopt and design a mentoring approach for non-master's prepared faculty and to follow the "grow your own" model as discussed by The Advisory Board Company (2008).

The Clinical Coordinator is assigned to orient and guide the part-time clinical faculty. The coordinator is available to guide faculty towards success, assists in procuring the required textbooks, establishing clinical dates and times, scheduling orientations, coordinating facility specific requirements, mentoring the part-time staff in evaluating student work. The clinical coordinator also maintains the Desire to Learn (D2L) information platform for the clinical classes which is available to all part-time faculty members.

Part-time faculty members are hired when/if a dedication to continuing educational pursuits of a master's degree in nursing are identified. Encouragement from the college to continue their educational goals is given. Whenever possible part-time faculty are assigned enough credits to allow them the opportunity to use an educational tuition waiver within the MnSCU system.

At this time, one adjunct clinical faculty who is not working towards a master's degree is retained. This faculty member is nearing retirement and instructs a maximum of one clinical group per semester. She is retained secondary to her exceptional clinical expertise and ability to maintain exceptional rapport with the Mayo Health System.

2.2 Faculty (full and part-time) credentials meet governing organization and state requirements

The Minnesota State College and University System (MnSCU) holds a contract with the college faculty organization Minnesota State College Faculty (MSCF). The MSCF contract requires that faculty hired into unlimited positions maintain a master's degree in field. However, when areas experience extreme shortages a lesser credential may be accepted with written documentation to MSCF and MnSCU. Workforce demands and nursing educator shortages impact the hiring of master's prepared nurses for Minnesota West. Current faculty, nursing and non-nursing, credentials are found on the Minnesota West website at:

<http://www.mnwest.edu/human-resources/faculty-credentials/> . Additionally, a faculty credentialing policy manual is available via the college website at:

<http://www.mnwest.edu/fileadmin/images/facstaff/facultycred.doc> .

The Minnesota Board of Nursing (MBN) requires all nurse educators in an AD Nursing Program hold and maintain RN licensure in Minnesota (www.revisor.mn.gov/statutes/?id=148.251). Nursing faculty licenses are verified by the program director on an annual basis. The MBN requires 24 contact hours of continuing education every two years to maintain an active license. Nursing faculty meet and exceed this requirement by attending conferences, seminars, educational in-services and by taking graduate level nursing courses. This allows the faculty to keep abreast in nursing and nursing education. Faculty requirements per the MBN for professional degree programs (i.e. AD nursing programs) include a baccalaureate degree in nursing and a current Minnesota registered nurse license.

Within two years of initial employment, a ten hour course of principles and evaluation methods of student performance must be completed. Information related to this course can be located at www.nursing.umn.edu/Preceptors/home.html

2.3 Credentials of practice laboratory personnel are commensurate with their level or responsibilities.

The Minnesota West AD Nursing Program does not employ laboratory personnel or a designated laboratory technician at this time. Faculty members plan dedicated supervised practice times into scheduled lab days and make themselves available at the four clinical lab sites following conclusion of the scheduled lab day to assist and guide students as desired by students. Students may request specific times to practice in the lab setting under a faculty member's supervision. At this time, few students have taken advantage of this opportunity. The faculty of the AD program is responsible for evaluating students during performance based skills lab. The faculty and nurse administrator of the AD program will continue to review the feasibility of adding a laboratory technician position as the position is presumed beneficial.

2.4 The number and utilization of faculty (full and part-time) ensure that program outcomes are achieved.

The Minnesota West AD Nursing Program does maintain faculty to student ratios that allow for optimal teaching–learning experiences. This is achieved by meeting the MnSCU and MSCF employment contract guidelines. The definition and guidelines in the MSCF contract state that full-time faculty members may be assigned 30 credits per academic year (15 credits per semester).

Nursing faculty members at Minnesota West are assigned using the 30 credits per academic year method of assignment. The assignment includes a mix of classroom time, skills lab time, and clinical time. Skills lab courses are team taught to emphasize discipline strengths of faculty for student benefit. Assignments for part-time faculty are determined on a pro rata basis. Faculty has the opportunity to teach during the “Maymester.” These hours (credits) are in addition to the usual 30 semester credits assigned over the academic year and include additional (overload) compensation.

Classroom, lab, and clinical teaching assignments constitute the core of the faculty work assignments. The MSCF contract notes that full-time faculty members average forty (40) hours per week in carrying out professional responsibilities. Other responsibilities include professional development, service to the college, and time spent on nursing unit functions (meetings, curriculum development, evaluation, etc). Each faculty is required to post and maintain one hour of student availability (office hours) for each three credits taught to a maximum of 15 credits. Faculty teaching online maintain contact with students by email. Emails are expected to be answered within 24 hours during regular school week (Monday – Friday). Faculty teaching online are available on campus during regular office hours or by special appointment. Faculty members are not assigned formal advising duties, but do informal advising upon student request.

Standard student to instructor ratio at Minnesota West is 35:1. Classroom ratio, whether online, face to face or ITV, for the AD program is also 35:1. Clinical time for faculty is based on a 2:1 ratio of teaching time as stipulated by the MnSCU contract. MnSCU appropriates funds for clinical on a 10:1 student to faculty ratio. However, clinical facilities utilized by the AD program have stipulated that clinical groups may have no more than 8 students per instructor. The Minnesota West administration is supportive of the 8:1 ratio. Preceptorship assignments are made according to the MSCF contract: 1 credit for each 17 credits the students take.

Table 2.2 identifies full-time and part-time faculty workload details for the FY09.

Table 2.2 Full-time and Part-time Faculty Workloads – 2009-2010

Faculty	Hire %	Credits per Hire %	Work load %	Credits Assigned	% of program	Other Duties	Assigned Mentor
Ruth Van Heukelom – Nurse administrator	Nurse administrator	Nurse administrator	Nurse administrator	3.75	3.2%	Priority: nurse administrator; Teaching as able	Jeff Williamson
Diane Vangsness	100%	30	100%	26 – AD 4 – Union Representative	22.4%	Clinical Coordinator, Hospital Contact Time, Grievance Rep for MSCF. Additional credits assigned for duties of college and program	Ruth Van Heukelom,
Erika Freking	40%	12	40%	13.55	11.6%	Hospital Contact Time	Ruth Van Heukelom
Karen Wiltrout (plan to take full-time teaching role upon MSN completion – May 2010)	75%	24	74.6% - AD 16.9% - PN 3.4% - HC 5.1% - DC	20.05 – AD 5 – PN 1 – Health Core Course - Nutrition 1.5 – Division Chair	17.2%	Support of continuing education – MSN Hospital Contact Time Goal for full-time upon MSN completion	Ruth Van Heukelom
Jane Wrede	40%	12	40%	10	8.6%		Ruth Van Heukelom
Nila Gilbertson	Adjunct	Adjunct	Adjunct	5	4.3%		Diane Vangsness
Barb Nordquist	Adjunct	Adjunct	Adjunct	10	8.6%		Diane Vangsness
Gail Schnieder	Adjunct	Adjunct	Adjunct	16	13.8%		Diane Vangsness
Alyssa Zweifel	Adjunct	Adjunct	Adjunct	12	10.3%		Diane Vangsness
Total Credits:				116.35	68.2 % - MSN faculty 31.8% - non-MSN <u>After May 2010:</u> 87% MSN 13% non-MSN	*All students have MSN faculty due to clinical rotations;	

The nursing administrator is responsible for making classroom, nursing lab, and clinical teaching assignments. The full-time faculty is assigned classroom, lab, and clinical assignments of the program. The part-time faculty assist with the laboratory and clinical assignments. When possible, students are assigned according to geographical proximity for the clinical laboratory classes and clinical experiences.

Each activity and educational lesson, directly or indirectly, meets educational objectives. Objectives in the didactic course work are consistent for all students. All students meet the same clinical objectives and complete the same clinical paper assignments. However, due to the utilization of a variety of clinical sites, the same objectives may be achieved in a different sequence by cohorts of students.

Many hours of preparation and communication are necessary for students to achieve positive experiences and success in meeting educational objectives in a variety of clinical settings. A Clinical Coordinator position has been created for the Minnesota West AD Nursing Program to ensure the communication is achieved and relationships are developed and maintained. Relationships are important to the strength of the Minnesota West AD program and the Clinical Coordinator position helps the program maintain these clinical partnerships. A copy of the Clinical Coordinator job description is found in Appendix 11.5 on page 189.

Achieving educational outcomes utilizing simulation experiences has been a recent priority. The Minnesota West AD Nursing Program has utilized low fidelity simulation since the program's inception and high fidelity simulation for three years. The low fidelity simulation is utilized by all the faculty teaching in the skills lab courses. The program is meeting a goal to educate more faculty members in the high fidelity simulation. This has been accomplished through further master's education with faculty Karen Wiltout.

The faculty and nurse administrator believe the classroom learning options, skills laboratory locations, and various clinical settings provide opportunities to meet the educational outcomes and also achieve the mission/vision of accessibility within the AD Nursing Program and governing organizations.

Additional non-nurse faculty assist in meeting the knowledge base and general educational requirements of the program. Table 2.1 lists non-nurse, supporting faculty at Minnesota West.

Table 2.1 Supporting Faculty

Faculty	Teaching Area	Credential	Status
Bruce Amundson	Biology	AA Worthington Community College BA St Cloud State University BS University of Minnesota MS University of Minnesota	Full-time
Janice Eibensteiner	Biology	BS Bowling Green State University BS Minnesota State University, Mankato MS Minnesota State University, Mankato PhD University of Minnesota	Full-time
Rosalie Hayenga	Biology	BS Minnesota State University Moorhead MS St. Cloud State University	Full-time
Jeff Rain	Biology	AA Vermillion Community College BS Minnesota State University, Mankato MA Bemidji State University	Full-time
Karsten Piper	English	BA Bethel College MA Boston College	Full-time
Daniel Roos	English	AA Minnesota West Community College BA Moorhead State MA University of Wisconsin	Full-time
Alan O'Neil	English	AA Minnesota West Community College BA Augustana College MA Minnesota State University, Mankato	Full-time
Cathy Blair	Sociology	AS Minnesota West Community College BS Minnesota State University, Mankato MS Minnesota State University, Mankato	Full-time
Rebecca Potts	English/Philosophy	BS University of South Dakota MA University of South Dakota	Full-Time
Mara Van Orman	Psychology	AA Minnesota West Community College BA Augustana College MS University of Wisconsin	Full-time

2.5 Faculty (full and part-time) performance reflects scholarship and evidence-based teaching and clinical practices.

The Minnesota West AD Nursing Program is dedicated to the development of the faculty and nurse administrator through scholarship. Both faculty and the nurse administrator appreciate Ernest Boyer's views of scholarship. Rather than focusing on a narrow view of scholarship, Boyer proposed a paradigm of scholarship that includes four separate, yet interrelated parts (Billings & Halstead, 2005). In non research focused, undergraduate settings like the one at Minnesota West, Boyer's approach to scholarship is one that nursing faculty at Minnesota West finds personally and professionally relevant and satisfying. The table found in Appendix 2.1 on page 166 summarizes a variety of faculty member's activities in the area of scholarship.

Boyer (1991) states, "As a scholarly enterprise, teaching begins with what the teacher knows. Those who teach must, above all, be well informed, and steeped in the knowledge of

their fields” (p. 11). Faculty at Minnesota West strive to maintain current in the field of nursing by continuing employment in health care facilities on a part time basis, attending educational conferences, taking classes, learning from peers and students, and reviewing current nursing literature.

Boyer (1991) asserts that good teaching mandates that faculty, as scholars, are engaged in lifelong learning. Such teachers, Boyer states are able to “stimulate active, not passive, learning and encourage students to be critical, creative thinkers, with the capacity to go on learning after their college days are over” (p. 11). Faculty at Minnesota West model patterns of lifelong learning and stress the necessity of such learning when interacting with students. Boyer goes on to state, “In the end, inspired teaching keeps the flame of scholarship alive. Almost all successful academics give credit to creative teachers – those mentors who defined their work so compellingly that it became for them, a lifetime challenge” (p. 12). Minnesota West is proud of faculty members who have dedicated significant portions of their life and vast amounts of energy to teaching future generations of nurses. Nursing faculty also take great pride in the quality of critically thinking and passionate nurses who graduate from Minnesota West and go on to productive and satisfying nursing careers. Many choose to further their education. Faculty are especially proud when a graduate returns to assume a position as a nursing faculty colleague.

As part of the scholarship of teaching, faculty pride themselves on the development and continual evaluation of curriculum and learning strategies to actively involve students in their learning process. Over the years, faculty have been involved in curricular revision, development of online classes, development of exceptional clinical experiences at critical access hospitals, and the development of simulation lab experiences. Faculty recognize that our students, as Licensed Practical Nurses, bring a wealth of experience and that faculty and students have the opportunity to learn together in creative ways.

Faculty at Minnesota West believe that informal discovery is a part of all professional work. Faculty members have the opportunities to share those discoveries with local faculty colleagues, at clinical sites, and at larger meetings of state wide faculty gatherings. Van Heukelom was awarded a fellowship in the area of family nursing as she works on a doctoral project and plans to disseminate results of her work later in 2010.

Boyer, as discussed by Stull and Lantz (2005) also recognized the scholarship of application. Nursing faculty at Minnesota West recognize this as a type of scholarship in which

nursing faculty excels. We believe that nursing is an applied science. As faculty members we continually ask ourselves how theoretical knowledge can be applied in specific clinical situations, and guide and challenge students to do the same. We believe that role modeling clinical application serves as a powerful teaching strategy. Some faculty members continue to work as nurses in clinical settings in addition to their work as nurse educators. Diane Vangsness has chosen to be very active politically, with a strong voice in the Minnesota Nurses Association. Several faculty members hold added credentials in their fields.

The scholarship of integration is role modeled for students in the clinical area. As Boyer (1992) states, “We need creative people who go beyond the isolated facts, who make connections across the disciplines, who help shape a more coherent view of knowledge and a more integrated, more authentic view of life” (p. 89). Nursing faculty strive to collaborate with other disciplines whenever possible in the clinical setting and stress the imperative nature of interdisciplinary collaboration with students.

Boyer (1992) asserts that while a college may demonstrate all four types of scholarship to some degree, they should also strive to develop their own special niche. At Minnesota West, faculty values all four types of scholarship as proposed by Boyer, but is particularly proud of its scholarship of teaching.

Faculty value evidence based practice. When selecting textbooks, faculty appraises potential texts to determine their emphasis and presentation of evidence based care. Appreciation of evidence based care is also a criterion during the recruitment of faculty and clinical sites. Faculty appreciates Goode’s (2000) perspective on evidence practice and values. We concur with Goode in that systematically conducted research, both quantitative and qualitative, is the primary source of evidence. We also believe, with Goode, that non researched based sources can be used by nurses to guide and support nursing practice. Goode guides readers to the University of Colorado’s model which includes entities such as patient preferences, quality improvement data, and clinical expertise as valuable sources of evidence that should be considered when making patient care decisions. Faculty believe evidence based practice is essential in the delivery of nursing care and are dedicated to sharing that belief with the future generation of nurses.

Clark and Ramsey (2005) address the rapid expansion of distance learning options. Because of Minnesota West’s geographic size and alignment with our mission statement,

distance education continues to evolve within the Minnesota West AD Nursing Program. Faculty concurs with the assertions of Clark and Ramsey that distance learning shifts the focus from the teacher to the learner and the imperative nature of active learning. At the same time, as stated in our philosophy, we appreciate the responsibility for guiding, directing, and creating the learning environment and learning experiences.

Several faculty members have specific areas of interest in the realm of current practice and best practice related to the teaching learning experience. Van Heukelom took a sabbatical leave in 2002 to initiate development of online nursing classes. Vangness, Wiltout, and Freking continue to develop and modify Minnesota West's online offerings. Case studies serve as a core teaching-learning strategy in both NURS 2120 and NURS 2220. Although a single student is assigned to initiate each case study, all students must contribute case study development each week. According to Rowles & Brigham (2005), this type of activity serves to stimulate critical thinking, promote recall, involves active learning, encourages teamwork, and promotes reflective learning.

Karen Wiltout anticipates completion of her master's degree May, 2010. She has been working diligently in the realm of high fidelity simulation, particularly group interaction and learning in simulation as part of her master's course work. Additionally she has completed a major project addressing the orientation of new graduates into the nursing workforce.

Diane Vangness has a special interest in cultural concerns as they impact both the students we teach and the associated patients and families. She continues to modify and develop portions of NURS 2230 to reflect that interest. Diane Vangness also recently completed an informatics class at the graduate level and completed two nursing education classes during sabbatical leave in 2008.

Clinical faculty strive to maintain current practice and strongly support evidence based practice standards. Several clinical faculty members continue employment in the clinical facilities. Examples of best practices that occur during clinical experiences include: students complete Braden assessments, fall risk assessments, and pain assessments on all patients they care for (with the exception of the OB clinical). Students must demonstrate medication safety, which includes two identification checks and maintaining the five rights of medication administration. Not all clinical facilities use SBAR during patient hand offs, but the SBAR

technique is used in the simulation lab so that all students have the opportunity to learn and practice the technique.

Faculty exemplify education and learning as a life-long process as stated in the nursing philosophy. Faculty development funds are available to provide financial support for nursing faculty to pursue additional post-graduate course work, update clinical practice, attain professional certification, develop new course delivery strategies and other scholarship endeavors. Faculty members may apply for grants from the college or from specific MnSCU programs to develop innovative curriculum, to integrate technology into the classroom, and/or to develop online courses. Faculty development funds have been awarded to several nursing faculty for education and conferences. Sabbatical release is another way in which faculty can pursue scholarship activities. For example, Diane Vangsness was granted a semester of sabbatical release to take two courses in nursing education. Van Heukelom was granted a semester of release from faculty responsibilities during fall of 2009. Wiltout will complete her master's work and Van Heukelom anticipates completion of doctoral studies in May of 2010.

In addition to the scholarship occurring at the present time, two creative endeavors are planned in this arena. Faculty has chosen to commence a *Journal Club*. Although final details are not in place, plans include meeting once a month asking faculty to do a brief literature review on a topic relevant to nursing education. A second endeavor is creation of a *Think Tank*. Faculty envision this as way to discover and integrate new ideas or discuss current nursing practice concerns with community nursing participants. This off campus social gathering has potential to stir leadership interest in education, research, service-learning events, and scholarship activities in communities.

2.6 The number, utilization and credentials of non-nurse faculty and staff are sufficient to achieve the program goals and outcomes.

Support staff directly related to the AD Nursing Program are hired based on related experience. Support staff in the AD Nursing Program is part of Minnesota State Employees Union AFSCME. Support staff do not have any teaching responsibilities.

Mitz Diemer, administrative assistant, dedicates her part-time (83 percent) position to the nursing programs, sharing equal responsibility with the Worthington PN Program and AD Nursing Program. The faculty and nurse administrator feel that Ms. Diemer is a valuable asset to

the nursing program. Diemer's position does not carry a required educational credential and meets the AFSCME related work experience credential. Annual evaluation by a nurse administrator is completed. The position has been maintained and supported by the college administration and governing organization. The nurse administrator will continue to be sure all program needs are met through continued evaluation of the support staff role.

2.7 Faculty (full and part-time) are oriented and mentored in their areas of responsibilities.

Orientation is provided for new faculty specific to the college and specific to the program. College orientation is provided by the human resources department and personnel within departments at the college (i.e. Administration, Technology, student services, LARC, etc). Orientation includes, but is not limited to, information on access to email, benefits, salary, academic calendars, faculty handbooks, contractual information (MSCF), grading, catalogs, accommodation, minority affairs, and policies/procedures.

Nursing program specific orientation consists of on-campus and clinical site orientation. Faculty members complete orientations to clinical objectives and student outcomes. Orientation and mentoring is provided by the clinical coordinator and nursing administrator. Orientation to the online learning platform, Desire to Learn (D2L) is provided. Clinical site specific information, including documentation and medication administration policy, is provided by the facility. Part-time faculty are mentored to assist faculty in evaluation of student performance and with student written assignments.

Veteran faculty mentor novice faculty when teaching assignments are made. A veteran faculty member explains course objectives, course content, and shares previous challenges and successes related to the assignment. Veteran faculty members remain available for mentoring during the time of the course. Current curriculum has been in place for five years allowing well-versed faculty knowledge of each course. This knowledge allows the full-time faculty member and nurse administrator to be effective mentors to part-time faculty.

2.8 Systematic assessment of faculty (full and part-time) performance demonstrates competencies that are consistent with program goals and outcomes.

Faculty evaluations are conducted as a means to determine if program goals and outcomes are achieved. Faculty evaluations occur with the same criteria and frequency as other faculty at the college. Full-time and part-time faculty are evaluated every three years after a two-year probationary period of semesterly evaluations. The Faculty Evaluation Manual is found at:

http://www.mnwest.edu/fileadmin/images/academics/Faculty_Evaluation_Handbook.pdf. The IDEA Center evaluation tool is used for both online and in-classroom instruction evaluation of faculty. This tool can be located at www.theideacenter.org. Completion of the faculty evaluation includes the IDEA Center tool review, class/clinical observation, and a faculty evaluation conference. Additionally, the faculty must prepare a Faculty Development Plan and a Faculty Self Evaluation Form (forms located in the Faculty Evaluation Manual noted above).

2.9 Non-nurse faculty and staff performance is regularly reviewed in accordance with policies of the governing organization.

MnSCU policy identifies an annual performance review process for both the nursing support staff and nurse administrator. The nursing program support staff and nurse administrator are evaluated annually per college staff and administrator policy. The system and college's policy align and annual evaluations are completed and placed in staff files in Human Resources.

2.10 Faculty (full and part-time) engage in ongoing development and receive support in distance education modalities including instructional methods and evaluation.

Minnesota West offers extensive training and support for faculty who teach using distance education modalities. Minnesota West has a progressive Center for Teaching and Learning. Kayla Westra, Instructional Designer, ensures that faculty has access to pertinent information related to online and ITV courses. She assists faculty with pedagogy and teaching strategies for face to face, ITV and online courses.

Teaching online workshops were held during the summers of 2006, 2007, 2008 and 2009. These workshops assist faculty to align the objectives, teaching strategies/activities and

assessment/outcomes. An emphasis is placed on active learning, academic honesty, and different types of learners. Westra, in her roles of instructional designer, Center for Teaching and Learning Coordinator, and Distance Learning Division Chair is readily available to assist faculty in a group or individually.

Diane Vangsness, Clinical Coordinator, orients and assists adjunct clinical faculty every semester to D2L with emphasis on communication among students and faculty. Adjunct clinical faculty utilize the clinical assignments, grade book, email, and drop box features of D2L regularly.

STANDARD 3

Students

Student policies, development, and services support the goals and outcomes of the nursing education unit.

For a description of the Minnesota West AD Nursing Program students, see Appendix 11.5 - AD Nursing Demographic Profile.

3.1 Student policies of the nursing education unit are congruent with those of the governing organization, publicly accessible, non-discriminatory, and consistently applied; differences are justified by the goals and outcomes of the nursing education unit.

Minnesota West maintains a student handbook which contains policies and information for all students attending Minnesota West. The Minnesota West Handbook can be found at [http://www.mnwest.edu/studentserv/handbook/index .htm](http://www.mnwest.edu/studentserv/handbook/index.htm) and is updated on an annual basis. Students are directed to the Minnesota West student handbook at a general pre-college orientation. The AD Nursing Program Handbook is reviewed annually, updated as needed and can be found at <http://www.mnwest.edu/website/nurs/>. Specific nursing program policies are found in this document. The nursing student handbook is reviewed at the spring pre-nursing program orientation, and also at the fall and spring clinical orientations. Students may print either the Minnesota West Handbook or the AD Nursing Program Handbook at anytime. If nursing program policy changes are made during the school year, students are required to read the policy and then sign a statement indicating awareness of the policy change. Nursing students must pass a small quiz on the specific nursing program policies that are in the handbook at fall orientation.

Both the Minnesota West Student Handbook and the AD Nursing Student Handbook contain policies specific to complaints, grievance, and a code of conduct for student behavior, academic probation, academic suspension and academic progression. The AD Nursing Program has a more stringent grading standard than the rest of Minnesota West and this is outlined in the AD Nursing Student Handbook. The nursing handbook mirrors the student handbook when addressing policies on classroom behavior, honesty in class work, alcohol and other drug use,

harassment/discrimination, violence, and weapons. Both handbooks serve as a guide to enhance the ability for student.

The AD Nursing Student Handbook contains specific program policies in addition to those of the general college. Minnesota law requires criminal background checks for any person who provides services that involve direct contact with patients and residents at health care facilities licensed by the Minnesota Department of Health. Students are informed upon application to the nursing program of this requirement and sign an Authorization for Release Form at the fall program orientation. Faculty follow the same standards for criminal background checks and immunizations. A copy of the Authorization for Release for Students and the Authorization for Release for Faculty can be found on site in the document room. The standard contract with clinical agencies called the Memorandum of Agreement is used by all MnSCU colleges between the college and clinical facility. The Memorandum of Agreement stipulates that nursing students may need to “submit the results of a health examination to the college and, if requested, to the facility, to verify that no health problems exist which would jeopardize student or patient welfare.” A copy can be found in the document room.

The nursing program requires a health history and physical examination upon acceptance and before the student can participate in clinical activities. Immunization records, along with results from a Mantoux (or chest x-ray), and documentation of current professional CPR must be provided before the student can participate in clinical activities. Upon submission of all necessary student records, students receive a card or “Clinical Pass” to be worn to clinical and off-campus nursing student experiences in addition to a student’s identification badge. This card indicates that they have met all requirements for clinical experiences. Health records of the students are kept while the student is in the nursing program. Upon graduation, the health records are destroyed.

Student policies are important in the student learning process. Table 3.1, to follow, contains an outline of student policies and the respective location of student information regarding college policies.

Table 3.1: Student Policies with Location

Policy	Location	Comments
Non-discrimination	AD Nursing Student Handbook www.mnwest.edu/website/nurs Minnesota West Student Handbook www.mnwest.edu/studentsev/handbook/index.htm .	
Admission	AD Nursing Student Handbook Nursing application packet Minnesota West Student Handbook	Minnesota West Community and Technical College has an open door policy. The nursing program has specific program admission policies.
Academic Progression	AD Nursing Student Handbook Minnesota West Student Handbook	
Student evaluation and grading	AD Nursing Student Handbook Minnesota West Student Handbook	The faculty at college have the option of using the + or – with the use of letter grading. The AD Nursing program has established a higher percentage standard of grading than the general college.
Retention	Policies that promote retention: Minnesota West College catalog AD Nursing Student Handbook Minnesota West Student Handbook	Related policies on ESL, leave of absence, supplemental academic services, tutoring, advising services; <i>Statement on Consumer Information</i> states that the college is in compliance with Title IV Educational Amendments 1976 Higher Ed Act
Withdrawal/Dismissal	AD Nursing Student Handbook Minnesota West Student Handbook	
Graduation Requirements	AD Nursing Student Handbook Minnesota West Student Handbook	
Grievances/complaints and appeal process	AD Nursing Student Handbook Minnesota West Student Handbook	
Financial Aid	AD Nursing Student Handbook Minnesota West Student Handbook	Financial Aid policies are kept in the main financial aid office at Worthington, including Higher Education Reauthorization Act Title IV
Transfer Credit	AD Nursing Student Handbook Minnesota West Student Handbook	
Recruitment	general college handbook	Nursing program eligibility requirements are listed in the nursing program websites
Health Requirements	AD Nursing Student Handbook Minnesota West Student Handbook	
Validation of prior learning and articulation	AD Nursing Student Handbook Minnesota West Student Handbook	

Minnesota West's nursing programs share with all nursing applicants a form titled "Technical Standards for Entry-Level Nursing Programs." The form details to students the required abilities for effective performance in MnSCU nursing education programs. The standards are compatible with the scope of practice as defined by the Minnesota State Board of Nursing. The Technical Standards for Entry-Level Nursing Programs is found on site in the document room and in the AD Nursing Student Handbook.

3.2 Student services are commensurate with the needs of students pursuing or completing the associate program, including those receiving instruction using alternative methods of delivery.

Support services are available regardless of enrollment in a traditional classroom, ITV, or online setting. Support services are available on all campuses as are online financial aid and advising. The Minnesota West home page has an "Ask Jay" feature which assists in answering questions a student may have. Support services staff and qualifications are listed in Table 3.2. Financial aid and counseling services availability and responsibilities are explicated in the student handbook. The handbook is available at www.mnwest.edu/studenterv/handbook/index.htm. The financial aid support service provides valuable information online at <http://www.mnwest.edu/financial-aid/>. Academic advising is also accessible online at <http://www.mnwest.edu/student-services/advising/>.

The Minnesota West counselor and advisors, along with the advising staff, provide assistance with degree requirements, course selection, registering for an upcoming term, career educational goals, choosing course of study, the Minnesota Transfer Curriculum, scholarship information, personal concerns that interfere with academic success, information or referrals to community services and career plans. Students are assigned an advisor when beginning education at Minnesota West. Students are strongly advised to contact the assigned advisors before beginning school and periodically during the year. The advisor assists AD nursing students with the application for graduation. This planning assures that the student will complete the AD Nursing Program in a timely manner.

Advising is an essential aspect at Minnesota West. Updates and revisions to include distance learning students in advising have developed at the college based on Noel-Levitz surveys over the past few years. Advisors follow the Minnesota Transfer Curriculum (MTC).

The MTC is a core undergraduate curriculum recognized by all Minnesota higher education institutions. It was developed in the early 1990s to help students transfer among state public institutions of higher education. Ten general education goals, each with a number of specified competencies, are addressed in the MTC. Each institution is responsible to identify and assign courses to meet those goals. Faculty who helped develop the MTC determined that the specified general education competencies would lead students to assume a common membership in the world community; to demonstrate personal responsibility; to gain awareness of the diversity of the world; and to acquire basic skills of discovery, integration, application and communication. Each degree or diploma program of more than 45 credits, including the AD Nursing Program, requires completion of a specified number of MTC courses. A complete description of general education requirements is published in the college catalog. Students also receive informal advising from the nursing faculty. The advising provided by the AD Nursing faculty may address personal concerns impacting academic success, referral to the Minnesota West Counselor, or identification of resources (i.e. community counseling providers, health care professionals).

Financial aid information is found on the Minnesota West website. Financial aid offices are located on each campus. Online financial aid counseling is available to all students, including distance learning nursing students. Financial aid staff may discuss the following topics with students: information on grants, loans, scholarships, employment, application, award notification, billing information, and information for veterans. Students who receive financial aid are required to participate in financial aid counseling before receiving the aid. The student is required to have exit counseling when completing school. Students who drop below one half credit load are required to have exit counseling. The financial aid office is required by the Department of Education to keep all records of aid applicants for three years beyond the time they leave school, or in the case of a Perkins loan, three years beyond the time the loan is paid in full. Student financial records are not accessible to departments outside of the financial aid and the registrar's office.

Table 3.2 Support Services

Support Services	Administered by	Professional and Educational Qualifications	Comments
Student Services	Diane Graber	BS, MS, EdD	Administrator; oversees Student Services at the college; land-based and online.
Health	Diane Graber	BS, MS, EdD	The Blue Jay Health Watch web page was initiated by two nursing faculty with the assistance of a MnSCU Award of Excellence. A Mental Health web page is available. The page was developed by a psychology faculty member. Both pages provide information and referral services for students and the community at large.
Counseling	Jerry Jansen, Worthington Campus	AA, BA, MS	A counselor is available on the Worthington campus. Counseling services are offered to students at no cost. The counselor is experienced at personal counseling, assisting student with educational decisions, career planning, interpersonal issues, parenting concerns, family adjustments when a student returns to college, and referrals for drug, alcohol and gambling concerns. Distance educational students have access to counseling via resources listed on the Minnesota West website – Blue Jay Health Watch as well as from resources provided by advisors.
Admissions -current and pre-nursing prospective students	Vanessa Ruether, online admissions Katie Delaney, online prospects Tammy Neyens – Worthington Campus	AAS BS Diploma	Admissions are handled through central admission offices on each campus. Students are then introduced to an advisor.
Advisement	Kile Behrends, Worthington Campus Rebecca Weber, online advising Beth Bents, Worthington Campus Laurel Smiglewski, distance learning advisor, Granite Falls Campus	AA, BS, ME BS, MS BS BA	Advising is available at all campuses. Advisement services are organized so students can design an education goal or can receive ongoing academic advice regarding satisfactory progress in a program. The nursing program is based on the Worthington campus and therefore advising services other than online counseling are offered to the Associate Degree student from this locale. Nursing faculty members are available to discuss academic, professional, or personal concerns with students in informal advising. If necessary a Directed Plan of Study is developed by the student with academic concerns and approved by a nursing faculty member.

<p>Academic Placement Assistance and Accommodation / Disability Services</p>	<p>Mike Fury, Worthington Campus</p> <p>Linda Pesch, online Disabilities/PSEO/Tutoring/Retention</p>	<p>MA</p> <p>BA</p>	<p>Minnesota West provides basic skill assessment and interpretation in accordance with uniform educational testing guidelines to help students identify their strengths and limitations to encourage the development of an early support plan. All students are required to complete the Accuplacer which consists of placement tests in reading, English, and math (Student Handbook).</p> <p>Minnesota West offers alterations to the learning environment for those requesting specific accommodations.</p>
<p>Financial Aid</p>	<p>Jodi Langaard, Director of Financial Aid</p> <p>Faith Drent, Worthington Campus</p> <p>Micha Armitage, Online Financial Aid</p>	<p>BS, MA</p> <p>B.A. Business Administration</p> <p>Diploma</p>	<p>Minnesota West has a financial aid director and assistants on each campus. Online financial aid assistance counseling is provided by Ms. Armitage. Financial Aid counseling is provided to all prospective and enrolled students. Information is available on the college web site.</p>
<p>Center for Student Success/Supplemental Services</p>	<p>Lou Ann Williamson</p>	<p>BS, B.Ed, MS</p>	<p>The service is designed to help facilitate the learning process of students. Services include tutoring, peer tutoring, skills development, computer assisted instruction, resume development, job seeking skills, and instruction in specific needs such as math, spelling, reading, science, writing, and ESL.</p>
<p>Technical Tutoring Services</p>	<p>Pam Sukalski, LARC Director</p>	<p>BA, MA</p>	<p>General tutoring services are available through the LARC. The service assists the student in learning skills useful in the classroom and laboratory courses. Tutoring facilitates the student's active approach to learning. At this time there is not a professional nurse available for tutoring nursing curriculum content. However, software with nursing content is purchased and available for students from the Minnesota West nursing website and is provided free of charge to the student.</p>

3.3 Student educational and financial records are in compliance with the policies of the governing organization and state and federal guidelines.

Financial aid records are in compliance with The Higher Education Reauthorization Act Title IV. Financial aid student records are maintained for a period of five years beyond graduation from Minnesota West.

Nursing department educational records are kept in a file cabinet in a locked room. Records maintained on students by the nurse administrator, such as application materials or transcripts, are kept in a locked records section of the administration area. Records include a file on each student, clinical evaluation tools, and, if necessary, a directed plan of study. After five years, the records are shredded. Faculty must maintain grading records for five years according to Minnesota West policy and for MBN compliance.

3.4 Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained.

The financial aid department remains in compliance with the Higher Education Reauthorization Act Title IV. Appropriate documentation by the financial aid department is submitted to the governing organization and MnSCU system (as necessary) to remain compliant. The governing organization Financial Aid Manual is located at the main Financial Aid Office on the Worthington Campus.

3.4.1 A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.

Students who apply for financial assistance must receive and complete entrance counseling before receiving the aid. Entrance counseling is available online from the financial assistance web page. Information covered in entrance counseling includes the student's rights and responsibilities. No student is allowed to receive Stafford Loan Funds until the counseling is completed. All students are encouraged to speak to a financial aid specialist on campus or meet "online" with the specialist. Students leaving

Minnesota West are required to complete exit counseling if they receive Stafford Loan Funds. Students below one-half time status are also required to complete the exit counseling. The students are informed of these policies when they arrive for orientation to the college. Policies regarding financial aid are reviewed annually by the financial aid director and staff.

3.4.2 Students are informed of their ethical responsibilities regarding financial assistance.

Information regarding the student's ethical responsibilities related to financial assistance is found in the student handbook and financial aid web link from the college website. This information is brought to the student's attention during orientation to the college. Again, this information is provided in the entrance and exit counseling the college financial aid specialists provide either face to face or online.

3.5 Integrity and consistency exist for all information intended to inform the public, including the program's accreditation status and NLNAC contact information.

Program information is communicated to the public via local newspapers, the college web site and the nursing web page. At this time Minnesota West is seeking accreditation from NLNAC. Information related to accreditation will be published in the local papers as soon as notification has been granted by NLNAC. Information will also be placed on the college and nursing web page. Candidacy status achievement was shared with the college faculty and staff, AD Nursing Program advisory committee, area health care facilities, and local community newspapers.

Information related to NLNAC status, Minnesota Board of Nursing approval, general college accreditation is explicated in the AD Nursing Program Handbook and on the Minnesota West website.

3.6 Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.

The faculty and nurse administrator believe it is vital to communicate changes in program policies in a timely manner. Changes to Minnesota West AD Nursing Program policies, procedures, and program information are provided to students via email communication or at beginning of semester orientations. Changes are reflected on the nursing web page www.mnwest.edu/website/nurs. When policy changes are made during an academic year, students are informed of the policy change(s). The AD Nursing Program Handbook and policies therein are updated yearly by the faculty and nursing administrator.

AD Nursing Student Handbook review is completed by students at two points prior to beginning AD Nursing courses. At the pre-program spring orientation for incoming students (5 months prior to program start), the handbook is reviewed with emphasis placed on student requirements necessary for a fall semester admittance (clinical requirements, health and immunization records, background studies, support services, curriculum, CPR certification, etc). At fall orientation another review of the handbook is completed. Students are then required to pass a handbook quiz related to the policies of the nursing department. Students sign this quiz and it becomes part of the student file. This provides documentation on knowledge of locating the handbook online and understanding the nursing department policies. If a revision is needed during a school year the information is communicated to the students.

Students have access to websites via the D2L platform. The students' homepage for this platform contains space for announcements. The students are encouraged to check the announcement page frequently for communication updates.

3.7 Orientation to technology is provided and technological support is available to students, including those receiving instruction using alternative methods of delivery.

Students have access to the D2L platform regardless of on-campus or online/distance learning status. All campuses have wireless internet access. Students are

introduced to the platform at the pre-program spring orientation. Many students have familiarity with the platform as they may have taken an on-campus or online class from Minnesota West or another MnSCU institution. Students who are coming to Minnesota West from an outside nursing program are provided additional orientation to the D2L platform during NURS 2100. Students in this class learn how to use the discussion board, quizzing/testing feature, grade book, electronic drop box, and email. Additional chat rooms and paging features are introduced.

Most students own their own computers. Additionally, there are adequate computers available for student use on each campus. Some of these computers are located in the campus Learning and Academic Resource Center, some in computer labs, some in nursing labs, and some in computer kiosks.

Student accounts are accessible from the Minnesota West website. This feature allows students to see current grades, transcripts, Degree Audit Reports (DARs), business office status, financial aid disbursement, class schedules, and provides the ability to enroll in classes. Videos and tutorials are used to orient students to a student account.

Upon acceptance to Minnesota West, students are given a free Minnesota West email account. Instructions are given to access the email address. Technology staff and a Help Desk contact (email and phone) is given to students to assist with any questions or technology accessibility concerns. Students are informed that this is the only email account faculty will use to communicate.

Technological support is supplied to Minnesota West students by the technology department. Students are able to take laptop computers to the technology department to allow access to the wireless technology that is available on the campuses. Students with dial-up internet access are able to discuss format of attachments, software updates, and speed issues with the technology staff. An Information Technology audit was conducted during the fall of 2009 and found adequate technological support is available at Minnesota West. Minnesota West maintains an online helpdesk designed to assist students with technology needs. The helpdesk may be contacted via email or telephone. The help desk is open from 8am to 8pm, Monday through Thursday; from 8am to 4pm on Fridays; and most Sundays from noon to 6pm. Modifications in hours due to holidays,

etc. are posted at www.mnwest.edu/larc/help-desk. Students are not penalized in evaluations if problems with technology occur.

During NURS 2100 and fall orientation students are oriented to the Minnesota West LARC (Library and Academic Resource Center). The librarians demonstrate how the research databases and proxy server can be used by nursing students. Information is given to the students on how to access the server from home. By accessing the proxy server the student is able to complete library searches (i.e. via CINAHL) for quality journal articles from their home.

Many students utilize some form of electronic medical record (EMR) at clinical facilities. Students are required to document in the EMR by these facilities. Students receive orientation to the EMR from a faculty member or facility personnel. Personnel resources at the facility for EMR questions are also available to the faculty and students.

3.8 Information related to technology requirements and policies specific to distance education is clear, accurate, consistent, and accessible.

In the Minnesota West AD Nursing Program, course requirements, standards and support are the same regardless of delivery modality. Technology requirements for on campus and distance delivery options are clear. Students are informed of technology requirements at required orientations approximately five months before the program commences and again at fall orientation. The goal of the messages at orientations is for students to have clear, accurate, and consistent information about the program and technology.

Due to increased interest in online learning, two of the three didactic sections are offered online allowing more students to experience an online learning environment. The faculty and nurse administrator are aware that not every student may be successful in an online course environment. Minnesota West has developed a free online, non-credit course, *Introduction to Online Learning*, that students may take to determine if online courses are appropriate for a student's learning style. Technical /support questions can be accessed from the Minnesota West homepage through the 'online learning' link.

Distance learning students have access to the same student services such as the LARC and advising in an online format via the Minnesota West website. LARC requests

for texts and research articles may be completed via emails and online searches with the online database, CINAHL. Advising is available to distance learning nursing students. An advisor, Rebecca Weber, is dedicated to online or distance learning students for online degree preparation audits, email or chat conversations, and course enrollment review.

STANDARD 4

Curriculum

The curriculum prepares students to achieve the outcomes of the nursing education unit, including safe practice in contemporary health care environments.

The nursing curriculum is developed, evaluated, and modified by members of the nursing faculty. The faculty plan learning experiences that are varied and consistent with the program mission, philosophy, organizing framework, educational outcomes, and health care trends.

Nursing course syllabi and objectives are available for viewing in the document room on site.

4.1 The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning and program outcomes.

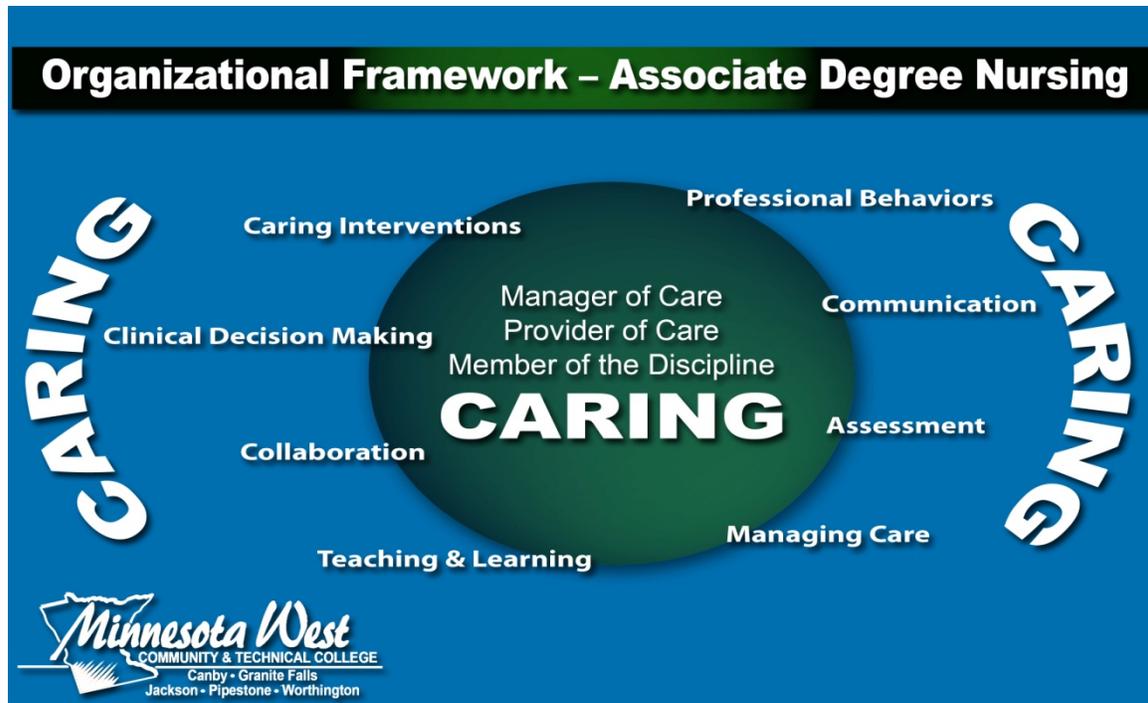
An organizational framework should reflect the concepts most valued by faculty and other identified stakeholders (Billings & Halstead, 2005). The Minnesota West AD nursing curriculum was developed around the organizational framework. The framework provides a guide that is used by faculty to establish learning outcomes, course objectives, sequence of content, and learning experiences.

The organizational framework was developed based on the *Educational Competencies for Graduates of Associate Degree Nursing Programs* (NLN, 2000) and Jean Watson's *Theory of Human Care*. The faculty believes that caring lies both at the heart of nursing and also envelopes all nursing competencies. Although not specifically part of the organizing framework, nursing faculty is dedicated to fulfilling the nursing abilities requirement as prescribed by the Minnesota Board of Nursing. Abilities are integrated into the classroom, laboratory, and clinical courses where they are taught and evaluated. The abilities evaluated in each course are listed in the syllabus and are also

included in the grading criterion of specific assignments. Examples of specific assignments, syllabi, and the “Abilities Book” can be found in the document room.

The visual depiction of our organizational framework follows. Both students and faculty find the graphic helpful in grasping the concepts included in our framework.

Organizational Framework – Visual Depiction



Caring

As previously indicated faculty adhere to Jean Watson’s *Theory of Human Care*. Concepts from Dr. Watson’s theory both lay at the heart of the curriculum and envelope the curriculum. Faculty members believe that caring is complex, can be actualized, and is the essence of nursing practice. Dr. Jean Watson’s philosophy and *Theory of Human Care* in nursing was first published in 1979 (Kozier, Erb, Berman, & Snyder, 2004). Dr. Watson “believes that the practice of caring is central to nursing; it is the unifying focus for practice” (Berman, Snyder, Kozier, & Erb, 2008, p. 47). Watson describes caring as “grounded in a set of universal human values (kindness, concern, and the love for self and others). Caring is described as the moral ideal of nursing; it involves the will to care,

the intent to care, and caring actions. Caring actions include communication, positive regard, support or physical intervention by the nurse” (Kozier, et al., 2004, p. 42).

Examples of course and lesson objectives that address caring can be found in the following table.

Table 4.1 Objectives Addressing Caring

Note that the objectives listed in this standard are preceded in the lessons with the phrase “Upon completion of this lesson, the learner will be able to:”

Objective	Course/lesson
Explore nurse-client interactions as experienced in mental health nursing	NURS 2120/lesson 1
Analyze the impact of the therapeutic environment	NURS 2120/ lesson 1
Appreciate the impact of chronic illness in the lives of clients and families	NURS 2120/lesson 3
Empathize with the lived experience of those who have mental illness and the family members of those with mental illness	NURS 2120/ lesson 8
Incorporate values of clarification and self awareness in professional practice	NURS 2230/ lessons 2, 13
Outline personal responsibilities to maintain professional competence including caring for self	NURS 2230/ lessons 2, 3, 8, 11,14
Provide a safe, supportive, protective environment for clients and families	NURS 2180
Manage a health care environment to promote a client’s self esteem, dignity, safety, and comfort	NURS 2240
Explore ways to increase client/family satisfaction	NURS 2240/ Lesson 12
Explore personal and professional stressors (caring for self) and articulate signs and symptoms of burnout	NURS 2240/ lesson 13, NURS 2230 lesson 14

Roles and competencies

Nursing faculty chose to echo the competencies as described by the NLN in *Educational Competencies of Associate Degree Nursing Programs* (NLN, 2000). Faculty believes proficiency in these competencies is essential for entry level professional nurses. While the roles of provider of care, manager of care, and member of the discipline are not emphasized by the NLN in *Educational Competencies of Associate Degree Nursing Programs* (2000), nursing faculty at Minnesota West continue to find those roles valuable in helping students envision and organize the competencies and the curriculum.

Although content is integrated and competencies are taught throughout the entire curriculum, NURS 2120, 2140, 2180, 2220 and 2280 focus on the *provider of care* role. NURS 2230 focuses on the role and competency as a *member of the discipline*. NURS

2240 focuses on the *manager of care* role, highlighting the competencies of collaboration and managing care.

The MBN abilities are integrated and met within the competencies as delineated by the NLN. A more detailed explanation of how the eight *Educational Competencies of Associate Degree Nursing Programs* (2000), and the MBN abilities are used to guide the curriculum follows. Table 4A, beginning on page 86, demonstrates in another format the manner in which course and lesson objectives drive the curriculum, and the progression from simple to more complex learning.

1. Assessment

In the role of provider of care, faculty guide learners to achieve competency in the arenas of assessment, communication, clinical decision making, caring interventions, and teaching clients and family members. A thorough and accurate assessment serves as the starting point and foundation for the nursing process. Students are guided through comprehensive data collection using Gordon's Functional Health Patterns. Faculty assist students appreciate the circular, dynamic, and flexible nature of the nursing process, and acknowledge assessment is ongoing throughout the entire episode of client care.

Students are guided to appreciate the nursing process as a client centered, continuous, and systematic process that must be validated and communicated clearly to effectively serve as the basis for planning care. Ongoing assessment includes assessing for possible complications, learning needs, referrals, and provision for direct client care.

Once the data is validated and organized, students are challenged to cluster data, identify patterns, and formulate nursing diagnoses.

Examples of objectives that address assessment are found in the following table.

Table 4.2: Assessment

Objective	Course/ lesson
Identify information and physical examination data essential to the assessment of clients throughout the surgical experience	NURS 2120/ lesson 3
Describe the assessment of suicide potential and methods of providing a safe environment for a suicidal client	NURS 2120/ lesson 8
Demonstrate selected skills necessary for accurate observation, physical assessment, and psychosocial assessment across the lifespan	NURS 2140
Contrast variance in assessment findings across the lifespan	NURS 2140
Utilize assessment and psychomotor skills learned in NURS 2140 when providing care to clients in the clinical laboratory	NURS 2180
Complete a focused, thorough assessment of a client received from post anesthesia recovery	NURS 2240 lab
Assess clients for side effects of treatment modalities and intervene appropriately	NURS 2220/ Lesson 2
Perform a rapid neurologic assessment	NURS 2220/ lesson 8
Contrast the clinical manifestations and laboratory findings present during the compensatory, progressive, and irreversible stages of shock.	NURS 2220/ lesson 10
Articulate components of the primary survey and secondary survey in an emergency situation for both pediatric and adult populations	NURS 2220/ lesson 14

Minnesota BON abilities that address assessment include:

- 6301.1800 Subpart 3A: Collect data pertaining to a patient’s physical and physiologic structure and function
- 6301.1800 Subpart 3B: Collect data pertaining to a patient’s intellectual, emotional, and social function
- 6301.1800 Subpart 3C: Collect data pertaining to a patient’s spiritual and cultural function
- 6301.1800 Subpart 3D: Interpret collected data to identify a patient’s health needs
- 6301.1900 Subpart 11A: Collect and interpret data pertaining to a family’s structure and function in relation to health needs
- 6301.1900 Subpart 12 A: Collect and interpret data pertaining to a community’s population and environment in terms of the community’s effects on an individual’s health

2. Clinical Decision Making

Faculty guide students as they continue to assess, organize data, and formulate nursing diagnoses. Students are guided to examine assumptions, validate data, and make decisions based on the data and facts, rather than opinion or intuition. Faculty challenge students to examine their decision making and problem solving strategies, providing

guidance to identify flaws and deficiencies in the process. AD nursing faculty believe that effective and deliberate clinical decisions result in appropriate caring interventions, positive outcomes, and safe, individualized care for clients and families. The clinical decision making process includes formulation of clinical judgments, utilization of assessment data to plan care, evaluation of intervention effectiveness, and modification of the plan of care as indicated by clinical outcomes.

Examples of objectives that address clinical decision making are found in the following table.

Table 4.3 Clinical Decision Making

Objective	Course/ lesson
Evaluate drug related and client related variables that affect medication action	NURS 2120/ lesson 3
Interpret laboratory data and clinical manifestations to determine the presence of a fluid or electrolyte imbalance	NURS 2120/ Lesson 10
Demonstrate evidence of careful thinking before acting	NURS 2180
Integrate knowledge of communication, growth and development, pharmacology, and nutrition when applying the nursing process	NURS 2180
Analyze common drug induced pathologies in the older adults including confusion, falls, incontinence, and immobility	NURS 2220/ lesson 7
Utilize the nursing process as a framework for decision making and priority setting	NURS 2240/ lesson 6
Implement further interventions based on continuing evaluation of the client	NURS 2240 lab
Determine factors necessary and choose interventions to provide a supportive/ protective/corrective environment when caring for clients across the lifespan and in a variety of settings	NURS 2280
Consistently demonstrate critical thinking, problem solving, and decision making skills.	NURS 2280

Faculty believe that caring may be actualized within all nursing competencies. For example, caring is essential throughout comprehensive assessments, clinical decision making, and the implementation of individualized, evidence-based interventions. Faculty believe caring supports the client’s dignity, honors uniqueness, supports family members, and assists with coping ability.

Minnesota BON abilities that address clinical decision making include:

6301.1800 Subpart 3E: Given a nursing care plan, establish a sequence of the student’s own nursing actions

6301.1800 Subpart 3F: Given nursing care plans for at least three patients, set nursing priorities for that group

6301.1800 Subpart 4C: Determine when it is necessary to use sterile technique

6301.1900 Subpart 2: Nursing care planning. Students must be evaluated for the ability to make a nursing care plan for the patient

6301.1900 Subpart 10B: Modify, if necessary, the nursing care plan for a patient

3. Caring Interventions

Students are encouraged to continually assess and utilize critical thinking to determine which interventions are most appropriate in assisting the client/family to achieve optimal wellness. Caring interventions may be identified and implemented following assessment and astute clinical decision making. Interventions may include ongoing assessment, providing for direct physical needs, referring and educating clients/families. Interventions should be individualized and supported by current evidence. Interventions may be classified as dependent, interdependent or independent. Students are encouraged to use a blend of interventions in care plans for clinical coursework.

Examples of objectives that address caring interventions are found in the following table.

Table 4.4 Competency: Caring Interventions

Objective	Course/lesson
Analyze the impact of the therapeutic environment	NURS 2120/ lesson 1
Explore crisis theory and apply the nursing process to those experiencing crisis situations	NURS 2120/ lesson 2
Describe nursing interventions to promote maternal and fetal well being during a complicated labor and delivery	NURS 2120/ lesson 13
Discuss safe, scientifically based and competent performance of independent nursing interventions in the clinical laboratory	NURS 2140
Assume the role of provider of care to provide safe, appropriate care to clients with common health care needs	NURS 2180
Prioritize dependent and independent interventions appropriate for the management of heart failure	NURS 2240
Determine factors necessary and choose interventions to provide a supportive/protective/corrective environment when caring for clients across the lifespan and in a variety of settings	NURS 2280

Minnesota BON abilities that address caring interventions include:

6301.1800. Subpart 4L: Provide for physical comfort

6301.1800. Subpart 5 J: Provide care to meet end of life concerns

6301.1800. Subpart 5E: Promote culturally competent care

6301.1900 Subpart 5A: Make a plan to assist family to achieve a health goal

4. Teaching and Learning

Faculty value client / family teaching as a critical component of professional nursing practice. As both a legal and professional obligation, teaching is an intangible component of caring. Faculty recognize the complexity of effective teaching and the multiple variables that influence learning. Faculty adhere to the principles of teaching and learning which include development of a level of trust, assessment of prior learning experiences, readiness to learn, motivation to learn, environmental and cultural influences, preferred learning style, level of literacy, physical condition and emotional state. The impact of successful teaching may influence the client’s health long after discharge. When implemented effectively, teaching can serve as a powerful and caring intervention to improve client outcomes, prevent illness, restore health or facilitate coping with chronic or even terminal illness. Teaching clients and families is integrated throughout the laboratory, theory, and clinical courses.

Examples of objectives related to client and family teaching are found in the following table.

Table 4.5 Competency: Teaching and Learning

Objective	Course/lesson
Formulate a teaching plan for an Alzheimer’s care giver	NURS 2120/ lesson 1
Develop teaching plans for the client throughout the surgical experience	NURS 2120/ lesson 3
Develop teaching plans for clients who are at risk for, or are experiencing fluid or electrolyte imbalances	NURS 2120/ lesson 10
Implement teaching plans suitable for the pregnant family	NURS 2120/ lesson 12
Apply teaching/learning concepts in meeting the educational needs of individuals and families	NURS 2140
Identify and meet teaching/learning needs of clients and families	NURS 2180
Teach the client about diagnostic studies and therapies common to those with neoplasm or potential neoplasm	NURS 2220/ lesson 2
Employ teaching as a nursing intervention to effectively care for the client experiencing pain	NURS 2220/ lesson 2
Implement teaching plans for clients with immune dysfunction to facilitate safety and infection control.	NURS 2220/ lesson 6
Design and implement teaching plans with selected clients and /or families	NURS 2280

Minnesota BON abilities that address teaching and learning include:

6301.1800 Subpart 5K: Provide for a patient’s need to know by giving, translating, or transmitting information

- 6301.1900 Subpart 4A: Promote a patient’s understanding of a health practice or of needed care through teaching
- 6301.1900 Subpart 8B: Make a teaching plan for meeting a learning need of nursing personnel
- 6301.1900 Subpart 8 D Determine if a learning need of nursing personnel has been met

5. Communication

Faculty believe that communication is an essential component of human interaction and caring. Effective communication is imperative if interdisciplinary care, collaboration, and managing care are to reach optimal outcomes. Effective communication is essential in the roles of provider of care, manager of care, and member of the discipline. Although nurses communicate almost continually, we recognize that effective communication is not simple or easy. We recognize that non-verbal behaviors support, emphasize, or contradict the verbal component of communication. Faculty appreciate the reality that multiple physiologic, cultural, and gender specific variables impact the clarity of communication. A breakdown in communication can occur in multiple places significantly impacting understanding, caring, learning, collaboration, and health.

Examples of objectives related to communication can be found in the following table.

Table 4.6 Competency: Communication

Objective	Course /lesson
Review concepts of therapeutic communication and the nuances associated with mental health nursing	NURS 2120/ lesson 1
Critique own communication skills and develop a plan to strengthen those skills	NURS 2140
Discuss nurse – patient communication as a dynamic process	NURS 2140
Discuss how nurses use communication skills in each phase of the nursing process	NURS 2140
Critique own communication skills and develop a plan to strengthen those skills	NURS 2180
Establish therapeutic, transpersonal relationships with clients and families	NURS 2180
Choose therapeutic communication techniques appropriate for the client/family experiencing a life changing situation	NURS 2200/ lesson 2
Establish a therapeutic relationships with clients/families requiring professional nursing care	NURS 2280
Demonstrates professional communication skills with health care team members	NURS 2280

Minnesota BON abilities that address communication include:

- 6301.1800 Subpart 2A: Use of verbal and nonverbal communication skills
- 6301.1800 Subpart 7A: Report orally the information necessary to facilitate the continued nursing care of a patient by any others involved

6301.1800 Subpart7B: Record the information necessary to maintain a record of nursing action, patient’s reactions to the cares, and resulting patient outcomes

6301.1800 Subpart7C: Maintain confidentiality of patient information

6301.1900 Subpart 5B: Provide necessary information to patient and other health resources

6. Professional Behaviors

Nurses have a responsibility to consistently demonstrate professional behaviors. One way nursing integrity has survived in the rapidly changing health care environment is by remaining focused on values such as high quality, individualized care.

Faculty believe that nurses must commit to lifelong learning. Faculty strive to model lifelong learning for students by continuing their own education, subscribing to nursing journals, and participating in both formal and informal learning experiences.

Faculty believe that nurses and nursing students must possess a clear understanding of ethical and legal issues. Nurses and students must demonstrate accountability as they work with clients and other members of the health care team.

Faculty value standards of professional nursing practice and appreciate the direction they afford. Faculty strive to model professional behaviors by participation in professional organizations and encourage students to do the same.

Examples of objectives addressing professional behaviors are included in the following table.

Table 4.7 Competency: Professional Behaviors

Objective	Course /lesson
Practice within an ethical and legal framework	NURS 2180
Demonstrate behaviors reflecting standards of professional practice	NURS 2180
Outline personal responsibilities to maintain professional competence including caring for self.	NURS 2230
Commit oneself to ethical and legal standards of professional nursing practice	NURS 2230/ Lessons 5, 14
Explain the importance of various nursing organizations and their impact on professional nursing	NURS 2230/ Lessons 7, 12
Describe ways the nurse can participate in research activities and incorporate findings into practice	NURS 2230/ lesson 13
Articulate an understanding of the diverse roles responsibilities and societal expectations for the professional nurse.	NURS 2230/ lessons 4, 11
Appraise own personal and professional responsibilities to maintain competence	NURS 2240/ lesson 7

Describe responsibilities of the professional nurse related to quality improvement programs	NURS 2240/ lesson 8
Demonstrate an understanding of and practice within the scope of practice of the registered nurse.	NURS 2280

Minnesota BON abilities that address professional behaviors include:

6301.1800 Subpart 2C: Maintain professional boundaries in nurse-patient relationships

6301:1800 Subpart 8: Determine the individual’s legal accountability for the scope of nursing practice.

7. Collaboration

Nurses are often responsible for managing client care and must typically work with others to achieve desired outcomes. Collaboration is fostered with the client, family, nursing peers, and members of the health care team. Faculty recognize that achieving optimal outcomes requires open communication and sharing of knowledge, expertise, and responsibility among members of the health care team. As advocates of client centered care, faculty strongly believe that the client should be central to all collaborative efforts. Because the nurse typically has the most direct contact with the client, it is a natural consequence that the nurse serves as a connecting link between the client and other members of the health care team. Faculty believe it is imperative that members of the health care team respect and value what each discipline has to offer in achieving optimal outcomes for the clients.

Examples of objectives that address collaboration are found in the following table.

Table 4.8 Competency: Collaboration

Objectives	Course/ lesson
Work effectively as part of the health care team	NURS 2180
Participate as a member of the interdisciplinary team to facilitate continuity and quality in client care	NURS 2240
Manage a health care environment to promote a client’s self esteem, dignity, safety and comfort	NURS 2240
Promote effective team relationships	NURS 2240
Explore the complexity of communication in the workplace	NURS 2240/ lesson 3
Examine the dynamics of work groups and interdisciplinary teams	NURS 2240/ lesson 9
Discuss behaviors that help to build efficient work teams	NURS 2240/ lesson 9

Discuss behaviors that lead to disruption of the work team	NURS 2240/ lesson 9
Demonstrate effective communication techniques to facilitate team building	NURS 2240/ lesson 9
Appreciate the necessity of interdisciplinary collaboration to facilitate quality client care and satisfaction	NURS 2240/ lesson 12
Discuss pitfalls that may be associated with interdisciplinary collaboration and develop ways to minimize problems	NURS 2240/ lesson 12

Minnesota BON abilities that address collaboration include:

6301.1900 Subpart 5A: Identify available health resources to match a patient’s needs and desires

6301.1900 Subpart 5B: Provide necessary information to patient and health resources

8. Managing Care

Managing care necessitates the most effective use of human, monetary, and physical resources to achieve optimal client outcomes. Effective management requires professional communication, effective team building, and assertiveness skills. As managers of care, nurses are required to prioritize nursing activities, delegate, teach, and supervise unlicensed health care personnel. It is a nursing responsibility to serve as a client advocate by assisting the client and support persons to access available resources and services. Professional nurses must be prepared to assume management of care for groups of diverse clients who may be cared for by a diverse group of staff members. Skills in conflict resolution, effective decision making, and maintaining a safe environment are needed.

Examples of objectives addressing management of care are found in the following table.

Table 4.9 Competency: Managing Care

Objective	Course/lesson
Prioritize, organize, and deliver care safely and effectively	NURS 2180
Demonstrate skills to effectively function in the role of manager of care	NURS 2240
Incorporate theoretical knowledge of delegation and supervision into the professional nursing role of manager of care	NURS 2240
Prioritize nursing activities safely with increasing effectiveness	NURS 2240
Differentiate between leadership and management	NURS 2240/ lesson 1
Develop a plan for building personal leadership style and assessing effectiveness as a leader	NURS 2240/ lesson 1
Apply principles of delegation to specific situations	NURS 2240/ lesson 4
Explore communication skills essential for effective supervision	NURS 2240/ lesson 5

Utilize the nursing process as a framework for decision making and priority setting	NURS 2240/ lesson 6
Discuss the skills that a change agent needs	NURS 2240/ lesson 10
Analyze conflict management techniques and outcomes	NURS 2240/ lesson 11
Prioritize and organize care efficiently and effectively in complex patient/family situations.	NURS 2280

Minnesota BON abilities that address managing care include:

6301.1900 Subpart 3F: Given nursing care plans for at least three patients set nursing priorities for that group

6301.1900 Subpart 6A: Determine which nursing actions are to be delegate at the level of nursing personnel to whom they should be delegate

6301.1900 Subpart 7C: Evaluate the care given by nursing personnel

4.2 The curriculum is developed by the faculty and regularly reviewed for rigor and currency.

Faculty are responsible for developing, evaluating and modifying the curriculum. Faculty meet regularly to assess progress in meeting both student outcomes and program outcomes. For example, HESI exit exams in both 2007 and 2008 indicated that a significant number of students had difficulty with concepts related to pharmacology. As a result, faculty revised the curriculum with integration of more pharmacology into each lesson. Faculty are astutely aware that simply adding more content is not an effective teaching methodology. Rather, faculty strive to assist students integrate new concepts with ones already understood to facilitate synthesis and application of new knowledge.

As another example, three years ago, upon evaluation of NCLEX pass rate, faculty discovered that nearly every student who was not successful on the first attempt of the NCLEX exam earned an average of between 76 percent and 80 percent in NURS 2120 and NURS 2220. As a result, faculty raised the score required to pass these courses to 80 percent from the previous passing score of 76 percent. The objective was that students would concentrate more effectively throughout the entire academic year to be better prepared to take the licensing exam at the end of the program.

Faculty members are committed methods of student evaluation that will lead to safe nursing practice and facilitate student success on licensure exams. During the creation of quizzes and exams, faculty members first list the topics and objectives the quiz or exam will cover. Next, they determine the emphasis each topic or objective will

have in terms of questions or percentage points. Faculty members then determine the level of complexity of difficulty each question will have. Because faculty members appreciate the fact that the practice of nursing requires application of knowledge, the majority of quiz or exam items selected are at the analysis or higher level of cognitive ability. Although faculty members do utilize test banks that accompany required texts, these are not relied on as a sole source of multiple choice questions. Questions from NCLEX board review books, as well as questions written by faculty members are utilized. In addition, questions are edited by faculty and peer review is sought prior to administering the test. Faculty consciously avoid “teaching to the test” as they recognize that such practices do not reflect student ability to think critically nor do those practices help students with licensure exams or actual practice.

Faculty use primarily multiple choice questions when constructing exams because NCLEX utilizes primarily multiple choice questions. As noted earlier, the majority of questions are written at the levels of analysis, synthesis, and evaluation. However, other methods of evaluation such as multiple response questions, scores on case studies, math calculations, annotated bibliographies, journaling, and discussions are used to determine the grade a student earns in course that is primarily didactic.

Before major exams, students are informed about the approximate number of questions that will address various content areas. They are also told to expect a high percentage of questions will be at the application, analysis, synthesis, and evaluation level of difficulty.

Following each quiz and test, an analysis is done. As a result of this analysis, questions that discriminate learners from non learners are retained to utilize in future exams, while questions that do not discriminate well are revised or discarded. Every effort is made to keep major exams secure.

Faculty recognize that review for currency must start with careful appraisal of our own teaching methodologies and the creation of positive, supportive learning environments. As mentioned earlier, high fidelity simulation has been utilized at Minnesota West for the last three years. Karen Wiltrout is continuing to develop the high fidelity simulation labs more fully as part of her master’s work. Concept mapping was piloted during the spring of 2009. Positive feedback was received from students along

with some suggestions for modification. Concept mapping will be piloted again during the spring of 2010.

Faculty are committed to providing learning experiences that move the student from a passive to a more active role in the learning process. Many students come to us with pedagogical learning characteristics, looking for faculty to identify what should be learned, and to provide students with the information and processes to learn it. Faculty attempt to move students away from a primarily pedagogical context, treating students as adults responsible for their own learning.

Nursing faculty realize that research supports a shift from teaching ‘content’ to modeling and developing learning experiences that develop process skills, collaboration and shared decision making. Several of the teaching strategies faculty employ have been implemented in recent years as a result of these research findings. Simulation in NURS 2240 mandates active participation, collaboration with peers, and shared decision making. Allowing students to make mistakes during a simulated client situation facilitates retention of critical safety concepts. Student evaluations indicate simulation provides effective learning experiences.

Research indicates that concept mapping requires students to be active participants in learning. This process necessitates the use of critical thinking, organization of information, analysis of information, and application of previously learned knowledge (Caputi & Blach, 2008). This process may prove particularly effective as faculty seek to help licensed practical nurses add new information to their already existing knowledge base. New concepts take on meaning when they are associated with already known concepts (Caputi & Blach).

Faculty appreciate the variety of preferred learning styles students bring to the program. Accordingly, faculty employ a variety of teaching strategies to help meet various learning needs and preferences. Faculty finds that the more mature learners become, the more they enjoy the challenge of a variety of teaching strategies described in the following table.

Table 4.10 Teaching Strategies utilized by Minnesota West AD Faculty

Teaching Strategy	Rationale
Life span approach	Allows students to compare and contrast facts and principles between various

	stages of life.
Simple to complex content progression	Once learners have understood a concept or accomplished a task, self confidence in their ability to learn increases. Learning is facilitated when material is organized in a logical manner. The learner assimilates new information with previous learning to develop a new understanding.
Computer assisted instruction	The majority of required text books include a CD Rom. Students are encouraged to use these resources with an emphasis on concepts that they find difficult to grasp. Supplemental computer assisted instruction materials are available in the LARC.
Nursing journals available in the LARC or online	Students are encouraged to explore reliable, evidence based nursing articles to supplement required readings. LARC staff orients new students to resources that are available.
<i>Soft ware for Nurses</i>	This resource is available to all nursing students and can be accessed online through the Minnesota West website. This resource affords students the opportunity to work through case studies, perform nursing calculations, and practice test taking skills at their own pace.
Variety of DVDs and videos	These resources are especially valuable for students who are primarily visual learners.
Specific web site assignments	Students are assigned <i>specific</i> internet sites to explore when the site will assist students learn, particularly in the affective domain. For example, http://www.visionsimulator.com/default.asp helps students appreciate some of the challenges visually impaired clients experience.
Lecture in an andragogical context	Lecture may be the best way to disseminate certain types of information. Faculty attempts to intersperse periods of lecture with other teaching methodologies such as lecture-discussion, lecture –practice, question and answer segments or asking students “What is the most difficult point?”
Case studies	These are used extensively in the online and face to face sections of NURS 2120 and 2220. One student is assigned to complete a case study and peers are required to add something relevant. Case studies are designed to facilitate active learning, application and synthesis of content, and peer to peer interaction. Case studies are assigned in the face to face NURS 2120 section. Students present the case studies during class and are required to post them in the D2L discussion board.
Demonstration/return demonstration	This strategy is used primarily in the laboratory courses, NURS 2140 and 2240. Psychomotor skills may be learned most effectively in this manner.
Threaded discussion	Utilized in online courses. Requires participation, discussion, application and synthesis of content.
‘wrap ups’	Wrap ups are authored by instructors in NURS 2120, 2220, and 2240 to include critical points that may have been missed by students and to emphasize critical concepts.
Link for questions	Each lesson in NURS 2120, 2220 and 2240 includes a link where students are encouraged to ask questions about content they find difficult. Students are encouraged to respond to their peers with the instructor wrapping up the discussion.
Posted reading guides	Used primarily in online sections of NURS 2120 and 2220. Assists students in completing reading assignments by emphasizing important points and clarifying more difficult concepts.
Quiz question rationale	Following completion of each online quiz in NURS 2120 and 2220, rationale for select questions is emailed to all students. This assists them in evaluating their own decision making and refines test taking skills.
Simulation	NURS 2240 uses simulation extensively as a teaching strategy. Students are required to work through realistic clinical situations with an overlay of both professional and therapeutic communication, delegation and supervision.
Post clinical discussions	At the conclusion of the clinical day, students in the clinical group meet to discuss a wide variety of issues, ask questions and clarify concepts. Along with concepts related to nursing process and patient care, affective learning is emphasized.
Concept mapping	This was piloted by one faculty member during Spring 2009 labs. This is supported in the literature as an exceptional strategy that promotes critical thinking, synthesis of multiple concepts, integration of previously learned concepts with new information, and retention of knowledge.

	This will be revised and piloted again during Spring 2010 labs. If objectives are met and students find this a valuable learning strategy, expansion throughout more of the curriculum will be considered.
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Faculty believe the readiness of adult learners depends on previous learning experiences and confidence in ability to learn. The nursing curriculum, therefore, progresses from known to unknown, and from simple to complex. Throughout the nursing curriculum, course content builds on concepts learned in practical nursing programs. Research indicates that retention improves when learners can integrate new information with already existing knowledge (Caputi & Blach, 2008).

Faculty place content in the fall courses that must be grasped prior to building upon that knowledge in subsequent courses. For example, fluids and electrolytes are studied in the fall semester so that students can build on that knowledge as they study renal function in the spring semester.

Although NURS 2240 focuses purposefully on management of care, a significant objective involves integrating common, yet complex client situations with the overlay of prioritization, professional communication, supervision, and delegation. Simulated experiences place students in charge of clients with complex health care needs affording the opportunity to synthesize information about specific illnesses, pharmacology, and diagnostics with a manager of care focus.

As society changes, nursing practice and the role of associate degree nursing graduates evolves. As the American society continues to age, the body of knowledge specific to caring for older adults continues to grow. Recognizing the role that associate degree graduates have in caring for older adults, an increased emphasis is placed on gerontologic concepts and the care of older adults with chronic illness. Additionally, in the effort to remain current, an increased emphasis is placed on health promotion, cultural diversity, and alternative and complementary therapies.

In today's environment of cost containment and nursing shortages, faculty believe all professional nurses should possess a working knowledge of delegation and supervision. Faculty believe graduates should be able to identify circumstances where delegation is appropriate, delegate to the appropriate personnel, provide the delegate with appropriate direction and communication, and provide proper supervision in accordance

with the state nurse practice act. Delegation and supervision theory has been taught for many years, but recently increased application and practice of these skills has been incorporated into the NURS 2240 simulation laboratory.

As technology within healthcare continues to develop rapidly, efforts are made to expose students to current technology, particularly in the clinical setting. The majority of clinical sites utilize electronic medical records. Faculty members Vangness and Wiltrout recently completed *Nursing Informatics*, a graduate course offered by Metropolitan State University, to remain current in the realm of nursing informatics. The Minnesota E-health Initiative is strongly encouraging nursing student utilization of electronic health records at clinical sites across the state.

Minnesota West's AD Nursing advisory board has emphasized the need for new graduates to quickly adapt to changing technology in the arenas of electronic records and also the technology associated with client care. Consequently, efforts are made to expose students to as many current technologies as possible.

Minnesota West's AD Nursing Program advisory board also assists faculty to identify current concerns related to nursing in our local area. Advisory board members from acute care, long term care, clinics, and community health settings emphasize the need for graduates to possess competent technical skills, skills in working as part of a team, and the ability to plan for comprehensive care. Thus, a majority of clinical experiences occur in the acute care setting. However, faculty believe that students are best prepared to practice in our rural setting by participating in a broader range of clinical experiences. Some of the additional clinical experiences students participate in will be addressed later in this self-study.

4.3 The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.

Faculty believe that every teaching and learning opportunity and activity must be goal-oriented and directed toward the achievement of student learning outcomes. Student learning objectives are organized around the Educational Competencies for

Associate Degree Nurses as prescribed by the NLN (2000). Faculty believe that caring, as described by Jean Watson lies at the heart and encompasses all educational competencies. Objectives become increasingly complex as the student progresses through the curriculum. The following table, Table 4A - Combined Curriculum and Organizational Framework, was developed to demonstrate the manner in which course and lesson objectives serve to meet educational objectives. The table also demonstrates progression from simple to complex learning. Finally, the table demonstrates how the concept of caring is integrated throughout the curriculum.

Table 4A Combined Curriculum and Organizational Framework

Provider of Care

Assessment - Collect, analyze, and synthesize relevant data for the purposes of appraising the client's health status and planning care							
Components	NURS 2120 Semester 1	NURS 2140 Semester 1	NURS 2180 Semester 1	NURS 2220 Semester 2	NURS 2230 Semester 2	NURS 2240 Semester 2	NURS 2280 Semester 2
Assessment – Course objectives	Examine elements of the nursing process in relationship to professional nursing practice	Critique own interview and physical assessment skills	Utilize assessment and psychomotor skills learned in NURS 2140 when providing care to clients in the clinical laboratory	Apply the nursing process when providing care for clients with complex health care needs across the lifespan	Application emphasis in NURS 2280	Participate as a member of the interdisciplinary team in order to facilitate continuity and quality in client care	Assume the role of the professional nurse to assess diverse clients holistically and use creative problem solving to deliver safe, appropriate care for clients with health care needs
Assessment Lesson objectives/ or clinical grading criteria	Identify information and physical examination data essential to the assessment of clients throughout the surgical experience	Describe elements of a nursing history and physical and psychosocial assessments	Assessment data is collected and recorded according to Gordon's Functional Health Patterns	Contrast the clinical manifestations and laboratory findings present during the compensatory, progressive, and irreversible stages of shock	Application emphasis in NURS 2280	Complete a focused physical assessment and health history of a client with congestive heart failure	Completes thorough and appropriate assessments of clients with diverse needs. Interprets significant findings and relates to the client situation. Focuses further assessment in areas of significance
Caring in the context of assessment	Apply the nursing process when caring for a family that is experiencing grief or loss related to the childbearing experience	Explain the significance of selected physical and psychosocial assessment findings	Provide a safe, supportive, protective environment for clients and families	Recognize and appreciate the impact one's own feelings and attitudes towards clients with mental health problems could impact care.	Incorporate values of clarification and self awareness in professional practice	Explore personal and professional stressors (caring for self) and articulate signs and symptoms of burnout	Exhibits caring and respect for the inherent worth and dignity of clients and families. Demonstrates cultural sensitivity

Communication - Utilize effective communication skills that demonstrate caring, compassion, and cultural awareness							
	NURS 2120 Semester 1	NURS 2140 Semester 1	NURS 2180 Semester 1	NURS 2220 Semester 2	NURS 2230 Semester 2	NURS 2240 Semester 2	NURS 2280 Semester 2
Communication Course objectives	Apply elements of the nursing process in providing care for clients with predictable health care needs across the lifespan	Critique own communication skills and develop a plan to strengthen own communication skills	Communicates effectively with members of the health care team	Examine factors necessary to provide a supportive/protective/corrective environment when caring for clients	Incorporate values of clarification and self awareness into professional practice	Communicate effectively with diverse and interdisciplinary team members	Establish a therapeutic relationship with clients/ families requiring professional nursing care
Communication Lesson objectives/ clinical grading criteria	Review concepts of therapeutic communication and the nuances associated with mental health nursing	Discuss nurse-patient communication as a dynamic process	Explore three communication techniques that were effective in communicating with your client. Why do you believe they were effective?	Choose therapeutic communication techniques appropriate for the client/family experiencing a life changing situation	Incorporate values of clarification and self awareness into professional practice	(In simulation lab) Treat family members like real persons – explain, communicate, comfort.	Demonstrates professional communication skills with health care team members
Caring in the context of communication	Explore nurse client interactions as experienced in mental health nursing	Recorded own thoughts and feelings as the interaction developed. Include possible meanings of the client's communications	Demonstrates an awareness of and sensitivity to the effect of self on others and others on self	Choose therapeutic communication techniques appropriate for the client/family experiencing a life changing situation	Incorporate values of clarification and self awareness into professional practice	Treat family members like real persons – explain, communicate, comfort. (In simulation lab)	Establishes and maintains rapport with clients and families and shows a desire for involvement

Clinical decision making - Use critical thinking that incorporates an attitude of inquiry, uses evidence based facts, principles, and theories, tolerates ambiguity, and involves a rational creative decision making process that continually reflects, evaluates and questions as the foundation for clinical decision making							
	NURS 2120 Semester 1	NURS 2140 Semester 1	NURS 2180 Semester 1	NURS 2220 Semester 2	NURS 2230 Semester 2	NURS 2240 Semester 2	NURS 2280 Semester 2
Decision making Course objectives	Apply concepts related to fluid balance/ electrolyte balance and acid base balance to clients with health care needs	Discuss safe, scientifically based and competent performance of independent nursing interventions in the clinical laboratory	Demonstrate evidence of careful thinking before acting	Apply the nursing process when providing care for clients with complex health care needs across the lifespan	Describe ways the nurse can participate in research activities and incorporate research findings into practice	Prioritize nursing activities safely with increasing effectiveness	Demonstrate synthesis of nursing concepts to analyze complex health situations and utilize effective clinical decision making
Decision making Lesson objectives/ clinical grading criteria	Evaluate drug related and client related variables that affect medication action	Apply the nursing process when caring for clients receiving blood, including those with untoward reactions to blood products	Integrates knowledge of communication, growth and development, pharmacology and nursing process when applying the nursing process	Analyze common drug induced pathologies in the older adult, including confusion, falls, incontinence, and immobility	Discuss how personal experiences, values, and attitudes influence our perceptions and behaviors	Utilize the nursing process as a framework for decision making and priority setting	Consistently demonstrates critical thinking, problem solving and decision making skills
Decision making in the context of caring	Analyze the impact of the therapeutic environment	Explore a variety of independent nursing interventions	Provide a safe, supportive, protective environment for clients and families	Outline nursing interventions that promote optimal family adjustment to special needs	Discuss how personal experiences, values, and attitudes influence our perceptions and behaviors	Recognize and address the impact of chronic mental illness on physical illness	Demonstrate synthesis of nursing concepts to analyze complex health situations and utilize effective clinical decision making

Caring interventions - Utilize nursing behaviors and actions that assist clients in meeting their needs. Employ caring interventions that are nurturing, protective, compassionate, person-centered, and which create an environment of hope and trust, while respecting values, beliefs, and lifestyles.							
	NURS 2120 Semester 1	NURS 2140 Semester 1	NURS 2180 Semester 1	NURS 2220 Semester 2	NURS 2230 Semester 2	NURS 2240 Semester 2	NURS 2280 Semester 2
Nursing intervention Course objectives	Apply elements of the nursing process in providing care for clients with predictable health care needs across the lifespan	Differentiate between independent, interdependent nursing interventions and delegated medical interventions	Assume the role of provider of care to deliver safe, appropriate care to clients with common human needs	Explore interventions that promote health across the lifespan	Describe and explore implications associated with complementary and alternative therapies	Manage a health care environment to promote a client's self esteem, dignity, safety, and comfort	Determine factors necessary and choose interventions to provide a supportive/ protective/ corrective environment when caring for clients across the lifespan in a variety of settings
Nursing intervention Lesson objectives/ grading criteria	Explore non pharmacological strategies to enhance relaxation and decrease discomfort during labor	Describe principles and nursing interventions related to selected nutritional therapies across the lifespan	Nursing interventions are appropriately prioritized	Recognize and manage potential complications the diabetic client may experience	Describe both internal and external workplace strategies that support efficient and effective quality client care	Recognize the development of potential complications and intervene appropriately	Gives evidence of participation with the client/family for implementing interventions
Teaching and learning – promotes, maintains, and /or restores health through teaching/learning processes that are implemented in collaboration with the client, significant support person(s), and other members of the health care team.							
Nursing intervention in Teaching and learning Course objectives	NURS 2120 Semester 1	NURS 2140 Semester 1	NURS 2180 Semester 1	NURS 2220 Semester 2	NURS 2230 Semester 2	NURS 2240 Semester 2	NURS 2280 Semester 2
Define health promotion and propose nursing interventions that promote health in clients across the lifespan	Apply teaching and learning concepts in meeting the educational needs of individuals and families	Identify and meet teaching/learning needs of clients and families	Employ teaching as a nursing intervention with a focus on client/family care	Display an inquiring attitude and willingness to pursue lifelong learning	Incorporate a client's self esteem, dignity, safety, and comfort/learning principles to promote nursing staff competence and development	Design and implement teaching plans with selected clients and / or families	

Teaching and learning Lesson objectives	Develop teaching plans for the client throughout the surgical experiences	Apply teaching learning concepts in meeting the educational needs of individuals and families	Identify and meet teaching/learning needs of clients and families	Employ teaching as a nursing intervention to effectively care for the client experiencing pain	Develop a plan for lifelong learning	Apply principles of teaching and learning to informal and formal education of staff	Design and implement teaching plans with selected clients and /or families
Teaching and learning in the context of caring	Explore ways that nurses can promote health and improve quality of life in those experiencing or at risk for cardiac dysfunction	Analyze the impact of cultural differences in teaching/learning situations	Identify and meet teaching/learning needs of clients and families	Employ teaching as a nursing intervention to effectively care for the client experiencing pain	Plan for the continued process of self awareness and self growth in oneself	Apply principles of teaching and learning to informal and formal education of staff	Design and implement teaching plans with selected clients and /or families

Member of the Discipline

Adheres to standards of professional practice, is accountable for her/his own actions and behaviors, and practices within legal, ethical and regulatory frameworks. Professional behaviors also include a concern for others, as demonstrated by caring, valuing the profession of nursing, and participating in ongoing professional development							
	NURS 2120 Semester 1	NURS 2140 Semester 1	NURS 2180 Semester 1	NURS 2220 Semester 2	NURS 2230 Semester 2	NURS 2240 Semester 2	NURS 2280 Semester 2
Professional behaviors Course objectives	Examine elements of the nursing process in relationship to	Document health history findings, assessment findings, intravenous and nutritional interventions in an	Demonstrate behaviors reflecting standards of professional practice	Appreciate the impact of acute and chronic illness and intervene to support clients	Commit oneself to ethical and legal standards of professional nursing practice	Demonstrates skills to effectively function in the role of manager of care	Demonstrate an understanding of and practice within the scope of practice of the registered nurse

	professional nursing practice	accurate and professional manner		and families			
Professional behaviors Lesson objectives/ Grading criteria	Explore ethical issues particular to mental health nursing	Identify and address ethnic and cultural variation in the realm of respiratory dysfunction	Practices within an ethical and legal framework	Recognize how attitudes of the nurse may impact the client in pain and appropriate pain management	Articulate an understanding of the diverse roles, responsibilities and societal expectations of the professional nurse	Appraise own personal and professional responsibilities to maintain competence	Demonstrate an understanding of and practice within the scope of practice of the registered nurse
Professional behaviors within the context of caring	Discuss legal and ethical issues related to the abuse of substances	Critique own communication skills and develop a plan to strengthen own communication skills	Demonstrates behaviors reflecting standards of professional practice.	Discuss the concept of hospice and apply the nursing process to clients at the end of life	Outline personal responsibilities to maintain professional competence including caring for self	Explore personal and professional stressors (caring for self) and articulate signs and symptoms of burnout	Consistently places the client's welfare first: priority of action reflects client/family needs

Manager of Care

Collaboration - collaborate with the client, significant support person(s), peers, other members of the health team, and community agencies to bring about solutions that balance differing needs, values, and motivations for the purpose of achieving positive client outcomes							
	NURS 2120 Semester 1	NURS 2140 Semester 1	NURS 2180 Semester 1	NURS 2220 Semester 2	NURS 2230 Semester 2	NURS 2240 Semester 2	NURS 2280 Semester 2
Collaboration Course objectives	Apply elements of the nursing process in providing care for clients with predictable health care needs across	Differentiate between independent, interdependent nursing interventions and delegated	Work effectively as part of the health care team	Explore interventions that promote health across the lifespan	Incorporate values of clarification and self awareness into professional practice	Participate as a member of the interdisciplinary team in order to facilitate continuity and quality in client	Demonstrates professional communication skills with health care team members

	the lifespan	medical interventions				care	
Collaboration Lesson objectives	Explore collaborative problems common to those with musculoskeletal dysfunction or injury	Application in NURS 2180	Uses professional & therapeutic communication skills when reporting data and concerns pertinent to clients	Apply the nursing process for a client who might benefit from a rehabilitation program	Incorporate values of clarification and self awareness into professional practice	Discuss behaviors that help to build efficient work teams	Works professionally, legally, and ethically as part of the health care team
Collaboration within the context of caring	Application in NURS 2180	Application in NURS 2180	Considers the aesthetic quality of the client's environment	Discuss the concept of hospice and apply the nursing process to clients at the end of life	Incorporate values of clarification and self awareness into professional practice	Appreciate the necessity of interdisciplinary collaboration to facilitate quality client care and satisfaction	Recognizes and is able to explore ethical dilemmas in a non judgmental manner
Manager of Care – assists the client to move toward positive outcomes in a cost effective manner, to transition within and across healthcare settings and access resources							
	NURS 2120 Semester 1	NURS 2140 Semester 1	NURS 2180 Semester 1	NURS 2220 Semester 2	NURS 2230 Semester 2	NURS 2240 Semester 2	NURS 2280 Semester 2
Manager of Care Course objectives	Emphasis and application in semester 2; NURS 2240 and NURS 2280	Explore community resources for health care	Work effectively as part of the health care team	Appreciate the impact of acute and chronic illness and intervene to support clients and families	Incorporate values of clarification and self awareness into professional practice	Demonstrate skills to effectively function in the role of manager of care	Prioritize and organize care efficiently and effectively in complex patient/family situations

Manager of Care Lesson objectives	Emphasis and application in semester 2; NURS 2240 and NURS 2280	Emphasis and application in semester 2; NURS 2240 and NURS 2280	Prioritize, organize, and deliver care safely and effectively	Prioritize care for clients experiencing a variety of burn injuries	Integrate the value of time management as a self management process	Value the complexity of decision making related to delegation	Determine factors necessary and choose interventions to provide a supportive/ protective/ corrective/ environment when caring for clients across the lifespan in a variety of settings
Managing care within the context of caring	Emphasis and application in semester 2; NURS 2240 and NURS 2280	Emphasis and application in semester 2; NURS 2240 and NURS 2280	Provides a safe, supportive, and protective environment	Employ teaching as a nursing intervention to care for clients/families	Outline personal responsibilities to maintain professional competence including caring for self	Demonstrate effective communication techniques to facilitate team building	Consistently places the client's welfare first; priority of action reflects client/family needs

Evaluation is based on attainment of criteria set forth in the educational objectives and grading criteria. Faculty believe grading criteria must be clear and relevant to students to facilitate optimal learning. Grading criteria for each course and each assignment are distributed to students prior to the assignment. Students are encouraged to ask questions about the assignment at any time in an effort to facilitate student understanding and successful achievement of desired outcomes.

Students are evaluated using a variety of strategies to provide a more complete picture of their strengths and areas for focused growth. Examples of evaluation and grading criteria are included in course syllabi and assignments and can be found in the document room.

4.4 The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national or global perspectives.

Over the last fifteen years, Southwest Minnesota has experienced a rapid change in cultural and social demographics. The ever-changing community demographic profile will require graduate nurses to possess the ability to deliver culturally competent and sensitive care to diverse population groups, regardless of setting. Cultural implications are integrated into lessons wherever applicable. Faculty believe culture encompasses far more than ethnic origin and race, embracing the concept that every individual is a unique being. Individuals experiencing health or disease, regardless of race or ethnicity, are respected for their personal values and beliefs. Culturally sensitive health care practices and appreciation of diversity are interwoven throughout nursing theory and clinical courses. Students are required to address cultural influences relevant to care in every clinical care plan.

In May 2008, the Minnesota West AD Nursing Program Advisory Board highlighted the need for graduates to be culturally competent. As stated previously, concepts of culture are appropriately integrated throughout the theory and clinical courses. However, as communities become increasingly diverse, faculty realize that dedication to increasing culturally focused coursework will be necessary. It should also be noted that students have the opportunity and are encouraged to take a “Spanish for Nurses” to fulfill one credit of the humanities requirement.

4.5 Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes.

Faculty believe that evaluation tools must determine if educational objectives, course objectives, and Minnesota Board of Nursing abilities are met. We believe it is crucial to evaluate student’s knowledge of course content and also their ability to reason, synthesize information, and apply knowledge to clinical situations. Consequently, a variety of evaluation methodologies are employed. It should be noted that the Minnesota Board of Nursing requires that each faculty member in an AD Nursing program must successfully complete at least ten clock hours of educational preparation in principles and methods of evaluation during the first two years of hire.

Examples of course objectives, evaluation methods and learning outcomes are included in the following table.

Table 4.14 Course Objectives, Evaluation Methodology, and Learning Outcomes

Course	Objective	Evaluation method	Learning outcome
NURS 2120	Apply elements of the nursing process in providing care for clients with predictable health care needs	Case studies Threaded discussion Multiple choice Quizzes/ exams	Assessment Caring interventions Clinical decision making Teaching/learning/ MN BON ability
NURS 2120	Define health promotion and propose nursing interventions that promote health in clients across the lifespan	Case studies Threaded discussion Multiple choice Quizzes/ exams	Clinical decision making Caring interventions Teaching/learning
NURS 2140	Demonstrate selected skills necessary for accurate observation, physical assessment, and psychosocial assessment across the lifespan	Skills test outs Written quizzes Lab practice with evaluation	Assessment Clinical decision making Communication MN BON ability
NURS 2140	Critique own communication skills and develop a plan to strengthen own communication skills	Communication analysis Clinical evaluation Quizzes/exams	Communication Caring intervention Professional behavior MN BON ability
NURS 2180	Integrate knowledge of communication, growth and development, pharmacology, and nutrition when applying the nursing process	Nursing care plan Clinical evaluation quizzes	Assessment Clinical Decision making Caring Intervention MN BON ability
NURS 2180	Demonstrate behaviors reflecting standards of professional practice	Clinical evaluation	Professional behaviors
NURS 2220	Implement teaching plans to facilitate maximal functional ability in those with chronic illness	Teaching /learning plan	Communication Teaching/learning Caring Intervention MN BON ability

NURS 2220	Analyze common drug induced pathologies in the older adults including confusion, falls, incontinence, and immobility	Nursing care plan quizzes	Assessment Clinical decision making Caring intervention Caring
NURS 2230	Articulate an understanding of diverse roles, responsibilities, and societal expectations of the professional nurse	Threaded discussion	Professional behaviors
NURS 2230	Display an inquiring attitude and willingness to pursue lifelong learning	Threaded discussion	Professional behaviors
NURS 2240	Participate as a member of the interdisciplinary team to facilitate continuity and quality in client care	Case studies Threaded discussion Simulation lab	Collaboration Managing care Communication Professional behaviors MN BON ability
NURS 2240	Incorporate theoretical knowledge of delegation and supervision into the professional nursing role of manager of care	Case studies Simulation lab Quizzes	Managing care Communication Clinical decision making MN BON ability
NURS 2280	Assume the role of the professional nurse to assess diverse clients holistically, and use creative problem solving to deliver safe, appropriate care for clients with complex health care needs.	Nursing care plan Clinical evaluation	Professional behavior Assessment Clinical decision making Collaboration Caring
NURS 2280	Prioritize and organize care efficiently and effectively in complex patient/family situations	Nursing care plan Clinical evaluation	Clinical decision making Caring intervention Managing care Collaboration MN BON ability

Faculty rely heavily on multiple choice quizzes and examinations in NURS 2120 and 2220. Multiple choice tests may be appropriate to test the understanding of large amounts of content, are an appropriate way to evaluate learning in the cognitive domain, and can be useful measures of critical thinking skills (Kirkpatrick, DeWitt-Weaver, & Yeager, 2005; Scheetz, 2000). When constructing exams, faculty attempt to progress toward the higher categories in Bloom's taxonomy. Faculty create exams that are written at levels that require application/analysis or synthesis/evaluation to promote and evaluate critical thinking, prioritization, and decision making.

In keeping with our mission statement, faculty emphasize safety during the evaluation of students. For example, students must complete five dosage calculation quizzes with an 85% or greater before they are allowed to pass medications during fall semester clinical. Students must pass dosage calculation quizzes that require a higher level of critical thinking with greater than 90% during spring semester.

Written assignments, particularly in the clinical area, attempt to measure synthesis of information and application to client care. This allows practice in organized thinking, synthesis, and application as opposed to memorization of facts. Written clinical assignments are also valuable in evaluating learning that occurs in the affective domain.

Completion of case studies and threaded discussions in online courses are utilized both to develop and evaluate student skills in analysis and problem solving as well as learning in the affective domain. Completion of case studies also occurs during the transition class, NURS 2100.

While faculty recognize the significance of affective learning in nursing education, evaluation remains challenging. While some evaluation of affective learning is done via written clinical assignments, case studies, threaded discussions, and journaling, this evaluation also occurs during the clinical experience and simulation lab. Students are frequently challenged to evaluate their own assumptions, and faculty strive to correct faulty assumptions as appropriate.

Since nursing is a practice discipline, clinical competency, psychomotor skills, as well as cognitive mastery must be evaluated. Clinical performance is measured in a number of ways which are made known to the student prior to the clinical experience. The student is evaluated for application of the nursing process through the nursing care plan. The student is evaluated for critical clinical reasoning skills through the nursing care plan and also by evaluation of responses to the questions at the conclusion of the nursing care plan. Skills in the psychomotor domain are evaluated in the clinical laboratory prior to the clinical experiences and also during the actual clinical experiences.

The observable changes in behavior that occur as a result of teaching, that is the ability to care for patients effectively, are challenging to measure. When evaluating students in the clinical setting, faculty use rating scales and narrative. The rating scale used by faculty includes the *Levels of Student Performance in Clinical Practice* developed by Kathleen Krichbaum from the original work of Bondy in 1983 (Krichbaum, et.al., 1994). Faculty find the tool offers a way to come to agreement on the various levels of performance used in evaluating students. Although recognizing that subjectivity continues to exist, faculty believe they can evaluate students more consistently and objectively using the stated criteria for competency and the scale point descriptors of this tool. Faculty select competency criterion based on the clinical course

objectives. The clinical evaluation tools for NURS 2180 and NURS 2280 are in the document room.

During the clinical experience, students are evaluated in both a formative and summative manner by faculty. Faculty visit informally with students during the clinical day, attempting to provide both positive and constructive feedback. We believe that students must be encouraged to develop their areas of strength more fully. Additionally, it is a critical responsibility of the faculty to provide constructive feedback in a timely manner. Faculty recognize the gravity of this responsibility in order to facilitate learning and improve clinical, professional, and team member skills. Faculty believe constructive feedback must be timely to provide a positive, safe, and nurturing learning environment.

Students are required to complete a self evaluation using the same evaluation tool faculty use every clinical day. Faculty believe self evaluation is important in that it ensures the student understands evaluation criteria and what faculty considers the primary learning objectives. Self evaluation encourages self reflection and encourages students to be responsible for their own learning. A variety of evaluation tools can be found on site in the document room.

As noted earlier the Minnesota Board of Nursing requires that each faculty member in an AD Nursing program must successfully complete at least ten clock hours of educational preparation in principles and methods of evaluation during the first two years of hire.

4.6 The curriculum and instructional processes reflect educational theory, interdisciplinary collaboration, research, and best practice standards while allowing for innovation, flexibility, and technological advances.

As stated earlier, faculty make significant effort to remain current in educational theory. Several faculty members have recently completed additional course work addressing teaching and learning. Simulation labs were added to the curriculum three years ago with encouraging evaluations from students. Concept mapping as either an alternative or supplement to traditional care planning was piloted during spring 2009 by one faculty member and will be further developed during the spring of 2010.

Faculty continue to move from teaching 'content' to providing learning experiences that move the student from a passive to a more active role in the learning process. Faculty make deliberate choices about what concepts, content, and experiences are essential to professional

nursing education at Minnesota West. Decisions on content are based on the program mission, philosophy, learning objectives, educational outcomes and local and national trends. Because students cannot memorize the entire body of nursing knowledge, faculty focus efforts on integrating essential knowledge with the pre-existing knowledge of the Licensed Practical Nurse to promote critical thinking, sound reasoning, and decision making skills. According to current research, this type of learning is more likely to be retained (Caputi & Blach, 2008).

Minnesota West encourages innovation by supporting faculty members who choose to develop and implement innovative teaching strategies within the existing curriculum. The MnSCU has offered grant monies to faculty members who desire to develop, implement, and evaluate new strategies to facilitate student learning. The NURS 2240 simulation labs were developed as a result of a MnSCU grant.

Nursing faculty work with the rest of college faculty, administration, and support services to facilitate quality education in a supportive environment. Because clinical schedules are typically difficult to alter, faculty of general education courses have at times altered their course times to accommodate nursing student needs. Support services work closely with the nursing department to meet student registration, financial, advising and counseling needs.

4.7 Program length is congruent with the attainment of identified outcomes and consistent with the policies of the governing organization, state and national standards, and best practices.

Minnesota West's Associate Degree Nursing program includes 60 – 64 semester credits. The current length is determined by Minnesota State Colleges and University system and state policy. Recently there has been discussion of limiting all associate degree programs in Minnesota to a maximum of sixty semester credits. This generated much concern within nursing education programs in the state. Most recently, recommendation has been made that exceptions will be made to this policy and that nursing programs will likely be considered an outlier and exempt from this requirement. Evaluation related to the appropriate number of credits is ongoing in Minnesota, but at this time Minnesota West's professional nursing program continues to consist of 60 - 64 semester hours. An outline of the nursing curriculum can be found in the Nursing Student Handbook and at: <http://www.mnwest.edu/fileadmin/images/curriculumluminaries/as/Nursing%20Pathway%20-%202nd%20year.pdf> and in the document room.

Only students who have been accepted into the nursing program are allowed to take nursing courses. Students must be licensed as practical nurses before fall courses begin. Students from the practical nurse program may be conditionally accepted prior to taking the NCLEX-PN exam. Students who are not entering directly from Minnesota West's practical nursing programs are required to complete NURS 2100: Professional Nursing Transition the summer prior to admission.

Students have the option of completing a 1-2 semester credit nursing preceptorship upon completion of required nursing courses. Some students choose this option. Although faculty strongly encourage students to take advantage of this course, in keeping with our mission statement to make nursing education accessible, it is not required.

General education courses are chosen collaboratively by nursing faculty with consideration of recommendations from the local advisory committee. For example, faculty considered modifying the composition and speech requirements, but chose not to based on input from the advisory committee. Nursing faculty meet with general education faculty to learn what is addressed in general education courses and make decisions based on the results of those meetings, input from students, and educational trends. Nursing faculty highly value the contribution and cooperation of general education faculty in building an essential foundation for nursing students in the areas of science, the humanities, and general education courses.

4.8 Practice learning environments are appropriate for student learning and support the achievement of student learning and program outcomes; current written agreements specify expectations for all parties and ensure the protection of students.

In keeping with our mission statement, every effort is made to provide learning environments and experiences that are accessible, while at the same time making quality learning a priority. Theory courses are offered online and via ITV as well as in a more traditional classroom. Laboratory courses are offered at Worthington, Pipestone, Granite Falls, and Jackson. Faculty rotate from site to site to provide consistency of learning experiences while decreasing driving time and expense for the students.

Clinical sites are considered for selection only if they afford students the opportunity to meet educational objectives effectively. Most health care facilities in Southwest Minnesota are

located in predominantly rural areas, and serve clients and families with common, yet often complex health care needs. Some of these facilities are small and prone to significant fluctuations in client census. This can at times be problematic when making quality learning assignments for the clinical experience. At the same time, because many of Minnesota West's graduates choose to work in rural areas following licensure, it is important the students are exposed to rural nursing. Because smaller facilities generally warmly welcome students and student contributions, these facilities work with faculty to be creative in providing excellent learning experiences. For example, if client census is low, students are assigned to assist staff in the emergency department or another specialty area during the clinical day.

The Minnesota Board of Nursing mandates that students care for a variety of clients, both well and ill, across the lifespan. This requirement also serves as a criterion for selecting clinical sites and experiences. Because faculty believe students are best prepared for professional nursing by participating in a broad range of clinical experiences and also to adhere to the Board of Nursing requirements, a variety of experiences are selected. Some of these experiences include participating in: hospice care, well child day care, emergency room observation, critical care settings, school nursing, clinic nursing, home health/public health nursing, substance abuse and rehabilitation facilities, occupational health nursing, correctional nursing, and mental health care units. These experiences serve to expose students to a wide variety of clients, facilitate exploration of potential employment possibilities, assist students in valuing different types of nursing, expose students to the care of clients across the wellness – illness continuum, and are generally appreciated by students.

Minnesota West employs several qualified adjunct faculty to serve as clinical instructors. These instructors spend time orienting to the nursing program policies and expectations, Desire to Learn (D2L), college communication systems, and the clinical unit. Although all faculty work together to support adjunct faculty, Diane Vangsness serves in the Clinical Coordinator faculty position and serves as a resource for adjunct faculty as well as a liaison between clinical facilities, adjunct faculty, and the college. College representatives and clinical facility representatives meet at least annually and as indicated before, during, and after the clinical experiences.

Written contracts are maintained with all clinical facilities and sites. Copies of contracts can be found on site in the document room.

4.8.1 Student clinical experiences reflect current best practices and nationally established patient health and safety goals.

Students meet the goals of the clinical facilities by reviewing individual facility patient safety goals and the *National Patient Safety Goals*. Examples of best practices included in clinical experiences are: completion of fall risk scales, assessment using the Braden scale, adherence to medication safety guidelines, exposure to rapid response teams, ensuring accuracy of patient identification, and practicing infection prevention recommendations. Students are expected to utilize the informatics systems available at clinical sites to retrieve data and document care. Students are to provide patient centered care and work as part of the interdisciplinary team during clinical experiences.

A goal for the near future involves incorporation of the Quality and Safety Education for Nurses (QSEN) goals throughout the curriculum. Faculty believe that delineation of the pre-licensure competencies into the knowledge, skills, and attitudes may be a valuable component of student learning.

Although not all clinical sites support the SBAR (situation, background, assessment, recommendation) method as a communication tool to facilitate safe patient hand-offs, the SBAR method is consistently utilized during the simulation lab. This facilitates appreciation of the significance of safe patient hand offs and ensures that all students are exposed to the SBAR method.

A sample of a facility's patient safety goals can be found on site in the document room.

4.9 Learning activities, instructional materials, and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes.

All learning activities, instructional materials and evaluation methods are selected to be consistent with the mission, organizing framework, and student learning outcomes. Distance learning activities are planned, evaluated, and modified by nursing faculty in an effort to provide accessible access to nursing education in rural, Southwest Minnesota.

Desire 2 Learn (D2L) is utilized as our online platform. Because faculty realize that students learn in a variety of ways, students are strongly encouraged to complete the free online course in D2L to help evaluate their aptitude for online learning. Students are encouraged to ask

questions about online learning and contact the help desk if they have specific questions about technical requirements. Technical and support questions can also be accessed from the Minnesota West homepage through the 'online learning' link.

Nursing faculty believe active learning facilitates understanding, nursing process skills, critical thinking, priority setting capabilities, and retention of knowledge. Primary learning activities in the online sections of NURS 2120 and 2220 include case study application and threaded discussion. Students are required to participate in case study discussions every week. Case studies focus on 'real life' situations and are written to facilitate critical thinking, nursing process and priority setting skills.

Evaluation in online courses closely parallels evaluation in the face to face and ITV sections. Students take a quiz online every week just as the face to face/ITV students do. These quizzes are written primarily at the levels of application and synthesis, utilizing primarily multiple choice and multiple select questions. Online students are required to come to a campus to take the midterm and final exams in NURS 2120 and NURS 2220 each semester. This helps to ensure the integrity of testing and also facilitates more personal interaction with the instructor. Students who take NURS 2120 and NURS 2220 at a distance take the same final exams as those who take the courses face to face. All students complete the same lab and clinical assignments utilizing identical evaluation methodologies.

Students in online courses use the same text books and academic resources as those students who are land-based. Students at a distance have access to the Library and Academic Resource Centers (LARC) in Worthington, Pipestone, Granite Falls, and Jackson. Pam Sukalski coordinates library resources for distance students. Librarians meet and teach the students how to access materials online with students during orientation to explain the many services that are available.

STANDARD 5

Resources

Fiscal, physical and learning resources promote the achievement of the goals and outcomes of the nursing education unit.

5.1 Fiscal resources are sufficient to ensure the achievement of the nursing education unit outcomes and commensurate with the resources of the governing organization.

The Minnesota West AD Nursing Program strives to acquire and maintain learning resources that are current, comprehensive, and sufficient to meet the ever-changing needs of student learning required by the health care environment. With input from students, faculty, and the nurse administrator, the program meets this goal by acquiring pertinent printed materials, computer software, instructional supplies, and equipment.

Minnesota West's administrative team supports the nursing programs and provides fiscal resources adequate to meet the needs of the department. Budgets of the nursing program are comprised of a salary/benefits budget and an operational budget. The nurse administrator is not responsible for assigning the salaries of faculty. The MnSCU system and the MSCF contracts strictly determine salaries and benefits. Each academic year, the AD nursing program receives fiscal resources from the operational budget that have been sufficient to support program goals and objectives. The nurse administrator collaborates with nursing faculty to determine the yearly operational budget request, including any equipment needs, technology needs, and supplies. After assessing the needs of the program, a requested budget is submitted to the Vice President of Instruction for approval. Technology and equipment budgets for each campus may also be used to ensure resources are available to students on the respective campuses.

As a member of MnSCU, Minnesota West receives an annual fiscal allocation. This revenue source is based on a legislative appropriation and MnSCU allocation. Tuition, fees, and the MnSCU allocation comprise the general operating revenues at Minnesota West. Grants also contribute revenue to the college as with the H1B Grant in nursing (Bridging Rural Healthcare) received in 2003 and 2004 and the HealthForce NLNAC Grant in 2009. With the current economic and state legislative funding status, the proportion of funding for higher education has

decreased, making tuition a larger proportion of college revenue. Nursing programs at Minnesota West have demonstrated fiscal responsibility by establishing faculty to student ratios of 1:16 in the lab settings and the 1:8 in the clinical setting. To offset expensive personnel costs, a differential tuition was established. The increase of \$20 per credit to lab courses (NURS 2140 and NURS 2240) and \$40 per credit to clinical courses (NURS 2180 and NURS 2280) was supported by college administration and was implemented in 2007.

Resources faculty members have found valuable as they work to continually improve quality of the nursing program are College Faculty Awards for Excellence that have been awarded by MnSCU. Diane Vangness, Karen Wiltrout, and Ruth Van Heukelom have received these awards.

Faculty members are eligible for sabbatical release time every seven years. Van Heukelom utilized a sabbatical leave in 2002 to develop online nursing courses and in 2009 to work towards the DNP degree. Vangness utilized a sabbatical leave in 2008 to complete two graduate level nursing education courses.

To meet mission objectives of both the governing organization and AD Nursing Program, approximately two thirds of the AD Nursing Program operational budget is dedicated to faculty and nurse administrator travel. Students taking ITV classes or attending labs at a campus other than Worthington will see the faculty and nurse administrator at those locations teaching a course or available for questions. Accessibility to meet, talk, discuss, and receive answers to questions regarding the program is essential to student success and satisfaction.

For fiscal year 2009 and 2010, an additional budget request was developed for seeking initial NLNAC accreditation. Minnesota West's administration continued to support the AD Nursing Program in this goal and funding was granted. This budget will continue to sustain NLN membership for the program as well as accommodate the steps through Candidacy toward accreditation.

Table 5.1 Nursing Unit Budget – Salaries/Benefits and Operational

Categories	2005-2006	2006-2007	2007-2008	2008 - 2009	Projected 2009 - 2010
Salaries & Benefits for AD Faculty and support staff	\$321,785	\$447,604	\$392,871	\$310,285	\$316,914
Operational Budget – AD Nursing Program	\$10,500	\$11,500 \$1155 for NLN membership	\$12,000	\$11,981	\$12,000
Operational Budget – NLN and NLNAC	\$9,500	Not Applicable	\$6,500	\$8,839	\$9,000
Totals	\$341,785	\$459,104	\$411,371	\$331,105	\$337,914

Budgets and fiscal resources are commensurate with other programs at the college. All programs must follow the same pattern to establish fiscal resources. The MnSCU system follows the identified resource allocation model for all colleges inclusive of the system.

5.2 Physical resources (classrooms, laboratories, offices, etc) are sufficient to ensure the achievement of the nursing education unit outcomes and meet the needs of faculty, staff, and students.

The Minnesota West Associate Degree Nursing program is fortunate to have sufficient classroom and laboratory space. The face to face class is televised via ITV to the Pipestone and Granite Falls campuses. The classrooms utilized for broadcasting are located in the Library and Academic Resource Center (LARC). The ITV equipment is current. Interruptions in broadcasting are few in number throughout the year. In the past year, no major interruptions were noted.

The nursing classrooms have state-of-the-art audiovisual equipment. All classrooms at Minnesota West have wireless internet access. Audiovisual equipment is used to enhance lectures. The AD Nursing program is assigned a classroom in the nursing suite. An additional resource for students and faculty is *Software for Nurses* which is accessed from the Minnesota West Nursing homepage at www.softwarefornurses.com

Minnesota West, Worthington Campus, enjoyed a major remodeling/building project in 2005. At that time, a dedicated nursing suite was established for nursing programs and the medical assistant program. The nursing laboratory at the Worthington campus is shared with the Worthington Practical Nursing program and nursing assistant classes. The laboratory was shared with the Medical Assistant Program until that program moved to the Luverne center. Since that move in 2008, extra space became available to the AD Program and is used for high fidelity simulation. Long range plans for the area include a computer lab for practice with electronic health records and computer assisted instruction.

Laboratory skills class meets at three additional campuses: Pipestone, Granite Falls, and Jackson. The Pipestone lab is shared with the Pipestone Practical Nursing program. The Granite Falls and Jackson laboratories are shared with nursing assistant classes. Nursing labs are equipped with beds, low fidelity mannequins, and equipment such as wall suction and oxygen for teaching nursing skills. A high fidelity mannequin is located at the Worthington campus and is utilized by all AD students during spring semester. Scheduling of laboratory space has not been difficult even though the labs are shared. Space is scheduled so all programs have adequate time allotments. The lab schedule accommodates open labs time when instructors are present. Specific times are arranged at campuses after class or lab to allow for extra practice of skills. Effort is made to utilize time after scheduled lab time to minimize additional trips to campuses for students. Laboratory practice times are integrated into the NURS 2140 and NURS 2240 classes. Specific skills are demonstrated to the students in the laboratory classes and students have opportunity to practice skills. Students are encouraged and welcomed to make appointments for laboratory time with instructors to practice and gain competence in lab skills when additional time is needed. The faculty chose *Kozier & Erb's Fundamentals of Nursing: Concepts, Process, and Practice* as the primary lab text in part because it includes a companion website to assist the student in laboratory skills from any computer.

Full-time and part-time faculty members have offices on the Worthington campus with the exception of Jane Wrede who has an office on the Granite Falls campus. Adjunct faculty have dedicated office space available for use at the Worthington campus. Other campuses have office space available upon request. Faculty are willing to travel to the remote campus sites to meet with an individual student or group of students when a need arises. When faculty travel to the remote campus sites, there is adequate private space to meet with an individual student. The

nurse administrator has dedicated office space available on the Pipestone campus. Nursing faculty and the nurse administrator received new computers with current software in 2009. Nursing faculty and the nurse administrator have laptop computers. Faculty may access email and the D2L course site from any computer with internet service.

The PN and AD Program share some needed supplies and equipment (i.e. Kelly Simulation Manikin). Faculty meetings are often held with the PN faculty to best discuss resources within nursing programs.

5.3 Learning resources and technology are selected by the faculty and are comprehensive, current, and accessible to faculty and students, including those engaged in alternative methods of delivery.

The Minnesota West Community and Technical College Associate Degree Nursing Program is committed to provide learning resources for students and faculty that reflect best evidence-based practices. The faculty place a high priority on assisting students to develop practices of life-long learning and so encourage students to develop skill in locating and utilizing credible online resources. The LARC on each campus houses print materials and has access to CINAHL for online searches of scholarly journals. Students are able to access CINAHL from any computer with internet access. The students are oriented to the LARC several times while at Minnesota West, including general college orientation, orientation to the nursing program, and fall clinical orientation. Students who are required to take NURS 2100 are also provided with LARC orientation. Librarians assist students in assessing credibility of websites students may access. The library home page includes internet search tips and identifies ways to identify websites of integrity.

The Worthington campus LARC has the majority of reference and print materials available to students. LARC staff assists students with library searches as needed and will send print materials to any campus or individual student who lives at a distance on request. Students have access to hospital libraries during clinical experiences.

Faculty search for relevant materials to be included in the library collection. Faculty prioritize the need for printed materials and technology so needed items can be purchased. Resources are reviewed annually for relevance and accuracy. Minnesota West students are surveyed annually using the Noel-Levitz or similar survey tool. Students have expressed

satisfaction with the LARC resources. Survey results are located on site in the documentation room.

Nursing faculty conduct yearly inventories of nursing labs. Faculty initiate purchases of equipment and supplies with the collaboration of the nurse administrator. A five year prioritization list is compiled for nursing equipment and technology needs and can be found in the document room. Purchases of equipment are made based on identified needs. Faculty may transport equipment, such as IV arm simulators and “Chester Chest” from one lab to another to ensure adequate student access to equipment at all campuses.

A Minnesota West priority, due to the accessibility and distance learning focus, is strong technological support. During the fall of 2009 an audit of technology staff and allocation of technology resources was conducted to ensure continuation of accessibility and adequacy. Students and faculty have technology support available on all five campuses. Each campus has at least one technology support person available to assist both faculty and students with technology problems. The ITV studios have ITS (Information Technology System) staff assigned for the hours of operation to assist with troubleshooting problems that may occur during broadcasting. The ITS staff provides training for the faculty in the use of the specialized equipment in the ITV studios. The ITS staff have developed a “Best Practices” for ITV teaching.

Computer access is available to all Minnesota West students. Up-to-date computer labs are on all campuses. Students who wish to bring laptop computers to the classroom may do so as Minnesota West has wireless access at all campuses. Access of courses and course materials is available from any computer with internet access via the D2L learning platform. Students bringing computers to the campus have the ITS staff assist them in obtaining the needed security for wireless use. The ITS staff is available to students via landline telephone and to faculty via cell phone. Students are also welcome to obtain help at the IT office.

Minnesota West uses technology to address student questions, technology questions, and as additional resources for on-campus and distance learning students. Minnesota West has a storage feature called the “Jay Walk” portal. This portal includes features students and faculty find valuable. NetStorage is a popular feature that provides students and faculty a location to upload and retrieve files without additional storage device needs (i.e USB drive, disk, CD, etc). Minnesota West’s home page includes an “Ask Jay” feature which assists students and potential

students find answers for general and specific questions. Technology resources can be utilized by on campus and distance learners.

5.4 Fiscal, physical and technological, and learning resources are sufficient to meet the needs of faculty and students and ensure that students achieve learning outcomes.

The AD Nursing Program uses the D2L platform for all courses as a means of class delivery. The platform is utilized by the face-to-face/ITV classes for weekly quizzing and communication. The clinical and lab classes use the D2L platform as a resource and communication site. As mentioned earlier, the ITS department is available to both faculty and students as needed. The D2L site administrator assists the faculty in developing course shells and instruction in use of D2L. The site administrator is available on site at the Worthington campus, and to all Minnesota West faculty via email, telephone or ITV. Training is provided when updates are made to the D2L system. The site administrator assists the faculty in providing high quality online delivery. The Clinical Coordinator orients adjunct faculty to the D2L learning platform.

The nursing program at Minnesota West strives to make all resources that are available to land based students available to distance students. Pam Sukalski, Distance Learning Librarian, provides an orientation to all students addressing library resources available via Minnesota West's proxy server. *Software for Nurses* is available to all nursing students and can be utilized from home computers.

STANDARD 6

Outcomes

Evaluation of student learning demonstrates that graduates have achieved identified competencies consistent with the institutional mission and professional standards and that the outcomes of the nursing education unit have been achieved.

6.1 The systematic plan for evaluation emphasizes the ongoing assessment and evaluation of the students learning and program outcomes of the nursing education unit and NLNAC standards.

A systematic plan for program evaluation has been developed by the faculty to evaluate student learning and program outcomes. The plan is organized according to NLNAC standards and criteria as well as program components.

Informal evaluation occurs continuously. Assessment of courses or program outcomes may prompt faculty to review and identify needed changes. For example, poor aggregate performance on an exam or poor feedback to faculty regarding a course stimulates faculty to initiate modification.

The systematic plan for program evaluation identifies components derived from NLNAC criteria. The plan includes categories for planning and implementation evaluation, and further delineate to: expected level of achievement, frequency of assessment, assessment methods, results of data collection and analysis, and actions for program development, maintenance, or revision. See Table 6A for the NLNAC Standards Program Evaluation.

Table 6A NLNAC Standards Program Evaluation

NLNAC STANDARDS PROGRAM EVALUATION
STANDARD 1

Mission and Administrative Capacity

The nursing education’s unit’s mission reflects the governing organizations’ core values and is congruent with its strategic goals and objectives. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified outcomes.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
1.1 The mission/philosophy and outcomes of the nursing education unit are congruent with those of the governing organization.	Consistency with mission/philosophy and outcomes of the nursing education unit and Minnesota West Community and Technical College and MnSCU.	Every four years based on MnSCU and college/institutional changes Annually during AD Nursing Handbook review.	Thoughtful review of the philosophy and framework is ongoing throughout the year by the faculty and nurse administrator. MnSCU boards and Minnesota West academic teams review mission, vision, and philosophy. Assessment is completed for congruency.	Nursing faculty and nurse administrator reviewed nursing program mission, vision, and philosophy and compared it to MnSCU and the college philosophy and mission. Consistency is demonstrated. Documentation included in nursing faculty meeting minutes	Continue ongoing and annual review. Improvement in documentation verification necessary. Needs to be reflected in faculty meeting minutes.
1.2 The governing organization and nursing education unit ensure representation of students, faculty, and administrators in ongoing governance activities.	Faculty, administrators are represented in governance activities. Student participation occurs through election or invitation to membership.	Yearly review	Nursing unit meeting minutes reflect the participation of faculty and administration and invited student participation. Meeting dates and times are set in advance.	Minutes of nursing unit reflect the participation of faculty and administrator(s). Student participation is evidenced in advisory council meeting minutes.	Maintain faculty and administrator participation. Invite other administration to meetings. Encourage the participation of students in faculty meetings as appropriate.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
1.3 Communities of interest have input into program processes and decision-making.	Communities of interest participate and discuss the program to stimulate decision-making.	Formally on an annual basis. Faculty attends to informal input continually and discusses as a group every semester and as needed.	Participation in Advisory Committee Meetings by participating area health care professional. College staff, faculty, and administrator participate in Advisory Committee Meetings to demonstrate support of the program and curricular changes. Clinical agencies offer input – informally or formally regarding program processes, students, and/or curriculum. Students have formal and informal input into decision-making and program processes. Area community members in the college service area provide input informally to program processes and decision-making.	Advisory Committee Members meet and provide input at annual Advisory Committee Meetings. Participation is strong and active. Meeting minutes are available in documentation room. Administration, staff, and faculty of the college participate along with the nurse administrator, nursing support staff, and nursing faculty (both AD and PN) in the program and curricular changes. Meeting minutes are available in documentation room. Clinical agencies offer verbal and written feedback on program or student concerns. See examples in documentation room.. Students offer formal or informal suggestions, concerns, and input into program processes or decisions. Copies of surveys available in documentation room. Community members offer formal or informal (most frequent) input on program processes.	Maintain Advisory Committee member participation. Maintain participation of the administration, staff, and faculty from non-nursing avenues of the college to enhance program knowledge. Maintain and welcome open communication from clinical agencies. Maintain and welcome open communication from students. Maintain and welcome open communication from area community members with an interest in the program's decisions and processes.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
1.4 Partnerships exist that promote excellence in nursing education, enhance the profession, and benefit the community.	Partnerships continue to be developed with four-year degree programs and health care facility partners such as the Avera Health System and Medisota.	Every semester	Documentation exists to demonstrate articulation agreements with MnSCU institutions. Active involvement in Avera Health System educational leadership meetings by the nurse administrator	Documentation of articulation agreements. Active participation in the Avera Health System educational leadership meetings by the nurse administrator and faculty. Documentation includes current involvement in a task force to improve nursing clinical experiences.	Maintain the articulation agreements with MnSCU schools. Develop articulation agreements with other four-year institutions. Continue formal meetings with Avera Health Systems
1.5 The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing.	The nursing education unit is administered by a nurse who holds a graduate degree -with a major in nursing The nurse administrator holds nursing and teaching experience valuable to the nursing education unit.	Upon new nurse administration	Documentation exists of the nursing unit's administrator's educational qualification.. Job description AD Director meeting minutes	Van Heukelom holds a Master's Degree with a major in nursing from SDSU (1997) and anticipates completion of a DNP program in May 2010. She has completed four graduate courses focusing on nursing education. .	Van Heukelom will maintain licensure.
1.6 The nurse administrator has authority and responsibility for the development and administration of the program and has adequate time and resources to fulfill the role responsibilities.	Van Heukelom will have authority, responsibility, and adequate time to fulfill responsibilities for development and administration of the program.	Ongoing and with annual review based on college and MnSCU employment policy	Van Heukelom's role is reviewed annually by the college administration per the MnSCU system and college policy.	Van Heukelom has administered the program since 2009.	Van Heukelom will seek mentoring from nursing administrators in the area and members of the local administrative team.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
1.7 With faculty input, the nurse administrator has the authority to prepare and administer the program budget and advocates for the equality within the unit and among other units of the governing organization.	Preparation of the budget is completed by Van Heukelom and distributed to the nursing faculty. A five year plan is implemented for equipment and technology purchases.	Annual program budget review	The budget is distributed, discussed and approved during faculty meetings and is reflected in minutes.	The budget is communicated at faculty meetings. Van Heukelom seeks the input from faculty when developing a five year plan. Documentation is reflected in faculty minutes	Maintain communication regarding budget and five year plan for technology and equipment purchases.
1.8 Policies of the nursing education unit are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the goals and outcomes of the nursing education unit.	MnSCU and college policies are upheld. Contract agreement is in place with MSCF.	MnSCU policies are reviewed every two years. College policies are reviewed every year and as needed.	MsSCU, MSCF, and nursing policies are compared. Contractual agreements are upheld by the college.	No difference in policies and MSCF contract for nursing and non-nursing faculty. No changes in 2009 – 2011 contract as compared to 2007 – 2009 contract.	Maintain ongoing review of policies and the MSCF agreement.
1.9 Records reflect that program complaints and grievances receive due process and include evidence of resolution.	Records are maintained. Due process is provided regarding any complaints.	Ongoing policy review of due process and Student Code of Conduct.	Student Code of Conduct involves several steps to ensure correct due process. Nurse administrator follows due process.	Written records of complaints can be retrieved from the Campus CEO	Maintain Student Code of Conduct for complaints and grievances. Revision – remind students of due process at orientation meetings every semester. Maintain records of all student complaints and actions taken.
1.10 Distance education, as defined by the nursing education unit, is congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit.	Accessibility is the common thread for -the governing organization and the nursing unit. Distance learning is congruent with the theme of accessibility	Every semester courses offered at a distance are evaluated for congruency with mission and congruency with courses that are offered on campus.	Academic requirements, nursing curriculum, and clinical expectations are the same for the students who take advantage of distance education modalities.	The governing organization and program have effective delivery of the nursing program for distance learning students. Accessibility is maintained for all students in the same manner. IDEA surveys indicate high levels of satisfaction with online delivery.	Faculty continue to review accessibility in delivery of program for both distance learning and on-campus students every semester.

NLNAC STANDARDS PROGRAM EVALUATION
STANDARD 2

Faculty and Staff

Qualified faculty and staff provide leadership and support necessary to attain the goals and outcomes of the nursing education unit.

Component	Plan			Implementation	
	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
2.1 Full-time faculty are credentialed with a minimum of a master's degree with a major in nursing and maintain expertise in their areas of responsibility.	<p>Full-time faculty members are credentialed with a minimum of a master's degree in nursing and maintain expertise in their areas of responsibility.</p> <p>Full-time faculty members maintain RN licensure, including CEU requirements for areas of expertise.</p>	<p>Transcripts upon employment.</p> <p>Compared to MnSCU policy annually.</p> <p>Annual review from the Minnesota Board of Nursing indicates licensure maintenance and renewal</p>	<p>Review resume, transcripts and interview for candidates for faculty positions regarding educational preparation.</p> <p>Verification from Minnesota Board of Nursing regarding licensure renewal and requirements.</p>	<p>One full-time faculty member, Diane Vangsness, has master's degrees in nursing and has completed post-graduate nursing education classes. RN licensure is maintained.</p>	<p>Maintain post-graduate credits for expertise.</p> <p>Maintain ongoing licensure renewal and CEUs therein.</p> <p>Program Development: Maintain, and increase when able, percentage of full-time MSN-prepared faculty teaching each semester.</p>

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
<p>2.1.1 The majority of part-time faculty are credentialed with a minimum of a master's degree with a major in nursing; the remaining faculty hold a minimum of a baccalaureate degree with a major in nursing.</p>	<p>Part-time faculty is sought with a master's degree. When failed searches yield no master's degree faculty, faculty with baccalaureate degrees are utilized based on experience.</p> <p>Part-time faculty members maintain RN licensure, including CEU requirements for areas of expertise.</p>	<p>Transcripts upon employment.</p> <p>Ongoing; based on college and MnSCU system policy</p> <p>Annual review from the Minnesota Board of Nursing indicates licensure maintenance and renewal.</p>	<p>Review resume, transcripts and interview candidates for faculty positions regarding educational preparation.</p> <p>Verification from Minnesota Board of Nursing regarding licensure renewal and requirements.</p>	<p>Four of the seven part time faculty have a master's degree with a major in nursing.</p> <p>In total, 68 percent of the program credits in the Spring 2010 semester are taught by master's prepared faculty.</p> <p>RN licensure is maintained.</p>	<p>Continue searches for master's credentialed faculty.</p> <p>Maintain ongoing licensure renewal and CEUs therein.</p> <p>Program Development: Maintain, and increase when able, percentage of part-time MSN-prepared faculty teaching each semester.</p>
<p>2.1.2 Rationale is provided for utilization of faculty who do not meet the minimum credential.</p>	<p>Part-time faculty hired who do not meet the minimum credential will have a plan in place for completion of a master's degree.</p> <p>Minnesota West has had four failed searches for master's prepared faculty. In the fall of 2008, a plea went out to Medisota (an area health care facility consortium) for assistance with utilization of MSN prepared staff nurses as nurse educators in the Minnesota West service region. One temporary part-time faculty was hired demonstrating dedication to quality nursing education within the community.</p>	<p>Every semester</p> <p>Continue hiring searches for MSN prepared faculty</p>	<p>Review resume, transcripts for candidates who do not meet the minimum qualifications. Educational plan in place for part-time faculty who do not hold a master's degree in nursing.</p> <p>Identify non-MSN faculty member's clinical expertise.</p> <p>Continue relationships with community partners to share MSN staff nurses from area facilities.</p>	<p>Three part-time faculty members do not have a master's degree. Karen Wiltrot has unlimited part-time status and will finish masters course work in the spring of 2010. One part-time faculty has temporary part-time status and is enrolled in a master's program. One is nearing retirement.</p> <p>Non-master's credentialed faculty are utilized in expertise area(s) of program.</p> <p>The remainder of the program, 32 percent, is taught by BS/BA in nursing prepared faculty.</p>	<p>Continue searches for master's credentialed faculty.</p> <p>Program Development: Maintain, and increase when able, percentage of MSN-prepared faculty teaching each semester.</p> <p>Maintain relationships with community partners to share master's prepared staff nurses from area facilities.</p>

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
2.2 Faculty (full- and part-time) credentials meet governing organization and state requirements.	<p>All faculty will hold a minimum of a master's degree in nursing.</p> <p>All faculty will have a current MN license and other state licenses as appropriate.</p> <p>All faculty will be current with CPR, immunizations, HIPPA requirements and criminal background checks needed to fulfill role.</p>	<p>Every semester based on college and MnSCU system policy</p> <p>Annual verification from the Minnesota Board of Nursing</p> <p>CPR, immunization, HIPPA, and criminal background check requirement submission to program annually</p>	<p>Review of transcripts and licenses and certificates.</p> <p>Annual verification from the Minnesota Board of Nursing</p> <p>CPR, immunization, HIPPA, criminal background check requirement are submitted to program.</p>	<p>All faculty meet credentials of governing organization and state.</p> <p>All faculty are in compliance with state licensure.</p> <p>All faculty are in compliance with CPR, immunization, HIPPA and criminal background check requirements.</p>	<p>Program Development: maintain progress toward educational goals for non-MSN faculty to meet college and MnSCU requirements.</p> <p>Maintain compliance with state and clinical facility requirements.</p>
2.3 Credentials or practice laboratory personnel are commensurate with their level of responsibilities.	<p>No laboratory personnel are hired at this time. Faculty members have the full responsibility of the laboratory.</p>	<p>Every semester</p> <p>Value of possible lab assistant is discussed at faculty meetings every semester.</p>	<p>Discussion at faculty meetings.</p>	<p>Faculty will continue to be available for open lab at the end of scheduled lab days at the campuses in Worthington, Granite Falls, Pipestone, and Jackson.</p> <p>Karen Wiltout will continue to order and maintain lab supplies.</p> <p>Nursing administrator will investigate possibility of monies to be dedicated to lab assistant hours.</p>	<p>Maintain faculty member responsibility for lab at this time .</p> <p>Program Development: Continue evaluation of the lab personnel position. Addition of lab personnel will depend upon economic circumstances of college and program.</p>

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
<p>2.4 The number and utilization of faculty (full- and part-time) ensure that program outcomes are achieved.</p>	<p>Workloads are based upon the employment contact with MnSCU, the college, and the MSCF bargaining unit. Full-time faculty members have full course loads of didactic, lab, and clinical courses. Full-time faculty member is responsible for coordinating both the clinical sites and the laboratory sites in the Clinical Coordinator position. The AD Nursing Program has one time faculty member and the remainder of the program uses part-time and temporary part-time faculty (adjunct) to complete workloads.</p> <p>Full-time faculty member, with input from part time faculty develops course syllabi.</p>	Each semester	<p>Full-time faculty member, with input from part time faculty develops syllabi.</p> <p>The Clinical Coordinator is responsible for the mentoring of temporary part-time and unlimited part-time faculty with the clinical responsibilities including: assessment of student written work, assisting with student performance issues, and assisting the faculty in utilization of D2L. When possible, clinical groups are rotated so students are evaluated by a regular full-time faculty member during the same semester.</p> <p>Faculty members team-teach the laboratory classes to maintain consistency between the laboratory groups and to teach to practice strengths and educational expertise.</p>	<p>All full-time and part-time faculty members have workloads established to achieve program outcomes with a balance of credits assessed based on MSCF contract agreements.</p> <p>The Clinical Coordinator provides mentoring of the assessment method at a faculty orientation.</p>	<p>Full time faculty will continue to maintain and/or develop course syllabi for all courses with input from part-time faculty.</p> <p>The Clinical Coordinator will continue mentoring part-time faculty members to achieve program outcomes. Part-time faculty will feel supported in nurse educator role development.</p> <p>Maintenance: All courses will have input from the full-time faculty to ensure program outcomes are achieved.</p>

Component	Plan			Implementation	
	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
2.5 Faculty (full- and part-time) performance reflects scholarship and evidence-based teaching and clinical practices.	<p>All faculty will demonstrate lifelong learning and scholarship in nursing education.</p> <p>Within two years of employment, Minnesota Board of Nursing requirements will be met.</p> <p>Faculty complete Faculty Development Plans.</p> <p>Faculty attend nursing faculty meetings.</p>	<p>Annually</p> <p>Within two years of hire</p> <p>Every three years with evaluation cycle</p> <p>Four nursing faculty meetings in academic year</p>	<p>Maintenance of RN licensure, including 24 hours of continuing education for renewal every two years.</p> <p>All faculty members complete the required principles in evaluation course required by the Minnesota Board of Nursing within two years of hire.</p> <p>Completion of Faculty Development Plans with evaluation cycle</p> <p>Attendance at the annual Health Educator's conference in the state of Minnesota.</p> <p>Scholarship demonstrated through formal graduate and post graduate classes.</p> <p>Attendance of nursing faculty meetings</p>	<p>All faculty members hold a current RN license.</p> <p>All faculty members completed the required principles in evaluation course.</p> <p>Faculty Development Plans completed.</p> <p>Faculty members attend the annual Health Educator's conference.</p> <p>Faculty members are encouraged to attend seminars and other educational opportunities.</p> <p>Faculty members demonstrate scholarship through formal graduate and post graduate classes, as well as certifications, and employment.</p> <p>Faculty Meetings attended.</p>	<p>Continue maintenance of RN licensure.</p> <p>Maintain faculty Minnesota Board of Nursing requirements.</p> <p>Maintain Faculty Development Plans with evaluation cycle.</p> <p>Maintain ongoing attendance at the annual Health Educator's conference.</p> <p>Continue graduate and post-graduate course goals.</p> <p>Continue to maintain attendance at nursing faculty meetings.</p> <p>Revision: Encourage active involvement in Journal Club and Think Tank with local nursing professionals.</p>

Component	Plan			Implementation	
	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
<p>2.6 The number, utilization, and credentials of non-nurse faculty and staff are sufficient to achieve the program goals and outcomes.</p>	<p>One non-nurse staff, an administrative assistant, is part of the program. Credentials meet the needs of the position.</p> <p>A non-nursing work-study student may be utilized in times of high needs in the program.</p>	<p>Annually based on college and MnSCU system policy.</p>	<p>Participation in nursing faculty meeting, organization of student records, and ability to find resources for students are expectations of the position..</p> <p>Administrative assistant is evaluated by nursing administrator.</p>	<p>The position is able to meet the needs of the program goals and outcomes when the assessment methods are reviewed.</p>	<p>Continuous review of the position assessment methods will determine potential for additional program-specific staff.</p>
<p>2.7 Faculty (full- and part-time) are oriented and mentored in their areas of responsibilities.</p>	<p>All faculty members are mentored and oriented to areas of responsibility.</p> <p>Faculty members have a resource/mentor (Clinical Coordinator) throughout time taught in program. Faculty have this resource/mentor not only at initial hire, but at all times during the academic year or semester.</p> <p>Faculty receive information related to salary and benefits</p>	<p>Every semester Upon new hire</p> <p>Clinical Coordinator serves as resource/mentor throughout academic year or semester</p> <p>Upon hire</p>	<p>Clinical Coordinator reviews orientation materials for new faculty specific to faculty outcomes.</p> <p>Orientation will occur with the Human Resources Department regarding salary and benefits.</p> <p>The nurse administrator of the program provides nursing unit specific orientation.</p>	<p>The Clinical Coordinator mentors the adjunct faculty at a new faculty orientation and as needed throughout the academic year. The coordinator is available in person, online, and face-to-face to assist the new faculty with the responsibilities of clinical instruction. Faculty verbalize appreciation of Clinical Coordinator position. Adjunct faculty members are scheduled for orientation in a group at least every fall semester to review the faculty handbook.</p> <p>The Human Resources Department oriented new hire to the college employment policies and benefits. Adjunct faculty members are</p> <p>The nurse administrator completed orientation of the nursing department policies to new hires.</p>	<p>Maintain annually and as needed when new faculty members are hired.</p> <p>Maintain Clinical Coordinator position. Faculty appreciation of the position is presumed to retain faculty in nursing education role.</p> <p>Revision: Nursing Faculty Handbook is being developed</p>

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
2.8 Systematic assessment of faculty (full- and part-time) performance demonstrates competencies that are consistent with program goals and outcomes.	Performance assessment is completed on all full-time, part-time, and adjunct faculty members as required by the governing institutions. Students evaluate faculty every semester using the IDEA survey	Unlimited full-time and unlimited part-time faculty members are evaluated every three years after a probationary period of two years (four semesters) is completed in accordance with the institutional policy. Temporary part-time and adjunct faculty members are evaluated on the same schedule as unlimited faculty by the nurse administrator in accordance with the institutional policy. Every semester	As the nurse administrator is a member of the faculty union, a peer evaluation is completed for unlimited full time faculty. The Vice President of Instruction, along with the nurse administrator complete the evaluation per MnSCU policy. The nurse administrator is responsible for evaluation of unlimited part time, temporary part time, and adjunct faculty members. Surveys of faculty members are completed by students	All faculty members are evaluated according to institutional policy. Evidence is available in personnel files of the evaluations completed by the nurse administrator. Feedback from students is shared with faculty members every semester.	Maintain performance assessments per governing institution. Revision – documentation of any action taken following performance assessment Maintain student evaluation of faculty.
2.9 Non-nurse faculty and staff performance is regularly reviewed in accordance with the policies of the governing organization.	Performance assessment is completed by the nurse administrator according to institutional policy.	Staff performance is evaluated annually per institutional policy.	Annual evaluation tool: "Performance Review"	Evidence is available in the staff personnel file of the evaluations completed by the nurse administrator.	Maintain / Continue annual evaluations. Revision – documentation of any action taken following performance assessment

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
2.10 Faculty (full- and part-time) engage in ongoing development and receive support in distance education modalities including instructional methods and evaluation.	Faculty members participate in development of distance learning modalities.	Each semester	Faculty members evaluate distance education modalities every semester and submit to Division Chair	Evaluations indicate faculty satisfaction with quality of and support for distance learning modalities.	Maintain both distance modalities and classroom learning as instructional methods.
	Faculty will receive adequate support from D2L site administrator.	Each semester	Faculty members are encouraged to request further training related to distance education modalities every semester and submit to Division Chair and D2L site administrator	Faculty requests are passed on to Centers for Teaching and Learning (CTL) leaders and D2L site administrator who use this input to plan further instruction and training.	Maintain CTL openness to requests for support of distance education support
	Online course evaluations are completed each semester by students in courses with sixteen or more students.	Each semester	Thoughtful conversations involving faculty who utilize distance education modalities.	Students enrolled in online courses are encouraged to complete IDEA surveys. Results of these evaluations assist faculty in viewing courses from a student perspective	Faulty members receive instruction in the online learning platform (D2L). The same support is available to instructors teaching with distance modalities as is in the classroom.
				IDEA surveys provide identification of strengths and weaknesses in the online course. Results of these surveys are available in the resource room.	Continue IDEA surveys to gain student perspective in online course evaluation.

NLNAC STANDARDS PROGRAM EVALUATION
STANDARD 3

Students

Student policies, development, and services support the goals and outcomes of the nursing education unit.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods/s	Results of Data Collection and Analysis	Actions for program Development, Maintenance, or Revision
3.1 Student policies of the nursing education unit are congruent with those of the governing organization, publicly accessible, non-discriminatory, and consistently applied; differences are justified by the goals and outcomes of the nursing education unit.	Congruency is expected with MnSCU and Minnesota West student policies. Policies that may be different are clearly delineated and justified in the Associate Degree Nursing handbook.	Annually	Annual review to assure congruence and clarity in explicating differences.	<p>Policies are congruent with Minnesota West Community and Technical College. Differences are clearly delineated.</p> <p>AD Nursing Student Handbook is congruent. Policies that are more stringent (ex. Grading scale and clinical requirements) are clearly defined.</p>	Maintenance of policies in the nursing educational unit and with the governing organizations.
3.2 Student services are commensurate with the needs of students pursuing or completing the associate program, including those receiving instruction using alternative methods of delivery.	All students are eligible for student services.	Noel Levitz student satisfaction survey is offered every year.	The Noel-Levitz survey assesses student services for a program and the college as a whole. A comparison is also completed with a multiple college database using the tool.	<p>Advising for students is available on all campuses. Online students are assigned an advisor in the same manner as the face-to-face students.</p> <p>Noel Levitz survey results indicated (2007) more advising and program clarity in student services was needed and later implemented.</p>	<p>Maintenance of established services.</p> <p>Continue to provide clear and concise information to the advisors and student services of Minnesota West campuses.</p> <p>Action completed: Online advisor established in 2008 based on Noel Levitz data.</p>

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods/s	Results of Data Collection and Analysis	Actions for program Development, Maintenance, or Revision
3.3 Student educational and financial records are in compliance with the policies of the governing organization and state and federal guidelines.	Student educational and financial records are in compliance with state and federal guidelines.	Annually and upon any governing organizational change	Document review to insure policies are followed.	Policies are followed regarding student educational and financial records. Documentation available upon request	Maintain ongoing review to ensure policy adherence.
3.4 Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained.	The Financial Aid Department and Financial Aid Director will maintain compliance with the Higher Education Reauthorization Act Title IV.	Annually and upon any governing organizational change	Document review to insure policies are followed. Financial Aid Policy Manual reviewed and updated.	Financial Aid Department maintains documents indicating compliance with the Higher Education Reauthorization Act Title IV. Financial Aid Policy Manual was updated in late 2008/early 2009.	Maintain ongoing review of financial aid policies in relation to state and governing organization requirements.
3.4.1 A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.	The Financial Aid Department and Financial Aid Director will maintain student loan repayment information including loan information, counseling, monitoring, and cooperation with lenders.	Ongoing	Review of financial aid documents including loan information, counseling, monitoring, and cooperation with lenders.	Documentation exists for students identifying information about loan information, counseling, monitoring, and cooperation with lenders.	Maintain documentation of student loan information.
3.4.2 Students are informed of their ethical responsibilities regarding financial assistance.	The Financial Aid Department will inform students of responsibilities regarding financial assistance.	Ongoing	Review documentation on student information of responsibilities with financial assistance.	Documentation exists identifying students are informed of responsibilities with financial assistance.	Maintain documentation of student loan and student responsibilities of financial assistance. Revision: Based on MnSCU notification, students are informed about situations that may impact financial aid

Plan			Implementation		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods/s	Results of Data Collection and Analysis	Actions for program Development, Maintenance, or Revision
3.5 Integrity and consistency exist for all information intended to inform the public, including the program's accreditation status and NLNAC contact information.	<p>Information available for the public will be accurate and consistent.</p> <p>The public and students are informed of NLNAC accreditation status and goal to attain future accreditation.</p>	<p>Every semester and with each revision</p> <p>Information related to NLN accreditation is shared with students and public as it is available.</p>	<p>Online information and hard copies of information will be checked for accuracy and consistency by the nursing administrator</p> <p>Clear and concise information is provided to all administrators, faculty, and staff at the college regarding NLN accreditation.</p>	<p>Information is consistent.</p> <p>College administrators, faculty, and staff have been instructed on the progression and status of NLN accreditation.</p> <p>A formal press release was completed and sent to local newspapers, people of interest, and advisory board members upon Candidacy Status achievement.</p>	<p>Maintain integrity and consistency of information.</p> <p>Maintain communication to students and college/governing organization, as well as to local newspapers, people of interest, and advisory board members regarding a NLNAC site visit and status.</p>
3.6 Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.	Changes are clearly and consistently communicated.	Ongoing and at spring and fall orientations	Written documentation is kept when policies, procedures, and other information is communicated to students.	Written documentation is kept via emails to students. The students are informed of changes in the program policies and procedures via email. The Associate Degree Nursing Student Handbook is available online and has the most recent information.	<p>Maintenance of the AD Nursing Student Handbook is needed to reflect any program changes.</p> <p>Maintenance of clear and consistent communication to students by email and at orientations is needed to best serve students.</p>

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods/s	Results of Data Collection and Analysis	Actions for program Development, Maintenance, or Revision
3.7 Orientation to technology is provided and technological support is available to students, including those receiving instruction using alternative methods of delivery	All students will receive orientation to technology. Technology support will be given.	Addressed during spring and fall orientations Students not familiar with Minnesota West or D2L must complete NURS 2100 where additional orientation is provided. Every semester	Students receive technology orientation at fall and spring program orientations, as well as at general student orientations. LPNs who graduate from other programs as well as those who LPNs have been away from Minnesota West for a year or more are required to pass NURS 2100 before progressing into fall semester nursing courses. Noel Levitz Survey	Students were provided technology orientation at the general student orientation and nursing student orientation. At the program orientation in the fall semester, a librarian provided information about online research and CINHAL database utilization. An online help desk remains available to answer technology questions throughout the academic year. Students may bring laptop computers for configuration to use the Minnesota West wireless network system.	Maintenance of the technology support and accessibility is needed for program success. Maintain online help desk and ITS support services
3.8 Information related to technology requirements and policies specific to distance education is clear, accurate, consistent and accessible.	Clear information related to technology requirements for distance education students is provided.	Addressed during spring and fall orientations Ongoing	Distance education students receive technology orientation at fall and spring program orientations, as well as at general student orientations. Orientations are the same for all program students.	Orientation for on campus and distance learning students was clear, accurate, consistent, and accessible . Orientation occurs in the spring and fall.	Continued maintenance is required to inform students each academic year and academic semester to ensure students receive clear, accurate, consistent, and accessible information.

NLNAC STANDARDS PROGRAM EVALUATION
STANDARD 4

Curriculum

The curriculum prepares students to achieve the outcomes of the nursing education unit, including safe practice in contemporary health care environments.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods/s	Results of Data Collection and Analysis	Actions for program Development, Maintenance, or Revision
4.1 The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning and program outcomes.	Professional standards and guidelines are used when establishing program outcomes; the NLN (2000) Educational Competencies are used to establish program outcomes. Minnesota Board of Nursing Abilities are adhered to in the curricular plan.	Every semester	Faculty review of syllabi, course objectives, and student evaluation criterion each semester. Thoughtful faculty discussion.	Course assessment is completed each semester. Program assessment is discussed at faculty meetings. Syllabi are reviewed with course assessment. Minnesota Board of Nursing must be met for students to graduate from program. Curricular threads remain congruent.	Maintain organizational framework Continue to explore evidence-based practice methodologies. Devote time at faculty meetings discussing course and program assessment. Record discussion in minutes. Curricular revision may be topic for Think Tank discussions and Journal Club
4.2 The curriculum is developed by the faculty and regularly reviewed for rigor and currency.	Curriculum is developed by faculty, is reviewed each semester, and remains current.	Every semester	Faculty review curriculum and develop curriculum. Faculty make changes and bring them to the campus curriculum committee and then submit the changes to the College's Academic Affairs and Standards Council. General education course review is completed with collaboration of nursing faculty.	Faculty meeting minutes reflect the curricular changes. Local curriculum meeting minutes demonstrate faculty involvement as does the minutes from the Academic and Standards Council.	Continue to assess areas of curricular strength and weakness, using current evidence, results of HESI exams, NCLEX results, and student evaluations.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods/s	Results of Data Collection and Analysis	Actions for program Development, Maintenance, or Revision
4.3 The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.	Outcomes, as developed by the NLN (2002), caring theory, and MBN Abilities drive curriculum development	Every semester	Thoughtful review and discussion by faculty of program and student outcomes.	Outcomes are clear in student handbook and are used to organize curriculum. Clearer connection to course outcomes and evaluation methodologies may be helpful for students.	Ongoing development of new learning activities as appropriate to meet learning outcomes. Investigate modification of course and clinical objectives and evaluation tools to more clearly reflect organizational framework.
4.4 The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national or global perspectives.	Cultural, ethnic and socially diverse concepts are included in the curriculum.	Every semester	Evidenced in course syllabi. Reflected in evaluation assessment in multiple written assignments. Criterion included in care plan grading.	Evidence is found in course syllabi. Students must pass assignment collectively to pass nursing courses.	Ongoing development Explore possibilities for students to become more involved with diverse cultures in the community. Seek more ways to explore culturally diverse concepts.
4.5 Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes.	Multiple evaluation methods are used.	End of semester course assessment.	Multiple assessment methods are delineated in course syllabi. (I.e. Quizzes, tests, case studies, threaded discussions, care plans, process recordings, teaching/learning plans, laboratory performance, and peer teaching.)	Evidence found in course syllabi and assignment evaluation criterion.	Maintenance Seek more methods to evaluate professional behaviors and critical thinking skills. Develop grading rubrics with increased discrimination.
4.6 The curriculum and instructional processes reflect educational theory, interdisciplinary collaboration, research, and best practice standards while allowing for innovation, flexibility, and technological advances.	Curriculum, instruction and educational processes remain current, innovative, and flexible. Best practices in teaching and learning will be utilized.	End of semester course assessment.	Student evaluation of instruction. Advisory Committee member input. Faculty reflection and discussion.	Student evaluations note satisfaction with online learning modalities and simulation labs. Faculty and Advisory Committee discussions indicate satisfaction.	Continue to pilot and implement varied instructional processes. (i.e. concept mapping pilot in Spring 2010). Best practices anticipated topic for Journal Club and Think Tank

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods/s	Results of Data Collection and Analysis	Actions for program Development, Maintenance, or Revision
4.7 Program length is congruent with the attainment of identified outcomes and consistent with the policies of the governing organization, state and national standards, and best practices.	Program length is consistent with state and national standards	Annually	Program length is a 10 month; 36 – 38 credit program.	Statewide change to review consistency of AD program length in Minnesota is continues	Maintenance Development needed regarding potential revision to be in compliance with Minnesota State legislative action.
4.8 Practice learning environments are appropriate for student learning and support the achievement of student learning and program outcomes; current written agreements specify expectations for all parties and ensure the protection of students.	A variety of practice environment support student learning. Clinical experiences are varied. Contracts with facilities are specific and clear.	Every semester Clinical sites are evaluated by students and faculty at the end of each semester.	Practice sites are evaluated each semester. Student evaluations of clinical sites are shared informally with faculty every semester. Clinical contracts are reviewed for currency.	Students practice in a variety of environments including laboratory, acute care, rehabilitation, and community settings. Contracts not consistently returned to MN West in a timely manner.	Maintain variety of practice environments Continue task force memberships and participation in “Bridging the Preparation-Practice Gap” with a clinical facility. Revision: Contracts sent to facilities earlier, reminders placed if not returned
4.8.1 Student clinical experiences reflect current best practices and nationally established patient health and safety goals.	A variety of clinical environments will be experienced. Students will participate in current best practices. Patient health and safety goals will be reviewed and followed.	Every semester Every semester	Clinical sites are evaluated by students. Informal evaluation is completed by the faculty each semester. Patient health and safety goals are reviewed with students during spring and fall semester orientation.	Clinical site evaluation is demonstrated by student evaluations. Clinical site requirements regarding patient health and safety goals are followed.	Development is needed for faculty to formally evaluate clinical sites each semester.

Plan			Implementation		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method/s	Results of Data Collection and Analysis	Actions for program Development, Maintenance, or Revision
4.9 Learning activities, instructional materials, and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes.	Learning activities, course materials, and evaluation methods support student learning	Every semester	Thoughtful faculty review of all course materials, learning activities, assignments, and evaluation tools to effectively support student learning.	Consistency is noted between traditional classroom and online nursing courses in accomplishment of student outcomes.	Revision: Repeated piloting and refinement of concept mapping as a learning activity during Spring 2010 to determine if appropriate to expand use Maintain <i>Software for Nurses</i> utilization.

NLNAC STANDARDS PROGRAM EVALUATION
STANDARD 5

Resources

Fiscal, physical and learning resources promote the achievement of the goals and outcomes of the nursing education unit.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for program Development, Maintenance, or Revision
5.1 Fiscal resources are sufficient to ensure the achievement of the nursing education unit outcomes and commensurate with the resources of the governing organization.	Operational budgets are adequate to support the unit's outcomes. Budget for NLN accreditation request to be achieved. Budget allocation for annual NLN membership is achieved.	Annually during budget planning	Review of operational budget, assess past needs, and project future needs by faculty and nurse administrator. Vice President of Instruction reviews budgets for adequacy and commensuration with the governing organization.	The operational budget is adequate to support learning outcomes and program needs (i.e travel, <i>Software for Nurses</i> , supplies, etc). A budget is in place for NLN accreditation and fees. NLN membership dollars are allocated within a nursing membership budget. Support of the nursing education unit budget is demonstrated by the college administrative team.	Continuous program budget evaluation will be required to maintain program outcomes. Current economic status of Minnesota public colleges will be a key factor in future annual program budgets preparation.
5.2 Physical resources (classroom, laboratories, offices, etc) are sufficient to ensure the achievement of the nursing education unit outcomes and meet the needs of faculty, staff, and students.	Sufficient classroom, laboratory, and office space is provided.	Annual student survey Annual faculty input	Student satisfaction tool endorsed by MnSCU Thoughtful faculty end of semester review	Data from student surveys indicate satisfaction with physical spaces. Faculty report of physical space adequacy.	Maintenance Development: Faculty survey form needs to be developed and distributed at the end of the semester faculty meeting. Alternative format for faculty survey could utilize D2L platform.

Plan			Implementation		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Method(s)	Results of Data Collection and Analysis	Actions for program Development, Maintenance, or Revision
5.4 Fiscal, physical, technological, and learning resources are sufficient to meet the needs of faculty and students and ensure that students achieve learning outcomes.	Learning outcomes are met. Surveys are utilized by the college to assess student satisfaction with resources.	Annually	Thoughtful review by nursing faculty. Use of <i>Software for Nurses</i> can be accessed by nursing administrator. Results are shared with faculty. Surveys are completed for evaluation of student needs.	Student learning outcomes are met. No differences in learning resources are found for distance delivery students and traditional classroom students. Students demonstrate use of software program to enhance learning and meet program outcomes. Student satisfaction survey for college and nursing program students indicate satisfaction with technology, library, and physical (classroom, supplies, etc) resources.	Maintenance and ongoing review of software technology provided to students to ensure learning outcomes. Maintain annual evaluation of student satisfaction on program/college surveys. Revision: Continue to explore possibility of nursing lab personnel

6.2 Aggregated evaluation findings inform program decision-making and are used to maintain or improve student learning outcomes.

Evaluation data is reviewed annually to identify program areas for improvement. Aggregate data is collected from the Minnesota Board of Nursing, the National Council of State Boards of Nursing (NCSBN), and the HESI licensure-preparation exam.

Licensure pass rates from the Minnesota Board of Nursing serve as a guide to program decision-making and student learning improvements. Appendix 6.1, pages 176-177, indicates the Minnesota Board of Nursing first-time pass rates over the last four years. The AD Nursing Program responded to a below program goal (<85 percent pass rate in a year) in 2007 and 2008 by altering the grading rubric.

Aggregated data utilized from HESI licensure-preparation exam scores guide program decision-making as well as highlights areas for continued emphasis or improvement. Recently, average HESI scores have resulted below the 850-900 level program goal. The response to this average, along with program content emphasis in areas for improvement, was an alteration to the grading rubric in the didactic courses. HESI exam evaluation summary documentation is available on site in the document room.

NCSBN program review reports have provided some information about student strengths and weaknesses leading to emphasis in content or focus area within student learning outcomes.

6.3 Evaluation findings are shared with communities of interest.

Communities of interest are a crucial part of the Minnesota West AD Nursing Program. Annual advisory committee meetings are a major avenue of communication to communities of interest. Area facilities, health care consortiums, and clinical agencies make up the communities of interest and are invited to be part of an annual advisory committee where evaluation of the program is reviewed and discussed. NLNAC goals, licensure pass rates, job placement, and program satisfaction are assessed. Additionally, faculty and the nurse administrator feel the college service area is a community of interest. Local newspapers are sent press releases to recognize significant changes and successes of the program, including changes in NLN accreditation status within the

program. The Minnesota West students are also informed via the Minnesota West website homepage. AD Nursing Program students receive direct communication by email and D2L platform announcements. The AD Nursing Program handbook is updated for the student community of interest.

6.4 Graduates demonstrate achievement of competencies appropriate to role preparation.

Role preparation of the current graduates is a high priority for the faculty and nurse administrator in the program. Role preparation and demonstration of competencies is assessed in the program by meeting the Minnesota Board of Nursing Abilities and successful completion of student learning outcomes through the AD Nursing courses. Table 6B contains the student learning outcomes. Minnesota Board of Nursing Ability information will be available in the document room at the Minnesota West AD Nursing Program home campus in Worthington.

Table 6B Student Learning Outcomes

STANDARD 6

STUDENT LEARNING OUTCOMES

Professional Behaviors

Adheres to standards of professional practice, is accountable for her/his own actions and behaviors, practices within legal, ethical and regulatory frameworks and demonstrates concern for others manifested by caring, valuing the profession of nursing, and participating in ongoing professional development.					
Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
a) practice within the ethical, legal, and regulatory framework of standards of professional nursing	Students will consistently practice within the ethical, legal and regulatory framework of standards of professional nursing.	Fall and Spring clinical courses NURS 2180, NURS 2280; Journaling in NURS 2230	Students evaluated using the Bondy scale by scoring at least the Assisted (2) level. Board of Nursing Abilities Journaling evaluated for identification and integration of concepts.	Students must score at the Assisted level (2) using the Bondy Scale (can be found in resource room).. Abilities completed. Journaling completed.	Maintain the Bondy rating system for clinical evaluation. Maintain completion of Board of Nursing Abilities. Continue the use of journaling for self-reflection.
b) demonstrate accountability for nursing care given by self and/or assigned to others.	Students demonstrate accountability for own nursing actions and verbalize appreciation for accountability associated with delegation	Fall and Spring clinical courses NURS 2180, NURS 2280, and Spring lab: NURS 2240	Students evaluated using the Bondy scale by scoring at least the Assisted (2) level. Students evaluated in didactic portion of NURS 2240.	Students must score at the Assisted level (2) using the Bondy Scale to progress in nursing program.	Maintain the Bondy rating system for clinical evaluation. Continue student self-evaluation of clinical day.
c) advocate for client rights.	Students demonstrate advocacy for client.	Fall and Spring clinical courses NURS 2180, NURS 2280	Students evaluated during the clinical day and via written work by faculty. Students complete self assessment each clinical day.	Assessment findings indicate that students recognize advocacy as an essential part of professional behaviors.	Continue faculty and student self-evaluation to assess the concept of advocacy.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
d) Maintain organization and client confidentiality	No breeches in confidentiality	Ongoing throughout program; NURS 2180; NURS 2280	Fall and Spring clinical courses NURS 2180, NURS 2280	Any violation in confidentiality is grounds for dismissal from program	Maintain the Bondy rating system for clinical evaluation.
e) participate as a member of professional organizations	Students recognize the importance of various nursing organizations and their impact on professional nursing.	Reflective journaling in NURS 2230. Participation in online discussion or face to face class lecture.	Journaling assessed for valuing membership in professional organizations	Journaling assignment demonstrate the valuing of concepts	Maintenance of lesson in NURS 2230. Development: Student Nursing Organization is missing from Minnesota West. Explore feasibility of starting a chapter so that students can participate in a pre-professional organization.
f) serve as a positive role model within healthcare settings and the community at large.	Students represent themselves and Minnesota West in a professional manner when attending clinical and when participating in community clinical opportunities.	Ongoing throughout clinical experiences: NURS 2180 and NURS 2280	Professional behaviors are assessed at clinical; must score at least at the assisted level (2) (Bondy Scale).	Students must score at the assisted level (2) using the Bondy Scale.	Maintain the Bondy rating scale for clinical evaluation.
g) recognize the impact of economic, political, social, and demographic forces on the delivery of healthcare	Students recognize impact of economic, political, social and demographic forces on delivery of healthcare.	Reflective journaling in 2230; Participation at clinical in NURS 2180 and 2280	Journaling assessed for integration of concepts presented in 2230. Demographic data is assessed using Gordon's Functional Health Patterns.	Journaling assignment demonstrates the integration of concepts	Maintain the lesson in NURS 2230; Maintain assessment in plan of care.
h) participate in lifelong learning.	Students recognize and appreciate the importance of lifelong learning	Reflective journaling in NURS 2230. Discussion held regarding lifelong learning	Journaling assessed for understanding concepts presented in 2230.	Journaling assignment demonstrate the understanding of concepts.	Maintain the lesson in NURS 2230.
i) delineate and maintain appropriate professional boundaries in the nurse-client relationship	Students recognize the significance of appropriate boundaries in the nurse-client relationship	Boundary issues are discussed in the fall orientation; Assessed using written paper work in NURS 2180 and NURS 2280	Boundary discussion held during fall orientation; Assessment of concept is completed with written work in NURS 2180 and NURS 2280	Boundary issues concepts are introduced and evaluated during clinical classes.	Maintenance

STANDARD 6

STUDENT LEARNING OUTCOMES

Communication

Utilize effective communication skills that demonstrate caring, compassion and cultural awareness.					
Plan			Implementation		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment methods	Results of Data Collection and Analysis	Action for Program Development, Maintenance, or Revision
a) Utilize therapeutic communication skills when interacting with client and significant support person(s).	Student will critique own communications and utilize therapeutic communication skills.	Ongoing Three Communication Analysis/Process Recordings are required during NURS 2180 and 2280 . Communication included in the clinical evaluation . NURS 2140 lesson/quiz in therapeutic communication completed.	Communication Analysis/Process Recordings Component of clinical evaluation Specific quiz 2140 Test questions throughout program	Students successfully complete the required assignments for the two clinical courses. Passing clinical paperwork is required to progress in the program. Average Quiz Score for Fall of 2008 was: 80.88	Action for Development: Track scores on Therapeutic Communication Analysis/Process Recordings. Compare scores from fall to spring semester.
b) Communicate relevant, accurate, and complete information in a concise and clear manner.	Students will document information that is accurate, complete, concise, and clear. Will complete appropriate handoffs during clinical	Ongoing during clinical rotations both in fall and spring. Verbal handoffs evaluated during simulation lab	Clinical Evaluation via Bondy Scale. Instructor review at clinical. Instructor evaluation during lab	Students are evaluated each clinical experience for their ability to communicate clearly both in writing /electronically and in oral communication.	Maintenance: Students must attain at least an Assisted (2) rating on the Bondy scale. Revise NURS 2240 rubric evaluation.
c) Report and document assessments, interventions, and progress toward client outcomes.	Students will report and document assessments, interventions and progress toward client goals.	Ongoing during clinical rotation both in fall and spring	Clinical Evaluation via Bondy Scale. Nursing Care Plan	Students are evaluated each day of clinical experience. Passing clinical paperwork is required to progress in the program	Maintenance: Students must attain at least and Assisted (2) rating on the Bondy Scale and pass clinical paper work.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment methods	Results of Data Collection and Analysis	Action for Program Development, Maintenance, or Revision
d) Protect confidential information.	Confidentiality is protected at all times. Violation is grounds for dismissal from program.	Ongoing during clinical rotation both in fall and spring	Clinical Evaluation via Bondy Scale.	Students are evaluated each day of clinical experience. Students instructed and given HIPAA information at fall clinical orientation and at individual clinical sites as required by the site.	Maintenance
e) Utilize information technology to support and communicate the planning and provision of client care.	Students will communicate utilizing beginning competence with information technology.	Ongoing during clinical rotation both in the fall and spring classes	Clinical Evaluation via Bondy Scale.	Students are evaluated at the clinical sites when information technology is in place for client care.	Continue requirement of individual facility clinical orientation. Development –evaluate with possible procurement of EMR for use in lab
f) Make use of appropriate channels of communication to achieve positive client outcomes.	Students will communicate essential client data to primary care providers both orally and in written form.	Ongoing during clinical rotation both in the fall and spring classes, and during simulation labs.	Clinical Evaluation via Bondy Scale. Evaluation during simulation lab	Students are evaluated each day. Simulation lab evaluation tool lacks desired level of discrimination	Maintenance of Bondy’s scale for clinical evaluation Refine 2240 evaluation rubric.

STUDENT LEARNING OUTCOMES

Assessment

Collect, analyze, and synthesize relevant data for the purposes of appraising the client's health status and planning care.					
Plan			Implementation		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
a) Assess the impact of developmental, emotional, cultural, religious, and spiritual influences in client's health care status.	Student will assess the impact of developmental, emotional, cultural, religious and spiritual influences on client to facilitate holistic client care.	<p>Daily during NURS 2180 and NURS 2280 clinicals using Gordon's Functional Health Patterns as a guide</p> <p>Time in NURS 2140 devoted exclusively to assessment.</p> <p>Nearly weekly quiz and exam questions.</p>	<p>NURS 2180 and NURS 2280 clinical evaluation tool.</p> <p>NURS 2180 and NURS 2280 care plans.</p> <p>NURS 2280 care plan and NURS 2280 clinical evaluation tool (spring semester) criterion reflect progression beyond levels expected in fall semester.</p> <p>NURS 2140 quiz focusing entirely on assessment.</p> <p>Quiz and exam questions in NURS 2120 and 2220.</p>	<p>Students are evaluated daily during the clinical experience using clinical evaluation tool. Student must earn at least an Assisted (2) rating on the Bondy scale.</p> <p>Students must successfully complete required written assignments to pass clinical courses.</p> <p>Average score on assessment quiz Fall 2008 was 77.7%.</p>	<p>Maintain clinical evaluation tool.</p> <p>Maintain care planning tool using Gordon's Functional Health Patterns.</p> <p>Maintain emphasis on progression between fall and spring semester.</p> <p>Allow time for more lab practice of head to toe assessment prior to quiz in NURS 2140.</p> <p>Maintain emphasis on assessment throughout program.</p>

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
b) Assess the client's health status by completing a health history and performing a physical, cognitive, psychosocial, and functional assessment.	Students will assess client health status, completing the health history, physical, cognitive, psychosocial, and functional assessments.	Daily during NURS 2180 and NURS 2280 clinical utilizing Gordon's Functional Health patterns	<p>NURS 2180 and NURS 2280 clinical evaluation tool.</p> <p>NURS 2180 and NURS 2280 Clinical care plans.</p> <p>NURS 2280 care plan and NURS 2280 clinical evaluation tool (spring semester) criterion reflect progression beyond levels expected in fall semester.</p> <p>NURS 2140 quiz focusing entirely on assessment.</p>	<p>Students are evaluated daily during the clinical experience using clinical evaluation tool. Student must earn at least an Assisted (2) rating on the Bondy scale.</p> <p>Students must successfully complete required written assignments to pass clinical courses.</p>	<p>Maintain care planning tool using Gordon's Functional Health Patterns.</p> <p>Maintain clinical evaluation tool.</p> <p>Maintain emphasis on progression between fall and spring semester.</p> <p>Allow time for more lab practice of head to toe assessment.</p>
c) Assess the client's response to actual or potential health problems.	Student will assess client response to actual or potential health problems.	Daily during NURS 2180 and NURS 2280 clinical.	<p>NURS 2180 and NURS 2280 clinical evaluation tool.</p> <p>NURS 2180 and NURS 2280 care plans.</p> <p>NURS 2280 care plan and NURS 2280 clinical evaluation tool (spring semester) criterion reflect progression beyond levels expected in fall semester.</p>	<p>Students are evaluated daily during the clinical experience using clinical evaluation tool. Student must earn at least an Assisted (2) rating on the Bondy scale.</p> <p>Students must successfully complete required written assignments to pass clinical courses.</p>	<p>Maintain care planning tool using Gordon's Functional Health Patterns.</p> <p>Maintain clinical evaluation tool.</p> <p>Maintain emphasis on progression between fall and spring semester.</p>

Plan			Implementation		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
d) Assess the client's response to interventions	Student will assess client response to interventions in a holistic manner.	Daily during NURS 2180 and NURS 2280 clinical.	NURS 2180 and NURS 2280 clinical evaluation tool NURS 2180 and NURS 2280 care plans Spring semester criterion reflect progression beyond levels expected during fall semester	Care plan requires documentation of response to interventions and attainment of objectives for care. Progression between fall and spring semester evident.	Maintain care planning tool. Maintain clinical evaluation tool. Maintain emphasis on progression between fall and spring semester.
e) Assess the client for changes in health status and identified needs.	Student will assess the client for changes in health status and identified needs.	Daily during NURS 2180 and NURS 2280 clinical. Family in Transition project during spring semester.	NURS 2180 and NURS 2280 clinical evaluation tool. NURS 2180 and NURS 2280 care plans. Family in Transition assignment. Spring semester criterion reflect progression beyond levels expected during fall semester	Students must successfully complete required written assignments to pass clinical courses.	Maintain care planning tool. Maintain clinical evaluation tool. Maintain emphasis on progression between fall and spring semester.
f) Assess the environment for factors that may impact the client's health status.	Student will assess the environment for factors that may impact client health status.	Daily during NURS 2180 and NURS 2280 clinical.	NURS 2180 and NURS Clinical evaluation tool Family in Transition project.	Students must successfully complete required written assignments to pass clinical courses.	Maintain clinical evaluation tool with specific objective addressing the environment. Maintain Family in Transition project.

STANDARD 6

STUDENT LEARNING OUTCOMES

Managing Care

Assist the client to move toward positive outcomes in a cost effective manner, to transition within and across healthcare settings, and to access resources.					
Plan			Implementation		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
a) Determine priority client care.	Student will prioritize to ensure safe and timely care Care.	Daily during NURS 2180 and NURS 2280 clinical. Daily during NURS 2240 Simulation lab. Frequent prioritization questions on written quizzes/exams in NURS 2120, 2220, and 2240.	NURS 2180 and NURS 2280 Clinical evaluation tools. NURS 2280 Clinical evaluation tool (Spring semester) criterion reflect progression in prioritization skills beyond level expected in Fall semester. Simulation evaluation rubric Multiple choice questions	Prioritization continues to be an area of difficulty for students. Student evaluations indicate simulation labs were helpful in developing prioritization skills.	Continue to emphasize prioritization during clinical. Continue to emphasize prioritization in simulation lab. Emphasize prioritization in concept mapping exercises Spring 09. Requiring textbook with emphasis on prioritization Spring 09. Revise 2240 simulation rubric to increase discrimination in evaluation.
b) Coordinate the implementation of individualized care for clients.	Students will provide individualized and coordinated care for clients.	Daily during NURS 2180 and NURS 2280 clinical. Daily during NURS 2240 Simulation lab	NURS 2180 and NURS 2280 Clinical evaluation tools. NURS 2280 Clinical evaluation tool (Spring semester) criterion reflect progression beyond levels expected in Fall semester simulation evaluation rubric.	Students are evaluated each clinical day. Evaluated first three days of simulation lab.	Maintain clinical evaluation tool. Increase emphasis on student progression from Fall to Spring semester. Revise 2240 simulation evaluation rubric to increase discrimination.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
c) Delegate aspects of client care to qualified assistive personnel.	Students will delegate appropriately to facilitate client safety and provide care in cost effective manner.	Daily during simulation labs Written exercises in NURS 2240	Simulation evaluation rubric Written exercises 2240 quizzes	Delegation continues to be an area of difficulty for students. Student evaluations indicate simulation labs were helpful in developing prioritization skills.	Revision - include delegation in concept mapping exercises Spring 09. Require textbook with emphasis on delegation and supervision Spring 09. Continue to emphasize delegation in simulation lab.
d) Supervise and evaluate the activities of assistive personnel.	Students will supervise and evaluate assistive personnel effectively.	Daily during simulation lab Written exercises in NURS 2240	Simulation lab evaluation Rubric Written exercises NURS 2240 quizzes	Continues to be an area of difficulty for students. Student evaluations indicate simulation labs were helpful in developing supervision skills.	Continue to emphasize supervision in simulation lab. Revise 2240 simulation evaluation rubric to increase discrimination.
e) Assist the client and significant support person(s) to access available resources and services	Students will assist clients and support person(s) access resources and services.	NURS 2280 clinical	Family in Transition assignment Identification of: *Potential client assignment *Emergency Department assignment *Community Assignment	Students must pass clinical assignments collectively to progress and graduate.	Maintain Family in Transition, Potential Client, Emergency Department, and Community assignments.
f) Implement nursing strategies to provide cost efficient care.	Students will deliver care in a cost effective manner.	NURS 2180 and 2280 clinical NURS 2240 simulation exercises	Family in Transition assignment Potential client assignment Community Assignment Clinical evaluation tool NURS 2240 exercises	Students must pass clinical assignments collectively to progress and graduate.	Maintain Family in Transition, Potential Client, Emergency Department, and Community assignments. Revise 2240 simulation evaluation rubric to increase discrimination.

STANDARD 6

STUDENT LEARNING OUTCOMES

Teaching and Learning

Promotes, maintains, and/or restores health through teaching/learning processes that are implemented in collaboration with the client, significant support person(s), and other members of the health team.					
Plan			Implementation		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
a) Develop an individualized teaching plan based on assessed needs.	Students will develop individualized teaching plans based on specific assessed needs.	<p>Students develop a teaching plan based on a case scenario in NURS 2140 lab.</p> <p>Students develop one complete teaching learning plan in NURS 2180 and one in NURS 2280 during the clinical experience.</p> <p>Students are required to identify client learning needs every clinical day.</p> <p>Students develop a teaching plan to address learning needs of their peers in NURS 2240 lab.</p>	<p>Teaching learning plan developed in NURS 2140.</p> <p>Quiz in NURS 2140</p> <p>NURS 2180 and NURS 2280 teaching plans.</p>	<p>Students complete required written assignments for clinical courses.</p> <p>Passing written clinical assignments is required to progress in the program.</p> <p>Students assess for learning need of peers, develop a teaching plan and teach peers in NURS 2240.</p>	<p>Maintain teaching / learning unit in NURS 2140.</p> <p>Maintain teaching / learning Assignment in NURS 2180 and NURS 2280.</p> <p>Maintain teaching / learning assignment in NURS 2240.</p>
b) Teach the client and significant support person(s) the information and skills needed to achieve desired learning outcomes.	Students teach the client and support person (as indicated) the skills and information needed to achieve desired outcomes.	Students teach the client following approval of plan by faculty member / staff nurse in the clinical setting.	Client / support person(s) receive appropriate teaching in the clinical setting. Teaching content and methods must be approved prior by faculty to actual teaching.	Students must implement teaching plan in the clinical setting in order to pass clinical courses.	Maintain teaching/learning assignment in the clinical setting.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
c) Evaluate the progress of the client and significant support persons(s) towards achievement of identified learning outcomes	Student will accurately evaluate progress of client/support person(s) in meeting learning outcomes.	Evaluation of learning outcomes is a requirement of written clinical assignment.	Effectiveness of teaching is evaluated by student in the clinical setting.	Students must document method(s) of evaluation of client teaching in written assignment.	Maintain teaching/ learning assignment, including student evaluation of client learning in the clinical setting.
d) Modify the teaching plan based on evaluation of progress toward meeting identified learning outcomes.	Student will modify teaching plan to facilitate increased progress in meeting identified learning outcomes.	Suggestions for modification are required component of each written teaching/learning plan.	Suggestions for modification must be included on each written teaching/learning plan.	Students are required to include modifications in each teaching/learning plan. Students must implement teaching plan in the clinical setting in order to pass clinical courses.	Maintain teaching/ learning assignment, including proposed modifications in the clinical setting.
e) provide assistive personnel with relevant instruction to support achievement of client outcomes.	Students provide assistive personnel with relevant instruction to support achievement of client outcomes.	Completed during simulation labs and debriefing sessions in NURS 2240. In each clinical scenario one student role plays assistive personnel. The primary nurse is responsible for providing instruction.	NURS 2240 Simulation evaluation rubric	Students must provide adequate instruction to assistive personnel. Discussion by lab group during simulation debriefing sessions.	Maintain simulation lab exercises. Revise simulation evaluation rubric to increase discrimination. Include teaching of assistive personnel in concept mapping – Spring 09.

STANDARD 6

STUDENT LEARNING OUTCOMES

Collaboration

Collaborate with the client, significant support person(s), peers, other members of the health team, and community agencies to bring about solutions that balance differing needs, values, and motivations for the purpose of achieving positive client outcomes.					
Plan			Implementation		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
a) Collaborate with the client, significant support person(s), and other members of the healthcare team to plan and evaluate progress towards achievement of outcomes	Students will collaborate with clients, support persons and the healthcare team effectively.	Daily during NURS 2180 and NURS 2280 clinical. Collaboration with members of health care team during NURS 2240 simulation.	NURS 2180 and NURS 2280 clinical evaluation tools NURS 2280 Clinical Evaluation Tool (spring semester) criterion reflect progression in collaboration skills beyond level expected in fall semester. Potential Client assignment Family in Transition assignment NURS 2240 Simulation grading rubric.	Students must maintain a minimum of Assisted (2) rating on Bondy scale to pass clinical. Students must pass clinical assignments collectively (includes Family in Transition and Potential client assignment) to pass clinical course.	Maintain clinical assignments and assignment evaluation tools. Maintain Potential Client assignment and Family in Transition assignment. Revise 2240 simulation rubric to increase discrimination.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
b) Interact creatively and openly with others to solve problems to achieve client goals and outcomes.	Students will interact with others to solve problems and achieve client outcomes.	Daily during NURS 2180, NURS 2280, and simulation labs.	NURS 2180 and NURS 2280 clinical evaluation tools NURS 2280 Clinical Evaluation Tool (spring semester) criterion reflect progression in creativity and problem solving skills beyond level expected in fall semester. NURS 2240 simulation grading rubric	Students must pass NURS 2180 and NURS 2280 to graduate from the nursing program.	Maintain clinical assignments and clinical evaluation tools. Revise 2240 simulation rubric to increase discrimination in evaluation.
c) Collaborate to bring about fair solutions that balance differing needs, values, and motivations for the purpose of achieving positive client outcomes.	Student will collaborate to bring about fair solutions, balancing differences, to achieve positive client outcomes.	Daily during NURS 2180 and NURS 2280 clinicals	NURS 2180 and NURS 2280 clinical evaluation tools NURS 2280 Clinical Evaluation Tool (spring semester) criterion reflect progression in working as part of the healthcare team beyond level expected in fall semester.	Students must pass NURS 2180 and NURS 2280 to graduate from the nursing program.	Maintain NURS 2180 and NURS 2280 clinical evaluation tools.

STANDARD 6

STUDENT LEARNING OUTCOMES

Clinical Decision Making

Use critical thinking that incorporates an attitude of inquiry, uses evidence-based facts, principles, and theories, tolerates ambiguity, and involves a rational creative decision making process that continually reflects, evaluates and questions as the foundation for clinical decision making.					
Plan			Implementation		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
a) Make clinical judgments and decisions to ensure accurate and safe care.	Students will consistently make clinical judgments to facilitate accurate and safe care.	Daily during NURS 2180 and NURS 2280 clinical. Daily during simulation lab exercises. Weekly quiz and exam questions in NURS 2120 and 2220 require making clinical decisions.	NURS 2180 and NURS 2280 Clinical Evaluation Tool NURS 2240 Simulation grading rubric Quizzes and exams in NURS 2120 and 2220	Students must score at the Assisted (2) level using the Bondy scale. Simulation grading rubric in past was not an effective measure of clinical decision making. Students must achieve an average of 80% to pass NURS 2120 and 2220.	Maintain clinical evaluation tool. Revise 2240 simulation rubric to increase discrimination.
b) Evaluate the effectiveness of care provided in meeting client outcomes.	Students will evaluate the effectiveness of care provided in meeting client outcomes.	Daily during NURS 2180 and NURS 2280 clinical.	Specific component of care plan grading criterion which requires students to evaluate the effectiveness of care provided and progress towards meeting client outcomes.	Students must pass collectively pass clinical assignments to pass clinical course.	Maintain criterion related to evaluation of care in the nursing care plan.

Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
c) Use evidence-based information to support critical thinking decisions	Students will use evidence-based information to support decisions.	Students are required to incorporate information from current journal article when writing nursing care plans, behavioral health papers, emergency department observation paper, community assignment papers, and when completing Family in Transition project.	Written clinical assignments	Students have difficulty differentiating evidence-based information from anecdotal information.	Spend more time during orientation and throughout program explaining evidence-based practice.
d) analyze and utilize assessment and reassessment data to plan care.	Students will analyze assessment data to plan care and continually assess to make modifications in care plan.	Daily during NURS 2180 and NURS 2280 clinical. Daily during NURS 2240 simulation labs	NURS 2180 and NURS 2280 Clinical Evaluation Tool Specific components of care plan grading criteria require students to complete assessment and reassess following nursing intervention. NURS 2240 simulation grading rubric	Students must score at the Assisted (2) level using the Bondy scale. Students must pass collectively pass clinical assignments to pass clinical course. Simulation grading rubric in past was not an effective measure of clinical decision making.	Retain clinical evaluation tool. Maintain care plan grading criterion. Revise 2240 simulation rubric to increase discrimination.

STANDARD 6

STUDENT LEARNING OUTCOMES

Caring Interventions

Utilize nursing behaviors and actions that assist clients in meeting their needs. Employ caring interventions that are nurturing, protective, compassionate, person-centered and which create an environment of hope and trust, while respecting values, beliefs, and lifestyles.					
Plan			Implementation		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
a) Protect and promote client dignity and honor the emotional, cultural, religious influences on the client's health	Students demonstrate ability to plan nursing interventions based on a comprehensive nursing assessment.	The students are assessed in all classes throughout the curriculum and at the end of program.	Care plan development in all classes; didactic and laboratory classes. HESI	Students achieve a passing grade in order to progress in the program. HESI scores indicate that MN WEST students are at an acceptable level in planning and implementation according to the nursing process.	Revision needed: National Council of State Boards of Nursing Program Reports may also be accessed to assess if Minnesota West is at an acceptable level with other schools of nursing.
b) Demonstrate caring behavior towards the client's significant support person(s), peers, and other members of the health care team.	Students need to score at a 2 or higher on the Bondy Scale during clinical and laboratory classes.	Assessed each clinical day in NURS 2180 and 2280 and in NURS 2240.	Subjective Assessment using the Bondy Tool.	Students must score at a 2 or higher.	Maintenance: Continue to assess students ability to demonstrate caring.
c) Implement the prescribed care regimen within the legal, ethical, and regulatory framework of nursing practice.	First time test takers on the HESI exam will score at an acceptable level. Students will score at a 2 or higher on the Bondy Scale during clinical laboratory classes.	Each clinical day in NURS 2180 and NURS 2280; End of program with HESI.	Subjective Assessment using Bondy Tool. HESI	HESI results indicate that students are above the recommended levels of 900 for 2008 graduates.	Maintenance

Plan			Implementation		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
d) Perform nursing skills competently, accurately, and safely in diverse settings.	Students perform skills in the clinical and laboratory settings that are at the level of a beginning professional nurse. Students are assessed for safety before their fall clinical rotation.	Each clinical day in NURS 2180 and NURS 2280. Laboratory: NURS 2140 and 2240.	Subjective Assessment in NURS 2140, NURS 2180 & NURS 2280 and NURS 22240. MN Board of Nursing Abilities are followed for assessment procedures.	Students must be able to practice safely in a laboratory setting before hospital experiences.	Maintenance. Continue to use the Board Abilities as guides. Continue subjective assessments.
e) provides a safe physical and psychosocial environment for the client.	Students must provide a safe physical and psychosocial environment at a level of a beginning professional nurse. Students must score at least a 2 on the Bondy Scale during clinical classes.	Each clinical day in NURS 2180 and NURS 2280.	Direct observation of student provides the opportunity for subjective assessment in NURS 2180 & 2280	Students must practice so that they provide a safe environment: physical and psychosocially.	Maintenance. Continue daily clinical assessment
f) Assist the client to achieve optimum comfort and functioning.	Students must assess and provide comfort measures including pain assessment and pain alleviating nursing interventions. Assessed via professional documentation during clinical.	Each clinical day in NURS 2180 and NURS 2280 Lesson in 2220 Pain, and rehabilitation nursing.	Direct observation of students and assessment of student professional documentation provides the opportunity for subjective assessment in NURS 2180 and 2280. Minnesota State Board of Nursing abilities assess students ability to assess pain and to react appropriately.	Students must assess clients pain accurately and react accordingly. Students assist clients with ADL's at clinical to guide them to independence.	Maintenance. Continue daily clinical assessment and continue with didactic class. Continue to assess with Minnesota Board Ability as a guide.

- 6.5 The program demonstrates evidence of achievement in meeting the following program outcomes:
- performance on licensure exam
 - program completion
 - program satisfaction
 - job placement

Table 6C Program Outcomes

PROGRAM OUTCOMES

Program Outcomes Summary Table				
			Resulting Action(s) Taken/ To be Taken with Time Frame for Implementation	
Required Program Outcomes	Expected Level of Achievement	Actual Level of Achievement	Action(s)	Time Frame
<u>Performance on NCLEX</u>	The goal for the Minnesota West AD Nursing Program is for 85% of the students attempting the NCLEX-RN exam will pass on the first attempt. *Data based from Appendix 6.1	2004 - 91% 2005 - 85% 2006 - 89.2% 2007 - 81.6% 2008 – 79.5% 2009 – >93.5% (two additional passes 11/09)	Prior to 2007 results from the NCSBN/MBN, the AD Nursing Program faculty realized a grading rubric needed changing to enhance student success on NCLEX-RN. The HESI exam results will continue to be utilized to predict student NCLEX-RN success.	Grading rubric changed Fall 2007 from passing at 76% to 80%.

<u>Program Completion</u>	The goal of the AD Nursing Program is that 85% of the students will graduate on time. *Data from Figure 3A.	<table border="1"> <thead> <tr> <th></th> <th>Fall 07</th> <th>Fall 08</th> <th>Fall 09</th> <th>Fall 10</th> </tr> </thead> <tbody> <tr> <td>Start:</td> <td>97</td> <td>92</td> <td>89</td> <td>108</td> </tr> <tr> <td>Graduate:</td> <td>90</td> <td>76</td> <td>61</td> <td>TBD</td> </tr> <tr> <td></td> <td>93%</td> <td>83%</td> <td>69%</td> <td>TBD</td> </tr> </tbody> </table>		Fall 07	Fall 08	Fall 09	Fall 10	Start:	97	92	89	108	Graduate:	90	76	61	TBD		93%	83%	69%	TBD	Progression plan is utilized to assist in program completion. Attrition is high. However, <85% graduated in May 09. Stricter adherence to GPA standard of admission Spring 2010.	Progression standards in progress.
	Fall 07	Fall 08	Fall 09	Fall 10																				
Start:	97	92	89	108																				
Graduate:	90	76	61	TBD																				
	93%	83%	69%	TBD																				
<u>Program Satisfaction</u>	At six months post graduation, at least 85% of responding employers will express satisfaction with the AD Nursing Program graduate.	Informal comments from employers/communities of interest are always welcomed. However, poor response rates to surveys limit statistical data. Response rates <10% return from area employers, despite providing information on the importance of the survey at the Advisory Committee Meeting.	Survey Monkey tool created. New survey tool developed and first responses arriving at college. Alternative survey options have been investigated (i.e survey monkey, zoomerang survey, etc).	At the Advisory Committee meeting in the Spring 2009, assistance will be requested on May 08 graduates and request suggestions for future feedback.																				
Graduate Satisfaction	At six months post graduation, at least 85% of responding graduates will express satisfaction with specified components of the AD Nursing Program with a “strongly agree” or “agree” level.	<u>Graduate Data by Year:</u> (% response of “strongly agree” and “agree”) 2004 – all responses >85% 2005 – all responses >85% 2006 – all but 2 responses >85% 2007 – all but 3 responses >85% 2008 – all responses >85% 2009 – in progress	Maintain goal to achieve >85% on program satisfaction surveys annually. Survey Monkey tool created. New survey tool developed and first responses arriving at college.	Continue survey evaluation six months post graduation.																				
<u>Job Placement</u>	At six months post graduation, at least 85% of graduates seeking employment as professional nurses will report placement in a nursing position in a site and time percentage desired.	86.7% of respondents from May 07 graduates surveyed indicated employment in professional nursing positions. Fall 07 total graduates: 90 Full-time employment: 60.0% Part-time employment: 20.0% Continuing education: 4.4% Status unknown: 8.9%	Continue annual reports. Strong indication for accurate statistical data with only 8.9% unknown.	Time of survey goal is six month post graduation. Additional time may be used to gather student data for increased statistical analysis.																				

6.5.1 The licensure exam pass rates will be at or above the national mean.

Minnesota West's AD Nursing Program reviews licensure exam pass rates of first-time test takers and compares them with other state and national AD nursing programs. Minnesota West's AD Nursing Program has established a goal of passing to be greater than 85 percent each year. Appendix 6.1, found on pages 176-177, contains Minnesota Board of Nursing Pass Rates for the state and national comparison from 2005 through 2008 as well as the current year's to date results. The AD Nursing Program does score often above the program goal and above the state and/or national mean. In 2007 and 2008, a lower than national mean stimulated program decision-making, with a grading rubric change result.

See Table 6C, Program Outcomes, for the expected level of achievement, actual level of achievement, and actions taken related to licensure exam pass rates.

6.5.2 Expected level of achievement for program completion are determined by the faculty and reflect program demographics, academic progression, and program history.

The AD Nursing Program faculty members have set a 85 percent program completion rate goal. In review of program completion, 2007 and 2008 fell below the 85 percent program outcome goal. Maintenance of the 85 percent goal is desired for continued student retention.

The AD Nursing Program completes necessary retention data forms annually for the governing organizational data. The Allied Health/Nursing Division chair collects the forms annually.

See Table 6C, Program Outcomes, for the expected level of achievement, actual level of achievement, and actions taken related to program completion.

6.5.3 Program satisfaction measures (qualitative and quantitative) address graduates and their employers.

Surveys are valuable indicators of the program views from graduates. Program satisfaction rates and graduate satisfaction rates are derived from the Minnesota West AD Nursing Program survey tool. The Program Satisfaction and Graduate Survey results may be found in the document room. The surveys sent to students six months post graduation after a

presumed time of achieved employment and potential work experience. Graduates are asked to rate eight primary questions in program satisfaction areas. Students rate answers as: strongly agree, agree, disagree, and strongly disagree. An additional summary category of “no response” is included in the survey.

Previous response rates range from 23 percent to 50 percent. The AD Nursing Program feels that the response rate is not sufficient to achieve true student satisfaction measurement. Alternative methods of program satisfaction review within an online venue (i.e. Survey Monkey, etc) are being investigated and piloted by the program at this time.

In addition to the student satisfaction survey, an employer satisfaction survey is also mailed from the program. Not to be confused with the job placement rating, the employer satisfaction tool is mailed to known employers of the AD Nursing Program graduates and asks questions of preparedness and ability as a professional nurse beginning employment with the facility. Due to a less than 10 percent response rate, no data has been developed on employer satisfaction. Informal assessment is always welcomed, but statistical data is needed. A plan to enhance statistical analysis has been developed with the Advisory Committee. A tool is being piloted in Survey Monkey with the goal of achieving an increased response rate.

See Table 6C, Program Outcomes, for the expected level of achievement, actual level of achievement, and actions taken related to program and employer satisfaction.

6.5.4 Job placement rates are addressed through quantified measures that reflect program demographics and history.

The college employment survey is utilized to determine AD Nursing Program job placement rates. At this time, job placement rates are high and exceeding the AD Nursing Program goal of 85 percent. From the data completed in the Fall of 2008, 86.7 percent of respondents surveyed indicated employment in professional nursing positions. Of the respondents, 60 percent gained full-time employment, 20 percent gained part-time employment, 4.4 percent continued education, and 8.9 percent are unknown.

Annual reports of statistical data from past academic years may be viewed on site in the documentation room. See Table 6C, Program Outcomes on pages 152-153, for the expected level of achievement, actual level of achievement, and actions taken related to job placement.

6.6 The systematic plan for evaluation encompasses students enrolled in distance education and includes evidence that student learning and program outcomes are comparable for all students.

The systematic plan for evaluation encompasses students enrolled in distance education and includes evidence that student learning and program outcomes are comparable for all students.

Although Minnesota West has developed a distance education delivery model for didactic nursing courses, course standards, and program outcomes are not differentiated. All AD Nursing Program students, regardless of course delivery method, must meet the same learning and program outcomes. The same standards must be achieved for students to successfully pass courses and complete the nursing program. It is difficult to compare overall graduation rates, attrition rates, employment rates and satisfaction rates because many students take portions of the program via distance learning and portions in the classroom learning environment. The goal of the program's delivery method is to remain congruent with the college, MnSCU, and program mission/vision to provide accessibility. The learning environments within the AD Nursing Program provide accessible nursing education.

References

- Advisory Board Company. (2008). Bridging the preparation-practice gap. Best practices for accelerating practice readiness of nursing students. Washington DC: The Advisory Board Company.
- Berman, A., Snyder, S.J., Kozier, B., & Erb, G. (2008). *Fundamentals of nursing: Concepts, process, and practice*. (8th ed.). Upper Saddle River: Pearson.
- Boland, D.L. (2005). Developing Curriculum: Frameworks, Outcomes, and Competencies. In D.M. Billings & J.A. Halstead (Eds). *Teaching in nursing: A guide for faculty* (pp. 167 -185). St. Louis: Elsevier.
- Boyer, E. (1991). The scholarship of teaching from scholarship reconsidered: Priorities of the professoriate. *College Teaching*, 39 (1), 11-14.
- Boyer, E. (1992). Scholarship reconsidered: Priorities of the Professoriate. *Issues in Accounting Education*, 7 (1), 87-92.
- Caputi, L. & Blach, D. (2008). *Teaching nursing using concept maps*. Glen Ellyn, Illinois: College of DuPage Press.
- Clark, C.E., & Ramsey, R.W. (2005). In D.M. Billings & J.A. Halstead (Eds). *Teaching in nursing: A guide for faculty* (pp. 397- 421). St. Louis: Elsevier.
- Finke, L.M. (2005). Teaching in Nursing: The Faculty Role. In D.M. Billings & J.A. Halstead (Eds). *Teaching in nursing: A guide for faculty* (pp. 3-20). St. Louis: Elsevier.
- Goode, C.J. (2000). What constitutes the “evidence” in evidence-based practice? *Applied Nursing Research* 13, (4), 222-225.
- Kirkpatrick, J.M., DeWitt-Weaver, D., & Yeager, L. (2005). Strategies for Evaluating Learning Outcomes. In D.M. Billings & J.A. Halstead. *Teaching in nursing: A guide for faculty* (pp. 465-491). St. Louis: Elsevier.
- Kozier, B., Erb, G., Berman, A., & Snyder, S.J. (2004). *Fundamentals of nursing: Concepts, process and practice*. (7th ed.). Upper Saddle River: Pearson.
- Krichbaum, K., Rowan, M., Duckett, L., Ryden, M., & Savik, K. (1994). The clinical evaluation tool: A measure of the quality of clinical performance of baccalaureate nursing students. *Journal of Nursing Education*, 33(9), 395-404.
- National League for Nursing. (2000). *Educational competencies for graduates of associate degree nursing programs*. National League for Nursing.

- Oermann, M.H., & Gaberson, K.B.(1998). *Evaluation and testing in nursing education*. New York: Springer Publishing.
- Rowles, C.J., & Brigham, C. (1998). Strategies to promote critical thinking and active learning. In D.M. Billings & J.A. Halstead (Eds). *Teaching in nursing: A guide for faculty* (pp.247-274). Philadelphia: Saunders.
- Sauter, M.K., & Applegate, M.H. (2005). Educational Program Evaluation. In D.M. Billings & J.A. Halstead (Eds). *Teaching in nursing: A guide for faculty* (pp. 543-599). St. Louis: Elsevier.
- Twigg, P., Rasmussen, L., & Speck, D.J. (2005). Developing and Using Classroom Tests. In D.M. Billings & J.A. Halstead (Eds). *Teaching in nursing: A guide for faculty* (pp. 493-519). St. Louis: Elsevier.
- Scheetz, L. J. (2000). *Nursing faculty secrets*. Philadelphia: Hanley & Belfus.
- Stull, A., & Lantz, C. (2005). An innovative model for nursing scholarship. *Journal of Nursing Education, 44* (1), 493-497.
- Watson, J. (1989). Watson's Philosophy and Theory of Human Caring in Nursing. In J. Riehl-Sisca (Ed.). *Conceptual models in nursing practice* (3rd ed.). Norwalk, CT: Appleton & Lange.
- Worral, P. S. (1997). Evaluation in Health-Care Education. In S.B. Bastable (Ed). *Nurse as educator: Principles of teaching and learning*. Boston: Jones and Barlett.

Nursing, A.S. (Registered Nurse)

We are accepting applications for the 2010-2011 nursing programs which begin with nursing coursework in the fall of 2010. We will accept applications from June 15, 2009 through February 15, 2010. Applications, transcripts, and/or supporting documents received after February 15, 2010 will not be considered for the fall 2010 start date.

Nursing A.S. is designed for Licensed Practical Nurses who wish to obtain the Associate in Science in Nursing Degree. It is an entrance point for mobility students who have graduated from another nursing program or have completed Minnesota West's Practical Nursing program. After successful completion of the Nursing A.S. Program, students are awarded the Associate Degree in Nursing and are then eligible to take the NCLEX-RN examination. At this point, students are also eligible to articulate to BSN/BAN program in the MnSCU system.

Admission requirements include: a minimum decision score of 80 on the NLN exam, a grade of C or higher in all required coursework, a minimum GPA of 2.5, and completion of the courses described below.

***NURS 2100**, Professional Nursing Transition, is required prior to entrance into Fall Semester nursing classes for students who have graduated from another nursing program or are returning to Minnesota West's Nursing Program.

LPN Licensure is required prior to taking any NURS courses (exception NURS 2100) in the Nursing program.

The following course sequence is required for completion of this program. Only students who have been accepted into the Nursing program are allowed to take the nursing courses. The non-NURS courses shown may be taken either before or during the program.

Prerequisites

Practical Nursing Diploma **OR** completion of Practical Nursing program (Advanced Standing) 9

CSCI 1102 Intro to Microcomputers 3

BIOL 2245 Medical Terminology 2

BIOL 2201 Anatomy 4

PSYC 1150 Developmental Psychology 3

ENGL 1101 Composition I 3

*NURS 2100 Professional Nursing Transition 2 (see guidelines above)

Prerequisite Credits Total: 24-26

Fall Semester

SPCH 1101 Introduction to Speech 3

BIOL 2202 Physiology 4

NURS 2120 Nursing Across Lifespan 4

NURS 2140 Professional Nursing Skills Lab 2

NURS 2180 * Clinical Applications 2

Sociology Elective Course 3

Spring Semester

PHIL 2201 Intro to Ethical Theory 1

PHIL 2222 Medical Ethics 1

Humanities Elective Course 3

NURS 2220 Nursing Across Lifespan II 4

NURS 2230 Trends and Issues 1

NURS 2280 * Clinical Applications 3

NURS 2240 Manager of Care 2

General Education Electives 3 - 5

Total AD Program Credits: 36-38 credits

Prerequisite and AD Program Credits: 60-64 credits

AD Nursing Program Curriculum Outline – Appendix A

Recommended electives include: ENGL 1102, humanities, social sciences (HIST 1101, HIST 1102, geography, political science or economics), chemistry, NSCI 1100, BIOL 1115, PSYC 1101

Humanities: choose from the areas of art, literature, theatre, HIST 1111, HIST 1112, music, or any course with HUM designator

Prior to graduation, a licensure preparation exam (HESI) is required. Students with a HESI score over 900 or HESI remediation within four weeks of completion of spring semester progresses toward graduation. The HESI is an indicator of success on the NCLEX-RN test.

* Clinical situations are a part of the program and are done locally in area medical facilities. On-campus and distance learning students need to be prepared to travel to local clinical sites as part of the program.

Additional program information can be found at the Minnesota West AD Nursing Program homepage:
www.mnwest.edu/nursing.

The AD Nursing Program curricular outline: <http://www.mnwest.edu/programs/program-type/as/nursing/>

Faculty Profile									
Full or Part Time Unlimited Status Faculty of Associate Degree Nursing Program									
Faculty Name	FT/PT	Date of Initial Appointment	Rank	Baccalaureate Degree and Name of Institution Granting Degree	Master's Degree and Name of Institution Granting Degree	Doctorate Degree and Name of Institution Granting Degree	Areas of Clinical Expertise	Academic Teaching (T) and Other (O) Areas of Responsibility	
								(T)	(O)
Diane Vangsness	FT	1997	100%	BA Nursing Metropolitan State University 1993	MA Nursing College of St Scholastica 1999		*Public Health Nurse *Staff RN – rural hospital nursing, home health care *School Nurse	Classroom and Clinical Instructor: NURS 2120 NURS 2220 NURS 2140 NURS 2230 NURS 2240 NURS 2180 NURS 2280 NURS 2100 NURS 2275	*Clinical Coordinator for 09-10 year *provides clinical orientation for AD students *Union Faculty Representative for 09-10 year *facilitates optional preceptorships for graduating AD students *mentors new adjunct faculty *provides orientation for new adjunct faculty

Faculty Profile – Appendix 1.1

<p>Erika Freking</p>	<p>PT</p>	<p>2002 – AD and PN programs 2008 – AD program</p>	<p>40% part time</p>	<p>BA, Biology and Chemistry Southwest State University 1998</p>	<p>MA, Nursing, Minnesota State University 2007</p>		<p>*Certified Nurse Practitioner with family medicine emphasis *Staff RN – rural hospital nursing</p>	<p>Classroom instruction and clinical instructor: NURS 2120 NURS 2180 NURS 2240 NURS 2280</p>	<p>*Serves as Clinical Coordinator when assigned *continues to be a communication link with the area health care facilities of program in CNP role</p>
<p>Karen Wiltout</p>	<p>PT</p>	<p>2002</p>	<p>75% AD Program</p>	<p>BSN South Dakota State University 2000</p>	<p>MSN, Metropolitan State University Graduation: May 2010</p>		<p>*Supervisor RN – rural hospital *PHN *Staff RN – rural hospital nursing, CCU/ICU, public/community health including jail/inmate nursing services</p>	<p>Classroom and Clinical Instructor: NURS 2120 NURS 2140 NURS 2240 NURS 2180 NURS 2280</p>	<p>*Assist with simulation goals of program – business plan development *maintains program lab inventory and organization</p>
<p>Jane Wrede</p>	<p>PT</p>	<p>2006</p>	<p>40% part time</p>	<p>BSN, Minnesota State University 2001</p>	<p>MSN, certificate: Nurse Midwife, University of Minnesota 2003</p>		<p>*Certified Nurse Midwife *Staff RN – OB, rural hospital nursing *Long term care facility director</p>	<p>Classroom and Clinical Instructor: NURS 2240 NURS 2180 NURS 2280 NURS 2100 NURS 2275</p>	<p>*strong communication link to distance learning students and health care facilities</p>

Faculty Profile

Adjunct Status Faculty of Associate Degree Nursing Program

Nila Gilbertson	PT	2008	Adjunct	BSN University of Iowa College of Nursing 2002	Plan established: evaluation of MSN goals - in progress		*Staff RN – rural hospital nursing *Cross Cultural Nursing Experience in Japan	Clinical Instructor: NURS 2180 NURS 2280 Instructs with MSN faculty; expert at facility	
Barb Nordquist	PT	2008	Adjunct	BA, Nursing Presentation College	MAN College of St. Scholastica Clinical Nurse Specialist		*Clinical Leader of Chippewa County Montevideo Hospital - rural nursing: ED, ICU, and all inpatient nursing areas *leads several PI teams in hospital *WOCN	Clinical Instructor: NURS 2180 NURS 2280	
Gail Schnieder	PT	2008	Adjunct	BSN South Dakota State University 1990	MA, Nursing College of St. Scholastica 1999		*diabetes education coordinator *clinical preceptor for MSN, BSN, and AD N candidates *director of nursing *charge nurse *staff nurse – rural hospital and home health	Clinical Instructor: NURS 2180 NURS 2280	

Faculty Profile – Appendix 1.1

Alyssa Zweifel	PT	2008	Adjunct	BSN, South Dakota State University 2008	MSN plan established: in progress; South Dakota State University Graduation: 2011		*Patient Care Supervisor for urban hospital *Charge RN - Rehab *Staff RN – Rehab,	Clinical Instructor: NURS 2180 NURS 2280 08-09: AD clinical coordinator mentoring as plan for MSN is established – oversee all clinical	
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Additional Members (Non-Faculty) of Associate Degree Nursing Program

<p>Ruth Van Heukelom, Director of Nursing – Associate Degree Nursing Program</p>	<p>FT</p>	<p>2009 Faculty: 1991-2009</p>	<p>Director</p>	<p>BSN Graceland College 1990</p>	<p>MSN South Dakota State University, Clinical Nurse Specialist 1997</p>	<p>DNP Minnesota State Colleges and Universities Graduation: May 2010</p>	<p>*Faculty of Minnesota West AD Nursing Program 1991-2009 *Staff RN – rural hospital nursing, ED *Supervisor RN – ED *Director of Nursing Services – long term care *Wound /Ostomy Nurse - CWOCN</p>	<p>Classroom and Clinical Instruction Experience: NURS 2120 NURS 2220 NURS 2140 NURS 2230 NURS 2240 NURS 2180 NURS 2280 NURS 2100</p>	<p>*Served as Clinical Coordinator as assigned when faculty *Awards of Excellence for online coursework development and simulation application development for the AD program *Faculty of the Year Award – 2008</p>
<p>Mitz Diemer</p>	<p>PT</p>	<p>1976</p>	<p>AD Program Support Staff – Administration Assistant: 80% time shared with PN program</p>	<p>AA, Liberal Arts</p>				<p>No classroom instruction</p>	

Scholarly Activities of AD Nursing Faculty

Faculty member	Scholarship of Discovery	Scholarship of Integration	Scholarship of Application	Scholarship of Teaching
Diane Vangsness	Master's thesis: <i>Educational Motivations of Masters Degree Nursing Students</i>	Collaborates with facilities as Clinical Coordinator MnSCU Award for Excellence: Health Watch	Active involvement in Minnesota Nurses Association Education Commissioner in Minnesota Nurses Association	Teaches land based didactic and lab classes; clinical instructor
Erika Freking	Master's thesis: <i>Exercise as an Intervention to Enhance Subjective Sleep and Reduce Self Reported Fatigue in Women: A Replicated Pilot Study</i>	Collaborates with multiple disciplines in work as FNP	Employment as Family Nurse Practitioner	Clinical faculty. Teaches online courses
Jane Wrede	Master's thesis topic: Risk, safety and benefits of vaginal birth following C-section	Recent work with multiple disciplines as Director of Nursing	Recent employment in nursing management	Involved further development of low fidelity simulation experiences Teaches online course
Karen Wiltrot	Master's work addresses new nursing graduate transition to the workplace	Working with Sanford Regional Hospital on new graduate orientation MnSCU Award for Excellence: Health Watch	Has been collaborating with hospital nurse administrator to further develop new nursing graduate development.	Continued refinement of high fidelity simulation lab experiences. Teaches online didactic courses, clinical and lab instructor
Gail Schneider	Master's thesis: <i>Nurses Inference of Pain and the Decision to Intervene for Culturally Different Patients</i>	Recently worked throughout Avera Marshall as WOC nurse	CWOCN Credential Strong relationships throughout Avera Marshall Regional Medical Center	Clinical faculty
Barbara Nordquist	Master's thesis: <i>Is There a Relationship between Nurse Patient Ratios and Medication Errors?</i>	Works as head of heart failure team, stroke team, and rapid response team	CWOCN Credential. Employment as clinical nurse leader in clinical facility	Clinical faculty
Alyssa Zweifel	Master's thesis – in development	Works with multiple disciplines on all units as patient care supervisor	Employment as patient care supervisor in clinical facility	Clinical faculty
Nyla Gilbertson		Serves as Minnesota West's link with the Mayo Health System	Employment at Fairmont Medical Center, Mayo Health System	Clinical faculty
Ruth Van Heukelom	Master's thesis: <i>Patient Satisfaction with Selected Aspects of Care Following Total Knee Arthroplasty</i> Taylor Fellowship in Family Nursing	MnSCU Awards for Excellence in simulation, concept mapping, and caring for dying clients and families	PRN employment at Avera McKennan CWOCN Credential	Development of online nursing courses Development of simulation labs

Scholarship as described by Boyer, 1992



NURSING PROGRAM APPLICATION

DEADLINE

The application deadline for the 2010-2011 nursing program is February 15, 2010. Everything **MUST** be received in the Admissions Department by February 15, 2010. Late applications, transcripts, and/or supporting documentation will **NOT** be considered.

PLEASE PRINT CLEARLY. Please answer all the questions on this application. If you do not, your admission to Minnesota West will be delayed. Items in this section will be used for identification and to determine admission. Items will also be used for advising and counseling, course placement, financial aid decisions, and institutional research.

PERSONAL DATA

_____ Social Security Number *(Providing your social security number is voluntary. If you do not provide this number, your application will still be processed. Without the information, there may be a delay in your ability to receive financial aid or to register for classes. International students and non-immigrants must complete the international application form and be admitted as international students before they can be accepted into the nursing program)*

Name (Last, First, Middle)

Name used on high school records or other education records and transcripts if different from above

Current Mailing Address City State Zip Code Country

Permanent Address, if different from above (House/Apartment Number, Street, PO Box/Rural Route) City State Zip Code Country

Home Phone Work/Business/Day Time Phone Cell Phone Email Address

ADMISSION DATA

Please refer to the Nursing Program descriptions located on this application or at www.mnwest.edu/nursing before making your selection below. Indicate the program, location and semester you are applying for by checking the boxes and filling in the year. Our nursing programs begin in the fall of each year. General education coursework can be completed before acceptance into the nursing programs. **NOTE: Some online lecture coursework may be available. If you are interested in that option, please write on your nursing application that you would like to be considered for online lecture coursework if space is available.**

- Practical Nursing (select campus)** Fall Semester, 2010
 - Granite Falls Campus – ITV on Granite Falls Campus in Granite Falls, MN
 - Pipestone Campus – Face-to-Face on Pipestone Campus in Pipestone, MN
 - Worthington Campus – Face-to-Face on Worthington Campus in Worthington, MN
- Nursing, A.S. (Registered Nurse) (select campus)** Fall Semester, 2010
 - Granite Falls Campus – ITV on Granite Falls Campus in Granite Falls, MN
 - Pipestone Campus – ITV on Pipestone Campus in Pipestone, MN
 - Worthington Campus – Face-to-Face on Worthington Campus in Worthington, MN
- Three Year Nursing Plan (lecture online, labs and clinicals face-to-face)** Fall Semester, 2010

NOTE: The Three Year Nursing Plan is a combination online and face-to-face program. Applicants are accepted into the three year cohort for this program. The lecture is online. Labs are face-to-face in Jackson and Granite Falls. Clinicals are face-to-face at multiple sites in southwest Minnesota. General education coursework begins in fall 2010; practical nursing coursework begins in fall 2011; registered nursing coursework begins in fall 2012.

STATEMENT OF UNDERSTANDING

By signing below, I agree to the following:

1. This application is valid only for the semester for which I have applied. If necessary, it will be my responsibility to reapply.
2. I have reviewed and understand that I must successfully complete the prerequisites prior to the fall 2010 semester.
3. I have reviewed and understand that I must successfully complete the admission requirements.
4. I understand that if information is missing from my file, I will **NOT** be admitted to the Nursing Program.

Signature (required by all applicants)

All of the information included is true and complete to the best of my knowledge. I understand that misrepresentation of application information is sufficient grounds for canceling admission. I have read and understand the general nursing information, the application process and the admissions criteria as outlined at www.mnwest.edu/nursing.

- All applicants will be notified in writing of admission status within six weeks of deadline
- **Incomplete applications will not be accepted.** Please initial here _____

Signature

Date

Practical Nursing – This is a 37-credit diploma program offered face-to-face in Pipestone and Worthington and over ITV in Granite Falls
After successful completion of general education coursework and two semesters of nursing courses, you will earn a diploma and be eligible to take the NCLEX-PN licensing exam. After you have completed the diploma program and the NCLEX-PN licensing exam, you may practice as a licensed practical nurse or progress into the Nursing, A.S. (Registered Nurse) Program. Admission requirements include:

- Completed MnSCU Application for General Admission or apply online at www.mnwest.edu/nursing
- A one-time non-refundable \$20 application fee must be sent with the MnSCU application form
- Official final high school transcript with graduation date OR a copy of completed GED certificate
- Completed Nursing Program Application (located within this packet)
- Official copies of college coursework from each college you have attended sent directly to the Admissions Department
- Results of the PSB Nursing Aptitude Test
- Results of the Accuplacer Test

Nursing, A.S. (Registered Nurse) – This is a 36-38 credit Associate in Science degree offered face-to-face in Worthington and over ITV in Granite Falls and Pipestone

With this option, after successful completion of the diploma program and NCLEX-PN exam, you may continue on in the second year of the nursing curriculum to be eligible to earn an A.S. degree. This is also an entry point for Licensed Practical Nursing mobility students who have graduated from another Practical Nursing Program or have exited Minnesota West's Practical Nursing Program and are returning to continue with their registered nursing coursework. After successful completion of the 36-38 credits and the National Council Licensure Examination – Registered Nursing (NCLEX-RN), you may practice as a registered nurse. Visit our website at www.mnwest.edu/nursing for prerequisites and course curriculum. Admission requirements include:

- Licensed Practical Nurse
- Completed MnSCU Application for General Admission or apply online at www.mnwest.edu/nursing
- A one-time non-refundable \$20 application fee must be sent with the MnSCU application form
- Official final high school transcript with graduation date OR a copy of completed GED certificate
- Completed Nursing Program Application (located within this packet)
- Official copies of college coursework from each college you have attended sent directly to the Admissions Department
- Results of the NLN Test
- Results of the Accuplacer Test

Three Year Nursing Pathway – This is a six-semester 76-78 credit Associate in Science degree option with online lecture and face-to-face labs and clinicals in southwest Minnesota

This option is for the student who wants to spread the nursing program over three years. The first year is general education coursework; the second year is practical nursing coursework; the third year is registered nursing coursework. The lecture part of the program is delivered online and via ITV. The labs and clinicals are face-to-face in southwest Minnesota. Students in this cohort have responsibilities throughout the year to attend mandatory campus activities such as class meetings/orientations; mid-term and final exams; class presentations, etc. Visit our website at www.mnwest.edu/nursing for prerequisites and course curriculum. **You must be a Licensed Practical Nurse before progressing into the registered nursing coursework.** Admission requirements include:

- Completed MnSCU Application for General Admission or apply online at www.mnwest.edu/nursing
- A one-time non-refundable \$20 application fee must be sent with the MnSCU application form
- Official final high school transcript with graduation date OR a copy of completed GED certificate
- Completed Nursing Program Application (located within this packet)
- Official copies of college coursework from each college you have attended sent directly to the Admissions Department
- Results of the PSB Nursing Aptitude Test
- Results of the Accuplacer Test

Completed Application

Send completed applications for Practical Nursing – Granite Falls & Worthington, Nursing A.S., or Three Year Nursing Pathway to:

Mitz Diemer, Minnesota West-Worthington Campus, 1450 Collegeway, Worthington, MN 56187 – 800-657-3966 or mitz.diemer@mnwest.edu

Send completed applications for Practical Nursing - Pipestone Campus to:

Eileen Christensen, Minnesota West-Pipestone Campus, PO Box 250, Pipestone, MN 56164 – 800-658-2330 or eileen.christensen@mnwest.edu



**DECLARATION OF INTENT
2010-2011 Application for Associate Degree
Nursing Program**

_____ **Social Security Number** (*Providing your social security number is voluntary. If you do not provide this number, your application will still be processed. Without the information, there may be a delay in your ability to receive financial aid or to register for classes*)

Name (Last, First, Middle)

Name used on high school records or other education records and transcripts if different from above

Current Mailing Address (House/Apartment Number, Street, PO Box/Rural Route) City State Zip Code Country

Permanent Address, if different from above (House/Apartment Number, Street, PO Box/Rural Route) City State Zip Code Country

Home Phone Work/Business/Day Time Phone Cell Phone Email Address

PLEASE CHECK ONE OF THE FOLLOWING CHOICES AND RETURN THE COMPLETED FORM BY FEBRUARY 15, 2010 to: Mitz Diemer, Nursing Department, Minnesota West-Worthington Campus, 1450 Collegeway, Worthington, MN 56187

I intend to take NURS 1295, PN Integration, take the Licensure by Exam for Practical Nurses, and continue to the 2010-2011 AD Nursing Program. I understand the following conditions must be met prior to beginning the AD Nursing Program in the fall of 2010.

- I must successfully complete, with a minimum grade of C, all coursework required in the nursing program, including prerequisites, general education courses, nursing courses and CSCI 1102.
- I must pass the Licensed Practical Nurse Licensure for Examination by **August 15, 2010**.
- I must maintain current certification in CPR.
- I must maintain current health records and immunizations as required by Minnesota West Community & Technical College throughout the nursing program.
- I must abide and agree with the policies and procedures set forth in the Nursing Handbook.
- I must prepay \$100 of registered nursing year tuition to reserve a place in the 2009 AD Nursing Program by **March 31, 2010**.

I wish to exit upon completion of the Practical Nursing Program with a diploma from Minnesota West Community & Technical College. I will register for NURS 1295, PN Integration, for 2 credits, and take the Licensed Practical Nurse Licensure for Examination. I do not plan to continue in the 2010-2011 AD Nursing Program.

Declaration of Intent / Application for AD Nursing Program – Appendix 4.2

Signature *(required by all applicants)*

All of the information included is true and complete to the best of my knowledge. I understand that misrepresentation of application information is sufficient grounds for canceling admission.

I have read and understand the General Nursing Information, the Steps to Apply for the Nursing Program and the Admissions criteria as outlined.

Applicant's Signature

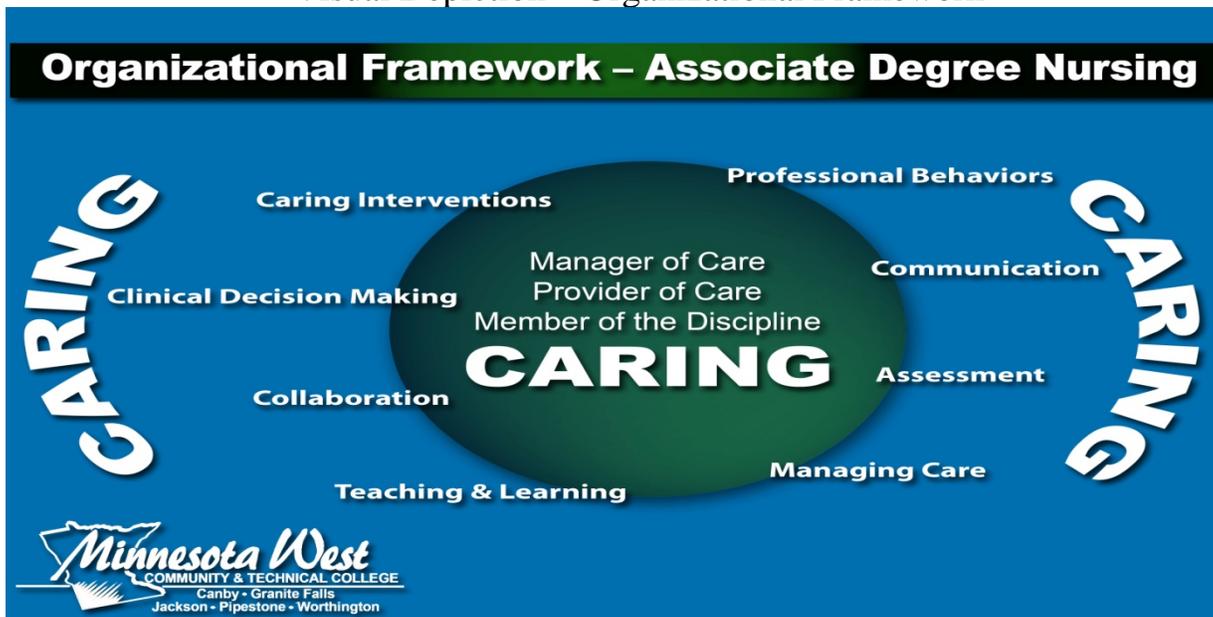
Date

Organizational Framework - Associate Degree Nursing Program

Caring	Roles/Competencies
<p>Selected assumptions from Jean Watson:</p> <ul style="list-style-type: none"> • Human caring in nursing is not just an emotion, concern, or attitude, but a personal response • Effective caring promotes health and individual or family growth • Caring promotes health more than does curing • Caring responses accept a person not only as they are now, but also for what the person may become • A caring environment offers the development of potential while allowing the person to choose the best action for self at a given point in time • Caring occasions involve action and choice by the nurse and client. • Human caring involves values, a will and commitment to care, knowledge, caring actions and consequences • The ideal and value of caring is a starting point, a stance, an attitude that has to become a will, an intention, a commitment and a conscious judgment that manifest in concrete acts • Caring for ourselves is a prerequisite to caring for others 	<p>As described by the NLN (2000)</p> <p>Provider of care</p> <ul style="list-style-type: none"> • Communications • Assessment • Clinical decision making • Caring interventions • Teaching and learning <p>Member of the Discipline</p> <ul style="list-style-type: none"> • Professional behavior <p>Manager of Care</p> <ul style="list-style-type: none"> • Collaboration • Managing care

Jean Watson as cited in Berman, A., Synder, S.J., Kozier, B., Erb, G., 2008, p. 47 and 48.

Visual Depiction – Organizational Framework



NCLEX-RN Education Reports: 2009, 2005-2008 – Appendix 6.1

Minnesota Board of Nursing

2829 University Avenue SE, Minneapolis, MN 55414-3253

Number and First-time Success Rates of NCLEX-RN® Candidates Educated in
Minnesota Professional Nursing Programs 7/1/2009 thru 9/30/2009

Associate Degree Nursing Programs	Program Code	Number of Candidates	Number Pass	Number Fail	3 rd Qtr Percent Pass	Year-to-Date Percent Pass	Applied to Other State Boards*
Alexandria Technical College Associate Degree Mobility Nursing Program	10-450	1	0	1	0.00	90.48	
Anoka-Ramsey Community College Associate Degree Nursing Program	10-474	41	35	6	85.37	91.45	
Central Lakes College Associate Degree Nursing Program	10-466	14	10	4	71.43	83.72	
Fond du Lac Tribal & Community College Associate Degree Nursing Program (new)	10-429	13	9	4	69.23	66.67	
Hibbing Community College Program in Nursing	10-476	17	16	1	94.12	97.30	NM - 1 NV - 1
Inver Hills-Century Colleges Associate Degree Nursing Program	10-468	66	54	12	81.82	84.40	GA - 1
Lake Superior College Associate Degree Nursing Program	10-419	45	37	8	82.22	80.37	KY - 1 TN - 1 WI - 1
Minneapolis Community & Technical College Associate Degree Nursing Program	10-472	41	34	7	82.93	80.00	
MN State College – Southeast Technical Associate in Science – Nursing Mobility Program	10-475	60	39	21	65.00	70.71	MA - 1 WI - 24
MN State Community & Technical College Associate Degree Nursing Program	10-420	49	30	19	61.22	77.52	AK - 1 ND - 21 TN - 1
MN West Community & Technical College Associate Degree Nursing, Worthington	10-421	37	33	4	89.19	92.98	IA - 1 SD - 4
Normandale Community College Nursing Program	10-469	23	23	0	100	96.84	IA - 1 TX - 1
North Hennepin Community College Nursing Program	10-471	41	39	2	95.12	94.78	OR - 1

NOTE: All first-time candidates who took the examination, regardless of state of application for licensure, are included in the above statistics. No repeat candidates are included in these statistics.

* Of the candidates who took the examination between 7/1/2009 and 9/30/2009, application for licensure was made in another state.

NCLEX-RN Education Reports: 2009, 2005-2008 – Appendix 6.1



Education Annual Report

Number and First-time Success Rate of
NCLEX-RN® Candidates Educated in
Minnesota Associate Degree Nursing Programs 2005 – 2008

Minnesota Associate Degree Nursing Programs	2005		2006		2007		2008	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Alexandria Technical College*					19	94.7	24	87.5
Anoka-Ramsey Community College	163	83	161	85.7	159	81.1	149	83.9
Central Lakes College	38	97	40	97.5	38	97.4	46	95.7
College of St Catherine, Minneapolis	147	78	123	81.3	136	83.8	122	81.2
Fond du Lac Tribal & Community College*								
Fond du Lac Tribal & Community College/ Lake Superior College**	30	50	18	72.2	19	89.5		
Hibbing Community College	97	82	77	92.2	67	83.6	80	81.3
Inver Hills-Century Colleges	180	89	203	88.7	235	83.0	258	85.3
Lake Superior College	107	83	76	89.5	87	86.2	101	78.2
Minneapolis Community & Technical College	113	83	133	73.7	126	77.8	136	77.9
MN State College-Southeast Technical	66	70	59	79.7	80	57.5	78	75.6
MN State Community & Technical College	99	83	115	84.4	128	64.1	165	75.2
MN West Community & Technical College	67	85	65	89.2	87	81.6	73	79.5
Normandale Community College	80	94	89	95.5	89	89.9	75	96.0
North Hennepin Community College	120	91	127	87.4	107	97.2	116	97.4
Northland Community & Technical College	126	87	97	90.7	118	78.8	106	78.3
Northwest Technical College – Bemidji*							45	80.0
Ridgewater College	67	75	6	83.3	101	66.3	106	68.9
Riverland Community College	63	84	65	84.6	67	79.1	78	88.5
Rochester Community & Technical College	109	94	106	99.1	104	96.2	115	91.3
South Central College	48	77	58	84.5	47	70.2	108	75.0
MN Program Associate Degree Candidates	1,720	84	1,618	87.0	1,814	80.9	1,981	82.4
All US Jurisdiction Associate Degree Candidates	60,053	87	65,390	88.0	69,890	84.8	75,543	86.2
All MN RN Program Candidates	2,430	85	2,393	87.4	2,726	83.6	2,932	83.7
All US Jurisdiction RN Candidates***	99,186	87	110,712	88.1	119,573	85.5	129,114	86.7

* New Program

** Closed Program

*** Includes diploma, associate degree, baccalaureate & higher degree candidates

Ruth Van Heukelom

Work: 1450 Collegeway
Worthington, MN 56187
(507) 372-3421

Ruth.vanheukelom@mnwest.edu

Home: 520 Tenth Avenue
Sibley, IA 51249
(712) 754-2704

gvanheuk@hickorytech.net

Education

Minnesota State University, Mankato
Doctorate of Nursing Practice candidate, May 2010

Metropolitan State University
webWOC nursing program, 2004 – 2005

St. Joseph's College of Maine, 2000 – 2001
three graduate nursing courses focusing on teaching and learning

South Dakota State University
Master of Science with major in nursing, 1997
- graduated Summa Cum Laude

Graceland College
Bachelor of Science with major in nursing, 1990
- graduated Summa Cum Laude

Indian Hills Community College
Associate Degree in nursing, 1974
- graduated Summa Cum Laude

Professional Objectives

- Role model exemplary nursing and leadership skills
- Communicate effectively with faculty, students, clinical facilities, and the community
- Explore value added learning experiences in collaboration with the faculty
- Strengthen the faculty team
- Inspire a future generation of nurses
- Role model lifelong learning

Professional Experience

Minnesota West Community and Technical Colleges
Worthington, Minnesota
October, 2009 – present
Director of Associate Degree Nursing Program

- Provides leadership in all aspects of the Associate Degree Nursing Program
- Responsible for administration of the Associate Degree Nursing Program
- Responsible for preparation and oversight of budget
- Coordinates, supervises, and evaluates faculty assignments
- Collaborates with faculty and administration to develop, guide, implement, evaluate, and revise curriculum
- Serves as both faculty and student advocate
- Keeps abreast of current trends in nursing education and healthcare delivery
- Functions in accord with institutional regulations, including the Minnesota Board of Nursing
- Delegates responsibilities to nursing faculty and supervises appropriately

Minnesota West Community and Technical Colleges

Worthington, Minnesota

1991 – May, 2009

Faculty Member

- Primary responsibilities in classroom, lab, and clinical instruction from 1991 – May, 2009
- Leader in development of online nursing instruction in the Associate Degree Nursing program beginning 2002
- Leader in development and implementation of high fidelity simulation experiences beginning 2006
- Served as clinical coordinator
- Mentor to new nursing faculty
- College Curriculum Committee 2003 – present
- Search Committee for Dean of Distance learning – 2002
- Committee member writing self study for Higher Learning Commission- 2009

Avera McKennan Hospital

Sioux Falls, South Dakota

Certified Wound, Ostomy, Continence Nurse

2005 – present on an as needed / as available basis

Pleasant View Good Samaritan Center

Corsica, South Dakota

Director of Nursing, 1988 - 1990

Douglas County Memorial Hospital
Armour, South Dakota
Staff nurse, assistant to director, 1986 – 1988

Waupun Memorial Hospital
Waupun, Wisconsin
Emergency Room Supervisor, 1978 – 1981

Academic and professional awards/honors

Award for Excellence – 2005-2006 – Simulation in nursing education
Award for Excellence – 2006 -2007 – Simulation of care of multiple
Clients
Award for Excellence – 2007 – 2008 – Caring for dying clients and
their families
Award for Excellence – 2008 – 2009 – Concept mapping in the nursing
Curriculum
Teacher of the Year at Minnesota West Community and Technical
Colleges- 2008
Taylor Fellowship for Family and Society Nursing 2008-2009

Professional Involvement

American Nurses Association – 2003 to present
Iowa Nurses Association – 2003 to present

Publications

Van Heukelom, R. (1997). *Patient satisfaction with selected aspects of care following total knee arthroplasty (South Dakota State University).*

Community Service

Annual community Passion Play – 1992- 2008
Adult small group leader in local church – 1992 – present
Sunday school teacher for variety of age groups – 1992 – present
Church choir member – 1992 – 2004
Member of audiovisual technology team in local church 2005 – present
Relay for Life Volunteer
Kid's Hope Volunteer in elementary school
Kid's College instructor

**MINNESOTA WEST COMMUNITY AND TECHNICAL COLLEGE
ADMINISTRATIVE POSITION DESCRIPTION**

ADMINISTRATIVE TITLE: Director of AD Nursing	
NAME OF ADMINISTRATOR:	
RANGE ASSIGNMENT: EA 5	POSITION CONTROL NUMBER:

Reports To: Vice President of Instruction

Requisite Qualifications:

Educational Requirements for Director of Nursing: Master’s degree in Nursing

Professional Licensure/Certification: Minnesota RN Licensure (required by Minnesota Board of Nursing and National League for Nursing Accrediting Commission)

Experience: A minimum of five years nursing experience at a professional level. A minimum of 4 years of professional experience in higher education, previous teaching experience highly desirable.

Signature of Employee _____ Date _____.

Signature of Supervisor _____ Date _____.

Position Purpose:

The position exists to collaborate with other administrative personnel and nursing program faculty in the development and directing of the associate degree nursing program.

The Director:

- Provides leadership and serves as a liaison in all aspects of the ADN programs, and functions in directing and liaison capacities
- Collaborates with faculty and administration to develop, evaluate and revise the curriculum of the nursing program
- Coordinates nursing programs with general education content

- Utilizes solid educational principles and demonstrates an awareness of current trends in health care education and health care delivery trends while developing, implementing, and evaluating the curricula
- Functions in accord with institutional rules and regulations, including the Minnesota Board of Nursing and other regulatory agencies
- Plans for professional accreditation
- Participates in interviewing potential faculty, studying professional records and submitting recommendations or suggestions for appointment to the college president and campus CEOs
- Assumes responsibility for orienting faculty to the college philosophy and policies, as related to the appropriate nursing programs.
- Delegates responsibilities to nursing faculty and sees that they are carried out successfully
- Coordinates, supervises and evaluates assignments of nursing faculty
- Collaborates with faculty in identifying needed equipment, supplies and materials and submits a budget according to regulations
- Engages in research and development activities that will assist nursing faculty in integrating innovative educational approaches into the nursing and health programs
- Participates in local, state, regional and national meetings, research projects, and professional development programs
- Consults with the Advisory Committee to the nursing programs concerning needs of the nursing community
- Administers admissions criteria and student evaluation procedures that are consistent with the academic standards of Minnesota West Community & Technical College
- Administers promotion and progression policies in a manner that is consistent with the policies and procedures of Minnesota West Community & Technical College
- Provides academic and personal advisement to the ADN students of Minnesota West Community & Technical College
- Coordinates student evaluation, grading and reviews student progression with faculty on a semester basis and as necessary
- Participates in the recruitment of students and publicity for the nursing programs according to policies of the college
- Develops a program of follow-up studies of graduates to obtain on-the-job performance evaluations to track effectiveness of the nursing programs
- Assists in the development of contractual agreements as are necessary between the College and community agencies utilized in the delivery of nursing education
- Participates as a resource person in providing appropriate classroom and or clinical instruction to nursing students
- Maintains personal competence through ongoing participation in professional development programs
- Collaborates with community constituents to promote nursing programs.
- Maintains program and day to day activities.

Qualifications:

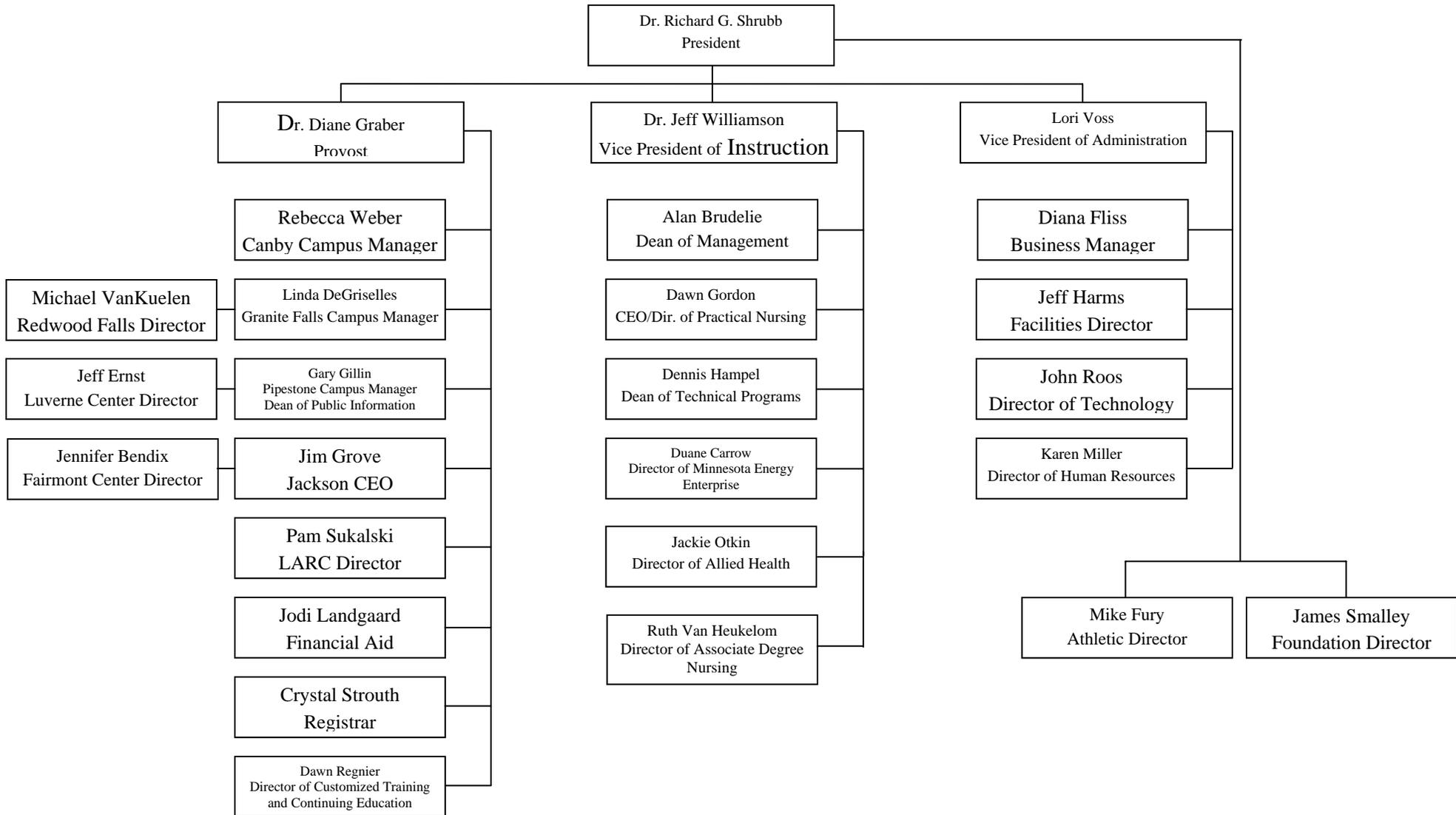
The position requires a knowledge and appreciation of the mission and philosophy of community and technical college education in addition to valuing the comprehensive nature of Minnesota West Community and Technical College.

Knowledge of an array of nursing academic areas/programs and related issues is required, including liberal arts, occupational/technical education, certification and licensure requirements, and accreditation processes. The Director should possess a strong background in nursing and health care theory, health related clinical skills, and the educational, societal, and health care trends that impact nursing education.

The position requires a high level of leadership, collaboration, and management skills along with an ability to identify and effectively resolve problems and conflicts. Strong written, oral and interpersonal communication skills are essential. The ability to establish and maintain productive, collegial and professional working relationships and partnerships within the internal and external college communities is necessary.

The Director should possess an understanding and appreciation of the curriculum development process, classroom and clinical teaching strategies and teaching/learning principles in relation to the adult learner. Evaluation skills, including formative and summative evaluation methods, and student, faculty and program evaluation are necessary.

The ability to use and promote technology is necessary.



POSITION SUMMARY: Clinical Coordinator

The person holding this position will serve as the clinical facility liaison and will collaborate with the Director of Nursing.

Reports to

The Clinical Coordinator will report directly to the Director of Nursing.

Preferred Qualifications

1. Must be licensed in the State of Minnesota as a Registered Nurse.
2. Nursing faculty working at least 75% time for two years.
3. Involved in teaching clinicals.

Position Details

This position has the following campus specific responsibilities:

- **Clinical Scheduling:**
 1. Coordinate and prepare all clinical sections schedules.
 2. Contact facilities/specialty areas to confirm student clinical dates and give copies of the schedule to the appropriate educational director or facility DON.
 3. Make clinical scheduling changes.
- **Mentoring:**
 1. Revise/update staff clinical preceptorship guides to be given to staff at clinical facilities.
 2. Set up clinical orientation schedule for new faculty.
 3. Resource person for clinical faculty.
- **Communication:**

Schedule and conduct clinical instructor meetings for Practical Nursing/Associate Degree programs. Collaborate with other campus Clinical Coordinators.
- **Student Clinical Orientation:**
 1. Communicates changes in clinical courses including but not limited to: Schedules, Policy/Procedure, Grading Rubric, Worksheets, etc.
 2. Coordinate clinical orientations.
- **Preparation:**

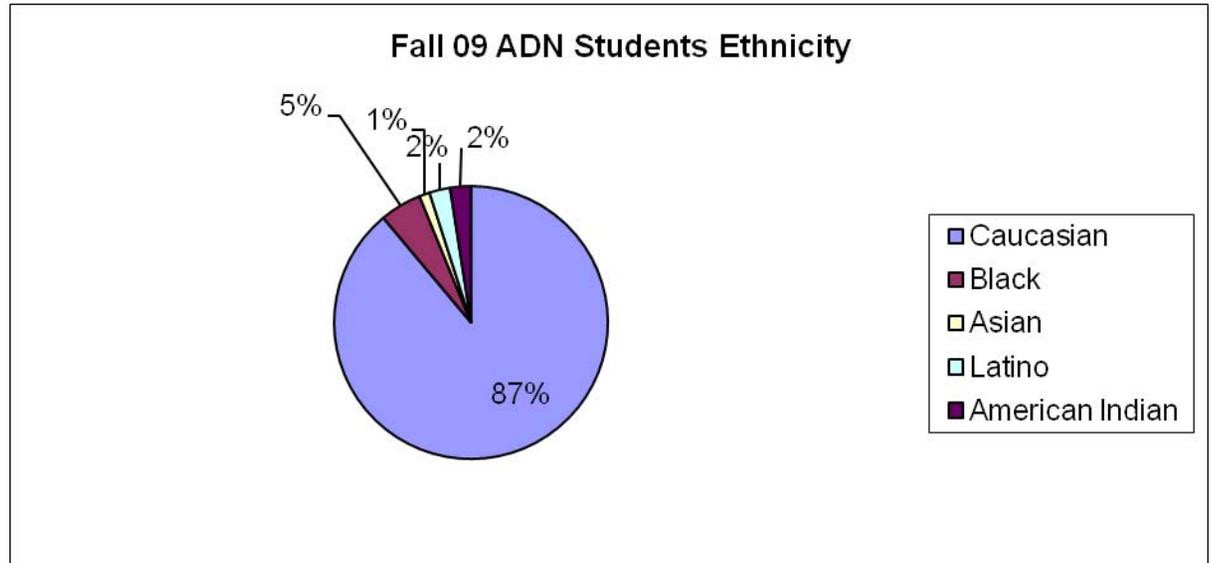
Prepare all clinical course documents, including student and facility expectations for the clinical experience.
- **Record Keeping:**
 1. Maintain records of student clinical attendance.
 2. Coordinate and maintain clinical course evaluations.
 3. Coordinate and maintain clinical site evaluations.
- **Disciplinary Actions:**
 1. Work with clinical instructors re: disciplinary process when applicable.
 2. Schedule and call faculty clinical progression meeting when applicable.
 3. Review and maintain documentation of student clinical incidents.

AD Nursing Program Demographic Profile – Appendix 11.5

Ethnicity

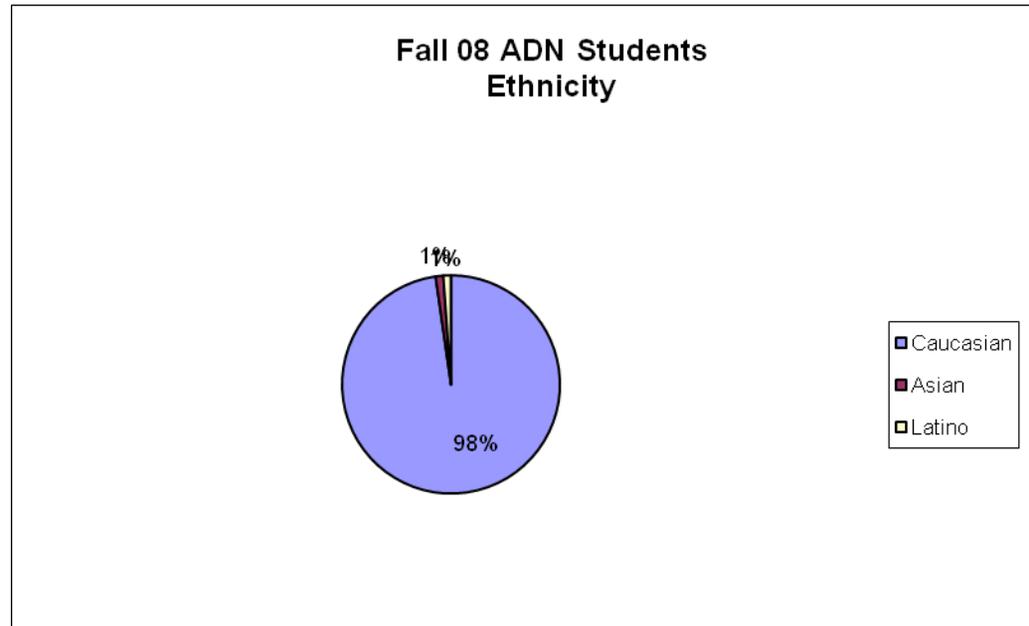
(Fall 09 as of 11/24/09)

Fall 09	# of Students	% of Total
Caucasian	72	87%
Black	4	5%
Asian	1	1%
Latino	2	2%
American Indian	2	2%
Unknown	2	2%
	83	100%



(Fall 08 as of 9/2/08)

Fall 08	# of Students	% of Total
Caucasian	86	98%
Asian	1	1%
Latino	1	1%
Unknown or Unreported	0	0%
TOTAL	88	100%

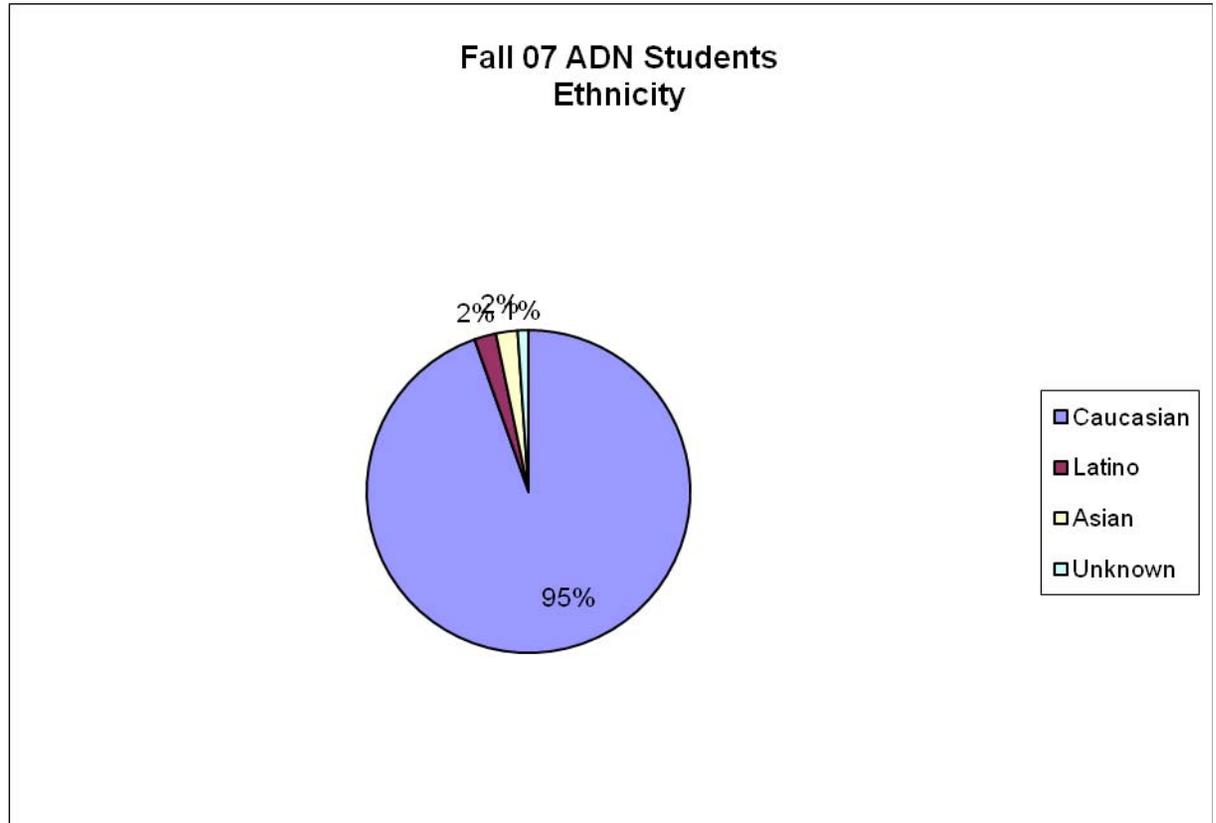


AD Nursing Program Demographic Profile – Appendix 11.5

<u>Fall 07</u>	# of Students	% of Total
Caucasian	87	95%
Latino	2	2%
Asian	2	2%
Unknown	1	1%
TOTAL	92	100%

<u>Previous 5 Year Average</u>	# of Students	% of Total
Caucasian	65	97%
People of Color	2	3%
Unknown or Unreported	0	0%
TOTAL	67	100%

<u>Fall 06</u>	# of Students	% of Total
Caucasian	94	97%
Am Indian	1	1%
Asian	1	1%
Black	1	1%
Unknown or Unreported	0	0%
TOTAL	97	100%



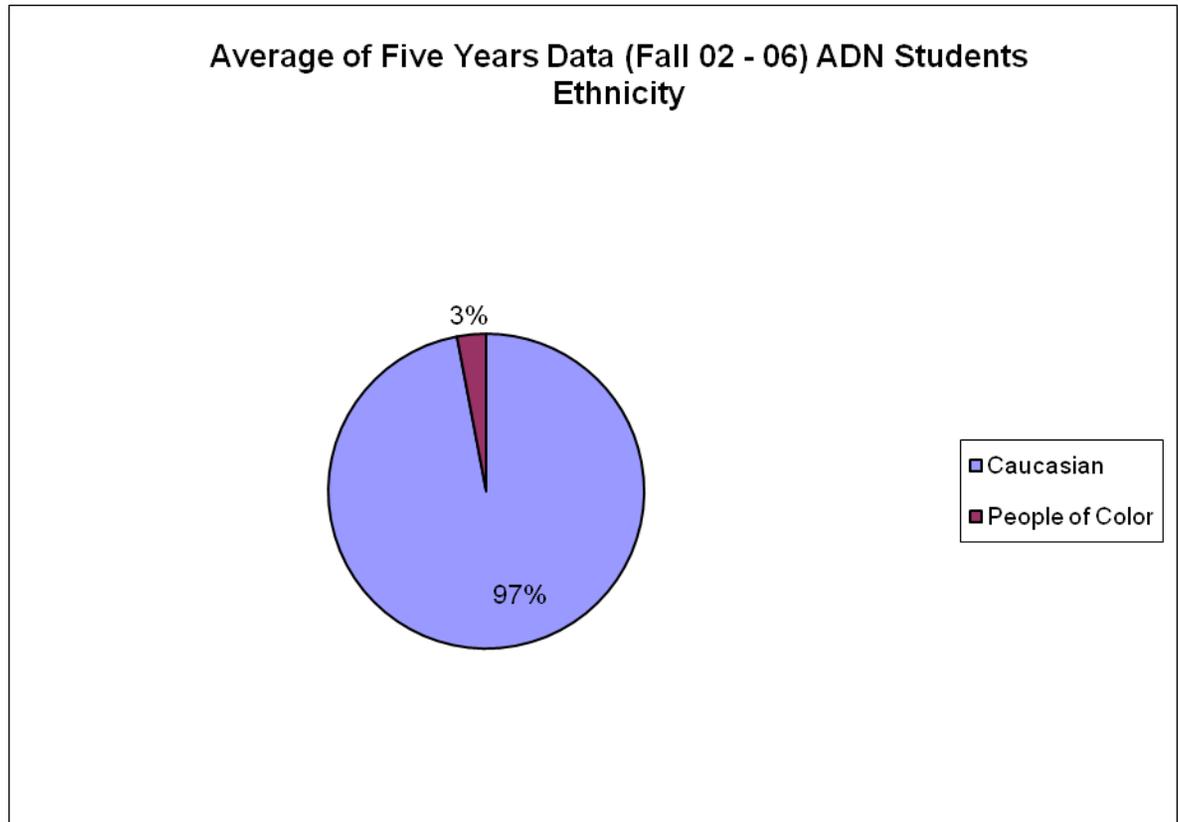
AD Nursing Program Demographic Profile – Appendix 11.5

	# of Students	% of Total
<u>Fall05</u>		
Caucasian	64	91%
Latino	3	4%
Am Indian	1	1%
Asian	1	1%
Unknown or Unreported	1	1%
TOTAL	70	100%

	# of Students	% of Total
<u>Fall04</u>		
Caucasian	63	98%
Asian	1	2%
Unknown or Unreported	0	0%
TOTAL	64	100%

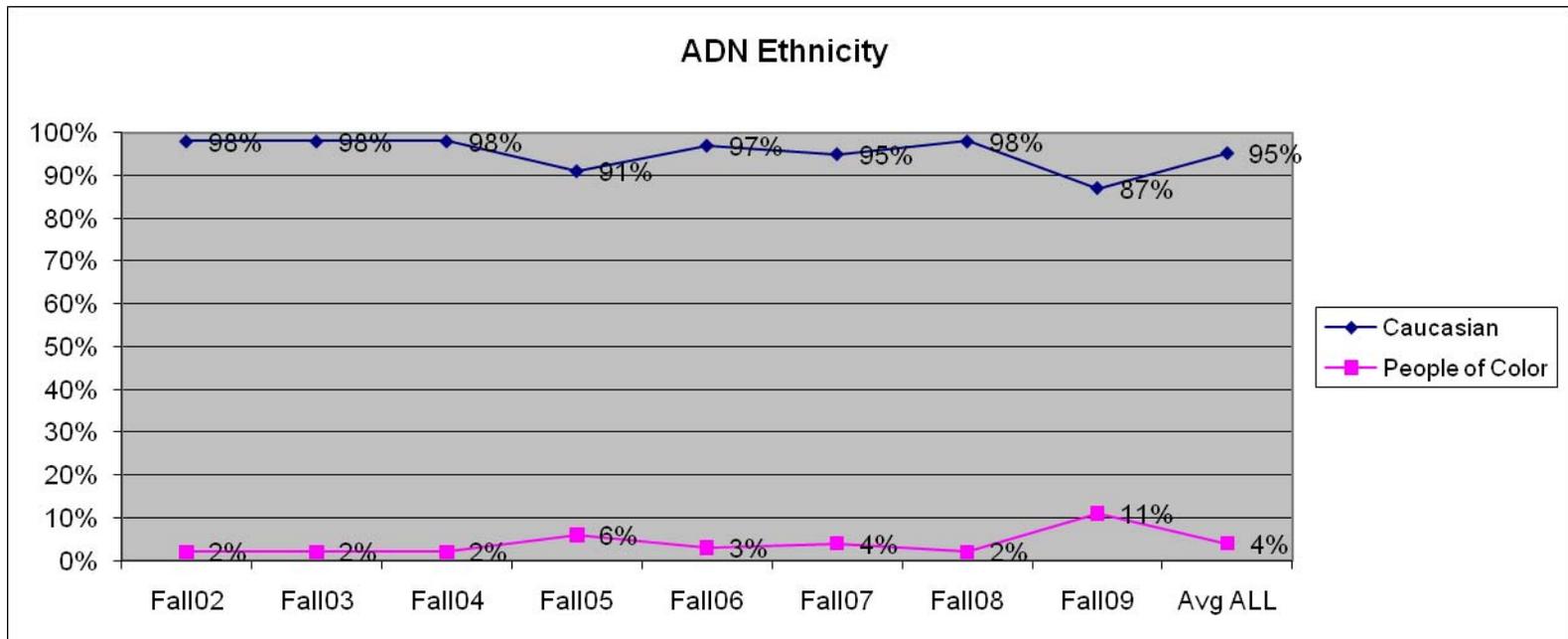
	# of Students	% of Total
<u>Fall03</u>		
Caucasian	41	98%
Latino	1	2%
Unknown or Unreported	0	0%
TOTAL	42	100%

	# of Students	% of Total
<u>Fall02</u>		
Caucasian	62	98%
Latino	1	2%
Unknown or Unreported	0	0%
TOTAL	63	100%



AD Nursing Program Demographic Profile – Appendix 11.5

	Fall02	Fall03	Fall04	Fall05	Fall06	Fall07	Fall08	Fall09	Avg ALL
Caucasian	98%	98%	98%	91%	97%	95%	98%	87%	95%
People of Color	2%	2%	2%	6%	3%	4%	2%	11%	4%
Not Reported	0%	0%	0%	1%	0%	1%	0%	2%	1%



AD Nursing Program Demographic Profile – Appendix 11.5

Average Age

(Fall 09 as of 11/24/09)

Fall 09

Avg. Age 29.6
 Median 26
 Mode 24.5 (both 24 and 25 are modes)
 Ages range from 19 to 55

(Fall 08 as of 9/2/08)

Fall 08

Avg. Age 31.7
 Median 29
 Mode 25
 Ages range from 19 to 54

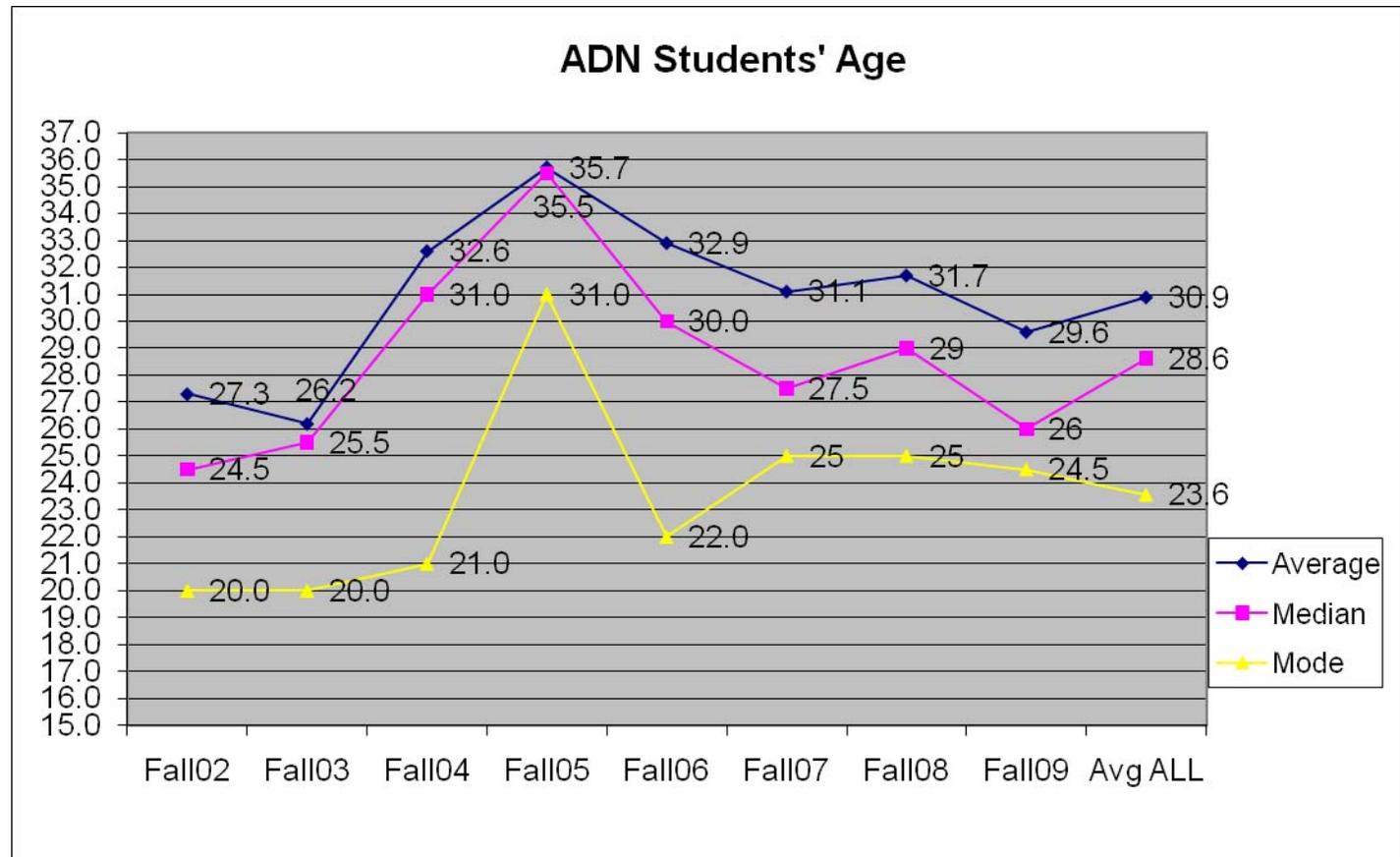
Fall 07

Avg. Age 31.1
 Median 27.5
 Mode 25
 Ages range from 21 to 57

Previous 5

Year

Average
 Avg. Age 30.9
 Median 29
 Mode 23



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Fall 06

Avg. Age 32.9
 Median 30
 Mode 22
 Ages range from 21 to 52

Fall05

Avg. Age 35.7
 Median 35.5
 Mode 31
 Ages range from 21 to 57

Fall04

Avg. Age 32.6
 Median 31
 Mode 21
 Ages range from 20 to 52

Fall03

Avg. Age 26.2
 Median 25.5
 Mode 20
 Ages range from 17 to 55

Note: As most of the individual ages were not recorded, I used the Age Range information and extrapolated - so these figures are not perfectly accurate and are best estimates.

Fall02

Avg. Age 27.3
 Median 24.5
 Mode 20
 Ages range from 17 to 56

	Fall02	Fall03	Fall04	Fall05	Fall06	Fall07	Fall08	Fall09	Avg ALL
Average	27.3	26.2	32.6	35.7	32.9	31.1	31.7	29.6	30.9

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Median	24.5	25.5	31.0	35.5	30.0	27.5	29	26	28.6
Mode	20.0	20.0	21.0	31.0	22.0	25	25	24.5	23.6

ADN GENDER

(Fall09 as of 11/24/09)

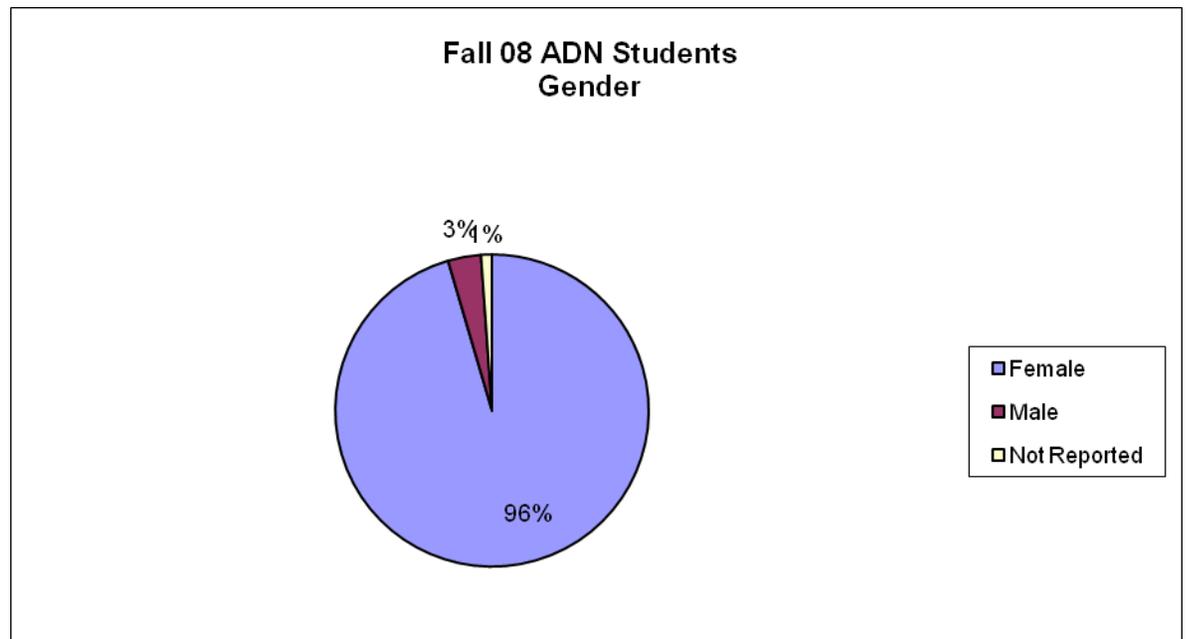
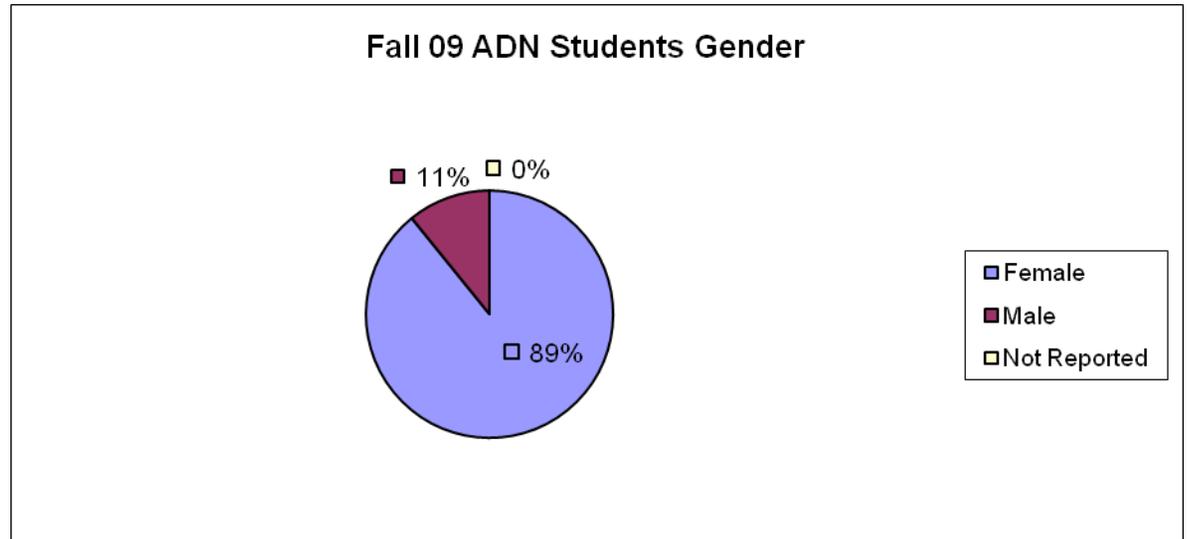
Fall 09	# of Students	% of Total
Female	74	89%
Male	9	11%
Not Reported	0	0%
TOTAL	83	100%

(Fall 08 as of 9/2/08)

Fall 08	# of Students	% of Total
Female	84	95%
Male	3	3%
Not Reported	1	1%
TOTAL	88	100%

Fall 07	# of Students	% of Total
Female	88	96%
Male	4	4%
Not Reported	0	0%
TOTAL	92	100%

Previous 5 Year Average	# of Students	% of Total
Female	64	96%
Male	3	4%



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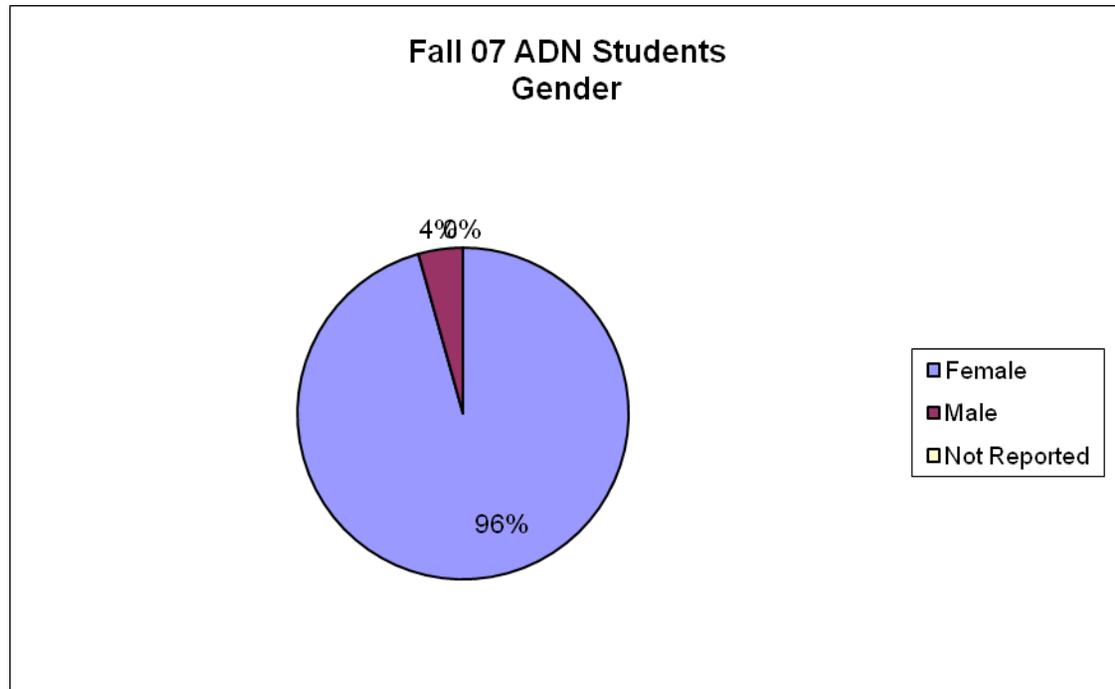
Not Report	0	0%
TOTAL:	67	100%

	# of Students	% of Total
<u>Fall 06</u>		
Female	93	96%
Male	4	4%
Not Reported	0	0%
TOTAL	97	100%

	# of Students	% of Total
<u>Fall 05</u>		
Female	67	96%
Male	3	4%
Not Reported	0	0%
TOTAL	70	100%

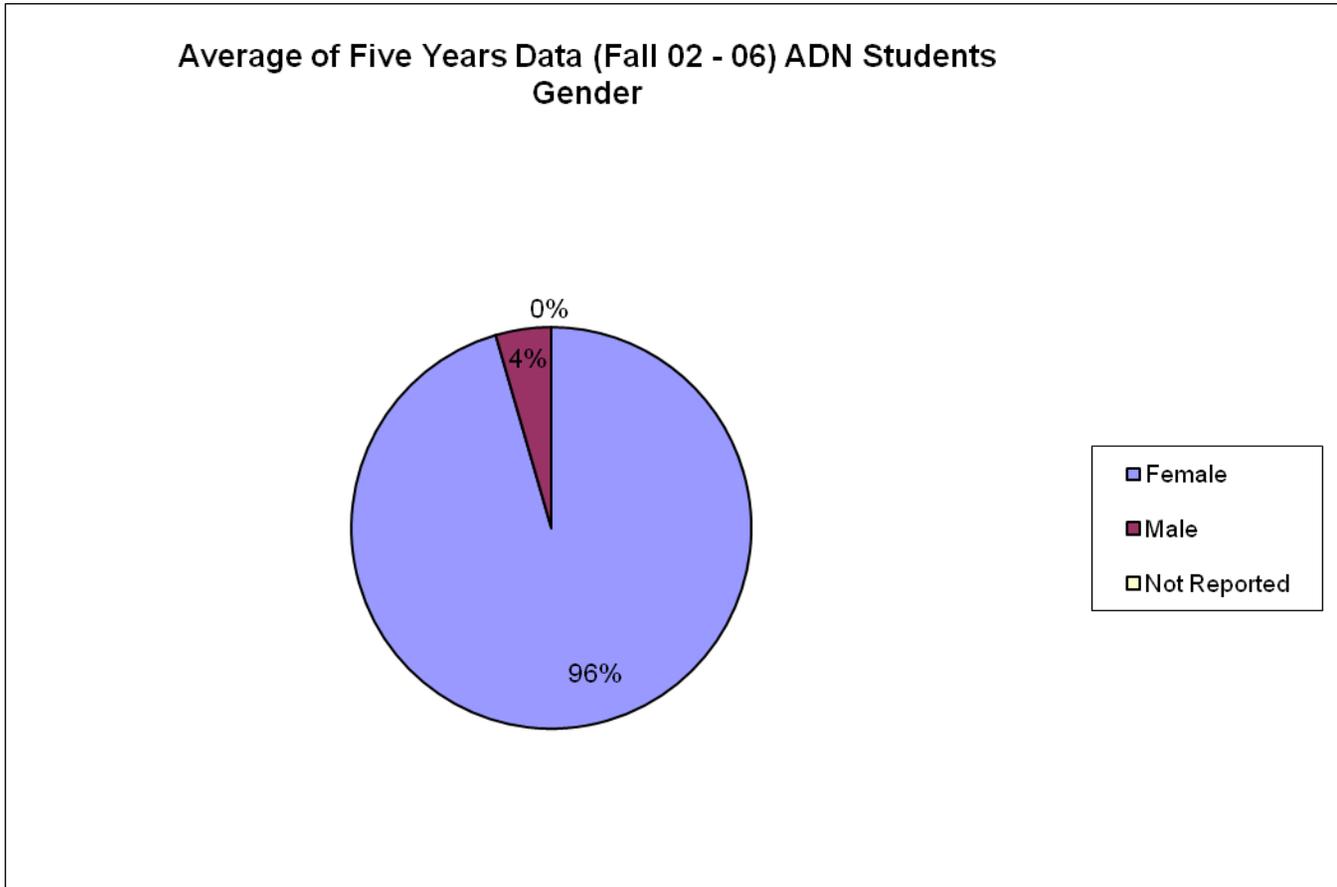
	# of Students	% of Total
<u>Fall 04</u>		
Female	61	95%
Male	3	5%
Not Reported	0	0%
TOTAL	64	100%

	# of Students	% of Total
<u>Fall 03</u>		
Female	36	86%
Male	6	14%
Not Reported	0	0%
TOTAL	42	100%



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<u>Fall 02</u>	# of Students	% of Total
Female	62	98%
Male	1	2%
Not Reported	0	0%
TOTAL	63	100%



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	Fall02	Fall03	Fall04	Fall05	Fall06	Fall07	Fall08	Fall09	Avg ALL
Female	95%	86%	95%	96%	95%	95%	95%	91%	89%
Male	5%	14%	5%	4%	4%	4%	3%	9%	11%
Not Reported	0%	0%	0%	0%	1%	1%	1%	0%	0%

