MARYLAND BOARD OF NURSING
BOARD MEETING
OPEN AGENDA

DATE: February 22, 2017
TIME: 9:00 A.M.
PLACE: Maryland Board of Nursing
4140 Patterson Avenue
Baltimore, Maryland

BUSINESS:

PLEASE NOTE: THE MEETING WILL BE IN OPEN SESSION FROM 9:00 A.M. UNTIL APPROXIMATELY 10:00 A.M. WITH EXECUTIVE (CLOSED) SESSION IMMEDIATELY FOLLOWING.

1. Call to Order
   a. Roll Call and Declaration of Quorum
   b. Minutes January 2017 Open Session

2. Consent Agenda
   A. Nurse Practitioner Programs The programs are listed below. (Quandra Horton)
      1. Allen College, Waterloo, IA, Family, Post-Graduate Certificate and Masters
      2. Regis, College, Weston, Mas, Psychiatric Mental Health, Masters
      3. Texas Tech University Health Sciences Center, Lubbock, TX Family, Masters and Post
      4. Uniformed Services University of the Health Science, Bethesda, MD, Psychiatric Mental Health, Doctor of Nursing Practice
   B. Certificate Training Programs/Facilities (Cheyenne Redd and Jill Callan)
      1. Request for Approval to Renew CNA-GNA Training Programs
         a. Dorchester Technical High School
b. Knowledge First Institute

c. Goodwill Retirement Center

d. Montgomery County Public Schools, Allied Health

e. Center for Career and Technical Education

2. Request for Approval of CNA Training Program-Clinical Facility

   Premier Healthcare Institute- Sligo Creek Nursing and Rehabilitation Center

C. Approval of Nursing Course Equivalent for CNA Training (Cheyenne Redd)

   Trinity Washington University

D. CNA Advisory Committee Member Approval (Cheyenne Redd)

   1. Allyson Stillwell, CNA (Independent Contractor Nursing Assistant designee)
   2. Tasha Brown, RN (Home Care Registered Nurse designee)

E. Rehabilitation Committee Member Approval – Kimberly Street, LPN Designee

F. Site Visit Reports

   1. Prince Georges Community College (2016)
   2. College of Southern Maryland (2016)
   3. Baltimore City Community College (2016)

3. Discussion of Items Removed from Consent Agenda

4. Education (Dr. Patricia Kennedy)

   a. Request for approval of expert consultant and review and request for approval of action plan submitted by Morgan State University

   b. Review and request for approval of action plan submitted by Prince Georges Community College
c. Request for Board Consideration to obtain outside Consultation, Bowie State University

5. **Practice**

None

6. **Licensure & Certification** (Cheyenne Redd and Jill Callan)

None

7. **Advanced Practice**

None

8. **Administrative and Legislative** (Shirley Devaris)

a. Legislative Summary

b. Work Group for CEU requirements, House Bill 253 - renewal of licenses.

9. **Direct Entry Midwives and Electrology** – (Ann Tyminski)

a. Direct-Entry Midwives applications

1. Elizabeth Reiner

2. Elizabeth O’Shea
The following renewal applications have been reviewed and have satisfied all criteria as outlined in COMAR 10.39.02 for CNA/GNA Training Programs in the State of Maryland:

a. Dorchester Technical High School
b. Knowledge First Institute
c. Goodwill Retirement Center
d. Montgomery County Public Schools, Allied Health
e. Center for Career and Technical Education
The following clinical facility has been reviewed and have satisfied all requirements of COMAR 10.39.02 for CNA Training Programs-Clinical Facilities in the State of Maryland:

Premier Healthcare Institute is requesting the use of Sligo Creek Nursing and Rehabilitation Center for the clinical portion of their CNA training program. Sligo Creek Nursing and Rehabilitation Center is a skilled nursing facility with 102 beds and 90 residents. This facility offers rehabilitation care, orthopedic rehabilitation care, short term/skilled services and long term care.

Sligo Creek Nursing and Rehabilitation Center employs Registered Nurses, Licensed Practical Nurses and Geriatric Nursing Assistants. This facility ten registered nurses and sixteen licensed practical nurses. This facility also has forty-two geriatric nursing assistants.

Premier Healthcare Institute will maintain the 1:8 instructor/student ratio for this clinical placement.
Trinity Washington University is seeking approval of NURS 117 Foundations for Nursing Practice and NURS 350 Medical-Surgical Nursing I as a course equivalents for CNA training. This portion of the Nursing Program meets the requirement that the Board has determined for a CNA Training Program. See Md. Health Occupations Code Ann. § 8-6A-05 and COMAR 10.39.02.05.07.

**NURS 117 Foundations for Nursing Practice** is a five credit course with a total of four credits of theory/didactic instruction, forty hours of clinical instruction, and one credit of lab instruction. In the course, students will get an introduction to basic concepts and nursing skills necessary for nursing care across the life span. Upon completion of this course, students will have critical thinking and communication skills as a foundation for professional nursing practice in health care settings.

**NURS 350 Medical-Surgical Nursing I** is a six credit course with a total of four credits of theory/didactic instruction, ninety hours (two credits) of clinical instruction, and zero hours of lab instruction. This course offers students the knowledge, skills, and values necessary for providing competent and safe nursing care to the adult patient. Students learn about concepts specific to the care of the acutely ill adult. Course content will focus on areas including, but not limited to pulmonary, GI, and renal systems.
Course Title: Foundations for Nursing Practice
Course Number: NURS 117 Foundations of Nursing
Meeting Day & Time: Tuesday & Thursday 12-2 pm, Lecture
                        Wednesday 9 am – 12 noon, Lab
Pre-Requisites: Acceptance into Nursing Program

Session: Spring 2016
Room: Alumni Hall B3/Nursing Skills Lab
Minimum Passing Grade: 78%
Credits: 5(4/1; Lecture/Lab)
Class Format: Lecture/Lab

Required Course for the Nursing Major

Instructor: Carrie O’Reilly, PhD MSN, RN
Trinity Phone: 202-884-9680
Trinity Email: oreillyc@trinitydc.edu
Office Location and Hours: Posted in Moodle and by appointment

Weather Delays, Closings, and Emergencies: Information on school delays and closings will be available online and at the weather hotline, 202-884-9009. Trinity’s Department of Public Safety can be reached at 202-884-9111.

Course Description: This course introduces basic concepts, values and nursing skills required for nursing care across the life span. An emphasis is placed on critical thinking, communication skills and the nursing process as the underlying foundation for professional nursing practice in health care settings. Credits: 5 (4 credits classroom; 1 credit laboratory). All components (classroom and laboratory) must be completed successfully to pass course. Prerequisites: Acceptance into nursing program.

Course Objectives:

After completing this course the student will be able to:

1. Identify concepts and principles from the natural and behavioral sciences, humanities, and nursing as they relate to professional nursing practice.
2. Demonstrate beginning basic nursing skills and clinical judgments by applying theory-based knowledge as the basis for professional nursing practice.
3. Demonstrate concepts of caring and competence in diverse settings when interacting with individuals, families, and communities.
4. Use critical thinking to apply the nursing process to simulated client situations.
5. Recognize concepts of leadership, autonomy, collaborations, and advocacy when providing care to clients, their families, and when interacting with other health care providers.
6. Demonstrate therapeutic and culturally sensitive interpersonal skills when interacting with clients, peers, and other health care providers.
7. Assume professional responsibility and accountability by practicing within legal and ethical standards and recognizing the need for one’s professional and personal growth.
8. Apply beginning principles of teaching and learning to promote, restore, and optimize health of clients.
9. Discuss current research as it applies to evidence-based practice for elderly clients and clients with long term and chronic health problems.
10. Describe the roles of the professional nurse in a variety of health care environments.
11. Demonstrate knowledge and understanding of basic skills essential for nursing practice.
IMPORTANT NOTES:
   1. Faculty reserves the right to alter the schedule/content if needed. You will be kept updated of changes.
Required Textbooks:


**Medical Dictionary:** Select a medical-surgical nursing dictionary from one of the following publishers: Mosby, Saunders, F.A. Davis.

**Nursing Drug Handbook:** Select a nursing drug book from one of the following publishers: Mosby, Saunders, F.A. Davis, or Prentice-Hall.

**Nursing Diagnostic and Laboratory Handbook:** Select from any of the following publishers: Mosby, Saunders, or F.A. Davis.

Additional Reading:

- Handouts given by the professor and other assigned readings as posted in Moodle.
- Math computations as assigned.

Required Resources:


Recommended Resources:

Trinity Library and librarian.

**Methods of Instruction:** Lecture, Discussion, Written Assignments, Quizzes/Exams, In Class and Online Activities through Moodle, Dosage Calculations, Laboratory Exercises and Simulation.

<table>
<thead>
<tr>
<th>Grading Scale</th>
<th></th>
<th>A</th>
<th>96-100</th>
<th>A-</th>
<th>93-95</th>
</tr>
</thead>
<tbody>
<tr>
<td>B+</td>
<td></td>
<td>B</td>
<td>87-89</td>
<td>B-</td>
<td>84-86</td>
</tr>
<tr>
<td>C+</td>
<td></td>
<td>C</td>
<td>78-80</td>
<td>F</td>
<td>77.9 &amp; below</td>
</tr>
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</table>

**Important Dates**

<table>
<thead>
<tr>
<th>First Day of Class</th>
<th>Tuesday January 19, 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Add/Drop</td>
<td>Wednesday January 27, 2016</td>
</tr>
<tr>
<td>Enrollment Verification</td>
<td>Wednesday February 3, 2016</td>
</tr>
<tr>
<td>Withdrawal</td>
<td>Wednesday April 6, 2015</td>
</tr>
<tr>
<td>Holidays</td>
<td>President’s Day Monday February 15, 2016; Good Friday March 25, 2016; Spring Break February 29-March 5, 2016; Easter Weekend March 26-27, 2016</td>
</tr>
<tr>
<td>Final Exam/Class Ends</td>
<td>Thursday May 5, 2016</td>
</tr>
</tbody>
</table>
## Assignment Contribution Towards Grade

<table>
<thead>
<tr>
<th>Assignments</th>
<th>Percentage/Points towards grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Skills Lab Competencies (ALL skills - 100% Satisfactory)</td>
<td>Pass/Fail</td>
</tr>
<tr>
<td>Exams (2 x 15% each)</td>
<td>30%</td>
</tr>
<tr>
<td>Concept Map Project Paper</td>
<td>10%</td>
</tr>
<tr>
<td>Dosage Calculation Medication Exam</td>
<td>5%</td>
</tr>
<tr>
<td>Quizzes (10 x 1% each; 11 quizzes given – lowest score dropped)</td>
<td>10%</td>
</tr>
<tr>
<td>Mid-Term Exam</td>
<td>15%</td>
</tr>
<tr>
<td>Final Exam</td>
<td>25%</td>
</tr>
<tr>
<td>ATI Fundamentals Proctored Assessment (Exam)</td>
<td>5%</td>
</tr>
<tr>
<td><strong>Total Percentage/Points</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

## Course Schedule

<table>
<thead>
<tr>
<th>Week</th>
<th>Date/Content</th>
<th>Content Topic</th>
<th>Required Reading (Potter &amp; Perry; †ATI Modules)</th>
<th>Content Topic</th>
<th>Required Reading (Potter &amp; Perry; †ATI Modules)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>January 19th</td>
<td>Introduction to NUR117</td>
<td>Chapters 1, 2, 24 ATI Assessment</td>
<td>Introduction to Skills Lab Handwashing</td>
<td>Chapter 29 †Vital Signs</td>
</tr>
<tr>
<td></td>
<td>January 21st</td>
<td>Health Care Delivery System Communication in Health Care</td>
<td>Chapters 2, 24 Quiz</td>
<td>Handwashing Vital Signs</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>January 26th</td>
<td>Ethics and Values</td>
<td>Chapter 22 Quiz</td>
<td>Client Safety Personal Hygiene</td>
<td>Chapters 27 &amp; 39 †Personal Hygiene</td>
</tr>
<tr>
<td></td>
<td>January 28th</td>
<td>Legal Implications in Nursing Practice</td>
<td>Chapter 23 †HIPAA</td>
<td></td>
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</tr>
<tr>
<td>3</td>
<td>February 2nd</td>
<td>The Nursing Process</td>
<td>Chapters 16, 17, 18, 19, 20</td>
<td>Infection Prevention &amp; Control Medical Asepsis</td>
<td>Chapters 28 †Infection Control</td>
</tr>
<tr>
<td></td>
<td>February 4th</td>
<td>The Nursing Process (cont.)</td>
<td>Quiz</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>February 9th</td>
<td>Critical Thinking in Nursing</td>
<td>Chapter 15</td>
<td>Pain Management, Comfort Measures</td>
<td>Chapter 43 †Pain Management</td>
</tr>
<tr>
<td></td>
<td>February 11th</td>
<td>Concept Mapping</td>
<td>Exam 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>February 16th</td>
<td>Evidence-Based Practice</td>
<td>Chapter 5</td>
<td>Activity, Mobility, &amp; Exercise Ambulation, Transfers &amp; Positioning</td>
<td>Chapters 38 &amp; 47 †Ambulation, Transferring, ROM</td>
</tr>
<tr>
<td></td>
<td>February 18th</td>
<td>Managing Client Care</td>
<td>Chapter 21 Quiz</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>February 23rd</td>
<td>Client Education</td>
<td>Chapter 25</td>
<td>Care of Surgical Patient</td>
<td>Chapter 50 †Surgical Asepsis</td>
</tr>
<tr>
<td></td>
<td>February 25th</td>
<td>Documentation and Informatics</td>
<td>Chapter 26 Quiz</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>February 29th – March 5th</td>
<td>SPRING BREAK</td>
<td></td>
<td>SPRING BREAK</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>March 8th</td>
<td>Dosage Calculation</td>
<td>Chapter 31</td>
<td>Dosage Calculation Practice Medication Administration</td>
<td>ATI Dosage Calculation Test Chapter 31</td>
</tr>
<tr>
<td></td>
<td>March 10th</td>
<td>Developmental Theories</td>
<td>Chapters 11,12, 13, 14 Mid-Term Exam</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Grading Criteria for NURS117 Course Assignments

**ATI Comprehensive Assessment Review Program**

1. Students are required to complete the designated ATI Content Mastery Series (CMS) proctored tests, tutorials and practice tests throughout the semester within certain identified courses (see below).

2. Students will have one (1) opportunity to take each proctored assessment and achieve a score of Level 2 Proficiency or above which counts for a maximum of 5% of the course grade (listed below). The assessment dates will be scheduled by course faculty each semester.

3. All students are required to take each designated ATI CMS proctored test(s) at the designated time assigned by course faculty (does not have to be within the official class period). Failure to take the assessments will result in a grade of ZERO.

**RN CMS 2013 Proctored**

<table>
<thead>
<tr>
<th>Assessment</th>
<th>Level 1 Cut Score</th>
<th>Level 2 Cut Score</th>
<th>Level 3 Cut Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fundamentals</td>
<td>51.7%</td>
<td>63.3%</td>
<td>78.3%</td>
</tr>
</tbody>
</table>

**ATI Proficiency Grading Scale in NURS 117:**

- Level 3 Proficiency = Grade of 100
- Level 2 Proficiency = Grade of 90
- Level 1 Proficiency = Grade of 0 (Zero)

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Trinity Academic Calendar can be found at [http://www.trinitydc.edu/academics/acadaff/Academic_Calendar.html](http://www.trinitydc.edu/academics/acadaff/Academic_Calendar.html)
• Below Level 1 = Grade of 0 (Zero)

Skills Lab Competencies

Skills lab competencies are PASS/FAIL. Students must demonstrate competency (safe and competent completion of the skill with a score of “Satisfactory”) for ALL skill competencies (100%) to achieve a PASS grade for the skills lab portion of the course. Failure to achieve a passing grade for the skills lab portion of the course constitutes a failure of the course.

Quizzes

Each week (except in exam weeks) a quiz will be given based on the required readings. The lowest score for the semester will be dropped but ONLY if the student takes ALL quizzes. No score of ZERO for a missed quiz will be dropped.

Concept Map Project Assignment Outline

1. Present the selected and approved altered health process with ONE nursing specific diagnosis and include at least TWO measurable nursing outcomes with applicable nursing interventions.
2. Include a concept map (in an Appendix to the paper – not counted in page total) of the aspects of the altered health process and the relevant interactions on all aspects of the individual.
3. Support your discussion with evidence from your review of the professional literature. Include at least THREE scholarly references.
4. Spelling and grammar at the collegiate level.
5. Using APA format write a two to three page paper to include:
   a. Title Page (not counted in page total)
   b. Introduction
   c. Paper body with sufficient discussion of the required topic
   d. Conclusion
   e. Reference Page (not counted in page total)
   f. Applicable Appendixes (not counted in page total)

Processes List for Concept Map Project:

1. Dysphagia
2. Urinary Incontinence
3. Stage 2 Sacral Decubitus
4. Hemiparesis
5. Peripheral Neuropathy
6. Expressive Aphasia

All processes selected for the Concept Map Project must be presented to and approved by the course faculty.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus/Thesis</td>
<td>The focus and main point of the work is clearly evident in the title, abstract (if present), and opening paragraph. The focus is fully supported with factual evidence throughout the paper. Accurate conclusions are drawn.</td>
<td>The focus and main point of the work is evident in the title, abstract (if present) and opening paragraph. The focus is mostly supported with factual evidence throughout the paper. Accurate conclusions are drawn.</td>
<td>The focus and main point of the work is not clearly identified and may be confusing to the reader. Evidence is present, but does not fully support the focus of the paper. Conclusions that are drawn may not flow from the body of the work.</td>
<td>The focus and main point of the work is not defined. Key ideas are not developed. Conclusions are inaccurate and not supported by evidence.</td>
</tr>
</tbody>
</table>

20% Thesis is clearly evident.
### Content/Subject knowledge

40%
- Altered health status presented clearly
- One nursing diagnosis is appropriate
- Two patient outcomes clearly identified with appropriate nursing interventions clearly linked to achieve outcome
- Concept map is present with well-developed content and clear structure.

#### Points Earned

<table>
<thead>
<tr>
<th>Content/Subject knowledge</th>
<th>20 points</th>
<th>17 points</th>
<th>15 points</th>
<th>10 points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student exhibits proficient command of the subject matter. Student establishes clear links between altered health and the nursing process. Student demonstrates ability to relate course content to practical examples and applications. Paper is laid out in logical sequence. Concept map is well developed with complete content and clear structure.</td>
<td>Student exhibits and competent command of the subject matter. Student establishes some links between altered health issue and the nursing process. Student is able to relate most course content to practical examples and applications. Paper is laid out in logical sequence, with few exceptions. Concept map has good content but some issues with structure noted.</td>
<td>Student demonstrates a general understanding of the subject matter. Student establishes minimal links between altered health issue and the nursing process. Minimal linkages between course content and practical examples or applications. Sequence of paper is somewhat difficult to follow. Concept map is missing some content and has issues with structure.</td>
<td>Student does not demonstrate a clear understanding of the subject matter. Student establishes poor or no links between altered health issue and the nursing process. Minimal or no linkages between course content and practical examples or applications. Paper is not outlined in a logical sequence. Concept map is missing obvious content and structure.</td>
<td></td>
</tr>
</tbody>
</table>

#### Organization & Structure

20%
- Structure of the paper is clear and easy to follow. Concept map is placed correctly in appendix to paper.

#### Points Earned

<table>
<thead>
<tr>
<th>Organization &amp; Structure</th>
<th>20 points</th>
<th>17 points</th>
<th>15 points</th>
<th>10 points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Structure of the paper is clear and easy to follow. Paragraph transitions are logical and maintain the flow of thought throughout the paper. Conclusion is logical and flows from the body of the paper.</td>
<td>Structure is mostly clear and easy to follow. Paragraph transitions are present but do not always maintain the flow of thought. Conclusion is logical.</td>
<td>Structure of the paper is not easy to follow. Paragraph transitions need improvement. Conclusion is missing, or if provided, does not flow from the body of the paper. Concept map present but not in appendix to paper.</td>
<td>Organization and structure detract from the message. Paragraphs are disjointed and lack transition of thoughts. Concept map present but not in appendix to paper.</td>
<td></td>
</tr>
</tbody>
</table>

#### APA Format

10%
- Guidelines from 6th edition of APA manual followed clearly without error. All references are from scholarly sources (total of three or more).

#### Points Earned

<table>
<thead>
<tr>
<th>APA Format</th>
<th>20 points</th>
<th>17 points</th>
<th>15 points</th>
<th>10 points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student is consistent in correct use of APA format. Formatting is free from errors. Student follows assignment instructions, including length of assignment.</td>
<td>Student is consistent in correct use of APA format, with few errors. Student follows assignment instructions, including length of assignment.</td>
<td>Student clearly attempts correct use of APA format, with a multiple formatting errors noted. Assignment may not meet all requirements as instructed, including length of assignment.</td>
<td>Student is inconsistent in the correct use of APA format. Multiple and severe formatting errors are noted. Assignment does not meet all requirements as instructed, including length of assignment.</td>
<td></td>
</tr>
</tbody>
</table>

#### Grammar, Punctuation & Syntax

10%
- Grammar, punctuation, and syntax are at the collegiate level.

#### Points Earned

<table>
<thead>
<tr>
<th>Grammar, Punctuation &amp; Syntax</th>
<th>10 points</th>
<th>7 points</th>
<th>5 points</th>
<th>2 points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student demonstrates consistent correct use of the rules of grammar, punctuation and syntax. Language is clear and precise; sentences display consistently strong, varied structure.</td>
<td>Student demonstrates consistent correct use of the rules of grammar, usage, punctuation and syntax, with a few minor errors. Language is clear but with some lack of precision.</td>
<td>Paper contains few grammatical, punctuation and syntax errors. Language lacks clarity or includes the use of some jargon or conversational tone.</td>
<td>Paper contains numerous grammatical, punctuation, and syntax errors. Language uses jargon or conversational tone.</td>
<td></td>
</tr>
</tbody>
</table>

**Total Possible Points = 100**

**Points Earned =**

### Class Projects and Written Assignments

1. Students are responsible for submitting class projects and written requirements on the due date specified in the course syllabus, at the beginning of class unless the instructor has granted permission, in advance, to submit materials at another time.
2. The student requesting to turn an assignment in late must make the request in writing prior to the assignment due date and time.
3. Students will be informed of the method for submission of written assignments (hard copies, email or uploading into Moodle course site). When submitting hard copies, papers must be in a folder, or stapled. Students are required to have a backup plan in the event of computer or printing failures, as computer or upload failure is not an acceptable excuse for not submitting a paper.
4. All written work must be completed following APA guidelines.

Class Attendance Policies

1. Students unable to attend or who are running late to a class, are required to notify the professor via email or phone prior to the beginning of the class.
2. Students are allowed two unexcused absences per course during a semester. Any additional unexcused absences will result in failure of the course. Attendance will be recorded in Moodle.
3. Students are expected to be on time and prepared for all classes, and remain in the class until dismissed by the professor. Students who arrive to class after the class start time or leave class prior to the end of class will be marked as late. Three “late” attendance marks will equate to one unexcused absence.
4. Faculty may grant permission in advance to be late to class in special circumstances. The request must be made in person to the faculty member prior to the class date for which the request is being made.
5. Excused absences are granted for the death of an immediate next of kin family member, which includes a sister, brother, mother, father, or child. An excused absence will also be granted for the performance of Jury duty, military service, student’s emergency room visit and inpatient hospitalization of the student. Other circumstances will be considered on a case by case basis. To obtain an excused absence, the student will need to make an appointment to discuss the reason for the absence with the course faculty and/or course coordinator. Proper documentation must be provided, such as a death certificate, record of inpatient hospitalization, or jury duty summons.
6. Students who are granted an excused absence will still be required to make up the missed quiz, assignment, or exam. Students are responsible for all material covered during the missed class.
7. A grade of incomplete will be assigned based on Trinity Washington University policy.

Examinations and Assessments

1. Any student suspected of cheating on graded assessments for any reason will be referred to the Dean of NHP for disciplinary action per Trinity Washington University policy.
2. Graded assessments are to be completed as scheduled on the course syllabus unless alternate arrangements have been made with the course faculty.
3. Students who arrive late for a graded assessment will not be allowed to complete the graded assessment and will receive a zero.
4. Students must adhere to the NHP testing guidelines. (Nursing Student Handbook)
5. Students given permission to reschedule a graded assessment must make up that assessment within one (1) week of the normally scheduled exam time. Failure to do so will result in a grade of zero.
6. Makeup assessments may be of a different version from the original.

Classroom Management Policies

1. All nursing students are required to have a laptop computer to bring to classes when requested by their professors. Use of electronic devices such as laptop computers, cameras, and iPads are allowed in class only with permission from the professor and only at the times in class specified by the professor. No “surfing” of the internet is allowed on laptop computers while class is in session. Students who are found reading internet web sites, not assigned by the professor, while class is in session will be dismissed from class.
2. Students are expected to prepare by reading assignments prior to each class and participating in class discussions. Please bring your textbook, laptop computer (if requested by professor), notebook, power point handouts, pencil, pens, eraser and other supplies necessary at all times.
3. Cell phones are required to be turned off while students are in class. Students who are caught using cell phones while in class or leaving a class that is in session to talk on the cell phone or texting someone while
in the classroom, will be dismissed from class and recorded as absent from class. Students will be given class breaks when they can check for emergency messages from family members or family can contact Trinity security.

4. Students are allowed to bring water bottles into the classroom and drink water while class is in session. Food and drink may be consumed in the classroom while on break.

5. Students are required to abide by Trinity Washington University’s code of conduct. Students who are disruptive during class will be asked to leave the classroom. An unexcused absence will be recorded if a student is asked to leave a class. Students who continually disturb nursing classes by their behaviors will be referred to the Chief Nursing Officer of the Nursing Program and/or Dean of NHP.

6. Students demonstrating unsatisfactory performance in a course, clinical, or lab at mid-term will be required to meet with their course faculty to complete a student learning contract.

7. Grades are assigned based on the Nursing Program grading scale. Numerical grades are not rounded up to the next highest whole number.

**Email and Moodle Communication**

1. Faculty reserves the right to alter the course schedule, content, and requirements, as necessary. You will be kept updated of changes via email or your course Moodle.

2. The Nursing Program uses email and Moodle as the major vehicles for communicating important information to students.

3. Students are required to check their Trinity email account and course Moodle site at least once per day.

4. Faculty and students should make every attempt to respond to email and Moodle communication within 48 hours.

**Repeating and Failure of Nursing Courses**

1. Undergraduate nursing students who fail or withdraw from a nursing course may repeat the course only one time. A second failure or withdrawal from that nursing course will result in dismissal from the Nursing Program.

2. In order to remain as a student in the Nursing Program, nursing students may not fail more than one nursing course. Failing a second nursing course will result in dismissal from the Nursing Program.

**Moodle Login Information**

Many courses in Trinity’s School of Professional Studies are web enhanced with an online web page in the Moodle online learning platform. There may be learning resources your instructor might refer you to or require you to engage in, or to download. Experience has shown that successful Trinity students are self-motivated and have excellent time management skills. Do not wait until the last minute to submit assignments. Allow yourself extra time to resolve technology problems. You might also print materials in advance from the course so you might continue your studies without a computer. Remember to log into and check on your course regularly!

To Access Moodle:

- In your Web Browser:
- Navigate to the Trinity web site and click the Moodle icon at the top of the page in the mini dashboard (it looks like a golden M with a mortar board - graduation cap).
- Login using your Trinity email user name and password
- This will redirect you to your Moodle course page where you can select your course ID and title
- You should be automatically enrolled in the course (The first time you log in you may be asked if you want to enroll in this course, please select ‘YES’).
  - If your course does not appear in your Moodle course page then search for it by using the search function.
- Now you are in the Moodle course home page for your course
Here you can access or view course announcements, course email, course forums for discussion, course related media, assignments and grades.

For Moodle assistance, please use the following links:
- **I Forgot My Password**: go to https://myaccount.trinitydc.edu.
- **Log-In Issues**: go to https://help.trinitydc.edu/ and choose the Technology Services option or call 202-884-9811 from 8 AM to 7 PM weekdays and from 8:00 AM to 5:00 PM Saturdays.
- **Other non-Login Issues and Questions**: go to https://help.trinitydc.edu/ and choose the Moodle Support option.

### Academic Support Services

Trinity’s Academic Services Center (ACS) offers assistance with topics such as scholarly writing, tutoring, disability support services, and time management to name a few. Students are encouraged to complete the appropriate online appointment request form found on the respective services web page. Students are encouraged to schedule a session in advance!

For writing assistance students can also make use of the free services at the Purdue Online Writing Lab (OWL). Here are some free resources available to you through Academic Support Services.

- Academic Services Center
- Disability Support Services
- Tutoring Services
- Writing Center

### Library and Online Databases

- [Trinity’s Sister Helen Sheehan Library Home Page](#) – Your resource Center for Online Journals, the Trinity catalogue, DVDs and Videos, Inter Library Loans, etc…
- [Trinity’s Free Online Research Databases](#) – Your resource for online journals, periodicals, and statistical data. Remember it is free! You just need your Trinity user name and a barcode from the Library, updated every semester, to login.

- Kimberley LaBoone, Director of the Academic Services Center
- Scott Swinney, Director of the Writing Center
- Jacob Berg, Acting Senior Library Associate
- Ashley Ryan, Reference Librarian
- China Wilson, Director of Career Service and Experiential Learning
- Kimberly McManus, Disability Support Services

### Trinity ADA Statement

Trinity welcomes all people to study and work at the University who otherwise meet the requirements for admission to the University. In all aspects of its academic policies and practices, Trinity seeks to ensure that applicants for employment, as well as employees, are treated in compliance with the American with Disabilities Act (ADA). Trinity is committed to nondiscrimination in its admissions and academic practices, including but not limited to access to courses, grading, participation in governance, events, and activities.

Students who require special consideration for any challenges or disabilities should contact Ms. Kimberly McManus, Director of Academic Services, at least two weeks prior to the start of their courses. Trinity provides prompt, fair and impartial consideration of all complaints of discrimination in employment or personnel practices. Complaints brought under the ADA should follow the same process as described for complaints of discrimination.

- [Trinity ADA policy](#)
The Trinity Plagiarism Handbook

Colleges and universities consider plagiarism a grave academic offence, and impose serious penalties on students who plagiarize. It is important to keep in mind that unintentional plagiarism is still plagiarism; whatever your intent, you are subject to the University's penalties for plagiarism. Therefore, it is essential that you learn to identify and avoid all forms of plagiarism.

To assist you in learning in understanding the fine points of plagiarism, paraphrasing, summarization, citation, and referencing Trinity has developed an online handbook. The exercises and quizzes in this handbook will help you identify gaps in your understanding of plagiarism and clarify "gray" areas. The Trinity Plagiarism Handbook

The Trinity Plagiarism Handbook clearly summarizes the Trinity Honor System, defines plagiarism, outlines acceptable and unacceptable uses of internet and print resources, and provides exercises and resources for your information and reference. This Handbook provides guidance and illustrations for students to learn more about plagiarism and how to uphold Trinity's Academic Honesty Policy.

The Trinity Honor Code

Trinity is devoted to the highest standards of academic honesty and intellectual integrity. As an institution of higher education founded in the Catholic intellectual tradition and rooted in liberal learning, Trinity challenges students to develop sound moral and ethical practices in their study, research, writing and presentations; in their examinations and portfolios; and in all of their relationships and actions as members of the academic community. The values that are central to the Trinity experience animate the Honor System that has been a part of the Trinity community since 1913. All members of the Trinity community, students, faculty, and staff, are expected to uphold a way of life that embraces personal integrity and responsibility, the foundation of the Honor System. The Honor System reflects a personal commitment on the part of all members of the community to individual integrity and shared trust; hence it also reflects a community commitment to abide by University policies, rules, and regulations. Upon joining the Trinity community, each student and each member of the faculty and staff agrees to adhere to the following honor pledge:

"I realize the responsibility involved in membership in the Trinity (Washington) community. I agree to abide by the rules and regulations of this community. I also affirm my intention to live according to the standards of honor, to which lying, stealing, and cheating are opposed. I will help others to maintain this responsibility in all matters essential to the common good of the community."

- The Trinity Academic Honesty Policy

Emergency Information, Weather, Delays & Campus Alerts

Information on emergencies school delays and closings will also be available on the Trinity homepage online and on local radio & television outlets

Follow Trinity Alerts by Text: text: “follow trinitydcalerts” to 40404.

Trinity Weather & Alert Hotline - 202-884-9009

Trinity Department of Public Safety: 202-884-9111
Course Information School of Nursing & Health Professions

Course Title: Medical-Surgical Nursing I  
Course Number: NURS 350  
Session 01 Section: Spring 2016/Weekly  
Room: MUS 200  
Meeting Day/Time: Monday and Friday  5:00 – 7:00pm  
Minimum Passing Grade: C/78%  
Pre-Requisites: All pre-nursing and core/general education courses;  
Class Format: Lecture, Discussion  
Required Course for the Nursing Major  

Instructor: Jane R. Taylor, MSN RN  
Trinity Email: @trinitydc.edu  
Office Location and Hours: Adjunct office, Main 259A/hours after class and by appointment  

Weather Delays, Closings, and Emergencies: Information on school delays and closings will be available online and at the weather hotline, 202-884-9009. Trinity’s Department of Public Safety can be reached at 202-884-9111.  

Course Description NURS 350 medical Surgical Nursing I:  
This theory course focuses on attaining the knowledge, skills, and values necessary for providing safe, competent, and humanistic nursing care for adult clients. Using a physiological systems approach, course content will focus on selected topics on diabetes and fluid and electrolyte balance and the pulmonary, cardiovascular, gastrointestinal, renal and integumentary systems. Students will use information technology systems to research evidence-based nursing practice. They will apply critical thinking skills as they examine sociocultural diversity and holistic, caring practices in medical-surgical nursing. Formerly NURS 350 Midlife through Geriatric Nursing.  
3 credits Prerequisites: NURS 117, NURS 117L, NURS 262, and NURS 220  

Course Objectives:  
Upon completion of this course, the student will be able to:  

1. Articulate the practice of medical-surgical nursing within a holistic, caring framework that recognizes the need to address the client’s mind, body and spirit.  
2. Use the nursing process to promote and restore optimal health for clients with medical surgical problems.  
3. Describe pathological deviations as they relate to the care of clients with common medical surgical problems relating to: fluids, electrolytes, and acid-base balance, regulation and metabolism, oxygenation, cardiac output and tissue perfusion, mobility sensation and cognition, protection, digestion, nutrition, and elimination and excretion.
4. Demonstrate the use of concept maps to develop critical thinking skills and create a client focused plan of care for medical surgical clients.
5. Utilize nursing process, evidence based practice standards, and critical thinking to design plans of care for medical surgical clients.

IMPORTANT NOTES:
Faculty reserves the right to alter the schedule/content if needed. You will be kept updated of changes. It is the student’s responsibility to abide by the most current syllabus.

Required Texts:

*students are encouraged to access on line student study resources provided by the textbook’s publisher for additional consolidation of knowledge and test taking practice. In particular, there are student HESI/NCLEX style questions with answers and rationales for each chapter on line. This is an EXCELLENT resource!

Required Resources
ATI Resources: Textbook - Medical Surgical Nursing ATI
   Online: ATI Practice Exams & Tutorials

Recommended Text:

Medical dictionary: select a medical-surgical nursing dictionary from one of the following publishers: Mosby, Saunders, Davis; Taber’s or Stedman’s
Nursing drug handbook: select a nursing drug book from one of the following publishers: Mosby, Saunders, Davis; Prentice-Hall.
Nursing diagnostic and laboratory guide book: from any of the following publishers: Mosby, Saunders.

Methods of Instruction: combination of : Case studies, study guide completion, Lecture, Discussion, Concept Mapping and Critical Thinking Exercises, Quizzes, Exams, Small group discussion/presentations.
<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage/Points</th>
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</thead>
<tbody>
<tr>
<td>A</td>
<td>96-100</td>
</tr>
<tr>
<td>A-</td>
<td>93-95.99</td>
</tr>
<tr>
<td>B+</td>
<td>90-92.99</td>
</tr>
<tr>
<td>B</td>
<td>87-89.99</td>
</tr>
<tr>
<td>B-</td>
<td>84-86.99</td>
</tr>
<tr>
<td>C+</td>
<td>81-83.99</td>
</tr>
<tr>
<td>C</td>
<td>78-80.99</td>
</tr>
<tr>
<td>F</td>
<td>77.9 &amp; below</td>
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</tbody>
</table>

### Assignment Contribution Towards Grade

<table>
<thead>
<tr>
<th>Assignments</th>
<th>Percentage/Points towards grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quizzes 4 @ 2.5%</td>
<td>10%</td>
</tr>
<tr>
<td>Exams 2 @ 20%</td>
<td>40%</td>
</tr>
<tr>
<td>Midterm Exam 1 @ 15%</td>
<td>15%</td>
</tr>
<tr>
<td>*Comprehensive Final Exam 1 @ 25%</td>
<td>25%</td>
</tr>
<tr>
<td>Written Assignments (Case studies, SBAR, Care Planning, Concept Mapping, ATI study guides, ATI Nugget lists)</td>
<td>10%</td>
</tr>
<tr>
<td>Clinical Performance</td>
<td>P/F</td>
</tr>
<tr>
<td><strong>Total Percentage/Points</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

*The final exam will be cumulative and will include topics from all of the units covered in class this semester.*
Allyson Stillwell has been an active CNA in Maryland since 2009. Ms. Stillwell has knowledge of the role and scope of practice of the nursing assistant. She has experience in the acute care setting, long term care, and as a PRN nursing assistant. Ms. Stillwell has an expressed interest in the protection of the public. She was made aware of the duties expected of a member of the CNA Advisory Committee set forth in Maryland Annotated Code, Health Occupations Article, section 8-6A-13(f). She is being considered for the independent contractor nursing assistant designation noted in Maryland Annotated Code, Health Occupations Article, section 8-6A-13(b).
SUMMARY QUALIFICATIONS:

- Possess excellent verbal and written communications skills.
- Superior organizational and attention to detail skills.
- Proven ability to work independently, completing prioritized tasks in an effective manner under minimal or no supervision.
- 10+ years of Administrative Duties in the Government and private sector environment.
- Proficient in Microsoft Office including, Windows XP, MS Word, MS Outlook, MS Excel and QuickBooks Accounting programs.

PROFESSIONAL WORK EXPERIENCE:

Program Lab Assistant
College of Southern Maryland, La Plata, MD
June 2014/September 2016

- Provided both administrative and program support to the Director as well as the Course Manager for Healthcare. Required strong administrative, computer, and people skills, and collaborative communication with continuing education staff and the Continuing Education and Workforce Development (CEWD) Operations department to deliver high quality continuing education courses.
- Independently performs financial record-keeping and data entry tasks for Healthcare. Continually monitors the department budget. Ensures budget-related documents are properly prepared and accounting transactions are accurately recorded.
- Independently maintains the bank reconciliations for multiple accounts.
- Performs Account Payables on a weekly basis.
- Assisted the department in class scheduling processes and office recordkeeping. Designs and generates needed reports and other products to improve department efficiency.
- Performed class-related functions. Implements and adjusts department procedures to ensure most effective and efficient methods of used. Completes required tasks or advises department on needed actions.
- Performed department administrative and logistical functions. Ensures department properly implements college policies and procedures. Reviews existing policies and initiates process changes to improve efficiency and effectiveness.
- Assisted with outreach activities to retain and attract new students which impacts enrollment.
- Conducted numerous department personnel processes. Ensures personnel policies are followed for part-time faculty and student assistants. Responsible for transitioning new employees by initiating needed documents, coordinating with various college offices, arranging office space and other logistics-related items, and advising them on a variety of college requirements. Initiates and monitors personnel-related documents and correspondence for new and existing employees.
- Served as department focal point for students, instructors, other departments, vendors, and public. Provides callers/visitors with accurate data in response to their requests or directs calls to appropriate person.
Registered Medical Assistant
Calvert Internal Med Group, Prince Frederick, MD
May 2012/June 2014

- Answer incoming calls for appointments and providers.
- Greet patients and verify insurance.
- Update medical records (EMR).
- Complete insurance forms, handling correspondence, scheduling appointments.
- Arrange for hospital admission and laboratory services.
- Collect and prepare laboratory specimens or perform basic laboratory tests on the premises.
- Dispose of contaminated supplies, and sterilize medical instruments.
- Arrange examining-room instruments and equipment, and assist Provider in procedures.
- Purchase and maintain supplies and equipment.

Certified Nursing Assistant
Baywoods of Annapolis
Temporary PRN CNA in the long term care unit providing patient ADL'S as well as glucometer readings and vitals

Certified Nursing Assistant
Emergency Room, University of Maryland Charles Regional
May 2009/May 2012

- Receives direction and assignments from physicians and nurses and provides technical support to optimize patient care.
- Responsible for reporting on the condition of patient/client to the appropriate supervisor and other staff members.
- Coordinate and assist with care as directed.
- Cleans and stocks carts, rooms, and changes linen, as required.
- Assists with transport of patients to other departments.
- Assist with resuscitation / CPR and emergency airway procedures.
- Assist with obtaining and documentation of vital signs and placement of oxygen saturation, cardiac monitoring, and non-invasive blood pressure monitoring systems.
- Assist with other technical functions such as: obtaining 12-lead EKGs, discontinuation of peripheral IV and heparin/saline locks, maintenance and care of specimens for laboratory analysis, and Point of Care Testing.
- Assist with wound care, insertion of Foley catheters, and nasogastric tubes.
- Decontaminates all equipment, instruments, and supplies.
- Assists with positioning patients, application of orthopedic splints and dressings.
- Measure and fit crutches and canes; instruct patients on proper crutch and cane walking.
- Maintains appropriate documentation.
- Maintains use of appropriate medical equipment and supplies.
GS-0303/06 – Office Support Assistant (OA)  September 2006/May 2007
National Institutes of Health, Bethesda, MD

- Perform generic clerical skills including greeting and directing visitors, fielding phone calls, scheduling meetings, reserving conference rooms, taking minutes, composing memos, collecting and distributing mail, etc.
- Use software (Excel, Access, MS Word, Power Point, etc.) to analyze data, create spreadsheets, graphs and presentations.
- Perform daily administrative and office support activities that require an ability to multi-task and assist multiple NIH employees at once.
- Complete initial review of incoming correspondence for staff and supervisor to identify missing documents or information.
- Maintain electronic filing system and SharePoint site, including organizational changes.
- Exercise sound judgment in the safeguarding of files containing confidential and/or sensitive information Order office supplies, services, and equipment in AMBIS.
- Act as Timekeeper for staff.
- Assist with property tracking and maintenance for the office.
- Process Domestic, Foreign, and Sponsored Travel Authorizations and Vouchers in the electronic travel system.
- Arrange flight hotel, conference registration, auto (if applicable) and any other reservations.
- Create and analyze written documents for dissemination to leadership.
- Compile information for outside inquiries and reports.
- Develop and maintain tracking tools to be used for reporting data.
- Complete special projects for senior staff, which may require researching readily available resources for information or entering information into government databases.
- Perform other clerical and administrative duties assigned by senior staff.

Department of Defense, Andrews AFB, MD

- Provided telephone and receptionist services.
- Maintained records of leave and attendance.
- Requisitioning of office supplies, repairs on office equipment, and printing services.
- Reserved rooms for meetings.
- Filed material and maintaining office filing systems.
- Received and controlled incoming correspondence.
- Reviewed outgoing correspondence, reports, etc., for format, grammar, and punctuation, and removing typographical errors; to include EPRs and OPRs.
- Writing simple or repetitive, non-technical correspondence such as letters of acknowledgment in accordance with a given format.
- Performed typing, stenographic, or transcribing duties.
- Kept abreast of various procedural requirements, for example, procedures required to process
travel vouchers.
- Maintained information needed for budget purposes.
- Made extensive travel arrangements.
- Took complete arrangements for large conferences to include seating arrangements and catering.
- Composed complex, but non-technical correspondence from Commander.

EDUCATION:
CPR Instructor for Health Care Providers, American Heart Association, 2016
CPR for Healthcare Providers, American Heart Association, 2016
Certified Nursing Assistant, Maryland Board of Nursing 2009 - Current
Business Administration, AA degree, College of Southern Maryland, Completed 2002
High School Diploma, Westlake High School, Waldorf, MD
Tasha Brown is currently an active registered nurse in the state of Maryland. She holds the position of Director of Nursing for Certified Home Nursing Solutions. Ms. Brown has a vast knowledge of long-term care nursing and home health nursing. Ms. Brown has an expressed interest in the protection of the public. She was made aware of the duties expected of a member of the CNA Advisory Committee set forth in Maryland Annotated Code, Health Occupations Article, section 8-6A-13(f). She is being considered for the home care RN designation noted in Maryland Annotated Code, Health Occupations Article, section 8-6A-13(b).
Objective
I want to secure a challenging position as a nurse management with a company where I can utilize my clinical and professional skills with an opportunity for growth and advancement.

Education

University of Maryland University College  Adelphi, MD  2013-2016
- Masters in Health Care Administration
- Accumulative GPA 3.6
- Upsilon Phi Delta Honor Society
- Expect MBA completion date 12/2017

Coppin State University  Baltimore, MD  2009-2013
- Bachelors of Science in Nursing
- Accumulative GPA 3.2
- Mary Mahoney Honor Society

ECPI College of Technology  Manassas, VA  2006-2008
- Health Science Diploma in Practical Nursing

Sanz School of Allied Health  Washington, DC  1999
- Registered Medical Assistant
- Certificate of Perfect Attendance

Cherry Dale Health and Rehabilitation  Arlington, VA  1998
- Certified Nursing Assistant

Friendly High School  Fort Washington, MD  1995-1998
- Diploma General Studies

Leadership

Director of Nursing
- Administrative Duties; budgeting, interviewing, marketing, staffing and performance reviews
- Write, implement and conduct educational trainings and in-services
- Management of daily operations and direct supervision of nurses and paraprofessionals

Clinical Training

North West Hospital  Cardiovascular
Erikson Charlestown  Long Term Care/Rehabilitation
St Agnes Hospital  Medical Surgery/ER/OR/ICU/Labor and Delivery
Mount Washington Children’s Hospital  Pediatric Facility

License and Certifications

American Red Cross CPR/AED for the Professional Rescuer Instructor  (Active) Received 07/2011
Registered Nurse  (Active) Received 10/2013
MD Delegating Nurse  (Active) Received 1/2014

Areas of Knowledge and Experience

Infection control  Managing Interventions  Foley Catheter Care
IV Pumps/Infusion  Health Teaching/Delegation  Records and reporting
Intravenous Fluids  Care Plans  Activities of Daily Living
Insulin Injections  Health Assessments/Care Plans  Sterile Techniques
Wound & Burn care  Nursing Process  Oxygen Therapy
Tracheotomy Care  Diagnostic testing  Dressing Changes
Chest/NG/ Gastric Tubes  Pediatric/Geriatric Care  Administer Medication
Pre/Post Operative Care  Pain Management  Phlebotomy

Office Skills
Proficient in Centricity/EMR, EPIC, PCC (Point Click Care), Millennium, Microsoft Word, Excel, and PowerPoint as well as desktop support and related IT issues, copy/fax machines and types 55wpm.
Tasha Brown

Employment History

Certified Home Nursing Solutions Edgewood, MD 03/2016- Present
**Director of Nursing**
- Supervises home health services to homebound patients in their place of residence.
- Participates in developing standards, which ensure safe and therapeutically effective service to patients and families, and seeing that said standards are met.
- Participates in developing objectives for agency, and seeing that said objectives are implemented and met.
- Prepare policies and procedures, which meet Medicare, Medicaid, accrediting bodies, state, laws, etc. and implement such; revises concurrently.
- Develops a cooperative relationship and communicates effectively and professionally with all physicians, clinical staff and office personnel.
- Investigates and reports any problem relating to patient care or conditions that might be harmful.

Active Day Senior Care Belcamp, MD 11/2014- 3/2016
**Medical Program Manager-Director of Nursing**
- Administrative Duties; budgeting, interviewing, marketing, staffing and performance reviews
- Write, implement and conduct educational trainings and in-services
- Facilitates, coordinates, and monitors quality/performance-improvement
- Maintaining data in preparation for audit and participates in timely responses to audit request
- Case Management / Multidisciplinary team member
- Aggressive member tracking and documentation (care plans, ADCAPS, utilization reviews)

Genesis Health Care Elkton, MD 06/2014-05/2015
**Clinical Nurse RN**
- Performed all areas of knowledge and experience listed above
- Performed same duties as listed below at Envoy
- Assigned to a Transitional Care Unit

Envoy of Pikesville Pikesville, MD 09/2013-10/2014
**Clinical Nurse RN**
- Performed all areas of knowledge and experience listed above
- Client teaching; Health Promotion and Prevention
- Medication Administration/ IV therapy, topical, injections and oral
- Health/Physical Assessments
- Wound care
- Admits and discharges
- Supervision of LPN’s and CNA’s

Total Health Care Baltimore, MD 01/2010-11/2013
**Registered Nurse/License Practical Nurse**
- Referrals to include ICD-9 and CPT Coding.
- Administer Medications/ Neb Treatment/ IV Therapy/Oxygen Therapy
- Client teaching in: Health Promotion/ Prevention, Tertiary care and Medications Therapy
- Drawing blood on clients of all ages
- Assistant in minor surgery procedures
- Wound care
- Triage via phone and in person
- Emergency response/Charge Nurse
- Performing various educational trainings
- Block Grant for Substance Abuse
- Clients: counseling, medication admin, ongoing tracking and monitoring of client status and make referrals/recommendations as needed.
### Memberships

<table>
<thead>
<tr>
<th>Organization</th>
<th>Year</th>
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<tbody>
<tr>
<td>Upsilon Phi Delta Honor Society</td>
<td>2016</td>
</tr>
<tr>
<td>American College of Healthcare Executives</td>
<td>2015 - Present</td>
</tr>
<tr>
<td>Mary Mahoney Honor Society</td>
<td>2013 – Present</td>
</tr>
<tr>
<td>National Black Nurses Association</td>
<td>2013 – Present</td>
</tr>
<tr>
<td>Financial Secretary/ Chair of Financial Committee</td>
<td></td>
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</tbody>
</table>

### Community Service

<table>
<thead>
<tr>
<th>Organization</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lioness Lions Club</td>
<td>2016</td>
</tr>
<tr>
<td>American Red Cross - Disaster Health Service Committee / Emergency Response Service</td>
<td>2010 - Present</td>
</tr>
<tr>
<td>Health Disaster Response (assist with medical needs in a disaster/ replace medical equipment)</td>
<td></td>
</tr>
</tbody>
</table>

### References

Available Upon Request
Graduate of the Harford Foundation and NASW Foundation Supervisory Leaders in Aging Program (SLA). Member of the inaugural class for the State of Maryland 2016.

**Special Skills: Instructor:** American Red Cross of Central Maryland – Provide CPR, First Aid and AED instruction utilizing the American Red Cross Curriculum. LPN with specialization in geriatrics and extensive experience with community based and public health programming.

**EDUCATION**

**MSW** - Social Work – University of Maryland School of Social Work  
Concentration – Management and Community Organization (MACO)  
Specialization: Health  
SWCOS Alumni – Social Work Community Outreach Center  
State of Maryland Licensure as LGSW

**BSW** – Social Work – Coppin State University, Baltimore, Maryland  
Magna cum Laude - Honor Student

**BA** – Sociology – Montclair State University, Montclair, New Jersey

**LPN** - Licensed Practical Nurse,  
Lafayette School of Practical Nursing  
Williamsburg, VA  
Active MD license  
Member of Maryland State Board of Nursing – current  
Governor Appointment 2009  
Reappointment 2013

**Certified Case Manager**  
National Case Management Certification - Commission for Case Management Certification.

**WORK/RESEARCH EXPERIENCE:**
Meals on Wheels of Central Maryland, Baltimore, MD

**Director of Support Services**  March 2016 – September 2016

Oversee the day to day operations of the Support Services Department for the agency. This includes the budget and staff development. Direct oversight of the following programs:

- **Internship Program** – Oversee the internship program, maintain strong on-going relationships with colleges and universities, screen all potential interns and provide programmatic oversight for interns.
- **Grocery Shopping Program** – Oversee the volunteer grocery shopping program while maintaining extensive familiarity with funding/deliverables/outcome/ and reporting requirements.
- **Case Management Services** - Assist in creating procedures and maintaining highest possible quality standards for targeted case management. Reviews referrals, determining whether referred cases will be placed in case management or returned to the regional manager. Oversees provision of services and case management staff. Maintain extensive familiarity with funding/deliverables/outcomes and reporting requirements for case management.
- **Companion and Phone Pals Program**
- **Kibble Connection program**

Meals on Wheels of Central Maryland, Baltimore, MD

**Assistant Director of Support Services**  August 2015 – February 2016.

Responsible for overseeing:

- **Internship Program** – Oversee the internship program, maintain strong on-going relationships with colleges and universities, screen all potential interns and provide programmatic oversight for interns.
- **Grocery shopping Program** – Oversee the volunteer grocery shopping program while maintaining extensive familiarity with funding/deliverables/outcome/ and reporting requirements.
- **Case Management Services** - Assist in creating procedures and maintaining highest possible quality standards for targeted case management. Reviews referrals, determining whether referred cases will be placed in case management or returned to the regional manager. Oversees provision of services and case management staff. Maintain extensive familiarity with funding/deliverables/outcomes and reporting requirements for case management.
Assist the Director of Client Services to oversee day to day operations of the Client Services Department for 6 regions throughout Central Maryland.

**Meals on Wheels of Central MD**, Baltimore, MD – **Central Regional Manager**
August 2014 – August 2015

- Supervision of Baltimore City Site Coordinators, Case Managers and Client Liaisons to ensure 300 plus elderly and disabled clients receive meals, personal contact and related services.
- Manage intern program for social work students to include supervision.
- Manage Meals on Wheels Grocery Assistance Program.
- Ongoing volunteer recruitment at targeted sites. Volunteer training to include isolation reduction planning, client concern reporting and outreach.

Supervisory position responsible for program coordination and direct supervision of the Day Program Assistants and Day Program Manager. Duties include:

- IP planning
- Life Enrichment program implementation
- Staff development.

**Elesy Manor Inc.**, Baltimore, MD, **Assisted Living Manager/ Administrator** (2 facilities)

- Case Management
- Medication Administration and treatments, hospice and palliative care
- 10 years’ supervisory experience at this facility. - 13 direct care staff, 24 residents and 2 contractual staff.
- Knowledge of regulatory processes and expectations.
- Extensive Community outreach experience working with affected families, vulnerable adults and potential neighborhood partners.
• Proven track record of coordinating community team members with the common goal of providing quality healthcare options and housing.

• Experience working with a multidisciplinary team in developing a strategic plan that can be successfully implemented.

• Spearheaded and successfully implemented ongoing recruitment program to hire and effectively train all personnel.

• Developed and implemented improved policies and procedures, resulting in improved efficiency and productivity.

• Maintained a 92% occupancy rate

**West Baltimore Employment Project**, Baltimore, MD– Field Internship

• Assisted in coordinating a collaborative effort to address unemployment.

• Focus Group facilitation and survey development.

• Committee organization and employer outreach.

• Advocacy initiatives to include testifying in Annapolis.

**Baltimore County Department of Social Services** – Field Internship

• Case Management

• Investigated reports of abuse and neglect

• Assisted in connecting families to services

• **VALUE-ADDED STRENGTHS**

Self-starter with flexible and open-minded personality. Cross-level and cross-cultural rapport building skills, based on background and ability to work with vulnerable populations.

• Public speaking and presentation experience.

• Mediation and problem solving skills.
Report of Survey to the Maryland Board of Nursing (MBON) Regarding
Prince George's Community College, Health Sciences Division/Department of Nursing
301 Largo Road, CHS—1409, Largo, MD 20744

Date of Survey: October 18 – October 20, 2016
Type of Program Surveyed: RN Traditional Associate Degree Program; LPN to RN Transition Pathway; Paramedic to RN Transition Pathway
Enrollment on Survey Date:
- RN Traditional Program—209 students
- LPN to RN Transition—81 students
- Paramedic to RN—6 students
- Total Students—296 students; 100% Part Time

Background/Overview:
Prince George’s Community College Department of Nursing is seeking re-accreditation from the Accreditation Commission for Education in Nursing (ACEN) for its established associate degree nursing program. Dr. Patricia Kennedy/Director of Education and Dr. Sheila Green/Nurse Consultant I from the MBON, participated in the survey process to assess adherence to state regulatory requirements (COMAR 10.27.03.02/.04—.16C).

Findings:
The Prince George’s Community College Department of Nursing met COMAR 10.27.03.02/.04—.15, as evidenced by onsite survey findings. The nursing program did not meet COMAR 10.27.03.16C regarding NCLEX-RN® examination results for FY 2015 and FY 2016.

Recommendations to the Nursing Program with Prior MBON Approval:

1. Identify an outside consultant approved by the MBON to critique the nursing program (COMAR 10.27.03.16C). Dr. Cheryl Dover, the nursing program administrator, provided an action plan and subsequent quarterly status reports to the MBON yet, no improvement in NCLEX-RN® examination performance has occurred.
2. Require the approved consultant to:
   - Review the nursing curriculum established in 2006 in relation to the changes that have occurred in the NCLEX-RN® and NCLEX-PN® test plans to insure congruency to nursing theory and clinical practice in the program. Since the establishment of the current curriculum in 2006, there have been four updates to the NCLEX-RN® test plan (2007, 2010, 2013, 2016) and three updates to the NCLEX-PN® test plan (2008, 2011, 2014), respectively.
   - Review the recognized standards incorporated in the 2006 curriculum to insure continuity and relevance to program and learning outcomes.
   - Review the grading scale policy recently implemented in the nursing program to determine efficacy in use for course grading and implications for grade point averages, scholarship eligibility, and grade equivalencies for future higher education endeavors for students/graduates (baccalaureate education and higher).

TDD FOR DISABLED MARYLAND RELAY SERVICE 1-800-735-2258
Report of Survey of
Prince George’s Community College
Health Sciences Division
Department of Nursing
to Maryland Board of Nursing for Continued Approval

Name and Address of Program: Prince George’s Community College, Health Sciences Division, Department of Nursing
301 Largo Road, CHS—1409
Largo, MD 20744

Date of Report: November 17, 2016

Date of Survey: October 18 – October 20, 2016

Type of Program Surveyed: RN Traditional Program; LPN to RN Transition Pathway; Paramedic to RN Transition Pathway

Enrollment on Survey Date: RN Traditional Program—209 students
LPN to RN Transition—81 students
Paramedic to RN—6 students
Total Students—296 students; 100% Part Time

Board of Nursing Representatives: Patricia Kennedy, EdD, RN
Director of Education, Examination and Research
Sheila Green, PhD, RN, CNE
Nurse Consultant I

Visiting Accreditation Body: Accreditation Commission for Education in Nursing (ACEN)

Background/Overview: Prince George’s Community College Nursing Education Unit is seeking re-accreditation for its established associate degree nursing program. This is an entry level nursing program located in Largo, Maryland. Two representatives from the Maryland Board of Nursing (MBON) participated in the survey process to assess continued adherence to state regulatory requirements.
.04 PHILOSOPHY AND OBJECTIVES
Prince George’s Community College Department of Nursing meets this regulatory requirement as evidenced by the following:

A.1 to A.4: The nursing faculty are responsible for the development, implementation, evaluation and revision of the philosophy, objectives and outcomes for the associate degree nursing program, as noted in the Standards 1 and 4 of the *Prince George’s Community College Associate Degree Nursing Program Fall 2016 Self Study* and corroborated in the program’s faculty and curriculum meeting minutes (2012 to 2016) and the *Systematic Plan for Program Evaluation*. These documents provided supporting information that verified total faculty involvement in the decision-making processes related to the program philosophy, objectives and outcomes.

B.1 to B.3: The nursing program’s philosophy, objectives and outcomes are congruent with Prince George’s Community College’s mission and values (*Prince George’s Community College Associate Degree Nursing Program Fall 2016 Self Study*). A comparison between the college’s mission and values and those noted in the nursing program curriculum documents demonstrates mutual goals and outcomes that complement both the college and the nursing program. The nursing program incorporates the Client Needs Framework of the NCLEX-RN® Test Plan (*Prince George’s Community College Associate Degree Nursing Program Fall 2016 Self Study*). The organizing framework incorporates four categories of client needs: safe and effective care environment; health promotion and maintenance; psychosocial integrity; and physiological integrity. The framework is client-centered and emphasizes health promotion and disease prevention across the lifespan (*Prince George’s Community College Associate Degree Nursing Program Fall 2016 Self Study*).

C.1 to C.4: The nursing program’s objectives and outcomes are clearly stated, measureable, and attainable, as articulated in the *Prince George’s Community College Associate Degree Nursing Program Fall 2016 Self Study*; the *Systematic Plan for Program Evaluation*; and in respective course syllabi reviewed by the MBON representatives.

.05 ORGANIZATION AND ADMINISTRATION
The nursing program meets this regulatory requirement as evidenced by the following:

A.1 to A.2: Prince George’s Community College (the controlling institution) is accredited by Middle States Commission on Higher Education. The college’s most recent accreditation was completed in May 2015. Prince George’s Community College has a clearly articulated statement offering equal educational opportunity for all students, as identified in the *Prince George’s Community College Catalog 2015-2016*; the *Prince George’s Community College Accreditation Study (2015)*; and the *Prince George’s Community College Associate Degree Nursing Program Fall 2016 Self Study*.

B.1 to B.3: Prince George’s Community College has clearly delineated organizational charts for academic and non-academic requirements in the institution. The academic organizational chart includes the nursing program, its reporting relationships, lines of responsibility, and communication and authority.
C.: The program has comparable status with other academic units within Prince George’s Community College, as identified through organizational charts and through interviews with Dr. Charlene Dukes, President/Chief Executive Officer and Dr. Sandra Dunnington, Vice President for Academic Affairs for the college.

D.1 to D.2: Prince George’s Community College provides the financial support and resources needed to operate the nursing program and achieve the nursing program goals. The college meets the legal and educational requirements of the Maryland Board of Nursing. Fiscal resources are sufficient to support the nursing program’s goals and outcomes. Nursing faculty salaries are comparable to other Prince George’s Community College faculty salaries and address current nursing salary market demands. The nursing program has access to grants that support purchase of additional equipment and supplies needed for programmatic and scholarly endeavors. Clerical and computer supports are sufficient to meet the needs of the program (*Prince George’s Community College Associate Degree Nursing Program Fall 2016 Self Study*).

E.1 to E.2: Prince George’s Community College provides the financial resources that support adequate facilities and equipment for the nursing program. The college employs administrative, clerical, and instructional personnel that meet regulatory requirements of the Maryland Board of Nursing and nursing education standards for practice.

F.: Prince George’s Community College employs Dr. Cheryl Dover, Nurse Administrator/Chair/Professor. She meets the qualifications stated in COMAR 10.27.03.07.

G.: Prince George’s Community College provides, in writing to the Maryland Board of Nursing, information regarding nursing program administrator changes, as required in *COMAR 10.27.03.05*. Dr. Dover has served in her current role as Nurse Administrator/Chair/Professor since 1998.

### .06 RECORDS AND REPORTS

The nursing program meets this regulatory requirement as evidenced by the following:

A.1: Current student records are up-to-date and maintained in the nursing administration offices within a double locked file system.

A.2: Transcripts of nursing program graduates are maintained in a double locked file system with access limited to that of the Nurse Administrator and her designee.

A.3: Faculty records are maintained and secured in the Office of Human Resources at Prince George’s Community College. These records include, by way of example, documentation of appropriate faculty credentials; transcript verifications of advanced education degrees; and faculty evaluations. All files for full time and adjunct faculty were up-to-date. The Nurse Administrator maintains annually updated faculty records in a double locked file system within the Nursing Administration Suite. These records include current CPR certifications and immunization information.
A.4a/b/c: Administrative records, inclusive of faculty and curriculum meeting minutes, are current and maintained in the Nursing Administration Suite. The faculty meeting minutes reflected faculty discussions and actions instituted. Evidence of these actions were corroborated in the nursing program’s Systematic Plan of Evaluation. The nursing program has provided annual reports and school bulletins (Prince George’s Community College Catalogs) annually to the MBON.

A.5a/b/c: The current nursing curriculum is found in the *Prince George’s Community College Department Catalog 2015-2016*, *Prince George’s Community College Department of Nursing, Fall 2016*; the *Prince George’s Community College Department of Nursing Self Study 2016*; and the *Prince George’s Community College Department of Nursing Student Manual, Fall 2016*. The nursing curriculum clearly articulates the program philosophy, objectives and outcomes. The course syllabi describe the plan for the course and incorporate threads from the program philosophy, objectives and outcomes. Course sequencing and progression are evident.

A.6: Agreements with cooperating agencies are up-to-date and maintained by the Nurse Administrator within a double locked file system. They are reviewed regularly by legal counsel within the college and the Nurse Administrator. These contracts support student learning in hospitals and outpatient/community-based settings.

A.7: The *Systematic Plan of Program Evaluation* is current and maintained under the auspices of the collective nursing faculty and the Nurse Administrator. The information is incorporated as a component of the college-wide assessment and evaluation requirements (*Prince George’s Community College TK-20 Assessment Plan*). The nursing faculty utilize these plans to address all components of the nursing program.

B.: Confidential files are maintained under double locked file systems in the nursing department and the Department of Human Resources. Prince George’s Community College has a policy and procedure for long term file storage and shredded disposal of confidentially-held materials.

C.: Supporting information indicates that the Nurse Administrator for the program submits annual reports to the MBON as required in *COMAR 10.27.03.06C*.

**.07 NURSING PROGRAM ADMINISTRATOR**
The nursing program meets this regulatory requirement as evidenced by the following:

A.1a/b/c to A.2: Dr. Cheryl Dover, Department of Nursing Chair and Nursing Program Administrator for Prince George’s Community College, meets the qualifications identified by the MBON/Nurse Practice Act, January 2016 (*COMAR 10.27.03.07*). She has current licensure in the state of Maryland; holds an associate degree in nursing from Prince George’s Community College; a bachelors’ degree in nursing from the University of Maryland, Baltimore, MD; a masters’ degree in Nursing Administration and Managed Care from the University of Maryland, Baltimore, MD; and a Doctorate of Nursing Practice (DNP) from Capella University, Minneapolis, MN. She has served in her current administrative role since 2003.
B.1 and B.2: Dr. Dover’s role as Nursing Administrator and Chair for the Prince George’s Community College Department of Nursing gives her authority to execute the nursing education program. She has oversight of faculty appointments and reviews, in accordance with the policies established by Prince George’s Community College and the Division of Health Sciences. Dr. Dover is a direct report to the Dean of the Health Sciences Division who, in turn, reports to the Vice President of Academic Affairs. The Vice President of Academic Affairs reports to the President of Prince George’s Community College. Dr. Dover serves in leadership roles at county, state and national levels.

B.3: With input from the nursing faculty and under the direction of the Dean of the Health Sciences Division, Dr. Dover prepares and administers the budget. The nursing operational budget for FY 2016-2017 was reviewed by the MBON representatives during the site visit.

B.4a/b/c/d/e/f/g/h: Dr. Dover maintains oversight of policy development, implementation and evaluation for the nursing program. Policies governing student admission, progression, withdrawal, reinstatement, evaluation, and graduation were reviewed during the MBON site visit. Policies are promulgated in accordance with Prince George’s Community College and the Department of Nursing standards and are published in the Prince George’s Community College Catalog 2015-2016; the Prince George’s Community College, Department of Nursing Student Manual/Fall 2016; and the Prince George’s Community College, Department of Nursing Faculty Manual 2016. If English is identified as a second language for students matriculating at Prince George’s Community College, they are required to complete required testing and course requirements to demonstrate competency in oral and written communication prior to admission to the nursing program.

B.5 and B.6a/b/c/d: Dr. Dover, in collaboration with the nursing faculty team, determines student learning needs, student/teacher ratios and the number of faculty (full time and adjunct) required to implement the nursing curriculum requirements. Community agencies’ policies/requirements are taken into consideration with the planning of student clinical placements and the number of faculty needed in each clinical setting. Teacher/student ratios vary from 1:6 to 1:10 depending on the specialties and acuity levels identified by the agency.

B.7: Agency contracts were reviewed and found up-to-date. The nursing program meets the MBON requirement noted in COMAR 10.27.03.07.

B.8: The nursing program has faculty orientation and development programs, as noted in the Prince George’s Community College Department of Nursing Faculty and Adjunct Faculty Manuals, 2016. The faculty corroborated the existence and use of the orientation and development programs during the faculty site visit meeting.

B.9: The nursing program implements the entire program in accordance with Board regulations (COMAR 10.27.03.07).

B.10: Dr. Dover, in collaboration with the nursing faculty and the Dean of Health Sciences, assures that all publications about the nursing program are clear, accurate, and current. This
includes the Prince George’s Community College Catalog, 2015-2016 and all documents used by the department of nursing on behalf of the program.

B.11: Dr. Dover, in collaboration with the nursing faculty and the Dean of Health Sciences, has a written plan in place that insures students participating in clinical practice settings are physically and mentally competent at all times to provide safe client care. The nursing program uses CastleBranch: a background screening and compliance tracking company (https://www.castlebranch.com). Students are required to upload and maintain currency of their health information to CastleBranch.

B.12: The nursing program meets this MBON requirement. There is a clear delineation of student learning outcomes in each course syllabus. Threads inherent in the philosophy and nursing curriculum are evident each course syllabus, course and clinical evaluations. The nursing program uses a standardized template for each course which insures continuity throughout the curriculum. This standardized template design is also used college-wide.

08 FACULTY AND CLINICAL INSTRUCTORS: The nursing program meets this standard, as evidenced by the following:

A.1a/b/c/d; C.1.a/b/c/d; and C.2: There are nineteen full time nursing faculty, including the Department of Nursing Chair. The nurse administrator teaches one senior level course (didactic only). There are thirty-two to thirty-six adjunct nursing faculty members employed in the program. All faculty are licensed as registered nurses in the state of Maryland and Washington, DC (as required for clinical rotations). Full time and adjunct faculty meet clinical nurse faculty qualification requirements specified in COMAR 10.27.03.08.C.1.a/b/c/d. The program meets COMAR 10.27.03.08.C.2 requirements. Waiver of graduate degree requirements for nursing faculty was not applicable to the nursing program (COMAR 10.27.03.08.B).

D.1: The eighteen full time faculty members, in collaboration with the nurse administrator (Dr. Dover), are responsible for planning, implementing, evaluating, and revising the educational program. Minutes of the Faculty and Curriculum meetings fully demonstrate the active involvement of all faculty. The faculty are afforded the opportunity to voice opinions and to collectively finalize programmatic decisions. Their ability to communicate and collaborate with each other is exceptional. The faculty have established a decorum which supports a united and cohesive approach to student learning and program implementation. They are deeply committed to student success. The faculty are members of college-wide committees and have direct input to campus-wide initiatives, thus supporting the college while enhancing the educational endeavors of the nursing program.

D2. There are services available through Prince George’s Community College Offices of Admissions, Registration, Financial Aid, Disability Support Services, and Advising which support all pre-nursing students. These services are an integral component to meeting the needs of prospective and newly enrolled students. They monitor the progression of students completing pre-requisite requirements for entry to the nursing program and consult with the Department of Nursing Chair on an as-needed basis. As students are admitted to the nursing program, the full
time nursing faculty administer and address advising and progression requirements of all matriculating nursing students.

The review of documents indicates that the faculty act as a whole in the development, and implementation standards for admission, progression and graduation of nursing students. Full time faculty participate in advisement, guidance of students, as well as evaluation of student performance. Formative and summative evaluation processes are well documented in the Prince George’s Community College Nursing program.

The review of faculty records (full time and adjunct faculty) show evidence of maintaining current clinical skills. Five full time faculty have doctorate degrees and one will complete the doctorate degree in 2017. Full time faculty maintain appropriate nursing licensure and certifications that are incorporated in their confidentially-maintained faculty files.

The full time faculty have an established plan which makes all course/learning materials accessible to students. They incorporate the use of BlackBoard® software to effectively communicate all relevant course materials. Faculty have mechanisms in place to elicit student evaluation of teaching effectiveness in classroom and clinical settings.

Faculty participate in the recruitment, selection and promotion of faculty. A mentoring program exists that supports the successful inclusion of new faculty members.

**09 FACULTY POLICIES:** The nursing program meets this standard as evidenced by:

A. and B.: The *Prince George’s Community College Employee Handbook, 2015*; the *Department of Nursing Faculty Handbook, 2016*; and the *Department of Nursing Adjunct Faculty Handbook, 2016* incorporate personnel policies for full time and adjunct faculty. These documents include information regarding faculty governance, teaching load and evaluation. Nursing faculty follow established personnel policies for Prince George’s Community College. The nursing program has recognized personnel policies governing teaching load and evaluation specific to the nursing profession and in accordance with nursing accreditation standards. These policies are approved by Prince Georges’ Community College in recognition of the inherent requirements for nursing education.

**10 FACULTY ORGANIZATION:** The nursing program meets this regulatory standard, as evidenced by:

A./B./C./D./E.: The nursing program is organized by semester progression. Each course has a faculty team leader. Duties include coordinating lecture and clinical schedules and hosting course meetings (*Prince George’s Community College Associate Degree Nursing Program Fall 2016 Self Study*). All full time faculty participate in faculty meetings, curriculum meetings, program evaluation meetings, and student progression meetings. Manuals were reviewed which support these endeavors and showed deliberations and actions instituted to address student and programmatic needs over a three year period.
.11 FACULTY DEVELOPMENT AND EVALUATION: The nursing program meets this regulatory standard, as evidenced by:

A./B./C.: The College provides support for nursing scholarship endeavors. Faculty maintain scholarship through, by way of example, attending/facilitating professional development workshops and pursuing formal academic studies (Prince George’s Community College Associate Degree Nursing Program Fall 2016 Self Study). A review of faculty records provided supporting evidence regarding ongoing scholarly development.

Faculty evaluation is described in the Faculty Evaluation Plan, 2011(revised 2015) and conducted by the Nursing Department Chair or her designee on an ongoing basis. The evaluation policy is found in the Department of Nursing Faculty Handbook, 2016 and in the Department of Nursing Adjunct Faculty Handbook, 2016. Peer and student evaluations were reviewed for all full time faculty and a representative sample of adjunct faculty during the site visit. Documents supported the policy for the faculty evaluation process.

.12 RESOURCES, FACILITIES AND SERVICES: The nursing program meets regulatory standard, as evidenced by:

A./B./C.: The Department of Nursing is located in the Center for Health Studies (CHS), which opened August 2012, on the Largo campus (Prince George’s Community College Associate Degree Nursing Program Fall 2016 Self Study). The nursing program resources are commiserate with other academic programs and are sufficient to meet faculty, student and program needs. Student services include, by way of example, tutoring and writing services; computer labs; eLearning services; and a fully operational library with technology supports. The library includes interlibrary loan for student usage. Students complete orientation to insure their familiarity with the use of on-campus and online resources.

Full time faculty have well-designed private offices and are fully equipped to meet the day-to-day operational needs. Adjunct faculty have well-designed work space which accommodates individual and small group educational requirements. Classrooms are equipped with state-of-the-art technology designed to meet audiovisual requirements for in-class endeavors. Educational support services are available to faculty to support classroom learning requirements.

Simulation labs are equipped with state-of-the-art technology. The labs are used for individual and group learning endeavors. Open labs are sufficient and designed to meet the diverse schedules of students to maximize opportunities for learning. The labs have personnel trained in the art of simulation. This allows students a safe environment in which to learn how to care for clients with a variety of health care needs. The labs are designed for acute and community-based simulation learning.
D/E: All agency contracts, representing the agencies used by the nursing program, were reviewed during the site visit and meet clinical facility requirements as stipulated in COMAR 10.27.03.12.D and E.

A site visit was conducted at Doctors Community Hospital/Units 3 East and 4 East, by way of example. This is a fully accredited hospital. The Prince George’s Community College Nursing students were well-received in both clinical settings. Ms. Salisa Lamb, BSN, RN, Instructor on Unit 3 East and Ms. Barbara Njoku, MSN, RN on Unit 4 East (adjunct faculty), provided an overview of the clinical experiences and course expectations to be achieved on each respective unit. Students on Unit 3 East were senior level students enrolled in NUR 2032: Physiological Integrity III. Two students were interviewed on location. Both were supportive of the setting, personnel and clinical instructor. Students on Unit 4 East were LPN-RN Transition students. One student was interviewed on Unit 4 East. She was also supportive of the setting, personnel and clinical instructor.

Ms. Michelle Manley, BSN, RN, Clinical Educator/Doctors Community Hospital (hospital representative) provided insight into unit operations and patient care requirements in accordance with hospital standards. Ms. Manley, a 1991 graduate of Prince George’s Community College Nursing program, was supportive of the nursing student learning experiences provided through Doctors Community Hospital. The hospital has 200 beds available to meet community needs in Medical/Surgical care of adults. Unit 3 East is devoted to the care of general medical and outpatient chemotherapy needs of patients. Unit 4 East is devoted to the care of medical/surgical, orthopedics, and neurological needs of patients. There was opportunity to interview six registered nurses and one licensed practical nurse as agency representatives on the respective units. The six registered nurses were graduates of the program.

**.13 CURRICULUM:** The nursing program meets this standard, as evidenced by the following:

A through M: The faculty maintain oversight for the established nursing curriculum. The curriculum is logically defined and has a reasonable sequential flow with clearly articulated outcomes (*Prince George’s Community College Associate Degree Nursing Program Fall 2016 Self Study*). The supporting documents provided for the MBON reviewers complement the information described in the self-study. The student learning outcomes, course outcomes and terminal program outcomes are congruent. The level of complexity in nursing practice is articulated in each course syllabus and is sequentially-defined in accordance with student advancement in the five-semester program.

The faculty designed and implemented the current curriculum in 2006. The curriculum incorporates standards delineated in the American Nurses Association Standards of Nursing Practice; the National League for Nursing Education Competencies for Graduates of Associate Degree Programs (2010); the Quality and Safety Education for Nurses pre-licensure competencies (2014); the Maryland Nurse Practice Act; and the National Council of State Boards of Nursing Client Needs Categories of the NCLEX-RN® Test Plan (2013) (*Prince
George’s Community College Associate Degree Nursing Program Fall 2016 Self Study). The NCLEX-RN® Test Plan is the organizing framework for the curriculum. Elements addressed in the framework and utilized in the curriculum include: client-centered care, health promotion and disease prevention. Threads incorporated throughout the curriculum include: nursing process, caring interventions, communication and documentation, teaching/learning, and culture and spirituality (Prince George’s Community College Associate Degree Nursing Program Fall 2016 Self Study). The curriculum plan, course outcomes, student learning outcomes, and terminal program outcomes appear congruent and appropriate to meet the expectations of entry level associate degree graduates into professional nursing practice.

Student clinical and simulation learning experiences are designed to enhance didactic learning and are offered concurrently within the defined and sequential courses of study. Evaluation methods and tools were reviewed and appear to support student learning and growth. Ratios of classroom and clinical hours for each clinical nursing course were clearly articulated for the Prince George’s Community College Nursing program. Clinical preceptors are not utilized in the nursing program. Students meet requirements for arts and humanities, social and behavioral sciences, biological and physical sciences as a part of their pre-nursing course requirements.

14 STUDENTS: The nursing program meets this regulatory requirement, as evidenced by the following:

A./B./C.: The Prince George’s Community College environment is one of inclusion and student-supported. The MBON reviewers met with forty-nine (49) nursing students during the site visit. Student attendees were enrolled in the traditional associate degree nursing program, the LPN to RN Transition Pathway, and the Paramedic to RN Transition Pathway. They believed the Prince George’s Community College Nursing program was positive, student-focused, and a program which encouraged them to be successful. Faculty were identified as accessible in person, by phone and by email, as needed, to assist them in learning endeavors. The students complimented the retention/success nurse faculty member (part time) who works with them in groups and individually in supporting their learning needs.

Students were aware of and had been encouraged to become members of faculty committees. Students participate in faculty committees, as evidenced by one student who identified himself as a member of a faculty committee during the site visit.

Students are active participants in the Nursing Student/Faculty Forums conducted each semester and believed that these sessions afforded opportunity for student/faculty dialogue and to address problems and concerns. Many students attending the site visit meeting expressed concern about the recent changes in the nursing department grading scale whereby the grade of 80 to 86 was noted as a grade of “C.” This was a major concern for current grade point averages, access to scholarships and future interpretation of grade point averages for future higher education endeavors (baccalaureate education and beyond).

Access to campus-wide services was not an issue. Several had used the services of the writing and tutorial supports and found them helpful to meeting their learning needs. They spoke
positively of the support offered through the Admissions, Registration, and Financial Aid offices during pre-nursing and nursing program time periods.

The policies governing students’ rights and responsibilities and student grievances were published in the *Prince George’s Community College Catalog 2015—2016 and the Department of Nursing Student Manual Fall 2016*. Students confirmed their awareness of these policies and locations for review.

A representative sample of student records was reviewed during the site visit. These student records were complete and maintained in the nursing program administrative office under a double-locked security system. When students leave the program through graduation or attrition, their final records are maintained in a separately double-locked secured filing system within the Center for Health Studies building.

**15 EVALUATION**

The nursing program meets this regulatory requirement as evidenced by the following:

A through D: The *Prince George’s Community College Associate Degree Nursing Program Systematic Plan for Program Evaluation 2013 – 2016; Faculty Minutes 2013 – 2016; Department of Nursing Curriculum Minutes 2013—2016; Prince George’s Community College Catalog 2015—2016; Nursing Curriculum Gap Analysis (Exhibit R); the Nursing Program Integration and Alignment of QSEN Core Competencies (Exhibit U); and a faculty interview session were incorporated to assess the development and implementation of the nursing program evaluation processes.*

The plan included many components of the program: administration and faculty; cooperating agencies; current students and graduates; curriculum design and usage; and congruency of the nursing program with college-wide mission, values and evaluation requirements. The evaluation time intervals are annually for the majority of the criterion standards. There was evidence of actions taken related to issues identified throughout the nursing program’s evaluation processes.

The nursing program is meeting its objectives and outcomes and the changing needs of nursing and society, based upon the review and findings established during the MBON site visit completed in October 2016.

The *Systematic Plan for Program Evaluation 2013 – 2016* incorporated recommendations for programmatic revisions and an action plan for each criterion, as relevant, for future nursing program direction.
.16 LICENSURE EXAMINATION PERFORMANCE

AD & LPN NCLEX-RN® Pass Rates

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The MBON approved the Prince George’s Community College Department of Nursing February 2012 NCLEX-RN® Action Plan Report. The MBON received subsequent updates every three months from July 2014 to April 2016.

RECOMMENDATIONS

1. Identify an outside consultant approved by the MBON to critique the nursing program. Although you have shared your extenuating circumstances, the poor NCLEX-RN® performance has continued beyond the two recommended years. Dr. Cheryl Dover contacted the MBON Director of Education, Dr. Patricia Kennedy, to identify a Board-approved outside consultant with expertise in nursing education that is congruent with program needs (COMAR 10.27.03.16.C). Based on the extended period of poor performance, the MBON representatives concur with the need for an outside consultant.

2. Review the 2006 curriculum as it relates to the changes that have occurred over time in the respective NCLEX-RN® and NCLEX-PN® test plans to insure relevance to current nursing theory and clinical practice. Since the establishment of the current curriculum in 2006, there have been four updates to the NCLEX-RN® test plan (2007, 2010, 2013, 2016) and three updates to the NCLEX-PN® test plan (2008, 2011, 2014), respectively.

3. Review the standards incorporated within the 2006 curriculum. While it is an excellent idea to base curriculum design, course objectives and expected outcomes on recognized standards, when these standards are not blended as a strategy, continuity in the program curriculum may suffer.

4. Review the grading scale policy recently implemented in the nursing program to determine efficacy and usage in course grading. Identification of 80 to 86 as “C” in the grading scale has grave implications for grade point averages, scholarship opportunities and grade equivalencies in future higher education endeavors for students (baccalaureate education and beyond).
PROGRAM STRENGTHS

- Prince George’s Community College is culturally diverse, inclusive and very student-oriented.
- Prince George’s Community College Nursing faculty are dedicated to the success of their students and foster team unity to insure educational continuity in the program.
- Prince George’s Community College Administration holds the nursing program in high regards and supports the educational experiences of matriculating students and the needs of the faculty.
- Prince George’s Community College Nursing program has one RN to BSN articulation agreement with Stevenson University and is pursuing additional agreements with the University of Maryland School of Nursing, Frostburg University, and Grand Canyon University to foster student lifelong learning endeavors.
- The nursing program has an established systematic plan of program evaluation and incorporates continuous quality improvement methods to address program needs.
- The nursing program has an engaged Advisory Board that offers valuable insight into current trends, needs and practices in community-based/hospital-based settings.
Report of Survey to the Maryland Board of Nursing (MBON) Regarding
College of Southern Maryland
Associate of Science Degree in Nursing Program and Practical Nursing Certificate Program
8370 Mitchell Road, P.O. Box 910
La Plata, MD 20646

Date of Survey: September 20—22, 2016
Type of Program Surveyed: Associate of Science Degree in Nursing & Practical Nursing Certificate Programs
Enrollment on Survey Date: 274; 100% Part Time Students

Background/Overview:
The College of Southern Maryland (CSM) is seeking re-accreditation from the Accreditation Commission for Education in Nursing (ACEN) for two entry level nursing programs: the associate of science degree and the practical nursing certificate programs. CSM has three campus locations of operation: La Plata (main campus); Leonardtown; and Prince Frederick. Dr. Patricia Kennedy/Director of Education and Dr. Sheila Green/Nurse Consultant I, representatives of the MBON, participated in the survey process to assess continued adherence to state regulatory requirements for these entry level programs (COMAR 10.27.03.02/.04—.16C).

Findings:
The College of Southern Maryland Nursing Program met COMAR 10.27.03.02/.04—.16C, as evidenced by onsite survey findings. This was an exemplar site visit.

Recommendations to the Nursing Program with Prior MBON Approval:
- Continued three year approval for the RN nursing program with an interim report due in three-years (COMAR 10.27.03.15 E, F (2)). Five years is the total maximum Board approval.
Report of Survey of
The College of Southern Maryland (CSM)
Associate of Science Degree in Nursing Program
And
Practical Nursing Certificate Program

to the Maryland Board of Nursing for Continued Approval

Name and Address of Program: The College of Southern Maryland
8370 Mitchell Road, P.O. Box 910
La Plata, MD 20646

Date of Report: November 18, 2016

Date of Survey: September 20—22, 2016

Type of Program Surveyed: Associate of Science Degree in Nursing & Practical
Nursing Certificate Programs

Enrollment on Survey Date: 274; 100% Part Time Students

Board of Nursing Representatives: Patricia Kennedy, EdD., RN
Director of Education, Examination and Research
Sheila Green, PhD, RN, CNE
Nurse Consultant I

Visiting Accreditation Body: Accreditation Commission for Education in Nursing
(ACEN)

Background/Overview: The College of Southern Maryland (CSM) is
seeking reaccreditation for two entry level nursing programs: the associate of science degree and the
practical nursing certificate programs. CSM has three campus locations of operation: La Plata (main
campus); Leonardtown; and Prince Frederick. The three campuses are located in the southern region of
Maryland. The MBON representatives participated in the survey process to assess continued adherence
to state regulatory requirements for these entry level nursing programs.
.04 PHILOSOPHY AND OBJECTIVES:
CSM meets this regulatory requirement as evidenced by the following:

(A.1 to A.4): The nursing faculty are responsible for the development, implementation, evaluation and revision of the philosophy, objectives and outcomes for the associate degree and the practical nursing programs. These findings were noted in Standards 1, 4 and 5 of the CSM Self Study Report/September 2016. Further corroboration of findings were noted in CSM Faculty Minutes (2013 to 2016), the CSM College Catalog 2016 and the CSM Nursing Student Handbook.

(B.1 to B.3): The nursing program’s philosophy, objectives and outcomes are congruent with CSM’s mission and values (CSM Self Study Report/September 2016). A comparison between the college’s mission and values and those noted in the CSM nursing curriculum documents demonstrates mutual goals and outcomes that complement both the college and the nursing program. The CSM Nursing Curriculum incorporates “professional standards consistent with safe practice in contemporary health environments” (CSM Self Study Report/September 2016, p. 7). The conceptual framework concepts and their relationship to student learning outcomes for both nursing programs are well articulated and validated in the CSM Self Study Report/September 2016.

(C.1 to C.4): The nursing program’s objectives and outcomes are clearly stated, measureable, and attainable, as articulated in the CSM Self Study Report/September 2016 and in respective course syllabi reviewed by the MBON reviewers.

.05 ORGANIZATION AND ADMINISTRATION:
CSM meets this regulatory requirement as evidenced by the following:

(A.1 to A.2): The College of Southern Maryland (the controlling institution) is accredited by Middle States Commission on Higher Education. The college’s most recent accreditation was completed in 2014, with full ten year accreditation status. The College of Southern Maryland has a clearly articulated statement offering equal educational opportunity for all students, as identified in the CSM Self Study Report/September 2016, the College of Southern Maryland Catalog 2016, and on the CSM website.

(B.1 to B.3): CSM has clearly delineated organizational charts for academic and non-academic requirements in the institution. The organizational chart includes the nursing program, its reporting relationships, and lines of responsibility, communication and authority.

C.: The nursing program has comparable status with other academic units within CSM, as identified through organizational charts and through interviews with Dr. Bradley Gottfried, President/College of Southern Maryland, members of the executive college team, and the nursing faculty.

D.: CSM provides the financial support and resources needed to operate the nursing program and achieve the nursing program goals. CSM meets the legal and educational requirements of the Maryland Board of Nursing.
E.: CSM provides the financial resources that support adequate facilities and equipment for the nursing program. The college employs administrative, clerical, and instructional personnel that meet regulatory requirements of the Maryland Board of Nursing and nursing education standards for practice.

F.: CSM employs Dr. Laura Polk, Chair of the Health Sciences Division. She meets the qualifications stated in COMAR 10.27.03.07.

G.: CSM has provided, in writing to the Maryland Board of Nursing, information regarding nursing program administrator changes, as required in COMAR 10.27.03.05. Dr. Polk has served in her current role as Chair of the Health Sciences Division since 2010.

.06 RECORDS AND REPORTS
CSM meets the requirements for this standard as evidenced through the following survey-acquired information:

(A.1): Current Records of Students: The CSM Health Sciences Division maintains academic student information only. All records are maintained in a locked file cabinet within a locked room (double locked system) in the CSM Health Sciences Division office. Student files were reviewed and determined to be up-to-date in accordance with the student’s progression status in the ADN and PN programs, respectively. These records included advisory information and clinical evaluation tools (formative and summative), referencing student progress. Health information is maintained by CastleBranch: a background screening and compliance tracking company utilized by CSM (https://www.castlebranch.com). Students are required to upload and maintain currency of their health information to CastleBranch.

(A.2): Transcripts of Graduates: Following program completion, academic files on PN and ADN students are maintained in a secured basement storage area in the Health Technology building. When the storage period expires, CSM oversees shredding of the files. The CSM Health Sciences Division adheres to the college’s records management policy regarding retention and disposal of records.

(A.3): Faculty Records: The CSM Department of Human Resources maintains all faculty hire/salary information. The CSM Health Sciences Division maintains faculty information regarding evaluations, current licensure, and transcripts credentialing. All faculty records and licensure are up-to-date and meet COMAR standards.

(A.4): Administrative Records: The CSM Health Sciences Division maintained complete and timely minutes of faculty meetings, annual reports of the program and up-to-date school bulletins.

(A.5): Current Curriculum: The programs’ philosophy, course outlines, and student learning outcomes are congruent with the level of learner. The onsite documents and the CSM Self Study Report 2016 revealed curriculum mapping consistent with the outcomes and expectations for the ADN and PN programs. The CSM Self Study 2016 denotes the following: “The ADN and PN
curricula are consistent with professional standards and reflect the program’s mission, philosophy and conceptual framework. This framework provides a universal structure for nursing interventions to clients throughout the lifespan and supports the nursing programs’ mission, vision and philosophy. The curricula are designed to enable students to develop the necessary competencies for safe, competent, professional nursing” (p. 68).

(A.6): **Agreements with Cooperating Agencies:** Agency contracts were reviewed and demonstrated compliance with this COMAR requirement.

(A.7): **A Master Plan of Evaluation:** The CSM Nursing Program has a clearly defined systematic plan of evaluation for the program. It includes definitions for each program component, levels of responsibility, source documentation, frequency of assessment, assessment method(s); results and data collection/analyses; and recommendations/actions administered. This document encompasses a thorough evaluation of the program for the last three years and its progress to-date. This information is included in the CSM college-wide assessment and evaluation program and is considered a model of excellence for other college programs, as noted by Dr. Eileen Abel, Vice President of Academic Affairs.

B. **Records shall be safely stored to prevent loss, destruction, or unauthorized use.** The CSM Nursing Program meets this requirement.

C. **The nursing program administrator shall submit an annual report to the Board on forms provided by the Board.** The CSM Nursing Program meets this requirement.

.07 NURSING PROGRAM ADMINISTRATOR

CSM meets the requirements for this standard as evidenced through the following survey-acquired information:

(A.1 & 2): **Qualifications of the nursing program administrator.** Dr. Laura Polk, Chair of the Health Sciences Division and Nurse Administrator of the CSM Nursing Programs, completed her bachelor’s degree in nursing (BSN) from Georgetown University and her master’s (MSN) and doctorate (PhD) degrees at Catholic University. She is a Certified Nurse Educator. Dr. Polk is experientially qualified and meets governing organization and state requirements to assume the role of nursing program administrator. Dr. Polk exceeds the requirements of the College of Southern Maryland and Maryland Board of Nursing as she possesses over 28 years of nursing and administrative experience and maintains a current registered nurse license.

(B.1/2/3/4/5/6/7/8/9/10/11/12): **Responsibilities.** The *CSM Self Study 2016* indicated that Dr. Laura Polk “has the responsibility to manage operation of the nursing programs and lead the development and implementation of nursing program initiatives” (p. 27). In addition, she is “responsible for all program budgets and can allocate funds across Division Programs as needed. Budgets are prepared in consultation with the faculty, staff, program coordinators, and the Vice President of Academic Affairs” (*CSM Self Study 2016*, p.29). This was also corroborated through interviews with the Vice President of Financial Services, Mr. Tony Jergensen.
Faculty, in collaboration with and under the direction of Dr. Polk, participate in recommendations for: faculty appointments; educational programs; preparation and administration of the program budget. The CSM Self Study 2016 and Administrative Minutes—2013-2016 provided supporting documentation that faculty play a pivotal role in the formulation and implementation of the all policies governing the nursing program, including those relative to: student admission and progression; advanced standing; transfer and articulation; withdrawal; reinstatement; evaluation; and graduation requirements.

Faculty, in collaboration with and under the direction of Dr. Polk, participate in determining the student/teacher ratio required to meet the objectives of each course and to define the methods of instruction employed. The faculty are involved in determining the number and qualifications of faculty required to meet programmatic requirements. CSM has a faculty orientation, mentoring and development program, as noted in the CSM Self Study 2016, the CSM Administrative Manual and the CSM Faculty Handbook. The CSM ADN and PN programs are implemented in accordance with the Maryland Board of Nursing regulatory requirements.

.08 FACULTY AND CLINICAL INSTRUCTORS:
CSM meets this regulatory requirement as evidenced by the following:

(A.1.a—d): There are sixteen (16) full time faculty and twenty-five (25) to thirty (30) part time adjunct faculty in the CSM nursing education program. Full time faculty records were reviewed during the site visit and one hundred percent (100%) of the faculty meet COMAR qualifications for the state of Maryland.

(A.(2) & (3); B.(1) –(8 )): These standards regarding waiver of graduate degree requirements for nursing faculty were not applicable to the CSM nursing program.

(C.(1) & (2)): Qualifications of Clinical Nurse Faculty. All faculty are licensed as registered nurses in the state of Maryland. Full time and adjunct faculty meet clinical nurse faculty qualification requirements specified in COMAR 10.27.03.C.1.(a)—(d). The program meets COMAR 10.27.03.C.2 requirements. Clinical preceptors are not utilized in the CSM nursing program.

(D.): Responsibilities.
D.1: The faculty members, in collaboration with the nurse chair (Dr. Polk), are responsible for planning, implementing, evaluating, and revising the educational program. Minutes of the CSM Faculty and Curriculum meetings fully demonstrate the active involvement of all faculty. They are afforded the opportunity to voice opinions and to collectively finalize programmatic decisions. The faculty have established a decorum which supports a united and cohesive approach to student learning and program implementation. The faculty are members of college-wide committees and have direct input to campus-wide initiatives, thus supporting the college while enhancing the educational endeavors of the nursing program.

D2.(a)—(h): There are services available through CSM Admissions, Registration, and Advising Offices which support pre-nursing and enrolled nursing students. These services are an integral
component to meeting the needs of prospective and enrolled students. They monitor the progression of students completing pre-requisite requirements for entry to the nursing program and consult with Dr. Polk or her designee on an as-needed basis. As students are admitted to the nursing program, the full-time nursing faculty administer and address the progression requirements for matriculating nursing students.

The review of CSM documents indicates that the faculty act as a whole in the development and implementation of standards for admission, progression and graduation of nursing students. The faculty participate in advisement, guidance of students, as well as evaluation of student performance. Formative and summative evaluation processes are well documented in the CSM program. Students are afforded the opportunity to evaluate teaching effectiveness for each course. They also complete Graduate Comments Surveys (ADN & PN graduates).

The review of faculty records (full-time and adjunct faculty) show evidence of maintaining current clinical skills. Full-time faculty maintain appropriate nursing licensure, certifications and evidence of advanced degree completion. This information is incorporated in their confidentially-maintained faculty files.

The full-time faculty have an established plan which makes all course/learning materials accessible to students. They incorporate the use of MyLearning® software to effectively communicate all relevant course materials. These materials are made available to all enrolled nursing students based on course and program progression.

Faculty participate in the recruitment, selection, and promotion of faculty. Peer evaluation is conducted for faculty under the direction of Dr. Laura Polk. A mentoring program exists that supports the successful inclusion of new faculty members.

D.3.(a) & (b): Clinical visits were conducted at the Leonardtown location of MedStar St. Mary’s. Hospital representatives included: Ms. Juliana Tyer, MSN, RN, NE-BC, Director of Medical/Surgical and Pediatric Care and Ms. Anita Wetzel, RN/Nurse Educator. CSM uses 4 clinical units for second and third semester student learning—Mondays through Thursdays/Day and Evening experiences. The hospital educators conduct student orientation to the hospital setting. There is a PharmD available on each unit who serves as a pharmacy resource to the nursing staff and nursing students. There are facilities readily available to support pre and post-conference requirements. Students participate in bedside rounds with physicians and nurses, as well as observational experiences in the operating rooms and respiratory care, by way of example.

CSM students are hired as certified nursing assistants and the hospital hires many of the program’s nursing graduates. The hospital administration encourages continuing education and pursuit of the bachelor’s degree in nursing.

Ms. Annette Ragland, Clinical Instructor, provided insight into student clinical endeavors on the medical/surgical unit. There were 8 students in the clinical setting on the day of the visit. Ms. Ragland determines patient assignments, based upon goals and objectives that incorporate current classroom learning with patient care experiences.
Two students were interviewed. They indicated that they enjoyed their clinical experiences and had a greater appreciation of clinical expectations in nursing care. They found the nursing staff to be friendly and helpful. Students were always included in different unit-based activities that enhanced their learning experiences. The students described their clinical evaluation experiences and articulated policies governing formative and summative evaluation reviews with clinical faculty.

**.09 FACULTY POLICIES:**
CSM meets this regulatory requirement as evidenced by the following:

A. & B.: The CSM Faculty Handbook incorporates faculty personnel policies for full time and adjunct faculty. It includes information regarding faculty governance, teaching load and evaluation. Nursing faculty follow established CSM personnel policies. The CSM nursing program has recognized personnel policies governing teaching load and evaluation specific to the nursing profession and in accordance with accreditation standards. These policies are approved by the College of Southern Maryland in recognition of the inherent requirements for nursing education.

**.10 FACULTY ORGANIZATION:**
CSM meets this regulatory requirement as evidenced by the following:

A—E.: The CSM nursing program is organized by sequential semesters and includes pre-clinical semester, clinical semesters 1, 2, and 3. This program progression is used in the ADN and PN programs. Full time faculty participate in faculty meetings, curriculum meetings, program evaluation meetings, and student progression/concerns meetings. Faculty actively participate in college-wide committees. Manuals were reviewed which support these endeavors and showed deliberations and actions instituted to address student and programmatic needs over a three year period.

**.11 FACULTY DEVELOPMENT AND EVALUATION:**
CSM meets this regulatory requirement as evidenced by the following:

A—C.: The College provides support for nursing scholarship endeavors. Faculty maintain scholarship through, by way of example, attending/facilitating professional development workshops, pursuing formal academic studies, and participating in distance learning that supports faculty development (CSM Self Study 2016).

A faculty meeting was held with the MBON and ACEN visitors. Faculty indicated that governance was very beneficial and there was faculty representation to the Faculty Executive Board. They had representation on college-wide committees and identified these committees as effective. Work load was comparable to that of other faculty campus-wide. A review of faculty records provided supporting evidence regarding ongoing scholarly development.
Faculty evaluation is described in the Faculty Performance Evaluation policy and conducted by the Chair of the Health Sciences Division or her designee on an ongoing basis. Peer, student, and agency-based evaluations were reviewed for all full time faculty and a representative sample of adjunct faculty during the site visit. Documents supported the policy for the faculty evaluation process.

12 RESOURCES, FACILITIES AND SERVICES:
CSM meets this regulatory requirement as evidenced by the following:

A. Physical Facilities: A tour of the physical facilities was conducted at the La Plata and Leonardtown campuses, respectively. CSM has worked very hard to insure that students have identical services and facilities among the three campuses (inclusive of Prince Frederick campus). The physical facilities are adequate to meet the needs of the CSM nursing program. Adequate space is available for privacy of faculty-student conferences (on campus and in the clinical settings). Classrooms, simulation and skills laboratories and conference rooms are available for student learning. A new health sciences building is being built in Hughesville, Maryland. Construction began in 2015.

B. & C. Learning and Educational Support Resources: Learning resources, such as MyLearning®, tutorial centers, a fully operational library with technology supports, and faculty development support are available for students and faculty, respectively. There is an orientation extended to nursing students and faculty to insure familiarity with the use of on-campus and online resources. Students and faculty can access services online and have remote access assistance as needed. These resources are current, comprehensive and commiserate with other academic areas on campus.

D. Clinical Facilities: A tour of the MedStar St. Mary’s Hospital, a 125 bed acute care facility, was conducted. This facility has full hospital accreditation through Joint Commission. It has sufficient registered nurses and support personnel to ensure safe and continuous care of clients and who conform to current standards of nursing practice.

E. Written Agreements: All agency written agreements were reviewed and meet this COMAR standard.

13 CURRICULUM:
CSM meets this regulatory requirement as evidenced by the following:

A—D.: The CSM nursing faculty maintain oversight for the established nursing curriculum. The curriculum is logically defined and has a reasonable sequential flow with a clearly articulated nursing philosophy, student and program outcomes (CSM Self Study Fall 2016). The supporting documents complement the information described in the self-study. The level of complexity in nursing practice is articulated in each course syllabus and is sequentially-defined in accordance
with student advancement in the four-semester program. Student clinical experiences are
designed to enhance didactic learning and are offered concurrently within the sequentially-
defined courses of study. Evaluation methods and tools were reviewed and appear to support
student learning and growth. Ratios of classroom to clinical hours for each clinical nursing
course were clearly articulated for the CSM nursing program.

The Nursing Philosophy addresses the interconnectivity among person, environment, health, and
nursing. The Philosophy of Nursing Education incorporates education, the teaching-learning
process, nursing education, the curriculum, and the importance of the conceptual framework.
Elements addressed in the conceptual framework and utilized in the curriculum include those
noted above and those associated with critical thinking that include: judgment, knowledge, skills,
communication and creative problem solving. The curriculum plan, the curriculum objectives,
student and program outcomes appear appropriate to meet the expectations of entry level
associate degree graduates into professional nursing practice.

Students meet requirements for arts and humanities, social and behavioral sciences, biological
and physical sciences as a part of their pre-nursing course requirements. They are encouraged to
complete these endeavors prior to entry into the CSM program.

14 STUDENTS:
CSM meets this regulatory requirement as evidenced by the following:

A.—C.: The College of Southern Maryland environment is one of inclusion and student-
supported. The MBON and ACEN visitors met with eighty-four (84) nursing students during the
site visit, in-person at the La Plata campus and through distance learning from the Leonardtown
and Prince Frederick campuses. There was significant cross-representation of student attendees
enrolled in the first, second, third, and fourth semesters of matriculation in the program.

Students believed the CSM program was positive, student-focused, and a program which
encouraged them to be successful. Faculty were identified as accessible in person, by phone and
by email, as needed, to assist them in learning endeavors. They were aware of and had been
encouraged to become members of faculty committees. They believed they had input in the
nursing program, as illustrated in their example of success in uniform changes.

Access to campus-wide services was not an issue at any of the three locations. Several had used
tutorial support services and found them helpful to meeting their learning needs. The students
spoke highly of peer student mentors and retention coordination services. They spoke positively
of the support offered through the Admissions, Registration, and Financial Aid offices during
pre-nursing and nursing program time periods. Many received grants, scholarships and loan
support for their educational endeavors at CSM.

The policies governing students’ rights and responsibilities and student grievances were
published in the CSM College Catalog, the Nursing Student Handbook, and were available
online through the MyLearning® website. Students confirmed their awareness of these policies
and locations for review.
A representative sample of student records was reviewed during the site visit. These student records were complete and maintained in the CSM Administrative Office under a double-locked security system. When students leave the program through graduation or attrition, their final records are maintained in a double-locked secured filing system within the CSM nursing program.

**15 EVALUATION:**
The CSM nursing program meets this regulatory requirement as evidenced by the following:

A. & B.: The review of the *CSM Systematic Plan of Evaluation, CSM Faculty Minutes, CSM Curriculum Minutes, CSM College Catalog*, and a faculty interview session were incorporated to assess the development and implementation of the CSM program evaluation processes. The plan included the six ACEN accreditation standards integrated across all elements of the nursing program. The evaluation time intervals are annually for the majority of the criterion standards. The methods used for evaluation include, by way of example, review of position descriptions and student participation records/surveys. There was evidence of actions taken related to issues identified throughout the CSM evaluation processes.

C. The CSM nursing program is meeting its objectives and outcomes and the changing needs of nursing and society, based upon the review and findings established during the MBON site visit completed September 2016.

D.(1) & (2): The *CSM Systematic Plan of Evaluation* incorporated recommendations for programmatic revisions and an action plan for each criterion, as relevant, for future CSM nursing program direction.
.16 LICENSURE EXAMINATION PERFORMANCE

ADN NCLEX-RN® & NCLEX-PN® Pass Rates

<table>
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<tr>
<th>Year</th>
<th>RN</th>
<th>MBON Required Pass Rate/RN</th>
<th>LPN</th>
<th>MBON Required Pass Rate/LPN</th>
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<td>100%</td>
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<td>80.03%</td>
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</table>

The College of Southern Maryland meets COMAR Standards 10.27.03.16.A & B.(1). COMAR Standard 10.27.03.C does not apply to this nursing program.

RECOMMENDATIONS

1. Continued three year approval for the RN nursing program with an interim report due in three-year (COMAR 10.27.03.15 E, F (2). Five years is the total maximum Board approval. This was an exemplar site visit.

PROGRAM STRENGTHS

- The College of Southern Maryland is inclusive and very student-oriented.
- The College of Southern Maryland faculty are dedicated to the success of their students and foster team unity to insure educational continuity in the nursing program.
- The College of Southern Maryland Administration holds the nursing program in high regards and supports the educational experiences of matriculating students and the needs of the faculty.
- There are extensive faculty development resources available through Distance Learning. Financial support is also available for faculty conferences, graduate education, and professional certifications.
- The Leonardtown, Prince Frederick and La Plata campuses provide impressive equitable student supports that enhance student learning. The campuses collectively support the needs of Charles County, Calvert County, and St. Mary’s County in higher education achievements.
• A new regional campus is being built in Hughesville, Maryland and will include the new Health Sciences Building.

• The College of Southern Maryland nursing program encourages its graduates to attend RN-BSN programs available through statewide articulation agreements and through its unique partnership with the University of Maryland School of Nursing, Baltimore, Maryland.

• The nursing program has a well-established systematic plan of program evaluation that clearly incorporates continuous quality improvement methods to address program needs.

• The nursing program has an engaged Advisory Board that offers valuable insight into current trends, needs and practices in community-based/hospital-based settings.
Report of Survey of
Baltimore City Community College School of Nursing (BCCC/SON)
to the Maryland Board of Nursing (MBON) for Continued Approval

Name and Address of Program: Baltimore City Community College School of Nursing (BCCC/SON)
2901 Liberty Heights Avenue
Baltimore, Maryland 21215

Date of Report: January 23, 2017

Date of Survey: February 9—11, 2016

Type of Program Surveyed: Associate Degree Nursing Program

Enrollment on Survey Date: 148 students

Board of Nursing Representatives: Patricia Kennedy, EdD, RN
Director of Education
Sheila Green, PhD, RN, CNE
Nurse Consultant I

Visiting Accreditation Body: Accreditation Commission for Education in Nursing (ACEN)

Background/Overview: BCCC/SON is seeking re-accreditation for its established associate degree nursing program. This is an entry level nursing program located in Baltimore, Maryland. Two representatives from the MBON participated in the survey process to assess continued adherence to state regulatory requirements.

.04 PHILOSOPHY AND OBJECTIVES: BCCC/SON meets this regulatory requirement as evidenced by the following:

(A.1 to A.4): The nursing faculty are responsible for the development, implementation, evaluation and revision of the philosophy, objectives and outcomes for the associate degree nursing program. These findings were noted in Standards 1, 4 and 5 of the BCCC/SON Self Study Report/Febuary 2016. Further corroboration of findings were noted in BCCC/SON Faculty Minutes (2012—2015), the BCCC College Catalog 2015/2016 and the BCCC Nursing Student Handbook Fall 2015.
(B.1 to B.3): The nursing program’s philosophy, objectives and outcomes are congruent with BCCC’s mission and values (BCCC/SON Self Study Report/February 2016). A comparison between the college’s mission and values and those noted in the BCCC nursing curriculum documents demonstrates mutual goals and outcomes that complement both the college and the nursing program. The BCCC Nursing Curriculum supports “the achievement of student learning outcomes and program outcomes consistent with safe practice in contemporary healthcare environments” (BCCC/SON Self Study Report/February 2016, p. 14). The conceptual framework concepts and their relationship to student learning outcomes for the nursing program are well articulated and validated in the BCCC/SON Self Study Report/February 2016.

(C.1 to C.4): The nursing program’s objectives and outcomes are clearly stated, measureable, and attainable, as articulated in the BCCC/SON Self Study Report/February 2016 and in respective course syllabi reviewed by the MBON reviewers.

.05 ORGANIZATION AND ADMINISTRATION: BCCC/SON meets this regulatory requirement as evidenced by the following:

(A.1 to A.2): Baltimore City Community College (the controlling institution) is accredited by Middle States Commission on Higher Education. The college’s most recent re-accreditation was completed June 25, 2015. Baltimore City Community College has a clearly articulated statement offering equal educational opportunity for all students, as identified in the BCCC/SON Self Study Report February 2016 and in the BCCC Catalog 2015-2016.

(B.1 to B.3): Baltimore City Community College has clearly delineated organizational charts for academic and non-academic requirements in the institution. The organizational chart includes the nursing program, its reporting relationships, and lines of responsibility, communication and authority.

(C.): The nursing program has comparable status with other academic units within Baltimore City Community College, as identified through organizational charts and through interviews with Dr. Tanja Ringgold, Interim Vice President/Academic Affairs, and other members of the executive college team. It is noted that Dr. Ringgold served as designated spokesperson in the absence of Dr. Gordon May, President, during the day of the nursing site visit.

(D.): Baltimore City Community College is the only college that receives total budgetary funding from the state of Maryland. The Baltimore City Community College budget incorporates the financial support and resources necessary to operate the nursing program. It is noted that federally funded financial aid for students is not available through the college. Baltimore City Community College provides student financial aid through scholarships and grants only. The college meets the legal and educational requirements specified in the Code of Maryland Regulations 2015 (COMAR 10.27.03.05) governing nursing programs in the state of Maryland.

(E.): Baltimore City Community College provides the financial resources that support adequate facilities and equipment for the BCCC/SON program. The college employs administrative,
clerical, and instructional personnel that meet the MBON regulatory requirements and nursing education standards for practice.

(F.): Baltimore City Community College employs Ms. Dorothy Holley, Associate Dean of Nursing and Allied Health. She meets the qualifications stated in COMAR 10.27.03.07.

(G.): Baltimore City Community College has provided, in writing to the Maryland Board of Nursing, information regarding nursing program administrator changes, as required in COMAR 10.27.03.05. Ms. Holley has served in her current role as Associate Dean of Nursing and Allied Health since 2012 and has an exemplar employment history with BCCC/SON for 40 years. She retired for one year, 2011-2012, and returned to administrative and academic service with the BCCC/SON.

.06 RECORDS AND REPORTS: BCCC/SON meets this regulatory requirement as evidenced by the following:

(A.1): Current student records are up-to-date and maintained in the nursing administration offices within a locked file system.

(A.2): Transcripts of nursing program graduates are maintained in a locked file system with access limited to that of the Associate Dean and her designee (administrative assistant).

(A.3): Faculty records are maintained and secured in the Office of Human Resources at Baltimore City Community College. These records include, by way of example, employment contracts; documentation of appropriate faculty credentials; transcript verifications of advanced education degrees, CPR certifications and results of current tuberculosis (TB) screenings. All files for full time and adjunct faculty were up-to-date.

(A.4): Administrative records, inclusive of faculty meeting minutes and school bulletins, are current and maintained in the Nursing Administration Suite. The faculty meeting minutes reflected faculty discussions and planned actions.

(A.5a/b/c): The current nursing curriculum is found in the BCCC/SON Nursing Student/Faculty Handbook Fall 2015, the CANVAS website, and is available through Associate Dean and faculty contact within the program. The nursing curriculum articulates the program philosophy, objectives and outcomes. The course syllabi describe the plan for the course and incorporate threads from the program philosophy, objectives and outcomes. Course sequencing and progression are evident.

(A.6): Agreements with cooperating agencies are up-to-date and maintained by the Associate Dean of the BCCC/SON program within a double locked file system. They are reviewed regularly by legal counsel within the college and the Associate Dean of Nursing. These contracts include those relegated to hospitals and outpatient/community-based settings which support student learning requirements.
The Systematic Plan of Program Evaluation is maintained under the auspices of the collective nursing faculty and the Associate Dean. It is noted that the current plan has been in effect for one year, as the nursing program is in the process of re-defining its evaluation criteria and processes. The Systematic Plan of Program Evaluation is an integral component of the nursing educational measures of program progress and incorporates continuous quality improvement modalities necessary to achieve the planned programmatic goals. Elements of the Nursing Systematic Plan of Program Evaluation are incorporated as a component of the college-wide assessment and evaluation requirements for Baltimore City Community College. Baltimore City Community College has a Nursing Systematic Plan of Program Evaluation. However, due to the limited time (one year) of implementation, impact of the plan could not be determined. The Associate Dean for the Baltimore City Community College Nursing Program is required to provide a summary on the outcomes of the Nursing Systematic Plan of Evaluation by June 30, 2017, as a part of a one year follow-up report to the Maryland Board of Nursing.

B.: Confidential files are maintained under locked file systems in the administrative offices of the nursing program (student files) and the Baltimore City Community College Department of Human Resources (employee files). The nursing program follows the established policies of Baltimore City Community College governing long term file storage and shredded disposal of confidentially-held materials.

C.: Supporting information indicates that the Associate Dean of the Baltimore City Community College Nursing Program submits reports to the Maryland Board of Nursing as required in COMAR 10.27.03.06C.

.07 NURSING PROGRAM ADMINISTRATOR: BCCC/SON meets this regulatory requirement as evidenced by the following:

A. (1): Ms. Dorothy Holley, Associate Dean of Nursing and Allied Health, serves as the nursing program administrator for the Baltimore City Community College Nursing Program and meets the qualifications identified by the MBON/Nurse Practice Act, January 2015. She has current licensure in the state of Maryland, holds a bachelors’ degree in nursing from Winston Salem State University of North Carolina; a masters’ degree in nursing from the University of Maryland; and a second masters’ degree in education. She has an earned certificate in Administration and has served in her current administrative role since 2012. Her role as Associate Dean gives her full authority to execute the nursing education program. Ms. Holley is a direct report to the Dean of Nursing and Allied Health and is included in monthly meetings (Deans and Associate Deans/Managers’ Meeting) with the Interim Vice President of Academic Affairs who, in turn, reports to the President of Baltimore City Community College. Ms. Holley serves in leadership roles within the nursing program and college.

B.1 & B.2: Ms. Holley holds responsibility for faculty appointments and review. She is responsible for the educational program, with input from the nursing faculty.
B.3: With input from the nursing faculty and in accordance with Baltimore City Community College financial planning standards, Ms. Holley prepares and administers the budget in collaboration with the Dean of Nursing and Allied Health.

B.4: Ms. Holley maintains oversight of policy development, implementation and evaluation for the nursing program. Policies governing student admission, progression, withdrawal, re-admission, competency in oral and written communication of the English language, and nursing program completion requirements were reviewed during the MBON site visit. Evidence of implementation processes was documented in the BCCC/SON Student Grievances Files and the Nursing Student/Faculty Handbook. Policies are promulgated in accordance with Baltimore City Community College and BCCC/SON standards and are published in the Baltimore City Community College Catalog 2015-2016, the Nursing Student/Faculty Manual, and through access to the CANVAS website.

B.5—B.7: Ms. Holley, in collaboration with the nursing faculty team and with regards to the respective community agencies’ policies, determines student/teacher ratios and the number of faculty (full time and adjunct faculty) required to implement the nursing educational requirements. Contracts are up-to-date with identified agencies and meets MBON requirements noted in COMAR 10.27.03.07.(7).

B.8—B.12: In collaboration with the nursing faculty team and in accordance with the Baltimore City Community College policies, Ms. Holley has a faculty orientation and development program that meets MBON regulatory requirements. Materials and policies reviewed by the MBON survey team indicate that the nursing program meets requirements for appropriateness of clinical learning experiences and has a plan to assess and insure physical and mental competency of students engaged in the clinical learning settings. All publications related to the nursing program demonstrated clarity and accuracy.

.08 FACULTY AND CLINICAL INSTRUCTORS: BCCC/SON meets this regulatory requirement as evidenced by the following:

A.(1) & A.(2): There are 12 full time faculty employed by BCCC/SON. All full time faculty meet these requirements, as noted through onsite review of faculty records. It is noted that one faculty member was hired in 1991 who does not have a masters’ degree in nursing but holds a masters’ degree in advanced studies. This faculty member meets COMAR 10.27.03.08.(2) related to date of hire and masters’ degree attainment. There is one full time faculty vacancy, with recruitment underway (two candidates pending at time of site visit). It was identified that faculty changes would occur at the close of the AY 16 with one anticipated faculty retirement and a second faculty member not returning in AY 17 (2 total). The Associate Dean for the Baltimore City Community College Nursing Program is required to provide an update on faculty recruitment and employment by June 30, 2017 to the Maryland Board of Nursing.

B.(1)—B.(8): These standards do not apply to the BCCC/SON program.
C.(1): There are 16 adjunct faculty. All clinical nurse faculty files were reviewed and meet this standard.

C.(2): No more than 25% of full-time employees for the program may be taught by part-time instructors. The BCCC/SON complies with this standard.

D.(1)—D.(3): Evidence demonstrated that full time faculty participate in the planning, implementation, evaluation, and revisions of the BCCC/SON program. Full time faculty provide academic advisement and guidance to students through face-to-face and online contact with students. In review of faculty records, it was confirmed that faculty maintain clinical skills in their respective areas of expertise. All clinical and didactic learning materials are provided to students through face-to-face contact with faculty and online access. Policies governing faculty roles in recruitment, selection, evaluation, and promotion are clearly articulated and available to faculty.

Evidence indicated that full time and clinical faculty provide clinical instruction, supervise students and evaluate (formative and summative clinical evaluations) student performance. A site visit was conducted at Bon Secours Hospital, St. Martin’s Hall (Medical/Surgical/Telemetry Unit). Three students were interviewed: Quiana Chandrasekar, Mary Ihezie, and Teresa McLaurin. Each provided information regarding their clinical experiences and the integration of these experiences with didactic learning. Two hospital representatives were interviewed: Ms. Sheila Matthews (Clinical Nurse Educator; Wound Care Nurse; graduate of BCCC Nursing Program) and Ms. Tonya Rayfield (Charge Nurse). The hospital site visit supported findings in the BCCC Nursing Self-Study 2015 and the BCCC Student Handbook.

.09 FACULTY POLICIES: BCCC/SON meets this regulatory requirement as evidenced by the following:

A. & B.: The BCCC/SON Faculty Handbook incorporates faculty personnel policies for full time and adjunct faculty. It includes information regarding faculty governance, teaching load and evaluation. Nursing faculty follow established BCCC personnel policies. The BCCC nursing program has recognized personnel policies governing teaching load and evaluation specific to the nursing profession and in accordance with accreditation standards. These policies are approved by the Baltimore City Community College in recognition of the inherent requirements for nursing education.

.10 FACULTY ORGANIZATION: BCCC/SON meets this regulatory requirement as evidenced by the following:

A—E.: The BCCC nursing program is organized by sequential semesters. The Baltimore City Community College Self Study Report 2015 indicates, “Four levels were developed to depict curriculum progression from basic, simple nursing concepts to complex nursing care, integrating national and professional guidelines and standards” (p. 71). Full time faculty participate in faculty meetings, curriculum meetings, and program evaluation meetings. Faculty actively participate in college-wide committees. Manuals were reviewed which support these endeavors and showed deliberations and actions instituted to address student and programmatic needs.
.11 FACULTY DEVELOPMENT AND EVALUATION: BCCC/SON meets this regulatory requirement as evidenced by the following:

A.—C.: The College provides support for nursing scholarly endeavors through established professional development funds (BCCC/SON Self Study 2015). Faculty maintain scholarship through, by way of example, attending/facilitating professional development workshops and pursuing formal academic studies. Faculty are required to incorporate professional development activities in their respective annual performance plans (BCCC/SON Self Study 2015).

A faculty meeting was held with the MBON and ACEN visitors. Faculty indicated that governance was beneficial. They had representation on college-wide committees and identified these committees as effective. Work load was comparable to that of other faculty campus-wide. A review of faculty records provided supporting evidence regarding ongoing scholarly development.

Faculty evaluation was described in the BCCC/SON Self Study 2015 and in the faculty evaluation policy. The Associate Dean of the Nursing Program conducted faculty evaluations annually, and as needed on an ongoing basis. Peer, student, and agency-based evaluations were reviewed for all full time faculty and a representative sample of adjunct faculty during the site visit. Documents supported the policy for the faculty evaluation process.

.12 RESOURCES, FACILITIES AND SERVICES: BCCC/SON meets this regulatory requirement as evidenced by the following:

A. Physical Facilities: The physical facilities are adequate to meet the needs of the BCCC/SON program. The nursing program is located in a three-story facility at the Liberty Campus (BCCC/SON Self Study 2015). Adequate space is available for faculty offices, as noted in the self-study and observed during facility tours. Office Suite N-302 has limited ability to support privacy during student/teacher conferences. However, the faculty have established alternative means whereby privacy support can be provided. It is noted in the self-study that the college will include the nursing building in its five-year master plan for renovations. Classrooms, simulation and skills laboratories and conference rooms are available for student learning.

B. & C. Learning and Educational Support Resources: Learning resources, such as, the Nursing Media Center, the open computer laboratory available to all students on-campus, a fully operational library with technology supports, Canvas Learning Management System, and faculty development support are available for students and faculty, respectively. Orientation is extended to nursing students and faculty to insure familiarity with the use of on-campus and online resources. Students and faculty can access services online and have remote access assistance as needed. These resources are current, comprehensive and commiserate with other academic areas on campus.
D. Clinical Facilities: A tour of the Bon Secours Hospital/St. Martin’s Hall (Medical/Surgical/Telemetry Unit) was conducted. This facility has full hospital accreditation through The Joint Commission. It has sufficient registered nurses and support personnel to ensure safe and continuous care of clients and who conform to current standards of nursing practice.

E. Written Agreements: All agency written agreements were reviewed and meet this COMAR standard.

13 CURRICULUM: BCCC/SON meets this regulatory requirement as evidenced by the following:

A—D.: The BCCC nursing faculty maintain oversight for the established nursing curriculum. The curriculum is logically defined and has a reasonable sequential flow with a clearly articulated nursing philosophy, student and program outcomes (BCCC/SON Self Study 2015). The supporting documents complement the information described in the self-study. The level of complexity in nursing practice is articulated in each course syllabus and is sequentially-defined in accordance with student advancement in the four-semester program. Student clinical experiences are designed to enhance didactic learning and are offered concurrently within the sequentially-defined courses of study. Evaluation methods and tools were reviewed and appear to support student learning and growth. Ratios of classroom to clinical hours for each clinical nursing course were clearly articulated for the BCCC nursing program.

The Nursing Philosophy addresses the faculty’s beliefs regarding the individual/family/community, health/illness continuum, education and nursing education (BCCC/SON Self Study 2015). Elements addressed in the conceptual framework and utilized in the curriculum include those concepts noted above. The curriculum plan, the curriculum objectives, student and program outcomes appear appropriate to meet the expectations of entry level associate degree graduates into professional nursing practice.

Students meet requirements for arts and humanities, social and behavioral sciences, biological and physical sciences as a part of their pre-nursing course requirements. They are encouraged to complete these endeavors prior to entry into the BCCC nursing program.

14 STUDENTS: The BCCC/SON meets this regulatory requirement as evidenced by the following:

A—C.: The BCCC/SON environment is one of inclusion and student-supported. The MBON and ACEN visitors met with nursing students during the site visit. There was cross-representation of student attendees enrolled in each semester of matriculation in the program.

Students believed the BCCC nursing program was positive, student-focused, and a program which encouraged them to be successful. Faculty were identified as accessible in person, by phone and by email, as needed, to assist them in learning endeavors. They were aware of and had
been encouraged to become members of faculty committees. They believed they had mechanisms that allowed them to offer input in the nursing program.

Access to campus-wide services was not an issue. Several utilized tutorial support services and found them helpful to meeting their learning needs. The students spoke highly of the Nursing Retention Success Specialist and the services provided to support their learning. They spoke positively of the support offered through the Admissions, Registration, and Financial Aid offices during pre-nursing and nursing program time periods. Several received grants and scholarships to support their educational endeavors at the BCCC/SON.

The policies governing students’ rights and responsibilities and student grievances were published in the *BCCC College Catalog and the Nursing Student Handbook*. Students confirmed their awareness of these policies and locations for review.

A representative sample of student records was reviewed during the site visit. These student records were complete and maintained in the *BCCC/SON* Administrative Office under a locked security system. When students leave the program through graduation or attrition, their final records are maintained in a locked secured filing system within the college campus.

**15 EVALUATION:** The BCCC nursing program does not meet this regulatory requirement. The BCCC/SON is required to provide an update on the status of the newly implemented *BCCC/SON Systematic Plan of Evaluation of July 2015* by June 30, 2017 to the MBON. The MBON is to be notified of the determinations made by the ACEN accrediting body and if a follow-up visit is planned.

**A. & B.:** The review of the *BCCC/SON Systematic Plan of Evaluation 2015*, *BCCC/SON Faculty Minutes*, *BCCC/SON Curriculum Minutes*, and a faculty interview session were incorporated to assess the development and early implementation of the BCCC/SON (July 2015) program evaluation processes. The plan includes the six ACEN accreditation standards integrated across all elements of the nursing program. The proposed evaluation time intervals are annually for the majority of the criterion standards. The methods to be used for evaluation have been established but insufficient time has occurred to gather data, review the findings and determine programmatic quality improvements through the evaluation processes.

**C.:** The MBON site visit team was unable to identify the outcomes of the newly implemented evaluation program for the BCCC nursing program, at the time of the visit. No determination could be made regarding the effectiveness of the evaluation process during the time of the site visit.

**D.(1) & (2):** There were no recommendations for programmatic revisions or action plans regarding proposed improvements as the systematic plan began in July 2015. There was insufficient time for BCCC/SON to measure outcomes and address future nursing program direction.
16 LICENSURE EXAMINATION PERFORMANCE

ADN & PN NCLEX-RN® Pass Rates

<table>
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<tr>
<th>Year</th>
<th>PN</th>
<th>MD Required Pass Rate</th>
<th>ADN</th>
<th>MD Required Pass Rate</th>
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RECOMMENDATIONS

1. Continued three year approval for the RN nursing program with an interim report due in three-year (COMAR 10.27.03.15 E, F (2)). Five years is the total maximum Board approval.

2. The BCCC/SON is required to provide a one year follow-up report by June 30, 2017 (the end of FY 2017—June 30, 2016 to July 1, 2017) which includes the following:
   - COMAR 10.27.03.06.A(7); COMAR 10.27.03.15A-D: An update on the Nursing Systematic Plan of Evaluation—measurements & outcomes for the nursing program.

3. The Board determines reviews the FY 2017 report and determines whether a survey visit is needed (COMAR 10.27.03.15F(1)-(2)). {I stopped here.}
   - COMAR .08.A.(1) & A.(2): Faculty recruitment and employment for academic year (FY) 2017.

PROGRAM STRENGTHS:

- The BCCC/SON is inclusive and very student-oriented.
- The BCCC/SON faculty are dedicated to the success of their students and foster team unity to insure educational continuity in the nursing program.
The Baltimore City Community College Administration holds the nursing program in high regards and supports the educational experiences of matriculating students and the needs of the faculty.
Report of Survey to the Maryland Board of Nursing (MBON) Regarding
Washington Adventist University, Department of Nursing
Health Sciences Building, 7600 Flower Avenue
Takoma Park, MD 20912

Date of Survey: April 4-6, 2016
Type of Program Surveyed: Baccalaureate Degree Nursing Program
Enrollment on Survey Date: 48 Students (Verify With WAU/DON)

Background/Overview:
Washington Adventist University Department of Nursing is seeking re-accreditation from the Commission on Collegiate Nursing Education (CCNE) for its established baccalaureate degree nursing program. Dr. Patricia Kennedy/Director of Education and Ms. Cheyenne Redd from the MBON, participated in the survey process to assess adherence to state regulatory requirements (COMAR 10.27.03.02/.04—.16C).

Findings:
Washington Adventist University Department of Nursing met COMAR 10.27.03.02/.04—.15 standards. The program did not meet COMAR 10.27.03.16 regarding NCLEX-RN® performance.

Recommendations to the Nursing Program with Prior MBON Approval:

1. Continued one year approval for the RN nursing program with an interim report.

2. The WAU/DON is to provide a one year interim report using FY 2017 information—July 1, 2016 to June 30, 2017—which includes the following:
   - COMAR 10.27.03.06.A.7; COMAR 10.27.03.15 A—D: An update on the Nursing Master Evaluation Plan—measurements & outcomes for the nursing program for FY 2017.
   - COMAR 10.27.03.13.A--D: Curriculum revisions (2015) and assessments of progress to-date for FY 2017 (July 2016 to June 30, 2017).

3. Review the FY 2017 report and determine whether a survey visit is needed (COMAR 10.27.03.15F (1)-(2)).
Report of Survey of  
Washington Adventist University Department of Nursing (WAU/DON)  
to Maryland Board of Nursing for Continued Approval

Name and Address of Program: Washington Adventist University  
Department of Nursing  
Health Sciences Building  
7600 Flower Avenue  
Takoma Park, MD 20912

Date of Report: February 6, 2017

Date of Survey: April 4-6, 2016

Type of Program Surveyed: Bachelor of Science (BSN)

Enrollment on Survey Date: 45 students (please verify this information)

Board of Nursing Representatives: Patricia Kennedy, EdD, RN  
Director of Education  
Cheyenne Redd, MSN, RN  
Director of Licensure and Certification

Visiting Accreditation Body: Commission on Collegiate Nursing Education (CCNE)

Background/Overview: Washington Adventist University Department of Nursing (WAU/DON) is seeking reaccreditation for its baccalaureate entry level nursing program. The MBON representatives participated in the survey process to assess continued adherence to state regulatory requirements for the baccalaureate nursing program.

.04 PHILOSOPHY AND OBJECTIVES:  
WAU/DON meets this regulatory requirement as evidenced by the following:  

(A.1 to A.4): The nursing faculty are responsible for the development, implementation, evaluation and revision of the philosophy, objectives and outcomes for the baccalaureate degree nursing program. These findings were noted in Standards 1, 3 and 4 of the WAU/DON Self Study Report 2016. Further corroboration of findings were noted in WAU/DON Faculty Minutes, the WAU/DON Catalog 2015-2016 and the WAU/DON Student Handbook.
(B.1 to B.3): The nursing program’s philosophy, objectives and outcomes are congruent with WAU’s mission and values (WAU/DON Self Study Report 2016). A comparison between the college’s mission and values and those noted in the WAU/DON nursing curriculum documents demonstrates mutual goals and outcomes that complement both the university and the nursing program. The conceptual framework concepts and their relationship to student learning outcomes for the nursing program are well articulated and validated in the WAU/DON Self Study Report 2016.

(C.1 to C.4): The nursing program’s objectives and outcomes are clearly stated, measurable, and attainable, as articulated in the WAU/DON Self Study Report 2016 and in respective course syllabi reviewed by the MBON reviewers.

.05 ORGANIZATION AND ADMINISTRATION:
WAU/DON meets this regulatory requirement as evidenced by the following:

(A.1 to A.2): Washington Adventist University (the controlling institution) is accredited and approved by the Maryland Higher Education Commission, the Middle States Commission on Higher Education, and the Accrediting Association of Seventh-day Adventist Schools, Colleges, and Universities. Washington Adventist University has a clearly articulated statement offering equal educational opportunity for all students, as identified in the WAU/DON Self Study Report 2016 and the Washington Adventist University 2015-2016.

(B.1 to B.3): Washington Adventist University has clearly delineated organizational charts for academic and non-academic requirements in the institution. The organizational chart includes the nursing program, its reporting relationships, and lines of responsibility, communication and authority.

C.: The nursing program has comparable status with other academic units within WAU, as identified through organizational charts and through interviews with President Weymouth Spence, members of the executive university team, and the nursing faculty.

D.: WAU provides the financial support and resources needed to operate the nursing program and achieve the nursing program goals. WAU meets the legal and educational requirements of the Maryland Board of Nursing.

E.: The WAU provides the financial resources that support adequate facilities and equipment for the nursing program. The university employs administrative, clerical, and instructional personnel that meet regulatory requirements of the Maryland Board of Nursing and nursing education standards for practice.

F.: WAU employs Dr. Nancie Crespi, Director of the Nursing Program. She meets the qualifications stated in COMAR 10.27.03.07.
G: WAU/DON has provided, in writing to the Maryland Board of Nursing, information regarding nursing program administrator changes, as required in COMAR 10.27.03.05. Dr. Crespi has served in her current role as Director of the Nursing Program since 2015.

.06 RECORDS AND REPORTS
WAU/DON meets the requirements for this standard as evidenced through the following survey-acquired information:

(A.1): Current Records of Students: The WAU/DON maintains student files in the main office suite. All records are maintained in a locked file room that contains cabinets and shelves for storage of students’ files and departmental files. Student files were reviewed and determined to be up-to-date in accordance with the student’s progression status in the nursing program. Student Accounts and the Financial Aid Office maintain student financial records. The nursing student records consisted of the following forms: student admission application; admission requirement; student agreements; clinical rotation/psychomotor competencies; clinical evaluation (formative and summative); registration worksheet; transcripts; nursing advisor notes; TEAS report; criminal history report; academic petition; and the acceptance letter to the nursing program. These records referenced student progress in the nursing program.

(A.2): Transcripts of Graduates: Following program completion, academic files are maintained in a secured storage area in the office suite. When the storage period expires, WAU/DON oversees shredding of the files. The WAU/DON adheres to the university’s records management policy regarding retention and disposal of records.

(A.3): Faculty Records: The WAU Department of Human Resources maintains all faculty hire/salary information. The WAU/DON maintains faculty information regarding evaluations, current licensure, and transcripts credentialing. All faculty records and licensure are up-to-date and meet COMAR standards.

(A.4): Administrative Records: The WAU/DON maintained complete and timely minutes of faculty meetings, annual reports of the program and up-to-date school bulletins.

(A.5): Current Curriculum: The programs’ philosophy, course outlines, and student learning outcomes are congruent with the level of learner. The onsite documents and the WAU/DON Self Study 2016 revealed a curriculum design consistent with the outcomes and expectations for a baccalaureate degree program, inclusive of the humanities and liberal arts courses. The WAU/DON Self Study 2016 denotes the following: “The ratio between nursing and non-nursing courses ensures that nursing students receive a foundation in the liberal arts and sciences at every level of their curriculum (p.39).” The nursing curriculum is organized sequentially and progresses in complexity as the student advances in the nursing program (WAU/DON Self Study 2016).

(A.6): Agreements with Cooperating Agencies: Agency contracts were reviewed and demonstrated compliance with this COMAR requirement.
(A.7): **A Master Plan of Evaluation:** The WAU/DON has a clearly defined nursing master evaluation plan for the program. It includes definitions for each area of evaluation, instruments utilized, data sources, frequency of review/assessment, benchmark(s), report development/monitoring responsibilities; results and data collection/analyses; and recommendations/actions administered. This document encompasses a thorough evaluation of the program for the last three years, required revisions and programmatic progress to-date.

B. **Records shall be safely stored to prevent loss, destruction, or unauthorized use.** The WAU/DON Program meets this requirement.

C. **The nursing program administrator shall submit an annual report to the Board on forms provided by the Board.** The WAU/DON Program meets this requirement.

.07 **NURSING PROGRAM ADMINISTRATOR**

WAU/DON meets the requirements for this standard as evidenced through the following survey-acquired information:

(A.1 & 2): **Qualifications of the nursing program administrator.** Dr. Nancie Crespi, Director of the WAU/DON program, completed her bachelor’s degree in nursing (BSN) and her master’s degree in nursing from Vanderbilt University. She completed her doctorate in nursing science and her PhD from The Catholic University of America. Dr. Crespi has been in this position since January 2015 and has more than thirty years of experience in health care leadership and nursing education. She is experientially qualified and meets governing organization and state requirements to assume the role of nursing program director. Dr. Crespi has the opportunity for reduced course load responsibilities, as enacted by the new Provost. This has allowed Dr. Crespi the ability to focus on measures to address failing NCLEX-RN® Examination scores. She meets the MBON qualification standards and maintains current registered nurse licensure.

(B.1/2/3/4/5/6/7/8/9/10/11/12): **Responsibilities.** The WAU/DON Self Study 2016 indicated that Dr. Nancie Crespi has the responsibility of managing operations for the nursing program and leads the development and implementation of nursing program initiatives. She is responsible for the nursing program budget. Budgets are prepared in consultation with the faculty, staff, and the Provost (WAU/DON Self Study 2016).

Faculty, in collaboration with and under the direction of Dr. Crespi, participate in recommendations for: faculty appointments; educational programs; preparation and administration of the program budget. The WAU/DON Self Study 2016 and Administrative Minutes—2012-2015 provided supporting documentation that faculty play a pivotal role in the formulation and implementation of the all policies governing the nursing program, including those relative to: student admission and progression; advanced standing; transfer and articulation; withdrawal; reinstatement; evaluation; and graduation requirements.

Faculty, in collaboration with and under the direction of Dr. Crespi, participate in determining the student/teacher ratio required to meet the objectives of each course and to define the methods of instruction employed. The faculty are involved in determining the number and qualifications
of faculty required to meet programmatic requirements. WAU/DON has a faculty orientation, mentoring and development program, as noted in the WAU/DON Self Study 2016, the WAU/DON Administrative Manual and Faculty Handbook. The WAU/DON baccalaureate program is implemented in accordance with the Maryland Board of Nursing regulatory requirements.

.08 FACULTY AND CLINICAL INSTRUCTORS:
WAU/DON meets this regulatory requirement as evidenced by the following:

(A.1.a—d): There are five (5) full time faculty, one departmental chair and sixteen (16) part time adjunct faculty in the WAU nursing education program. Full time faculty records were reviewed during the site visit and one hundred percent (100%) of the faculty meet COMAR qualifications for the state of Maryland.

(A.(2) & (3); B.(1) –(8)): These standards regarding waiver of graduate degree requirements for nursing faculty were not applicable to the WAU nursing program.

(C.(1) & (2)): Qualifications of Clinical Nurse Faculty. All faculty are licensed as registered nurses in the state of Maryland. Full time and adjunct faculty meet clinical nurse faculty qualification requirements specified in COMAR 10.27.03.C.1.(a)—(d). The program meets COMAR 10.27.03.C.2 requirements.

(D.): Responsibilities.
D.1: The faculty members, in collaboration with the nurse director (Dr. Crespi), are responsible for planning, implementing, evaluating, and revising the educational program. Minutes of the WAU/DON Faculty and Curriculum meetings fully demonstrate the active involvement of all faculty. They are afforded the opportunity to voice opinions and to collectively finalize programmatic decisions. The faculty have established a decorum which supports a united and cohesive approach to student learning and program implementation. The faculty are members of university-wide committees and have direct input to campus-wide initiatives, thus supporting the university while enhancing the educational endeavors of the nursing program.

D2.(a)—(h): There are services available through WAU Admissions, Registration, and Advising Offices which support the success of students enrolled in the nursing program. As students are admitted to the University and the WAU/DON program, a full time admission and progression coordinator addresses the progression requirements for matriculating nursing students.

The review of WAU/DON documents indicates that the faculty act as a whole in the development and implementation of standards for admission, progression and graduation of nursing students. The faculty participate in advisement, guidance of students, as well as evaluation of student performance. Formative and summative evaluation processes are well documented in the WAU/DON program. Students are afforded the opportunity to evaluate teaching effectiveness for each course.

The review of faculty records (full time and adjunct faculty) show evidence of maintaining current clinical skills. Full time faculty maintain appropriate nursing licensure, certifications and
evidence of advanced degree completion. This information is incorporated in their confidentially-maintained faculty files.

The full time faculty have an established plan which makes all course/learning materials accessible to students. These materials are made available to all enrolled nursing students based on course and program progression.

Faculty participate in the recruitment, selection and promotion of faculty. Peer evaluation is incorporated into faculty development. A mentoring program exists that supports the successful inclusion of new faculty members.

D.3.(a) & (b): Clinical visits were conducted and meet MBON standards. The hospital educators conduct student orientation to the hospital settings. There are facilities readily available to support pre and post-conference requirements. Students participate in bedside rounds with physicians and nurses, as well as observational experiences that enhance student learning and development. Students described their clinical experiences as positive learning endeavors.

.09 FACULTY POLICIES:
WAU/DON meets this regulatory requirement as evidenced by the following:

A. & B.: The WAU and WAU/DON Faculty Handbooks incorporate faculty personnel policies for full time and adjunct faculty. These documents include information regarding faculty governance, teaching load and evaluation. Nursing faculty follow established WAU personnel policies. The WAU/DON program has recognized personnel policies governing teaching load and evaluation specific to the nursing profession and in accordance with accreditation standards. These policies are approved by WAU in recognition of the inherent requirements for nursing education.

.10 FACULTY ORGANIZATION:
WAU/DON meets this regulatory requirement as evidenced by the following:

A—E.: The WAU nursing program is organized by sequential semesters. The program follows the guidelines stated within the faculty handbook. Full time faculty participate in monthly faculty meetings, curriculum meetings, program evaluation meetings, policy and procedure meetings, and student progression/concerns meetings. Faculty actively participate in university-wide committees. Manuals were reviewed which support these endeavors and showed deliberations and actions instituted to address student and programmatic needs over a three year period. The MBON review team reviewed minutes of faculty meetings and committee meetings. The minutes documented the actions and decisions of the faculty meetings.
FACULTY DEVELOPMENT AND EVALUATION:
WAU/DON meets this regulatory requirement as evidenced by the following:

A.—C.: Washington Adventist University offers an orientation for new faculty; there is no separate departmental orientation of new nursing faculty. New nursing faculty are assigned to an experienced faculty member for mentorship and orientation. The University provides support for nursing scholarly endeavors. Faculty are allotted funds each year to maintain scholarly pursuits through, by way of example, attending/facilitating professional development workshops (WAU/DON Self Study 2016). The President and Provost strongly encourage faculty progression as well as development.

A faculty meeting was held with the MBON and CCNE visitors. Faculty indicated that governance was beneficial and that they had representation on university-wide committees. Work load was comparable to that of other faculty campus-wide. A review of faculty records provided supporting evidence regarding ongoing scholarly development.

Faculty evaluation is described in departmental and university policies. Faculty participate in peer performance appraisal. These appraisals include self-evaluation. Faculty also receive student and course evaluation at the end of each semester. Peer, student, and agency-based evaluations were among the supporting documents reviewed during the site visit.

RESOURCES, FACILITIES AND SERVICES:
WAU/DON meets this regulatory requirement as evidenced by the following:

A. Physical Facilities: A tour of the physical facilities was conducted. The physical facilities are adequate to meet the needs of the WAU nursing program. Adequate space is available for privacy of faculty-student conferences (on campus and in the clinical settings). Classrooms, simulation and skills laboratories, study hall and conference rooms are available for student learning and professional development.

B. & C. Learning and Educational Support Resources: Learning resources, such as, tutorial centers, a fully operational library with technology supports, and faculty development support are available for students and faculty, respectively. There is an orientation extended to nursing students and faculty to insure familiarity with the use of on-campus and online resources. Students and faculty can access services online and have remote access assistance as needed. These resources are current, comprehensive and commiserate with other academic areas on campus.

D. Clinical Facilities: A clinical tour was conducted. This facility has full hospital accreditation through Joint Commission. It has sufficient registered nurses and support personnel
to ensure safe and continuous care of clients and who conform to current standards of nursing practice.

E. Written Agreements: All agency written agreements were reviewed and meet this COMAR standard.

.13 CURRICULUM:
WAU/DON meets this regulatory requirement as evidenced by the following:

A—D.: The WAU/DON nursing faculty maintain oversight for the established nursing curriculum (evaluated, revised and implemented for Fall Semester 2015). The curriculum is logically defined and has a reasonable sequential flow with a clearly articulated nursing philosophy, student and program outcomes (WAU/DON Self Study 2016). The supporting documents complement the information described in the self-study. The level of complexity in nursing practice is articulated in each course syllabus and is sequentially-defined in accordance with student advancement/progression in the program. Student clinical experiences are designed to enhance didactic learning and are offered concurrently within the sequentially-defined courses of study. Evaluation methods and tools were reviewed and appear to support student learning and growth. Ratios of classroom to clinical hours for each clinical nursing course were clearly articulated for the WAU nursing program.

The WAU/DON Self Study 2016 indicates, “Every nursing course integrates the concepts of spirituality and socio-cultural diversity in addition to the six QSEN competencies of patient-centered care, teamwork and collaboration, evidence-based practice (EBP), quality improvement, safety, and informatics” (p.44). The nursing process is also incorporated in theory and application throughout the nursing curriculum. The curriculum plan, the curriculum objectives, student and program outcomes appear appropriate to meet the expectations of entry level baccalaureate degree graduates into professional nursing practice. Students meet requirements for arts and humanities, social and behavioral sciences, biological and physical sciences as a part of their baccalaureate course requirements.

.14 STUDENTS:
WAU/DON meets this regulatory requirement as evidenced by the following:

A.—C.: The WAU/DON environment is one of inclusion and student-supported. The MBON and CCNE visitors met with WAU nursing students during the site visit. There was cross-representation of student attendees enrolled in the sequential semesters of matriculation in the program.

Students believed the WAU/DON program was positive, student-focused, and a program which encouraged them to be successful. Faculty were identified as accessible in person, by phone and by email, as needed, to assist them in learning endeavors. They were aware of and had been encouraged to become members of faculty committees. They believed they had input in the nursing program.
Access to campus-wide services was positive. Students reported that they used tutorial support services and found them helpful to meeting their learning needs. The students spoke positively of the support offered through the Admissions, Registration, and Financial Aid offices during their nursing program matriculation.

The policies governing students’ rights and responsibilities and student grievances were published in the Washington Adventist University Catalog, the Nursing Student Handbook, and were available online. Students confirmed their awareness of these policies and locations for review.

A representative sample of student records was reviewed during the site visit. These student records were complete and maintained in the WAU/DON Administrative Office under a locked security system. When students leave the program through graduation or attrition, their final records are maintained in a locked secured filing system within the WAU/DON program.

15 EVALUATION:
The WAU/DON program meets this regulatory requirement as evidenced by the following:

A. & B.: The review of the WAU/DON Master Evaluation Plan, WAU/DON Faculty Minutes, WAU/DON Curriculum Minutes, WAU/DON University Catalog, and a faculty interview session were incorporated to assess the development and implementation of the WAU/DON program evaluation processes. The WAU/DON has a clearly defined nursing master evaluation plan for the program. It includes definitions for each area of evaluation, instruments utilized, data sources, frequency of review/assessment, benchmark(s), report development/monitoring responsibilities; results and data collection/analyses; and recommendations/actions administered. This document encompasses a thorough evaluation of the program for the last three years, required revisions and programmatic progress to-date.

C. The WAU/DON program is meeting its objectives and outcomes and the changing needs of nursing and society, based upon the review and findings established during the MBON site visit completed April 2016.

D.(1) & (2): The WAU/DON Master Evaluation Plan incorporated recommendations for programmatic revisions and action plans, as relevant, for future WAU/DON program direction. As curriculum changes were implemented in the Fall Semester 2015, a one-year interim report to the MBON is required by June 30, 2017. This report should provide an update on progress of the revised curriculum and program evaluation for FY 2017 (July 1, 2016 to June 30, 2017).
.16 LICENSURE EXAMINATION PERFORMANCE

NCLEX-RN® Pass Rates

<table>
<thead>
<tr>
<th>Year</th>
<th>WAU Pass Rate</th>
<th>MD Pass Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>40.38%</td>
<td>74.28%</td>
</tr>
<tr>
<td>2014</td>
<td>40.48%</td>
<td>74.30%</td>
</tr>
<tr>
<td>2013</td>
<td>50.53%</td>
<td>78.33%</td>
</tr>
<tr>
<td>2012</td>
<td>59.68%</td>
<td>80.03%</td>
</tr>
<tr>
<td>2011</td>
<td>77.14%</td>
<td>78.95%</td>
</tr>
</tbody>
</table>

RECOMMENDATIONS

1. Continued one year approval for the RN nursing program with an interim report.

2. The WAU/DON is to provide a one year interim report using FY 2017 information—July 1, 2016 to June 30, 2017—which includes the following:

   - COMAR 10.27.03.06.A.7; COMAR 10.27.03.15 A—D: An update on the Nursing Master Evaluation Plan—measurements & outcomes for the nursing program for FY 2017.

   - COMAR 10.27.03.13.A--D: Curriculum revisions (2015) and assessments of progress to-date for FY 2017 (July 2016 to June 30, 2017).


3. Review the FY 2017 report and determine whether a MBON survey visit is needed (COMAR 10.27.03.15F (1)-(2)).
**PROGRAM STRENGTHS**

- The WAU/DON is inclusive and very student-oriented.

- The WAU/DON faculty are dedicated to the success of their students and foster team unity to insure educational continuity in the nursing program.

- The Washington Adventist University Administration holds the nursing program in high regards and supports the educational experiences of matriculating students and the needs of the faculty.

- The nursing program has a well-established master evaluation plan that clearly incorporates continuous quality improvement methods to address program needs.
Dr. Patricia Kennedy  
Director of Education, Research & Examination  
Maryland Board of Nursing  
4140 Patterson Avenue  
Baltimore, Maryland 21215-2254  

Re: Notice of Placement on Conditional Approval for Second Successive Year of Unacceptable Examination Performance  

Dear Dr. Kennedy:  

Morgan State University Nursing Program received a letter dated 17 November 2016, notifying us that the NCLEX-RN first time pass rate of 41.86% was substantially below an acceptable pass rate of 74.30% (90% of the national pass rate of 82.56%). COMAR 10.27.03.16C(3)(a) requires that nursing programs with unacceptable NCLEX-RN first-time pass rates must submit a 1) report that identifies the factors believed to have contributed to the unacceptable NCLEX-RN performance and 2) obtain the services of a board-approved outside consultant with expertise in nursing education that is congruent with the program’s needs.  

Attached is a report outlining factors that contributed to the pass rate, the action plan that is now in place and the resume of the consultant who has agreed to review the curriculum and make additional recommendations. Please advise if any other documentation is needed. We look forward to any additional recommendations that MBON has regarding the report.  

Very Respectfully,  

Maija Anderson, DNP, RN  
Director
REPORT ON NCLEX-RN PASS RATES:
CAUSATIVE FACTORS AND INTERVENTIONS IMPLEMENTED TO IMPROVE NCLEX-RN
FIRST-TIME CANDIDATE SUCCESS

The undergraduate pre-licensure program at MSU did not post an acceptable first time NCLEX-RN pass rate for FY 14. As this is the second year, that the first time pass rate was unacceptable, we’ve identified a number of causative factors and resolution.

Contributing Factors

Analysis revealed 5 potential reasons for the drop in the NCLEX-RN pass rates which follow:

1. The corrective plan of action around NCLEX remediation and preparation was only partially implemented. This was primarily due to the fact that the Program Director, was out ill for a portion of the year and was unable to guide the process. The corrective action plan was fully implemented in June 2015, after the new Program Director started.

2. There were a number of students who were dismissed from the program, whose dismissals were overturned. They were allowed to complete the program, and sit for the NCLEX-RN.

3. Nursing administration and faculty suspected that some students had access to test banks in various courses. This was verified by a number of the students.

4. In following up with students who were cleared to take the NCLEX-RN, it was noted that students were waiting extended periods of time (well past the 3-month recommended timeframe), to take the NCLEX-RN. Once candidates have passed the 3 month window, their chances of passing the first time are significantly diminished.

5. The program has a high percentage of students who speak English as a Second Language. Strategies weren’t in place to best facilitate their learning and first time success on the NCLEX-RN.

Corrective Action Plan

To ensure the success of the students in the program and on the NCLEX-RN, the nursing program implemented the following policies/procedures:

1. NCLEX-RN review/tutoring is a mandatory component of the curriculum which begins in second semester Junior year and continues through the remainder of their progression. This was implemented in Fall semester (2015). Since implementation, we’ve noted a significant increase in the first-time NCLEX-RN pass rates of those cohorts we were able to actively engage. We did note the following, the May 2016 cohort was very small (n=11). Of the cohort, there were three students from previous cohorts, who were dismissed at the level of the program. Their dismissals were overturned and they were allowed to complete the program. Of those three students, only one of them was engaged
in NCLEX review/tutoring as a mandatory component of the curriculum. She was only engaged for the period of one semester. The other two students only had the exit exam requirement, therefore they were inconsistently engaged in NCLEX tutoring although the resource was extended to them many times.

Of these three students, none of them passed the NCLEX-RN the first time. Two of them passed the second time. There was also another candidate during the testing period, who completed in 2014. This person was noted to be a first time test taker. We note that there are no more outlying students that we’re aware of in the 2015 cohorts, left to test. There is one student remaining from the May 2016 cohort, who has yet to test. We’ve attempted to engage him many times in remediation/review activities and have paid for a Kaplan Review package for him. Of the original cohort, the 7/7 students passed the NCLEX-RN exam the first time. A table tracking all candidates who have tested in 2015-2016 is attached for review.

2. The Program Director meets with the Dean of the School of Community Health and Policy regularly to discuss academic dismissals, to ensure that they are upheld and in compliance with policy.

3. A new testing policy was implemented which includes: 1) Exam structuring 2) External exam review and 3) Enhanced Proctoring. The policy is attached for review.

4. The Nursing Program received funding to pay for NCLEX reviews which are now a mandatory component of NURS 454 (Transition into Nursing). As a component of the course, students are encouraged to pay upfront the fees for the MBON and PearsonVue, so that when they graduate, they are cleared within 2 weeks of graduation by the Program Director, and on track to take the NCLEX-RN within 8-10 weeks of graduation. Syllabus is attached for review. We also received funding to include additional incentive to pass; those students who take the NCLEX-RN within 10 weeks of graduation and pass the first time, have fees for MBON and PearsonVue reimbursed to them.

5. The NCLEX coach/mentor/tutor tracks progress in review and remediation and follows up with candidates after graduation and right up until the time that the candidate sits for the NCLEX-RN. If the coach notes an area of weakness in the area of client need, follow up is initiated with the candidate.

We plan to engage the services of Dr. Joyce Anderson as our external consultant once approved by the MBON, to review our curriculum and make any additional recommendations. Please note, we are also tracking into accreditation for the undergraduate program with a site visit scheduled for October 2017.
NCLEX-RN Pass Rates:

The NCLEX-RN® pass rate for each campus/site and track is provided for each of the three most recent calendar years (AACN/CCNE).

<table>
<thead>
<tr>
<th>Track</th>
<th>Campus/Site</th>
<th>Year</th>
<th>Number of Students Taking NCLEX-RN® for 1st Time</th>
<th>NCLEX-RN® Pass Rate for 1st Time Test Takers</th>
<th>NCLEX-RN® Pass Rate for All Test Takers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic/Traditional/Pre-licensure</td>
<td>Baltimore</td>
<td>2012</td>
<td>75</td>
<td>34.67%</td>
<td>69.15%</td>
</tr>
<tr>
<td>Generic/Traditional/Pre-licensure</td>
<td>Baltimore</td>
<td>2013</td>
<td>97</td>
<td>43.30%</td>
<td>59.2%</td>
</tr>
<tr>
<td>Generic/Traditional/Pre-licensure</td>
<td>Baltimore</td>
<td>2014</td>
<td>43</td>
<td>41.86%</td>
<td>64.9%</td>
</tr>
<tr>
<td><strong>Generic/Traditional/Pre-licensure</strong></td>
<td>Baltimore</td>
<td>2015</td>
<td><strong>20</strong></td>
<td><strong>50%</strong></td>
<td>65%</td>
</tr>
<tr>
<td>*<strong>Generic/Traditional/Pre-licensure</strong></td>
<td>Baltimore</td>
<td>2015</td>
<td>*<strong>9</strong></td>
<td><strong>90%</strong></td>
<td><strong>85%</strong></td>
</tr>
<tr>
<td>~Generic/Traditional/Pre-licensure</td>
<td>Baltimore</td>
<td>2016</td>
<td>~16</td>
<td><strong>63%</strong></td>
<td>74%</td>
</tr>
<tr>
<td>~Generic/Traditional/Pre-licensure</td>
<td>Baltimore</td>
<td>2016</td>
<td>11</td>
<td><strong>82%</strong></td>
<td><strong>91%</strong></td>
</tr>
</tbody>
</table>

*Data for the NCLEX-RN First Time Test Takers (2012) was reported as Self-Study and Maryland Board of Nursing. Data from NCLEX-RN First Test Takers was extrapolated from NCLEX Program Reports (Mountain Measurements). Data periods were from Oct-March 2013 & April-September 2013; October – March 2014 & April – September 2014. Data for NCLEX-RN Pass Rate for All Test Takers was extrapolated from Maryland Board of Nursing quarterly reports for all years. Data periods are reported from Maryland Board of Nursing from January 1 to December 31 of each year in line with reporting periods for AACN/CCNE.

NCLEX-RN Pass Notes

- **First time NCLEX-RN Pass Rate (May 2015 Cohort): 50%
- **Overall NCLEX-RN Pass Rate (May 2015 Cohort): 65%.
- ***First time NCLEX-RN Pass Rate (May 2015 Cohort) of candidates who participated in mentoring/tutoring/coaching initiative (N=10): 90%. Supported by NSP II 16-115
- ***Overall NCLEX-RN Pass Rate (May 2015 Cohort) of candidates who participated in mentoring/tutoring coaching initiative after failing the NCLEX-RN the first time (N=11): 91.6% NSP II 16-115
- NCLEX-RN First Time Pass rate (May 2015 Cohort) of candidates who did not participate in mentoring/tutoring/coaching initiative prior to taking the NCLEX-RN the first time = 0%
- Overall NCLEX-RN Pass Rate (May 2015 Cohort) of candidates who did not participate in mentoring/tutoring/coaching initiative and were successful in subsequent attempts (N=2): 50%
- ~Generic/Traditional/Pre-licensure: Includes data for test takers from December 2015 cohort (N=5) who did not participate in the mentoring/tutoring/coaching initiative
Morgan State University Nursing Program

- Generic/Traditional/Pre-licensure (May 2016 Cohort) – 9/11; 82% first time pass rate; Overall NCLEX-RN Pass Rate for this cohort is 91%. One student hasn’t yet tested from this cohort.
<table>
<thead>
<tr>
<th>Candidate</th>
<th>Date of Graduation</th>
<th>Date Passed NCLEX-RN</th>
<th>First Time/Repeat</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abatai, Itoro</td>
<td>May 2015</td>
<td>25 February 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Onwubiko, Udodiri</td>
<td>May 2015</td>
<td>15 January 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Shrestha, Samira</td>
<td>May 2015</td>
<td>5 January 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Singh, Deepa</td>
<td>May 2015</td>
<td>28 January 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Yates, Shonda</td>
<td>May 2015</td>
<td>7 June 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Yeung, Christine</td>
<td>May 2015</td>
<td>21 June 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Bundu, Rabiatu</td>
<td>December 2015</td>
<td>April 2016</td>
<td>First Time</td>
</tr>
<tr>
<td>Dyson, Kelly</td>
<td>May 2016</td>
<td>June 2016</td>
<td>First Time</td>
</tr>
<tr>
<td>Zier, Amanda</td>
<td>May 2016</td>
<td>July 2016</td>
<td>First Time</td>
</tr>
<tr>
<td>Cunningham, Myeisha</td>
<td>May 2016</td>
<td>July 2016</td>
<td>First Time</td>
</tr>
<tr>
<td>Savoy, Portia</td>
<td>May 2016</td>
<td>July 2016</td>
<td>First Time</td>
</tr>
<tr>
<td>Omo-Ojo, Phoebe</td>
<td>May 2016</td>
<td>June 2016</td>
<td>First Time</td>
</tr>
<tr>
<td>Nwachukwu, Linda</td>
<td>May 2016</td>
<td>July 2016</td>
<td>First Time</td>
</tr>
<tr>
<td>Muthee, Kenneth</td>
<td>December 2015</td>
<td>19 May 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Sharma, Jeni</td>
<td>December 2015</td>
<td>January 2016</td>
<td>First Time</td>
</tr>
<tr>
<td>Price-Horton, Jenae</td>
<td>December 2013</td>
<td>3 June 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Ayers, Tammie</td>
<td>Unknown</td>
<td>24 May 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Griffin, Victoria*</td>
<td>May 2016</td>
<td>5 August 2016</td>
<td>First Time</td>
</tr>
<tr>
<td>Uzoka, Adaora</td>
<td>Unknown</td>
<td>20 June 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Nnoyelum</td>
<td>Unknown</td>
<td>7 July 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Cunningham, Kirsten*</td>
<td>May 2016</td>
<td>21 July 2016</td>
<td>First Time</td>
</tr>
<tr>
<td>Holland, Naima*</td>
<td>May 2016</td>
<td>11 October 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Nounke, Christelle**</td>
<td>May 2015</td>
<td>30 September 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Ross, Lachaine</td>
<td>May 2015</td>
<td>30 September 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Smith, Julian*</td>
<td>May 2015</td>
<td>19 December 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Lancaster, Reisa**</td>
<td>May 2015</td>
<td>7 July 2016</td>
<td>Repeat</td>
</tr>
<tr>
<td>Cunningham, Kirsten*</td>
<td>May 2016</td>
<td>21 July 2016</td>
<td>First Time</td>
</tr>
<tr>
<td>Smith, Joyce Ann*</td>
<td>December 2014</td>
<td>Failed</td>
<td>First Time/Repeat</td>
</tr>
<tr>
<td>Junior, Jermiere</td>
<td>Unknown</td>
<td>Failed</td>
<td>Repeat</td>
</tr>
<tr>
<td>Ankwaraonwu, Ann</td>
<td>Unknown</td>
<td>Failed</td>
<td>Repeat</td>
</tr>
<tr>
<td>Alford, Rasheeda</td>
<td>Unknown</td>
<td>Failed</td>
<td>Repeat</td>
</tr>
<tr>
<td>Abraham, Precious</td>
<td>Unknown</td>
<td>Failed</td>
<td>Repeat</td>
</tr>
<tr>
<td>Smith, Julian*</td>
<td>May 2016</td>
<td>Failed</td>
<td>First Time</td>
</tr>
<tr>
<td>Myers, Eboni*</td>
<td>May 2016</td>
<td>Failed 26 September 2016</td>
<td>First Time</td>
</tr>
</tbody>
</table>

**Candidates who Haven’t Passed in 2016**

<table>
<thead>
<tr>
<th>Candidate</th>
<th>Date of Graduation</th>
<th>First Time/Repeat</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allen, Ashley*</td>
<td>December 2015</td>
<td>Failed three times</td>
</tr>
<tr>
<td>Eze, Germain*</td>
<td>December 2015</td>
<td>Failed</td>
</tr>
<tr>
<td>Kadiri, Adewunmi*</td>
<td>December 2015</td>
<td>Failed</td>
</tr>
<tr>
<td>Smith, Joyce Ann*</td>
<td>December 2014</td>
<td>Failed</td>
</tr>
<tr>
<td>Junior, Jermiere</td>
<td>Unknown</td>
<td>Failed</td>
</tr>
<tr>
<td>Ankwaraonwu, Ann</td>
<td>Unknown</td>
<td>Failed</td>
</tr>
<tr>
<td>Alford, Rasheeda</td>
<td>Unknown</td>
<td>Failed</td>
</tr>
<tr>
<td>Abraham, Precious</td>
<td>Unknown</td>
<td>Failed</td>
</tr>
<tr>
<td>Smith, Julian*</td>
<td>May 2016</td>
<td>Failed</td>
</tr>
<tr>
<td>Myers, Eboni*</td>
<td>May 2016</td>
<td>Failed 26 September 2016</td>
</tr>
</tbody>
</table>

**Candidates Remaining as First Time Test Takers 2016**

<table>
<thead>
<tr>
<th>Candidate</th>
<th>Date of Graduation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Masiglat, Keven</td>
<td>May 2016</td>
</tr>
</tbody>
</table>

*Students not from original Cohort (Repeating, dismissed and readmitted or were unable to pass exit exam several times) and/or inconsistently engaged in NCLEX review activities

**Students consistently engaged in review activities who passed after repeating NCLEX
Morgan State University Nursing Program

NURSING PROGRAMS
August 10, 2015

To: Nursing Program Faculty and Staff

From: Maija Anderson, DNP, RN
Program Director

RE: Mandatory Processes for Exam Building for Undergraduate Nursing Courses

The following references processes that will be put in place and executed from this point on, until there is an identified need for additional processes to be put into place around exams.

1. All exams given to students in undergraduate nursing courses will be built into Blackboard. End of semester assessment exams are given in the software provided by the vendor. Exams will only be given in paper format when technical issues occur.
2. All exams are to be proctored by nursing faculty with assistance if needed

<table>
<thead>
<tr>
<th>Client Needs</th>
<th>Percentage of Items from Each Category/Subcategory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe and Effective Care Environment</td>
<td>17.23%</td>
</tr>
<tr>
<td>- Management of Care</td>
<td>17.23%</td>
</tr>
<tr>
<td>- Safety and Infection Control</td>
<td>9.15%</td>
</tr>
<tr>
<td>Health Promotion and Maintenance</td>
<td>6.12%</td>
</tr>
<tr>
<td>Psychosocial Integrity</td>
<td>6.12%</td>
</tr>
<tr>
<td>Physiological Integrity</td>
<td></td>
</tr>
<tr>
<td>- Basic Care and Comfort</td>
<td>6.12%</td>
</tr>
<tr>
<td>- Pharmacological and Parenteral Therapies</td>
<td>12.18%</td>
</tr>
<tr>
<td>Redirection of Risk Potential</td>
<td>9.15%</td>
</tr>
<tr>
<td>Physiological Adaptation</td>
<td>11.37%</td>
</tr>
</tbody>
</table>

4. No more than 50% of exam questions will come from test banks. The remaining 50% will come from NCLEX-RN review texts. Faculty are to utilize questions from NCLEX-RN Review texts.

5. Because nursing practice requires application of knowledge, skills and abilities, the majority of items are written at the level of application or higher levels of cognitive ability based on Bloom's taxonomy for the cognitive domains. As such, exams are to be written with no more than 30% of questions written below the level of application. Students entering their first semester of the nursing program, should be given initial exams with no more than 40% of questions written below the level of application.

6. All questions that are uploaded into Bb Test Banks created by faculty for each course, are to be coded the following way for review:
   - Content Category (i.e. Health Promotion and Maintenance of Care), Sub Category (i.e. Advance Directives), Area of Specialty (i.e. Medical/Surgical Nursing — Respiratory), Cognitive Level (i.e. Application).
   - Faculty will include rationale for correct and incorrect answers that students will be able to access immediately after the exam is completed.
   - Exams will contain no less than 25% alternate item questions.
   - Exams will be updated every year per course. Test banks will be pulled forward in Bb so that questions can be utilized again. At this point, no more than 50% of the exam questions will be repeated. Exams must have new content each year.
   - Item analyses will be run in Bb after each exam to identify areas of weakness as a whole for the purposes of faculty review and to ascertain which questions should be thrown out.
   - All exams will be secured with a password known only to faculty prior to exam. Exams will be deployed and made available to students for a limited amount of time. No student is to take an unproctored, unsupervised exam.
   - Review should be closed to students immediately after they complete and review exam to mitigate issues where questions are copied and passed on to oncoming cohorts.
   - Faculty are to utilize the random settings in Bb to make sure that the questions and answers are randomized to students.
   - Faculty are to utilize University policy for testing to guide them in administering exams.
   - To ensure integrity, exams for each course are to be written by two faculty. Faculty will be selected by the Director of Nursing.

These processes are not all inclusive but are meant as a start to improve outcomes for the undergraduate nursing program and to assist faculty in developing exams that can be utilized as reliable assessment tools.

Faculty development in this is ongoing, and we will be seeking out faculty development specific to item writing and test development as we move toward nursing excellence.

V/r,
Nancy R. Anderson
MORGAN STATE UNIVERSITY
School of Community Health and Policy, Nursing Program

NURS 454 TRANSITION INTO PROFESSIONAL NURSING
6 Credit Course (Didactic 3 credits: 45 contact hours, Clinical 3 credits: 135 contact hours)

Spring 2017
Wednesday 1300pm – 15:50pm Jenkins Building Room 109
Course Coordinator: Maija Anderson, DNP, RN
Contact information: maija.anderson@morgan.edu
443-885-4144 (phone)
Office Location: Jenkins Room 308
Office hours: By Appointment only
NCLEX Tutor/Mentor/Coach: Pawn Johnson-Hunter, MS, RN
Contact info: pawn.johnson-hunter@morgan.edu

NURSING PROGRAM MISSION
The mission of the Undergraduate Nursing Program is to prepare graduates to provide safe, effective, and evidenced-based practice as baccalaureate-prepared nurses. The program aims to prepare nurses who will be able to meet the challenges of a dynamic, changing, and emerging health care setting.

COURSE CATALOG DESCRIPTION
This course helps the student integrate all aspects of the nursing curriculum in preparation for transitioning from student to professional nurse. The focus is on issues related to the student transitioning to actual nursing practice. Students are guided in a review of nursing content and a final comprehensive exam in preparation for the NCLEX exam. The clinical component will provide students with an opportunity to further demonstrate competencies consistent with program outcomes and to refine their nursing care practice skills including establishing priorities and applying leadership principles. Students will collaborate with faculty in choosing a care setting, planning and organizing a learning experience, and practicing professional nursing in a safe and effective manner.

PREREQUISITE/COREQUISITE COURSE(S)
Students are required to have successfully completed all prerequisite nursing courses with a grade of ‘C’ or better prior to attempting the NURS 454 course. Prerequisite courses for NURS 454 are as follows: NURS 401, NURS 403, & NURS 405. Co-requisite courses (could also be considered as prerequisites) are as follows: NURS 407, NURS 409, & NURS 453

COURSE OBJECTIVES
Upon completion of the course students are expected to:
1. Utilize critical thinking, diagnostic reasoning, and moral and ethical reasoning in the application of nursing process to assist the client in achieving optimal health outcomes.
2. Synthesize knowledge from the humanities, arts and sciences to provide quality nursing services reflective of value, dignity and worth of each individual in a culturally diverse society.
3. Communicate effectively and therapeutically in writing, verbally and nonverbally.
4. Incorporate the caring ethic as the foundation of nursing practice.
5. Apply the nursing process to assist the client to promote, restore and maintain an optimal-level of wellness by providing holistic care.
6. Function effectively in the role of provider and manager of nursing care demonstrating leadership in the health care team.
Morgan State University Nursing Program

7. Apply principles of leadership and management skills to nursing practice to ensure quality care and patient safety.
9. Appropriately use technology to deliver safe, effective nursing care.
10. Apply principles of evidence based practice
11. Be accountable for personal and professional growth and continued lifelong learning.
12. Be accountable for ethical professional nursing practice to meet the health care needs of the community and populations served.

Within NURS 454, the student will:

1. Identify areas of strength and weakness from which the student will develop a plan for NCLEX preparation and successful performance as a baccalaureate graduate.
2. Independently complete review of all nursing content essential for satisfactory performance on the NCLEX examination and as a baccalaureate graduate.
3. Demonstrate application of the nursing process in the clinical setting at the appropriate level for the baccalaureate graduate.
4. Engage in classroom discussions on issues pertinent to the novice role of the baccalaureate graduate.

SERVICES FOR STUDENTS WITH DISABILITIES PROGRAM
The Services for Students with Disabilities Program coordinates services to ensure that students with learning, emotional, and physical disabilities have equal access to University programs. Students who have a disability are responsible for contacting Services for Students with Disabilities Program in Room 202 Carter Grant Wilson or call 443-885-3130 to discuss their needs for accommodations. All information shared with Services for Students with Disabilities Program will be held in confidence.

TEACHING METHODS AND EVALUATION OF STUDENT PERFORMANCE
This course will combine a variety of learner-centered and teacher assigned strategies that best fit comprehension of the information. As adult learners, the student is responsible for reviewing all of the course content both from the text as well as Blackboard (BB). Students are expected to access BB at least once every 24 hours to check for class updates and instructor communications. Blackboard will be utilized as the main platform to communicate with students, deliver content and also administer exams. Additionally, the student shall seek out opportunities for academic support if remediation is needed during the course.

The course consists of two components equally weighted in assessing the performance of the student.
- didactic component - knowledge of nursing principles and processes
- clinical component (the appropriate application of these principles and processes in the clinical setting)
Both segments of the class must be passed in order to pass the course.**

<table>
<thead>
<tr>
<th>Didactic (Rubric may be referenced on Page 10)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical</td>
</tr>
<tr>
<td>Overall Clinical Performance</td>
</tr>
<tr>
<td>Clinical/Skills Competency Check off</td>
</tr>
<tr>
<td>Simulation</td>
</tr>
<tr>
<td>Patient Case Studies (2)</td>
</tr>
<tr>
<td>Total (Clinical is graded as a Pass/Fail)</td>
</tr>
</tbody>
</table>

Final Grades for the Course will be assigned as follows:

- 92 - 100 A
- 91 - 82 B
- 81 - 73 C
- 72 – 64 D
- ≤ 63 F

**NOTE**: A student who has completed all of the coursework and has been advised that he/she is failing by the faculty cannot withdraw or drop the class. The student will receive the grade earned at the time the course ends. Failure to adhere to this constitutes academic dishonesty.

**DIDACTIC REQUIREMENTS -- assignments & directions**

**All course assignments are due at the beginning of class on the assigned due date**

1. **Specialty Exams**
   - Students will complete specialty exams assessing knowledge of Pathophysiology, Pharmacology, Health Assessment, Fundamentals of Nursing, Adult Health Nursing, Critical Care, Maternal/Child Health, Psych Mental Health, Pediatric Nursing, Leadership and Community Health. Your score is the conversion score that you achieve. For instance, if you receive a 55% conversion score, this percentage and applied to your grade in Bb for that particular assignment. If however, you achieve a 72% conversion score or higher, you will receive full credit for the exam. Grades lower than that are scored based on the percentage of 72% (i.e. 50% conversion score/ 72% conversion score = 69%)

2. **NCLEX-Review Module Exams**
   - Students will be required to complete assigned NCLEX Test Plan Modules. These modules are designed to assist students continue their intense preparation for the EXIT & NCLEX-RN exams. After each module, the students will complete an online exam focused on module content. These exams will be graded. The goal of this assignment is to develop critical thinking skills and prepare the students to take the RN- NCLEX Boards. The assignment must be submitted per syllabi on Tuesday in BB by 2359 for grading. **No Exceptions.** To receive full credit for
your assigned questions, you must achieve a minimum score of 65%. Grades lower than that are scored based on the percentage of 65% (i.e. 50% conversion score / 65% = 76%)

3. **Comprehensive Exam**
   Students will take an online comprehensive exam during the course. The exam will serve as a formative evaluation of students’ progress toward readiness for the senior comprehensive exit and NCLEX-RN exam. Your score will be assigned based on the recommended score set.

4. **HESI Case Study / Patient Review Homework**
   Students will complete assigned case studies or patient reviews from the Evolve platform. Patient reviews/case studies will be only accessible during an identified time. Grades will be recorded based upon the student’s score from the **first attempt**. This activity is a part of your clinical grade.

5. **Diagnostic / Pre-Assessment Exam**
   An assessment exam will be given the first week of the course. The purpose of this exam will be to help students identify their areas of strengths and weakness in an effort to improve or adjust individualized study plans.

6. **Standardized Final Exam**
   An on-campus comprehensive standardized final examination will be given. Your score for this course will be assigned based on the recommended score set. **The requirement for the same comprehensive exit exam for NURS 001.Senior Comp Course is that you achieve a 90% conversion score.**

7. **Simulation**
   Simulation activities and exercises will be given in class or the skills lab. Simulation activities help to engage students in active learning in a safe environment. Simulation activities are a component of your clinical grade.

8. **Skills**
   The assigned grade for the skills check off evaluation at the end of the course will be a component of the grade required for the clinical component of the course.

9. **Discussion Questions/Journal Assignments/NCLEX Preparation Study Plan/Senior Exit Survey**
   Throughout the course of the semester, students are required to complete discussion questions, journal assignments and an approved NCLEX Preparation Study Plan (Prof. Johnson-Hunter) as a component of total grade.

10. **Kaplan/Content Reviews**
    All students are required to complete the Kaplan review. Your score will be assigned based on 100% participation.

**The Reflective Journal** is a place for you to post your reflections on what you have learned and experienced throughout each week. Between the course readings, discussion boards, written assignments and your daily life experiences, there will be concepts, understandings and coping strategies that were new to you or shifted your perception or worked when you used them or not etc.
Journaling provides a format for you to synthesize your knowledge, skills and experiences and allows you to find meanings and make connections in order to be able to critically think and apply the concepts and skills you have learned. Although this looks like an online discussion forum, this space is set up as a journal that is yours and viewable only by student and faculty. This journal is part of your final grade. There will be some feedback about your posting and more if you specifically request it or ask questions.

Treat your journal entry as a written assignment for formatting purposes and composing it in a word document file that you keep a copy of in case of computer/human problems that can arise. Two or three sentences are not sufficient nor are daily logs/reports of activities meeting the criteria outlined below.

First reflect on what you have learned during the activities to date and include any memories that arose of prior learning and/or experiences that are connected to your learning to date, and then write about it. You can describe the thoughts and events but what I am looking for is your thinking about your thoughts and feelings regarding the new learning that has occurred for you.

References


Discussion Board Postings - Grading Criteria
The purpose of the discussion board is to take the place of the class interchange that would occur in a face-to-face class. It is your opportunity to demonstrate your mastery of the assigned readings and your ability to supplement those readings with expanded exposure to related (and sometimes contrary) information that you will seek in your self-directed quest to understand and be informed. To that end, we will expect you to share ideas you have gained from the literature, noting the source when appropriate and interpreting into your own words. We will also expect that you will use a more complex thought process to dissect and analyze what you read in the literature and in the discussion thoughts of your fellow students as you offer your own insights. We do not care if you use big words or a lot of words (remember, the world values parsimony), but we are eager to read your thoughtful insights into the questions and statements, your analysis of the words and ideas, and your recommendations for future pathways for nursing and healthcare. The following information will give you some guidelines and allow you to see thinking process we will use to assign a grade to the discussion board exercises.

<table>
<thead>
<tr>
<th>Criteria/Points</th>
<th>&lt; 80</th>
<th>80-89</th>
<th>90 - 100</th>
</tr>
</thead>
<tbody>
<tr>
<td>Format and logical progression of posting</td>
<td>Spelling and grammar errors detract from the substance</td>
<td>Midpoint</td>
<td>Form is superior; obvious attention to proofreading</td>
</tr>
<tr>
<td>Depth and relevance of post to the topic at hand</td>
<td>Posting shows superficial thinking based on personal experiences or opinions only, there is little consideration of contributions to the topic in the literature or from colleagues. Literature support is not relevant to the topic or major literature contributions are missing. Post strays from topic with much irrelevant information and does not address the intent of the assignment. No references cited</td>
<td>Midpoint</td>
<td>Posting clearly shows evidence of critical thinking and analysis to a substantial depth expected of a graduate student. Ideas offered are relevant to the topic and show the ability to extrapolate complex ideas from various sources into a coherent argument or statement(s). Two or more relevant references cited; cited references are appropriate and indicative of the best knowledge on the topic.</td>
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<tr>
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</tr>
<tr>
<td>Contribution to the Learning community</td>
<td>Posting is largely aimed at self-expression without consideration of the reader. There is no room for dialogue or disagreement and no acknowledgment of the potential contributions of others. The posting is a rehash of old ideas without consideration of how these can advise the future. No evidence is found of making the material consumable or reader-friendly</td>
<td>Midpoint</td>
<td>Posting shows an astute awareness of the needs of the learning community with an interest in their growth and knowledge acquisition; attempts to move colleagues into meaningful dialogue and presents creative approaches that are open to discussion. Post contributes to the progression of nursing as a scholarly community but is presented in a clear, enlightening, and engaging way.</td>
</tr>
</tbody>
</table>

**CLINICAL REQUIREMENTS**

Clinical Practice grading is based on successfully demonstrating passing behavior on the clinical practice component of the course. See specific clinical expectations in the NURS 454 Clinical Course Packet. Be mindful that the student MUST pass and meet clinical standards and requirements to pass the course. Lack of success in the clinical component of the courses, means that the student has not earned a passing grade for the course. Students MUST complete all the clinical assignments by the due date, failure to do so may result in an unsuccessful grade in the course.
Clinical Code of Conduct

Violations of items listed in the behavioral guide, code of clinical conduct, and/or MSU Undergraduate Nursing Student Handbook may result in removal from the clinical experience or more serious penalties allowed by the University and Nursing Program handbooks.

Clinical Course Assignments:

Completion of 135 hours of direct hands-on care of patients/clients in clinical site & lab setting.
Completion and passing of the Medication Calculation Exam
Completion of a Clinical/Skills Competency Checklist
Completion of Midterm and Final Clinical Evaluation Tools (by faculty)
Two Patient Case Studies
Simulation
Weekly Journal
Demonstrate effective use of SBAR in healthcare agencies
Utilize QSEN (6) competencies in nursing practice
   1) Patient-Centered Care
   2) Evidenced Based Practice
   3) Safety
   4) Teamwork and Collaboration
   5) Quality Improvement
   6) Informatics
Accurate use of electronic chart documentation in the clinical setting

ADDITIONAL COURSE POLICIES

ALL MSU students are expected to adhere to Morgan State University Policies as well as those set forth in the Undergraduate Nursing Program Student handbook. Any student found in violation of University or Program policies on academic dishonesty including plagiarism or cheating may be penalized to the fullest extent allowed including course failure and possible program dismissal. See University and Nursing Program student handbooks for general policies on academic integrity, progression, inclement weather policy, testing, use of standardized tests, etc.

RELATIONSHIP TO CURRICULUM SEQUENCE

This course is generally taken by students in their final semester of the nursing program. It is required before students can graduate but is taken after other core clinical courses. This course includes the following Essentials of Baccalaureate Education:

Essentials of Baccalaureate Nursing
   I. Synthesize knowledge from the humanities, arts, and sciences as a basis to provide effective nursing services within a multicultural society.
   II. Apply principles of basic organizational and systems leadership and management in nursing practice to ensure quality care and patient safety.
   III. Utilize scholarship scientific evidence, inter-professional perspectives and patient preferences for EBP to inform practice and make clinical judgments.
   IV. Effectively use information systems and health care technology to support safe nursing practice.
   V. Apply principles of therapeutic interpersonal, intraprofessional and interprofessional communication in improving patient health outcomes.
   VI. Apply the nursing process to assist the client (patient, family, community or population) to
Morgan State University Nursing Program

promote, restore and maintain an optimal level of wellness across the lifespan. 

VII. Maintains nursing professional standards of moral, legal and ethical conduct.

BIBLIOGRAPHY

Required Resources:
Kaplan Nursing Online Resource

HESI/Saunders Online Review for the NCLEX-RN Examination
(Evolve Elsevier Platform)

Required Readings:


Maryland Nurse Practice Act available at http://www.lexisnexis.com/hottopics/mdcode/. To access select ‘Health Occupations’ then select ‘Title 8 Nurses’

ISBN: 978-14557-2755-1

ISBN: 978-1618655011

ISBN: 978-0323101097

Suggested Texts:

ISBN: 978-0-323-05306-8

ISBN: 9781455733194

ISBN: 978-0323101097

ISBN: 978-1609788919
NCSBN's Review for the NCLEX-RN Examination v7.0.1 (learningext.com)
3 weeks to 15-week Study Plan (suggested for post-graduation NCLEX-RN prep).

All textbooks required in all previous nursing courses.
<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fundamentals Assessment Exam</td>
<td>08Feb</td>
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<tr>
<td>Health Assessment Exam</td>
<td>08Feb</td>
<td>2</td>
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<tr>
<td>Pathophysiology Assessment Exam</td>
<td>08Feb</td>
<td>2</td>
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<tr>
<td>W4: Discussion Question 3</td>
<td>14Feb</td>
<td>1 (Full participation required for full credit)</td>
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<td>Content Review (1300 – 1800)</td>
<td>15Feb</td>
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<tr>
<td>W5: Discussion Question 4</td>
<td>21Feb</td>
<td>1</td>
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<tr>
<td>Module 9 Exam (Independently – 100 questions)</td>
<td>21Feb</td>
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<tr>
<td>Module 10 Exam (Independently – 100 questions)</td>
<td>21Feb</td>
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</tr>
<tr>
<td>Module 1 Exam (Independently – 100 questions)</td>
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<tr>
<td>Pharmacology Assessment Exam</td>
<td>22Feb</td>
<td>2</td>
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<tr>
<td>Maternity Assessment Exam1</td>
<td>22Feb</td>
<td>2</td>
</tr>
<tr>
<td>Pediatric Assessment Exam1</td>
<td>22Feb</td>
<td>2</td>
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<tr>
<td>W6: Discussion Question 5</td>
<td>28Feb</td>
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<tr>
<td>Module 2 Exam (Independently – 100 questions)</td>
<td>28Feb</td>
<td>1</td>
</tr>
<tr>
<td>Module 3 Exam (Independently – 100 questions)</td>
<td>28Feb</td>
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<tr>
<td>Module 4 Exam (Independently – 100 questions)</td>
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<tr>
<td>Med/Surg Assessment Exam 1</td>
<td>01Mar</td>
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<tr>
<td>Critical Care Assessment Exam 1</td>
<td>01Mar</td>
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<tr>
<td>Mental Health Assessment Exam 1</td>
<td>01Mar</td>
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<tr>
<td>W7: Discussion Question 6</td>
<td>07Mar</td>
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<tr>
<td>Med/Surg Assessment Exam 2</td>
<td>08Mar</td>
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<tr>
<td>Mental Health Assessment Exam 2</td>
<td>08Mar</td>
<td>2</td>
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<tr>
<td>Critical Thinking Exam 1</td>
<td>08Mar</td>
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<tr>
<td>W8: Journal Entry 1 IOM/AACN Essentials/Nursing Curriculum Comparison</td>
<td>15Mar</td>
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<tr>
<td>NCLEX Preparation Plan (Study Plan with Milestones)</td>
<td>15Mar</td>
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<tr>
<td>Comprehensive Assessment Exam (Practice) – Midterm Grade discussions as necessary</td>
<td>16Mar</td>
<td>6</td>
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<tr>
<td>Spring Break Week of 19Mar – 25Mar</td>
<td></td>
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<tr>
<td>Journal Entry Due – Reflections on Journey in Nursing to this point; Goals Year 1, Year 5 and Long Term</td>
<td>28Mar</td>
<td>1</td>
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<tr>
<td>W9: Maternity Exam 2</td>
<td>29Mar</td>
<td>2</td>
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<tr>
<td>Community Assessment Exam</td>
<td>29Mar</td>
<td>2</td>
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<tr>
<td>W10: Senior Exit Survey</td>
<td>4Apr</td>
<td>1</td>
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<tr>
<td>Nursing Assessment Exam</td>
<td>5Apr</td>
<td>7</td>
</tr>
<tr>
<td>Completion and Submission of MBON Application and Background Check (Confirmation sent to my email by MBON – Cost $100 plus $75 for Criminal Background check)</td>
<td>5Apr</td>
<td>EXTRA CREDIT</td>
</tr>
</tbody>
</table>
### Week 1 Content

**NCLEX Review Areas to be Covered Outside of Class**
1. Management of Care
2. Safety and Infection Control

**Assigned Readings:**
1. HESI/Saunders Online Review – Course Orientation *(Pre Week 1 Preparation)*
2. HESI/Saunders Online Review – Test Taking Strategies *(Pre Week 1 Preparation)*
3. HESI/Saunders Online Review – The Test Plan *(Pre Week 1 Preparation)*
4. HESI/Saunders Online Review – Study Calendar
5. HESI/Saunders Online Review Module 5 – Lessons 21-27
6. HESI/Saunders Online Review Module 6 – Lessons 28-31
7. HESI/Saunders Online Review Live Review Videos – Test Preparation and Delegation/Prioritization
8. Cherry, Chapters 1 and 2
Objectives:

**Saunders:** By the end of Module 5, the student will have a better understanding of the following review content:

1. Various principles of management of care
2. Ethical and legal issues which include; advance directives, confidentiality and information technology and security; informed consent and client rights
3. Concepts of management
4. Principles of delegating and prioritizing nursing care

**Saunders:** By the end of Module 6, the student will have a better understanding of the following review content:

1. Nursing responsibilities in ensuring a safe environment for clients and others
2. Fire, electrical, and radiation safety
3. Standard and transmission based precautions
4. Poisoning
5. Ethical and legal responsibilities involved in the use of restraints and other safety devices
6. Emergency response plans
7. Nursing responsibilities in the event of a disaster
8. Triage systems
9. Biological warfare agents

**Cherry:** The student will be able to:

1. Summarize health practices throughout the course of history.
2. Analyze the effect of historic, political, social, and economic events on the development of nursing.
3. Describe the evolution of professional challenges experienced by nurses of diverse ethnic, racial, and educational backgrounds.
4. Describe the image of nursing in art, media, and literature over time.
5. Identify nursing actions that convey a negative image of nursing.
6. Suggest strategies that would enhance the image of nursing.
7. Create an individualized plan to promote a positive image of nursing in practice.

The following Essentials of Baccalaureate Nursing are covered in this learning module:

- Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice
- Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety
- Essential IV: Information Management and Application of Patient Care Technology
- Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
- Essential VIII: Professionalism and Professional Values

Assignments:

1. **PreTest (In class)**
   
   The Pre-Test consists of questions designed to help you determine which content areas are your strongest and which are your weakest. You will have 1 ½ hours to take the exam. This test comprises multiple-choice, fill-in-the-blank, multiple-response (in which you are asked to select all responses that apply), ordered-response (in which you are asked to prioritize a list of activities), and image-based questions. Each question is weighted equally for scoring purposes.
Each question will appear individually on the screen; the questions are numbered in succession. Be sure to answer each question, and do not skip questions; remember, you will not be allowed to return to complete them later. Once you have submitted a response, you cannot change your answer. Each time you submit a response, a new question will appear, until you have reached the final question Complete Study Calendar based on your Pre-Test Results and syllabus.

2. Exams for Modules 5 and 6
3. Discussion board questions – Assigned by me

Compare and contrast various contributions made by nurse pioneers. Describe how these contributions affect your philosophy of nursing.

What was the historic significance of racial segregation and the impact of racial integration on professional nursing? Explain why this is important.

What are some of the challenges that you see for the nursing profession in the future?

Recent studies have indicated that nurses are the most highly trusted health professional group. What component of nursing's contemporary image places nurses in this position of trust? What threatens this position?

In an ideal health care setting, what would be the most important image of nursing?

You are a trauma nurse who takes care of a U.S. Senator after a life-threatening car accident. He credits you with saving his life. When he becomes President, he invites you to the White House and asks you to tell him the most important thing he can do to reform the health care system. In one sentence, what do you say?

If you wanted to artistically portray a twenty-first century nurse, what would the nurse be wearing?

**Week 2 Content**

**NCLEX Review Areas to be Covered Outside of Class**
1. Basic Care and Comfort
2. Monitoring for Health Problems

**Assigned Readings:**
1. HESI/Saunders Online Review Module 7 – Lessons 32-34
2. HESI/Saunders Online Review Module 9 – Lessons 40-44
3. HESI/Saunders Online Live Review Videos: Triage
4. Cherry Chapters 3 and 4
8. MBON Compact Licensure Information: [http://mbon.maryland.gov/Pages/msl-compact-states.aspx](http://mbon.maryland.gov/Pages/msl-compact-states.aspx)
Objectives

*Saunders:* By the end of Module 7, the student will have a better understanding of the following review content:
1. Basic human needs including hygiene, nutrition, elimination, rest and sleep
2. Mobility, assistive devices and the complications of immobility as well as interventions to prevent these complications, and
3. Nonpharmacological comfort interventions including complementary and alternative therapies

*Saunders:* By the end of Module 9, the student will have a better understanding of the following review content:
1. Procedures and nursing responsibilities involved in taking a client’s vital signs
2. Nursing responsibilities involved in preparing clients for common diagnostic tests, treatments and procedures, as well as preprocedure and postprocedure guidelines
3. Laboratory values, acid-base balance and the steps involved in the analysis of arterial blood gases, and
4. Considerations in the care of the perioperative client.

*Cherry:* The student will be able to:
1. Integrate knowledge of 10 current trends and issues in society and health care into a more holistic perception of their influence on nursing education, students, faculty, and nursing practice.
2. Create a personal philosophy and plan for ongoing professional development and practice that integrates knowledge of current trends and issues.
3. Access current information resources from the Internet related to evolving trends and issues as a component of ongoing learning and preparation for practice.
4. Differentiate among various types of conventional, mobility, and new nursing education programs and the issues associated with them.
5. Explain the development of licensure requirements in the United States.
6. Summarize current licensure requirements in the context of historical developments.
7. Analyze the various components of a nurse practice act.
8. Discuss mutual recognition of nursing practice and identify Nurse Licensure Compact states.
9. Describe the development of certification requirements for advanced practice.
10. Identify requirements for certification for advanced practice in different specialties.
11. Use appropriate resources to obtain current information on licensure and certification.

The following Essentials of Baccalaureate Nursing are covered in this learning module:

Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice
Essential III: Scholarship for Evidence-Based Practice
Essential V: Health care Policy, Finance, and Regulatory Environments
Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
Essential VIII: Professionalism and Professional Values

Class Activity for the Week – Content Review from 1300 – 1800

Assignments Due NLT
1. Module 7 and 9 Exams
2. Discussion Questions – Assigned by me
   Obtain a picture and description of your school or college nursing pin. Examine each aspect of the pin and learn the meaning ascribed to it. Reflect on how the nursing program exemplifies the symbolism of its pin. Think about your own nursing practice and describe how it represents the
meaning of your nursing school pin. If you find the pin does not reflect the aforementioned, speak to that and how this could be resolved/mitigated.

Contact the board of nursing in your home state or jurisdiction to obtain a copy of your nursing practice act with the accompanying rules and regulations. Read the act carefully and identify: (a) the definition of nursing; (b) the scope of nursing practice; (c) requirements for licensure; and (d) requirements for renewal of licensure. Are statements regarding mandatory continuing education or continuing competency included?

Using your state board of nursing or the National Council of State Boards of Nursing, Inc., website, determine whether your state is a Nurse Licensure Compact state. If so, what are the implications for your practice in adjacent or distant states? If not, what must you do to practice in a neighboring state?

With the growth of telehealth and telenursing, nursing involves practicing across state lines without nurses ever leaving home. What are the implications of practicing in another state? How does your state regulate telehealth?

Use the nurse practice act of your state to identify the scope of practice, regulations, and requirements for certified advanced nursing practice.

Week 3 Content

NCLEX Review Areas to be Covered Outside of Class
1. Pharmacology and Intravenous Therapies
2. Physiological Health Problems

Assigned Readings:
1. HESI/Saunders Online Review Module 8, Lessons 35-39
2. HESI/Saunders Online Review Module 10, Lessons 45-50
3. HESI/Saunders Online Live Review Videos: Triage; Delegation and Prioritization
4. Cherry Chapters 5 and 6

Objectives

Saunders: By the end of Module 8, the student will have a better understanding of the following review content:
1. Guidelines for administering medications and the formulas for calculating medication doses and the intravenous flow rates
2. Major medication classifications with an emphasis on nursing interventions and client education
3. Nursing responsibilities in regard to intravenous therapy, administration of blood products and parenteral nutrition

Saunders: By the end of Module 10, the student will have a better understanding of the following review content:
1. Review of imbalances of fluid volume and electrolytes which includes: assessment findings and interventions
2. Methods for monitoring a client’s hemodynamic status and the electrical activity of the heart
3. Cardiac dysrhythmias; care of the client with decreased cardiac output
4. A variety of emergency medication situations: disseminated intravascular coagulation,
oncological emergencies; the procedures for basic life support measures including use of the automated external defibrillator, and foreign body obstruction (a.k.a. choking)
5. Medical and surgical disorders of the adult client, including assessment findings, interventions and priority client teaching reports. Pediatric considerations in specific disorders are also reviewed.
6. High-risk conditions of pregnancy and the neonatal period. Descriptions, assessment findings and interventions for the various conditions are also reviewed.
7. Disorders of the pediatric client with an emphasis on assessment findings, nursing interventions and education regarding prevention and treatments.

Cherry: The student will be able to:

1. Differentiate between a science and a theory.
2. Identify the criteria necessary for science.
3. Identify the criteria necessary for theory.
4. Explain a nursing theory and a nursing model.
5. Discuss two early and two contemporary nursing theorists and their theories.
6. Explain the effect of nursing theory on the profession of nursing.
7. Summarize major points in the evolution of nursing research in relation to contemporary nursing.
8. Evaluate the influence of nursing research on current nursing and health care practices.
9. Differentiate among nursing research methods.
10. Evaluate the quality of research studies using established criteria.
11. Participate in the research process.
12. Use research findings to improve nursing practice.

The following Essentials of Baccalaureate Nursing are covered in this learning module:

Essential III: Scholarship for Evidence-Based Practice
Essential IV: Information Management and Application of Patient Care Technology

Class Activity for the Week – HESI Fundamentals and Pathophysiology Assessment Exams

Assignments Due NLT
1. Exams for Modules 8 and 10
2. Discussion questions
   Select a nursing theory that you find most interesting. Then, (a) explain the reason for choosing that particular theory; and (b) discuss how the theory could guide nursing practice. Use relevant examples from your clinical experiences.

As a critical care nurse, you learn that several research studies have been conducted about open visitation in the critical care area. How would you find this information and use it in your practice?

As a home health nurse, you learn that several studies have been conducted on long-term care giving and caregiver burden. What strategies could you use to facilitate staff involvement in reviewing and critiquing the literature related to this problem?

As a hospice nurse, you learn that some reports have shown the effectiveness of two alternative methods of pain control: relaxation techniques and music therapy. How would you compare the effectiveness of these two methods in controlling the pain of hospice patients?
Week 4 Content

NCLEX Review Areas to be Covered Outside of Class
1. Developmental Stages and Transitions
2. Health Promotion and Disease Prevention

Assigned Readings:
1. HESI/Saunders Online Review Module 1, Lessons 1-7
2. HESI/Saunders Online Review Module 2, Lessons 8-10
3. HESI/Saunders Online Live Review Videos: Preeclampsia, Eclampsia
4. Cherry Chapters 7-9

Objectives

Saunders: By the end of Module 1, the student will have a better understanding of the following review content:
1. Normal growth and development of the infant, child and adolescent.
2. Normal and expected occurrences during pregnancy, labor and delivery and postpartum
3. Family systems and dynamics
4. Family planning which includes infertility and methods of contraception

Saunders: By the end of Module 2, the student will have a better understanding of the following review content:
1. Health and wellness, health promotion programs, health screening, lifestyle choices and health risks
2. Teaching and learning principles
3. Components of a health assessment and techniques for performing a physical exam

Cherry: The student will:
1. Analyze major factors that have influenced health care access and financing since the middle of the twentieth century.
2. Analyze the relationship between market issues and health care resource allocation.
3. Integrate knowledge of health care resources, access, and financing into managing professional nursing care.
4. Critique the relationship between contemporary economic issues and trends and professional nursing practice.
5. Discuss the implications of the Patient Protection and Affordability Care Act (PPACA) for nursing and health care.
6. Differentiate among the three major categories of law on which nursing practice is established and governed.
7. Analyze the relationship between accountability and liability for one’s actions in professional nursing practice.
8. Outline the essential elements that must be proven to establish a claim of negligence or malpractice.
10. Identify causes of nursing error and patient injury that have led to claims of criminal negligence.
11. Incorporate fundamental laws and statutory regulations that establish the patient’s right to autonomy, self-determination, and informed decision-making in the health care setting.
12. Incorporate laws and statutory regulations that establish the patient’s right to privacy and privacy
of health records.
13. Integrate basic concepts of human values that are essential for ethical decision making.
14. Analyze selected ethical theories and principles as a basis for ethical decision making.
15. Analyze the relationship between ethics and morality in relation to nursing practice.
16. Use an ethical decision-making framework for resolving ethical problems in health care.
17. Apply the ethical decision-making process to specific ethical issues encountered in clinical practice.

The following Essentials of Baccalaureate Nursing are covered in this learning module:

Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice
Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety
Essential IV: Information Management and Application of Patient Care Technology
Essential V: Healthcare Policy, Finance, and Regulatory Environments
Essential VIII: Professionalism and Professional Values

Class Activity for the Week – Content Review 1300 - 1800

Assignments Due NLT
1. Module 1 and 2 Exams (Saunders)
2. Discussion Questions
   The majority of the provisions of the Patient Protection and Affordable Care Act (PPACA) of 2010 were ruled as constitutional by the United States Supreme Court in July 2012. Conduct an Internet search for reputable sources to summarize and describe key components of the AAC. Why is it important for nurses to understand this act and its impact on health care in the United States?

   Use the Internet to learn more about new methods and rules affecting health care reimbursement: pay-for-performance and "never events." Describe the ways in which pay-for-performance and "never events" will create new or expanded opportunities for nurses and how they might affect patient care.

   The nurse is asked to implement a new, complex, and invasive procedure and is concerned that this may violate the state’s nurse practice act.
   A. What are the logical steps that the nurse should take to clarify the legal scope of nursing practice in this case?
   B. In what order should the nurse proceed?

   A new graduate nurse is working in the pediatric intensive care unit. She has been employed a total of 5 months, 3 of which were spent in orientation. Her patient, a child with a cardiac defect and pneumonia, has a very unstable condition and has needed an increasing amount of supplemental oxygen during the night. This is the most complex and unstable case the new nurse has cared for. The physician has been called four times during the night with reports of deterioration in the child’s status. Telephone orders have been issued each time but have not resulted in the patient’s improvement. The nurse has kept her charge nurse apprised of the child’s changing condition and the physician’s orders. The charge nurse advises her, “Try to get the doctor in here a little earlier this morning and make sure he sees your patient first; she’s not looking good.” Twenty minutes later, the child has cardiac arrest and cannot be resuscitated.
   A. What are the four elements that must be proved to uphold a claim of negligence?
   B. Can the child’s family assert a claim of negligence against a new graduate with very limited experience and seniority?
A nurse who works the night shift in an emergency department is told to prepare a pregnant woman in labor for transport to a high-risk perinatal center. The nurse is aware that an "antidumping" law governs transfer of emergency department patients and is unsure whether this transport is lawful.

A. How can the nurse quickly determine the lawfulness of this transport at 3 o’clock in the morning?
B. What resources should the nurse access for information?
C. How would the nurse prioritize the process of obtaining clarification?

During a brief stable period, a patient calls her nurse to her bedside late in the night. She asks the nurse whether the medication for her pneumonia is working. The nurse is fully aware that the aggressive antibiotic treatment not only is ineffective for the pneumonia but also is causing significant adverse effects. Discuss the nurse’s ethical obligation to truth telling versus the obligation to encourage, instill hope, and inspire a will to live.

A patient being treated after cardiac arrest expresses to her family and health care providers her desire to forego further resuscitation efforts. Her family does not agree with her decision. The health care providers believe that the patient is sufficiently competent to make her own choices. However, a second cardiac arrest occurs before legal action is taken. Discuss the issues involved when patients, their families, and health care providers disagree.

**Week 5 Content**

**NCLEX Review Areas to be Covered Outside of Class**
1. Mental Health Concepts
2. Psychosocial Alterations

**Assigned Readings:**
1. HESI/Saunders Online Review Module 3, Lessons 11-16
2. HESI/Saunders Online Review Module 4, Lessons 17-20
3. Cherry 10-13

**Objectives**

*Saunders:* By the end of Module 3, the student will have a better understanding of the following review content:
1. Foundations of mental health nursing which include: Principles of the nurse-client relationship, the therapeutic communication process, types of therapy, and legal issues related to hospital admission and discharge
2. Concepts of grief and loss and end-of-life care including cultural and religious issues
3. The nurse’s role in caring for a client who is dying
4. Coping mechanisms and various stress management techniques

*Saunders:* By the end of Module 4, the student will have a better understanding of the following review content:
1. Various common mental health disorders and associated nursing interventions
2. Crisis theory and intervention
3. Care of the client who is depressed or suicidal
4. Addictions, abusive behavior, family violence
5. Nurse’s role in identify and caring for a client who is a victim of abuse

Cherry: The student will:

1. Integrate knowledge of demographic and sociocultural variations into culturally competent professional nursing care.
2. Provide culturally competent care to diverse client groups that incorporates variations in biologic characteristics, social organization, environmental control, communication, and other phenomena.
3. Critique education, practice, and research issues that influence culturally competent care.
4. Integrate respect for differences in beliefs and values of others as a critical component of nursing practice.
5. Describe various complementary and alternative healing practices.
6. Identify how to effectively incorporate complementary and alternative therapies into care.
7. Provide patient education regarding uses, limitations, and precautions associated with selected complementary and alternative healing practices and products.
8. Identify issues that affect the practice of professional nursing in the health care workplace.
9. Identify available resources to assist in improving the workplace environment.
10. Define the role of nurses in advocating for safe and effective workplace environments.
11. Describe workforce strategies that support efficient, effective, high-quality patient care and promote improved work environments for nurses.
12. Use terms associated with collective bargaining correctly in written and oral communications.
13. Examine key events in the historical development of collective bargaining and unions.
14. Recognize questionable labor or management practices in the workplace.
15. Analyze collective bargaining as a method for achieving power sharing in the workplace.
16. Evaluate current conflicts and controversies associated with collective bargaining by professional nurses.

The following Essentials of Baccalaureate Nursing are covered in this learning module:

Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice
Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety
Essential III: Scholarship for Evidence-Based Practice
Essential V: Health Care Policy, Finance, and Regulatory Environments
Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
Essential VII: Clinical Prevention and Population Health
Essential VIII: Professionalism and Professional Values

Class Activity for the Week – HESI Pharmacology, Health Assessment and Gerontology Exams

Assignments Due NLT
1. Module Exams 3 and 4
2. Discussion Questions
   How can health care organizations promote the cultural competence of nursing staff?

   Describe some potential constraints to integrating complementary and alternative healing measures into practice.
Describe complementary and alternative healing measures that nurses can use as part of their own self-care.

How will issues currently affecting the nursing workforce affect you as an individual? How will the nursing workforce supply affect the profession of nursing and health care delivery?

Discuss the advantages and disadvantages for a group of nurses seeking union representation to resolve their concerns about poor relationships with physicians and physicians’ failure to respond to urgent patient needs.

Discuss strategies that nurses can use to develop sound relationships with their management team and the organization’s executive leaders, regardless of whether the nurses are working in a union environment.

A nurse working in a health care facility that is undergoing a union organizing initiative is concerned about being terminated from her position because of her involvement in the union organizing activities. Should the nurse be concerned? Why or why not?

**Week 6 Content**

NCLEX Review Areas to be Covered Outside of Class

**Assigned Readings:**
1. HESI/Saunders Online Live Review Videos: Preeclampsia, Eclampsia
2. HESI/Saunders Online Live Review Videos: Blood transfusions, dysrhythmias, chest tubes, DIC, Head Injury, Shock, Oncological Emergencies
3. Cherry 14-17
4. HESI/Saunders Online Focus on Maternity Exam: Located under “Crossing the Finish Line” Module. Assignment to be completed prior to presenting for assessment exam
5. HESI/Saunders Online Focus on Pediatric Exam: Located under “Crossing the Finish Line” Module. Assignment to be completed prior to presenting for assessment exam

**Objectives**

*Cherry:* The student will:

1. Describe key attributes of electronic health record systems and their influence on patient safety and quality care.
2. Explain "meaningful use" criteria as applicable to electronic health records.
3. Critique various types of point-of-care technology and their use in the clinical setting.
4. Assess how future trends in technology will affect health care delivery.
5. Use established criteria to evaluate the content of health-related sites found on the Internet.
6. Describe the interaction between local, state, and federal emergency response systems.
7. Examine the roles of public and private agencies in preparing for and responding to a mass casualty event.
8. Compare and contrast chemical, biologic, radiologic, nuclear, and explosive agents and treatment
protocols.
9. Access resources related to disaster preparedness on the Internet.
10. Communicate effectively (using correct emergency preparedness terminology) in regard to an MCI.
11. Describe the need for personal preparedness for individuals and households.
12. Relate leadership and management theory to nursing leadership and management activities.
13. Differentiate among the five functions of management and essential activities related to each function.
15. Implement effective team-building skills as an essential component of nursing practice.
16. Implement the nursing process as a method of problem solving and planning.
17. Apply principles and strategies of change theory in the management role.
18. Discuss implications of leadership and management challenges of the twenty-first century.
19. Understand the basic terminology of budgeting in the health care industry.
20. Contribute to the budget development process for a nursing or clinical department.
21. Contribute to the capital budget development process for a nursing or clinical department.
22. Explain aspects of monitoring financial performance against an operational budget.
23. Understand the overall role of nursing in a health care organization's budget process.

The following Essentials of Baccalaureate Nursing are covered in this learning module:
Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety
Essential IV: Information Management and Application of Patient Care Technology
Essential V: Health Care Policy, Finance, and Regulatory Environments
Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
Essential VII: Clinical Prevention and Population Health
Essential VIII: Professionalism and Professional Values

Class Activity for the Week – HESI Maternity, Pediatric and Mental Health Assessment Exams

Assignments Due NLT
1. Discussion Questions
   Some institutions are reluctant to issue passwords to nursing students that would allow them to access the electronic health record (EHR), fearing that this could compromise its security. Is this a legitimate concern? Do you agree with this position? Why or why not?

   Hospitals and physician practice sites are challenged with addressing "meaningful use” criteria, which are now required in relation to the use of the EHR system. Review the following website with information on EHRs and Meaningful Use from the U.S. Department of Health and Human Services: https://www.healthit.gov/providers-professionals/how-attain-meaningful-use
   Discuss your perceptions of the implementation of meaningful use criteria in your clinical setting. How are the goals of "meaningful use" being addressed through the use of the EHR system?

   If you were asked to develop a program about emergency preparedness to be presented to a community lay audience, what information would be most important to relay?

   Identify experienced nurses who seem to be efficient at accomplishing their daily work. How do these nurses plan and organize their daily assignments? How do the more experienced nurses interact with other members of the health care team? Identify and list several management skills that help nurses accomplish their work more efficiently.
Think about a situation in the nursing unit in which an unsatisfactory management decision was made. Was the decision based on inaccurate or incomplete information or an incorrectly identified problem? How could this situation have been avoided? What would you recommend should be done to prevent a similar circumstance from occurring in the future?

Suppose the nurse manager’s monthly budget for overtime was $6800 and the monthly budget report showed actual overtime expenditures as $10,650, for a variance of $3850 unfavorable. What should the nurse manager consider as he or she prepares a justification report and an action plan targeted at reducing the variance?

Develop a plan for how you can learn more about budgeting and health care finance.

Week 7 Content

NCLEX Review Areas to be Covered Outside of Class

Assigned Readings/Content:
1. HESI/Saunders Online Focus on Adult Health Exam: Located under “Crossing the Finish Line” Module. Assignment to be completed prior to presenting for assessment exam
2. Cherry 18-20
3. Thou Shalt Not Commit Logical Fallacies link: https://yourlogicalfallacyis.com/
4. Purdue Online Writing Lab Logical Fallacies link: https://owl.english.purdue.edu/owl/resource/659/03/

Objectives

Cherry: The student will:
1. Outline factors that can influence the communication process.
2. Communicate effectively with diverse intergenerational and interdisciplinary team members.
3. Apply positive communication techniques in diverse situations.
4. Recognize negative communication techniques.
5. Evaluate conflicting verbal and nonverbal communication cues.
7. Respond to use of logical fallacies in communication.
8. Develop professional social media interaction behaviors.
9. Evaluate the effect of changes in the current health care system on nurse staffing patterns and responsibilities.
10. Outline six topic areas that the professional nurse should consider when making delegation decisions.
11. List nine essential requirements for safe and effective delegation.
12. Incorporate principles of delegation and supervision in professional nursing practice to ensure safe and legal patient care.
13. Outline key issues surrounding staffing for a health care organization.
14. Evaluate lines of responsibility and accountability associated with various types of nursing care delivery models.
15. Analyze the advantages and disadvantages of nursing care delivery models in relation to patient care in various settings.
17. Differentiate among several nursing care delivery models by evaluating their defining characteristics.
18. Explain the purpose and components of nursing case management.
19. Summarize criteria to be considered in developing future models of nursing care delivery.

The following Essentials of Baccalaureate Nursing are covered in this learning module:

- Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety
- Essential IV: Information Management and Application of Patient Care Technology
- Essential V: Healthcare Policy, Finance, and Regulatory Environments
- Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcome
- Essential VIII: Professionalism and Professional Values

Class Activity for the Week – HESI Medical/Surgical and Critical Care Assessment Exams

Assignments Due NLT
1. HESI/Saunders Online Focus on Mental Health Exam: Located under “Crossing the Finish Line” Module
2. Discussion question

Dr. Blademan, who you recently paged to report an abnormal laboratory result, approaches you, shouting angrily, “Why did you page me with that report? You know I make rounds in the evenings, and I would have been here soon.” You attempt to explain that the patient was symptomatic, that the abnormal laboratory result was high enough to be labeled a critical value, and that you believe prompt reporting was in the best interest of the patient. You also are thinking about the fact that “in the evening” could be anytime from 6:00PM to 11:00PM for this particular physician. Nothing you say in defense of your decision appeases the physician, who has digressed to general statements about the lack of consideration that nurses give doctors. What do you perceive to be the true message here? How will you respond to the physician’s comments? What techniques can you use to prevent the situation from escalating? If the situation continues to escalate, what would be your next course of action?

You are talking with Mr. Phillips about his new diagnosis of diabetes mellitus. You state, “Mr. Phillips, I noticed that the diabetic educator was in to talk with you this morning. What did you talk about?” His response is, “Oh, she told me about the special diet . . . you know . . . no sugar and that stuff. But I’m going to tell you now that I drink sodas, and nobody is going to take those away from me!” You comment, “Have you tried diet sodas?” to which he responds, “Are you kidding? That stuff tastes like crank case oil! I’m not using any of that sweetener stuff!” The conversation continues along the same lines, indicating a lack of commitment to healthy self-regulation on his part. What will you do? It appears that Mr. Phillips is resistant to the restrictions
of his new diagnosis. What additional resources can you use to help interpret his health beliefs? What techniques will you use to clarify the issues he must address?

Analyze the delegation criteria contained in your state’s nursing practice act. Explain how delegation practices at a selected clinical site are influenced by delegation criteria included in the nursing practice act.

Consider this scenario and answer the questions that follow. One registered nurse is assigned to care for six medical-surgical patients, with the help of one nursing assistant. Tasks that must be performed include giving a bed bath, setting up a tray for eating, feeding a patient, inserting a Foley catheter, providing a bolus PEG feeding, administering intravenous (IV) antibiotics, getting a patient out of bed and into a chair, teaching a family about dressing changes, performing Accucheks on a patient every 4 hours with sliding scale insulin, and providing frequent skin care and linen changes for a patient who is incontinent of stool.

A. Which tasks can be done by the nursing assistant?
B. What additional information does the RN need to make the best delegation decision?
C. When the RN delegates the tasks, who is accountable for the nursing care outcomes?
D. Once the RN delegates the tasks, does the RN need to follow up? If so, why and how?

Consider this scenario and answer the questions that follow. Today, you are the charge nurse, and part of your responsibility is to make patient assignments. A total of 18 patients are present on the unit, as are two RNs, one LPN, and three nursing assistants. You make the following assignments: one charge nurse will give the IV medications for the LPN and will help as needed; two RNs will each take six patients; one LPN will take six patients; and three nursing assistants will each take six patients.

A. Should the nursing assistants be assigned to patients, or should they be assigned to a nurse? Why?
B. When assigning patients to the RNs, should you consider the patient’s physiologic status and complexity of care? Give examples of patients with more unstable physiologic status or complex care requirements.
C. When making assignments, how should you consider infection control issues? Would you assign one nurse an infectious patient and an immunosuppressed patient?
D. When assigning patients to the LPN, what would the RN consider regarding the level of supervision required by the LPN? Explain

Describe the nursing care delivery models you have observed in the clinical setting. List the advantages and disadvantages of each, and note the delivery models you liked best and why

Your nurse manager has asked you to serve on a committee to review the nursing care delivery system currently in place on the nursing unit and to make recommendations to improve the current system. What factors should you consider when evaluating the current system and reviewing new systems?

**Hypothetical Question**

Nonverbal communication, or body language, sends positive and negative signals. What message are you sending if:

Someone is presenting a new idea and you are frowning?
You are dressed casually at an important meeting?
You are looking at other things in the room when someone is speaking to you?
You keep moving closer to a person who is backing away from you?
During a disagreement, you start to speak loudly?

Week 8 Content

NCLEX Review Areas to be Covered Outside of Class

Assigned Readings:
1. HESI/Saunders Online Focus on Delegating/Prioritizing/Triage/Disaster Exam: Located under “Crossing the Finish Line” Module. Assignment to be completed prior to presenting for comprehensive assessment exam
2. HESI/Saunders Online Live Review Videos: Triage; Delegation and Prioritization
3. Cherry 21-23

Objectives

Cherry: The student will:

1. Outline key issues surrounding staffing for a health care organization.
2. Evaluate lines of responsibility and accountability associated with various types of nursing care delivery models.
3. Analyze the advantages and disadvantages of nursing care delivery models in relation to patient care in various settings.
4. Integrate essential components of the critical pathway model into patient care planning.
5. Differentiate among several nursing care delivery models by evaluating their defining characteristics.
6. Explain the purpose and components of nursing case management.
7. Summarize criteria to be considered in developing future models of nursing care delivery.
8. Apply principles of QM to the role of the professional nurse.
9. Analyze the basis for the increasing emphasis on health care quality and medical errors.
10. Analyze the role of health care regulatory agencies and how they have embodied the principles of QM.
11. Discuss the role process improvement can play in ensuring patient safety and improving quality in the health care system.
12. Describe the tools and skills necessary for successful QM activities.
13. Discuss the professional nurse’s role in promoting patient safety.
14. Describe driving forces for quality and safety competency in nursing.
15. Define the six core quality competencies integrated into nursing curricula to prepare nurses for working in systems focused on quality.
16. Base nursing care delivery on the knowledge, skills, and attitudes defining the six core competencies.
17. Evaluate nurses’ roles in improving health care quality.

The following Essentials of Baccalaureate Nursing are covered in this learning module:

Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety
Essential III: Scholarship for Evidence-Based Practice
Essential IV: Information Management and Application of Patient Care Technology
Essential V: Healthcare Policy, Finance, and Regulatory Environments
Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
Class Activity for the Week – Senior Exit Survey/Comprehensive Exam

Assignments Due NLT

Discussion Questions

Describe the nursing care delivery models you have observed in the clinical setting. List the advantages and disadvantages of each, and note the delivery models you liked best and why.

Review a clinical pathway from a selected clinical setting. How is patient care based on the clinical pathway implemented in the facility? How is the patient’s progress through the clinical pathway communicated to the entire health care team and documented in the chart? What action does the nurse take if the patient “falls off” the pathway?

Week 9 Content

NCLEX Review Areas to be Covered Outside of Class

Assigned Readings:
1. Cherry 24-26

Objectives

Cherry: The student will:

1. Compare and contrast the phases of reality shock with phases of transition shock.
2. Differentiate between the novice nurse and the expert professional nurse.
3. Design strategies to ease the transition from novice to professional nurse.
4. Differentiate between compassion fatigue and burnout.
5. Make the transition from novice to professional nurse.
6. Understand the unique demands of complex health care environments in today’s fast-paced world of high technology and communication transfer and its effects on personal time management.
7. Describe the relationship between personal performance and time management.
8. Articulate one’s own time management preferences and style.
9. Create an action plan to manage procrastination, distraction, and anxiety.
10. Describe how individual learning and communication styles interact with the ability to manage time effectively.
11. Adopt into daily practice a time management strategy plan unique to one’s own style to ensure high-level personal performance in work and home life.
12. Evaluate the effect of the current health care environment on the future role of nurses.
13. Analyze the influence of current demographic characteristics of RNs in the United States on contemporary nursing roles.
14. Differentiate among various innovative nursing practice roles today.
15. Differentiate between the roles of advanced practice nurses and other RNs in various settings.
16. Describe the role of the CNL.

The following Essentials of Baccalaureate Nursing are covered in this learning module:

Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety
Class Activity for the Week – Assessment Exams

Assignments Due NLT

Discussion Questions

What are the roles of the professional nurse as seen by the student compared with those as seen by the experienced nurse?

What type of nursing environment eases the transition from student to professional nurse?

What important factors can affect the transition from novice to experienced nurse?

Compare and contrast advanced practice roles such as clinical nurse specialist, nurse practitioner, nurse midwife, and nurse anesthetist. How would you explain the differences to a layperson?

Analyze the influence of current trends in health care on the development of new nursing roles.

Evaluate the impact of health care trends on traditional nursing roles.

Develop your own personalized time management plan by completing the following steps:

a. Write a one-paragraph statement regarding your philosophy of time and energy management.

b. At the end of a day, make a record of how you spent your day. Analyze the record to determine what personal objectives were attacked or accomplished and which activities could be classified as time wasters or procrastination efforts.

c. Analyze each hour of the day that was recorded to determine whether it illustrates the best use of your time.

d. For 1 day, keep a record of the number and type of interruptions you experience. Analyze the record and develop a plan to decrease that number by at least half.

e. Identify your three favorite time wasters and devise a plan for reducing them each day until they finally are eliminated.

f. Identify your three favorite forms of procrastination; then create an action plan that includes strategies designed to eliminate them.

Clinical Questions

List five of the patients on your unit and provide their ages, diagnoses, and specific therapeutic interventions. Prioritize patient care activities in terms of how you would plan to deliver their care.

Evaluate the patient care assignment that you had today and replan how you would deliver care to be able to accomplish more within the same time frame

Week 10 Content
NCLEX Review Areas to be Covered Outside of Class

Assigned Readings:
Cherry: Chapters 27-28

Objectives

Cherry: The student will:

1. Use the interview process to evaluate potential employment opportunities.
2. Prepare an effective résumé and nursing portfolio.
3. Compare and contrast various professional nursing employment opportunities.
4. Summarize the employment process.
5. Explain the purpose of the NCLEX-RN® examination.
7. Create a personal plan for preparing for the NCLEX-RN® examination.
8. Analyze the relationship between the nursing process and client needs as they relate to NCLEX-RN® test items.
9. Compare various review courses designed to aid in review for the NCLEX-RN® examination.

The following Essentials of Baccalaureate Nursing are covered in this learning module:

Essential V: Health Care Policy, Finance, and Regulatory Environments
Essential VIII: Professionalism and Professional Values

Class Activity for the Week – Assessment Exams

Assignments Due NLT

Discussion Questions

In the interest of creating the right match for yourself with your first career choice as a graduate nurse, what personal qualities and professional strengths and weaknesses will you consider?

How would you evaluate the overall work environment of the agency you have selected for employment, other than by asking direct questions?

Consider the responsibility of nurse recruiters to create an environment of safe care.
  a. How thorough should preemployment examinations be?
  b. In what positions should a new graduate be allowed to function, and why?
  c. Describe the steps that would be included in a preemployment examination.

Develop a realistic plan for reviewing for the National Council Licensure Examination for Registered Nurses (NCLEX-RN®). Identify what you think is important in developing your plan and include the following:
  a. Assessment of areas of strengths and weaknesses (e.g., if your school uses an exit examination or diagnostic tool, use that feedback to design an individualized program of study)
  b. Time frame for review
  c. Methods of review
  d. Specific plans for each review session
  e. Resources
f. Barriers to effective review

\[\text{g. Realistic solutions to barriers}\]

Week 11 Content

Class Activity for the Week – Comprehensive Exit Exam 1

Week 12 Content

NCLEX Review Areas to be Covered Outside of Class

Assigned Readings:
HESI/Saunders Online Review Module

Objectives

Cherry:

The following Essentials of Baccalaureate Nursing are covered in this learning module:

Class Activity for the Week – Four Day Kaplan Online Review

Week 13 Content

Class Activity for the Week – HESI Assessment Exams

Week 14 Content

Class Activity for the Week – Comprehensive Exit Exam 2
Joyce Crider Anderson, DNP, cFNP

Education

BA
1970 Case Western Reserve University, Cleveland, Ohio

MAT
1986 Eastern Michigan University Ypsilanti, Michigan

BSN
1995 Andrews University, Berrien Springs, Michigan

DNP (FNP)
1997 Rush University, Chicago, Illinois Community Health Nursing, Family Nurse Practitioner

Credentialing
CFNP (ANCC), RN, RRT,

Research
Church-based health care delivery
Cooperative learning as primary method of instruction for nursing students

Publications:
Respiratory Assessment in Respiratory Therapy, Fink, James 2001

Work experience

Clinical nurse
12 years full/part time experience in medical-surgical, telemetry nursing, step-down, maternal-child, clinical research

Hillside Hospital, Pulaski, Tennessee
(2008-2010) ICU nurse full time

Johns Hopkins University Medical Center (2002-2004)
clinical research/medical-surgical-telemetry nurse
Peds-mother baby (part time)

Nurse clinician, med-surg nurse; respiratory therapist

Labor and delivery; post partum and newborn nursery – full time.

PRN positions –
Medical surgical, telemetry, intermediate care nursing
Lee Hospital, Dowagiac, Michigan
South Haven Community Hospital, South Haven, Michigan
Woodstock Nursing Home, Niles, Michigan

Director of Nursing
Martin Methodist College, Pulaski, TN 2012-2016 – Chaired BSN program with overseer of 7 FTE faculty
members, set up nurse managed clinic; obtained 300,000 in grant funding for clinic, Division of Nursing

**Sojourner-Douglass College**, Baltimore, Md. 2006-2008

Set up, implemented Practical Nursing/BSN program; wrote curriculum for entire program; set model for distribution to off-site campuses; committee chair (curriculum); monitored for State review of program; supervised self-report for review of program; BON liaison, set up/managed budget; received approval from St. Board of Nursing for program after initial 1 yr. review; have written proposal (pending approval of Md BON, MHREC) to transition program to 3 yr (3 semester/yr) LPN-BSN program. Set up curriculum and program evaluation committees/standards for program; supervised 22 employees/faculty.

Nurse Consultant/Director of Nursing
Feb 2005 - Jan 2007

Consulting with/setting up Practical Nursing programs in the Baltimore/DC area. Assisting PN schools to increase pass scores on NCLEX exam.

Nursing instructor 14 years teaching in college nursing - pathophysiology, medical-surgical nursing, community health nursing, pharmacology, physical/health assessment-graduate/undergraduate programs.

Chaired curriculum committees at 3 schools at both graduate and undergraduate level. Wrote curriculum and program evaluation standards for FNP program at University of Michigan, Flint.

Participated in 4 self-studies for accreditation as nursing instructor – Rush (Chicago), Western Michigan, University of Michigan, Howard University). Assisted with writing self report at all 4 institutions

**Howard University 2002-2005**

Undergraduate/graduate - pathophysiology, health assessment, community health, leadership; chaired curriculum; served on evaluation and learning resource committees; course coordinator for pathophysiology, Community Health Nursing; set up Clinical Collaborative – partnership with agencies for students to have complete nursing clinical educational experience in a 1:1 preceptorship with experienced BSN nurse.
Taught Pathophysiology and Health Assessment in graduate FNP program

**University of Michigan, Flint. 1999-2000**
Undergraduate/graduate instruction - Community Health Nursing; Adult Primary Care (FNP program); chaired graduate program committee; served on curriculum committee

**Western Michigan University 2000-2002**
Undergraduate - pharmacology, pathophysiology, physical assessment, medical-surgical nursing, integrated with community health nursing; served on curriculum and faculty organization committees

**Rush University, Chicago, Illinois. 1997-1999.**
Practitioner/teacher in undergraduate and graduate program (Physical Assessment)- community health and physical assessment; served on faculty governance and curriculum committees

Family Nurse Practitioner 4 years (1997-2001) direct practitioner/teacher in nurse practitioner programs

**Chicago Family Health**
Provided care in ambulatory care clinic, homeless shelters in city of Chicago through contracted hours from Rush University

**Chicago Lighthouse for the Blind**
Provided on-site care for developmentally disabled/delayed children at this school setting through contracted hours from Rush University

Set up, managed independent nurse-managed clinic at **Olive Branch Mission** in Flint, Michigan to provide care to under and uninsured.

1.3 years (2015-2016)

**Oakwood University Church Health Service**
Set up and provided care for this mission outreach ambulatory care clinic. Saw primarily children and older adults for care. Children- primarily physical and wellness exams. Elderly – in home and onsite treatment of chronic conditions
Elem/HS Instructor 6 years In public school in Michigan, Baptist school in Michigan, Lester Christian Academy - Tennessee

Telephone references

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To: Maryland Board of Nursing

From: Patricia Kennedy, Director of Education

Re: Prince George’s Community College, Department of Nursing Request for Approval of Contributing Factors and Action Plans for Unsatisfactory Licensure Scores

Date: February 22, 2017

Contributing factors for the unsatisfactory NCLEX-RN® pass rates are presented for fiscal years 2014-2016. Six (6) contributing factors are aligned with their related action plans.
Prince George’s Community College  
Division of Health Sciences  
Department of Nursing  

**Contributing Factors and Action Plan Report January, 2017**

- NCLEX-RN Performance July 1, 2014 – June 30, 2015  

1. **Contributing Factor #1:**
   
   Admission criterion (GPA alone) is not a good indicator of student success in the Nursing Program. Despite high GPAs, some students entering the nursing program exhibit unsatisfactory English language, reading, math, and comprehension skills.

   **Action Plan:**
   
   Following PGCC Board of Trustees approval, the use of ATI TEAS (Test of Essential Academic Skills) admission testing started with the incoming Spring 2016 class. Admission criteria now includes ranking of applicants by GPA (2.5 or above) and TEAS (with preparedness category score of Basic or above). Students admitted with TEAS are now entering the third semester of the program with a December 2017 graduation date. Data collection is underway looking at success of students scoring at TEAS Basic Level versus TEAS Proficient or above, and surveying other Maryland nursing programs to determine the minimum TEAS score required. The incoming January 2017 class of the generic RN program is smaller due to current admission requirements including mandatory attendance at a two day orientation program. In addition, beginning Fall 2014, all science courses must have been completed within 10 years of petitioning to the nursing program.

2. **Contributing Factor #2:**
   
   All students purchase Kaplan support and testing products and Kaplan is used in all courses, however, Kaplan tests have not been considered part of the course grade and many students do not use Kaplan or take it seriously.

   **Action Plan:**
   
   All students are required to purchase Kaplan resources (focus tests, case studies, integrated tests etc.) and use them in every course. Beginning spring 2017 students will take Kaplan Integrated Tests in every course and results will count toward the course grade (5% of course grade in every course). In addition, Kaplan focus tests and case studies have been embedded into all course syllabi as required assignments.

3. **Contributing Factor #3:**
   
   NCLEX Review Course occurs too late after graduation for faculty to mandate attendance, and graduates wait too long after graduation to take NCLEX.

   **Action Plan:**
   
   Graduates are required to take the NCLEX-RN Live Review Course, which is provided on-campus immediately following the end of the semester. For the Spring 2017 graduating class, the Kaplan review will be provided in the week prior to Commencement. Graduates are expected to take NCLEX as soon as possible upon receipt of their ATT (Authorization to Test) or within 3 months following graduation.
The nursing faculty have requested a full-time faculty position, a nursing retention specialist who will develop, manage, and track all nursing program admission, progression, graduation, NCLEX, and remediation initiatives and procedures. The proposed start date for this 12-month position is July 1, 2017. Students will be required to pass the Kaplan Predictor Integrated Exam (or equivalent) in order to be authorized to take NCLEX, with support and remediation provided for those who need it.

4. **Contributing Factor #4:**
There is no consistent mechanism to ensure continued skill competency throughout the program, particularly in the skills lab and simulation lab. The curriculum focuses on the didactic grade with lab and clinical assessed as pass/fail. A number of students do not put sufficient effort into lab and/or clinical and often come unprepared (i.e. no lab coat, textbook, etc.).

**Action Plan:**
In Fall 2014 all clinical nursing courses identified four essential lab skills that students must pass in order to pass the course. Using a five-level rubric template developed in collaboration with the college Academic Affairs Assessment Committee (AAAC), skills lab rubrics were developed by the faculty to assess student skill proficiency. In Spring 2015 all clinical nursing courses began using these rubrics for student skill check-off. Student skills are checked off during scheduled lab time. Open labs are scheduled throughout the week to provide faculty-guided skill practice time. In Spring 2017, scores obtained from these four rubrics will combine to provide 10% of the students’ course grade. Students who demonstrate unsatisfactory lab skills will be required to remediate during Open Labs.

In NUR 1030 (OB) and NUR2010 (Peds), simulation is now being used as an adjunct to clinical hours. A simulation based clinical evaluation tool has been implemented to assess student performance. All nursing courses utilize scheduled NLN-based simulation scenarios in skills labs. Debriefing tools and tools to evaluate student performance in simulation have been developed. “Open” sim labs are also available for student practice. The Nursing Lab coordinator and the Nursing Lab and Simulation Lab Coordinator conduct open skills labs and sim labs in the Fall, Spring, and Summer semesters.

5. **Contributing Factor #5:**
Guidelines, procedures, standards, and expectations for program orientation, progression, grading, remediation, attendance, and integrity are provided and described in the Student Manual. Students acknowledge these in writing but there are not always consequences for non-compliance. These procedures are in place on order to help students be successful.

**Action Plan:**
Attendance is mandatory for the orientation to the generic RN or RN to LPN programs. Students who did not attend both days of the January 2017 orientation were not permitted to enter the program this semester. Attendance is required for all class, lab, and clinical sessions. The attendance policy delineated in the Student Manual will be strictly enforced and students with excessive absences will receive an F for the course. Two tardies greater than 15 minutes in lab or clinical will count as an absence. The attendance policy is being revised to include lowering the course grade automatically for attendance infractions.
In Fall 2015, with support from college administration, the nursing program instituted a new grading scale throughout the program as follows:

- **A** = 94 – 100%
- **B** = 87 – 93%
- **C** = 80 – 86%
- **D** = 73 – 79% (course failure)
- **F** = 72% or below (course failure)

Course grades are determined through scores on exams, lab skills, and Kaplan exams. Student grades and course and program completion rates are tracked and analyzed.

Nursing Program “Student Success Contracts” have been developed by faculty and instituted for all student in all nursing courses beginning Spring 2017. All students sign this contract and they are required to take the following actions during the first five weeks of the semester:

- Meet with their course instructor during office hours
- Contact their faculty mentor
- Attend study skills and test-taking skills workshops presented by the Health Sciences Retention/Success Coach. These workshops will be conducted by the Retention/Success Coach and will be embedded in every course starting Spring 2017.

In addition, students who are unsuccessful on any course exam will be required to do faculty prescribed mandatory remediation such as tutoring, Kaplan, resources, software, skills lab, etc. Any student who does not comply with the required remediation will lose 5% from the next course exam.

6. **Contributing Factor #6:**

The nursing curriculum may not be equally weighted with the content emphasized in the current NCLEX Test Plan.

**Action Plan:**

Since PGCC wrote the first “Contributing Factors and Action Plan Report” in April 2014, an extensive curriculum analysis with gap analysis has been conducted by the faculty. QSEN competencies for pre-licensure nursing programs were added and aligned to the NCLEX Test Plan Client Needs Categories and the program outcomes, course outcomes, and clinical outcomes. During the site visit conducted by ACEN and MBON in October 2016, the Curriculum Standard (Standard 4) was found to be in full compliance with several strengths identified, including mention of the extensive curriculum analysis with identification of clear alignments and linkages. The Nursing Curriculum Committee is continuing to review the curriculum to ensure there are consistent connections across courses to ensure students are better prepared for NCLEX.

The complete ACEN Self Study Report (Fall, 2016) analyzing all aspects of the Prince George’s Community College Nursing Program is available for review.
Response to request for Ms. Jackso-McCoy's contact info

Rena G Boss-Victoria <rbossvictoria@bowiestate.edu>  Thu, Feb 2, 2017 at 8:42 AM
To: Keva Jackson-McCoy -DHMH- <keva.jackson-mccoy@maryland.gov>, Patricia Kennedy -DHMH- <patricia.kennedy@maryland.gov>, Elliott Parris <EParris@bowiestate.edu>

Good morning Ms. McCoy,

The purpose of this communication is to officially notify the Maryland State Board of Nursing that the search for the required Bowie State Nursing B.S. Degree Program Consultant continues. During the past month, two qualified consultants were contacted and presented the option for establishing a working contractual agreement with the Bowie State University Department of Nursing for services. However, the first potential nursing program consultant declined due to her employment schedule and the second program consultant reported unavailability due to time constraints. The effort continues with an emphasis placed on identifying a consultant in the region that can be presented to the board for approval. The plan is to confirm a qualified program consultant as soon as possible.

In addition, I received the communication from you in December 2016 that indicated that I should expect a written response to the request for a meeting to be scheduled for the Chair and the Dean for the College of Professional Studies to discuss the described concerns, specifically related to Maryland State Board of Nursing official notification letter dated November 17, 2016 and the related attachment. The College of Professional Studies in which the Department of Nursing is organizationally located has a new Interim Dean, Dr. Elliott Parris, as of January 4, 2017. I have not received the written response and remain hopeful that we will be able to meet with you to seek clarification and resolution to the submitted described concerns.

I want to thank you for your consideration. Please feel free to contact me directly via e-mail and or cellular @ 443-415-2208 for any questions or concerns related to this communication.

Respectfully and Sincerely,
Rena Boss-Victoria

Rena G. Boss-Victoria, DrPH, MPH, MS, RN, APN-CNS
Chair and Associate Professor
Department of Nursing
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rbossvictoria@bowiestate.edu

From: Keva Jackson-McCoy -DHMH- [keva.jackson-mccoy@maryland.gov]
Sent: Wednesday, February 01, 2017 4:29 PM
To: Patricia Kennedy -DHMH-
Cc: Rena G Boss-Victoria
Subject: Re: Response to request for Ms. Jackso-McCoy's contact info
MEMORANDUM

FROM: Shirley A. Devaris, RN, JD  
Director, Policy Analysis and Legislation  

TO: The Board  

DATE: February 22, 2107  

IN RE: Legislative Status Report

Bills that effect BON or nursing practice

<table>
<thead>
<tr>
<th>Bill Number</th>
<th>Title</th>
<th>Summary</th>
<th>Status</th>
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</thead>
<tbody>
<tr>
<td>HB 668 Del. Krebs</td>
<td>Health Occupations Boards - Regulations and Policy Interpretations - Notice and Public Meeting Requirements</td>
<td>Requires health Occupation Boards to send proposed regulations via e-mail or US mail to every licensee and certificate holder before they are sent to AELR, allow for a comment period and queries to the Board, and require a stakeholder meeting 30 days after the proposed regulations are sent to all licensees and certificate holders.</td>
<td>Hearing 2/22 – House Health and Government Operations committee</td>
</tr>
<tr>
<td>HB 1471 Dl. Krebs</td>
<td>Business Occupations and Professions and Health Occupations – Regulation of Occupational Boards</td>
<td>Establishes OFFICE OF SUPERVISION OF OCCUPATIONAL BOARDS – complete oversight of everything a health occupation board does with stated intent to avoid anti-competitive practice, impairment of small business, etc. Will allow a legislator to ask for a review of any order.</td>
<td>No hearing date</td>
</tr>
<tr>
<td>Bill Number</td>
<td>Title</td>
<td>Description</td>
<td>Hearing Dates</td>
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<tr>
<td>HB 1474</td>
<td>Office of Health Occupations</td>
<td>Establishes Office of health Occupations under a Director. Almost identical to last year’s bill, SB 1083.</td>
<td>No hearing date</td>
</tr>
<tr>
<td>SB 517/HB 628</td>
<td>Secretaries of Principal Departments – Supervision and Review of Decisions and Actions by Units within Departments</td>
<td>Bill was result of last summer’s work group to try to find a solution for oversight that meets the test of NC Dental case. Provides for limited review by Office of Administrative Hearings with authority to overturn a decision or remand to Board. Amendments offered by Board of Physicians meet most of BON concerns.</td>
<td>Heard on 1/15/2017 in House and Senate. Work group scheduled for next week.</td>
</tr>
</tbody>
</table>
MEMORANDUM

FROM: Shirley A. Devaris RN, JD  
   Director, Policy Analysis and Legislation  
TO: The Board  
DATE: February 22, 2017  
IN RE: Work group for developing CEU regulations for House Bill 253

House Bill 253 - State Board of Nursing - Registered Nurses and Licensed Practical Nurses - Renewal of Licenses - Continuing Education Units will authorize the Board to accept approved Continuing Education Units (CEUs) for renewal instead of active practice hours. To enable the board to determine what will be necessary for enabling on-line renewals we need to develop the requirements as soon as possible. For that reason we are requesting that a committee be appointed to work on proposed requirements. Thank you.
At its meeting of February 10, 2017, the Direct-Entry Midwifery Advisory Committee reviewed the following applications for licensure:

Elizabeth J. O’Shea
Elizabeth Reiner

Both applicants meet the minimal requirements for licensure as Direct-Entry Midwives in Maryland. The Committee requests Board of Nursing approval. Copies of the applications are available for review.