# California State University, Chico Chico, California

# SCHOOL OF NURSING SELF STUDY

Submitted to the Board of Registered Nursing

February 2000

# NURSING PROGRAM APPROVAL APPLICATION & COVER DATA SHEET

EDP-P-09 (Rev. 9/99)

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Name of Nursing Program:     California State University, Chico	Type of Program Offered:     Basic Baccalaureate		
School of Nursing Holt Hall - Room 369 Chico, CA 95929-0200			
Manuel A. Esteban, Ph.D.	5) Director of Nursing Program: Sherry D. Fox, Ph.D., R.N.		
Person to Whom Director is Directly Responsible:  Roger Lederer, Ph.D. Dean, College of Natural Sciences	7) Name of Contact Person and Post- secondary Institution with which the Nursing Program is Affiliated (FOR PROGRAMS NOT SPONSORED BY A POSTSECONDARY INSTITUTION):		
B) Date of Last Approval Visit by the Board of Registered Nursing:  March 6-7, 1995	9) Date of Last Approval of Curriculum: September, 1994		
0) Number of Graduates to Date: 11) Date of First Graduation:  2,457  June, 1956			
12) Number Currently Enrolled in Each Cla 0- First Year  _30 Second Year			

13) Signature of Administrator of Controlling Institution:   Amuel A. Salban	14) Title: President
15) Signature of R.N. Director of Program in Nursing:	16) Title: Director

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#### I. ADMINISTRATION

#### SECTION 1424(a)

There shall be a written statement of philosophy and objectives which serve as a basis for curriculum structure. Such statement shall take into consideration the individual differences of students, including their cultural and ethnic background, learning styles, goals, and support systems. It shall also take into consideration concepts of nursing and man in terms of nursing activities, the environment, the health-illness continuum, and relevant knowledge from related disciplines.

The curriculum foundation for the CSU, Chico School of Nursing's baccalaureate nursing program is based on the mission statement, philosophy, organizing framework, program goals, program objectives, and terminal objectives as developed and approved by the faculty of the School of Nursing. These statements take into consideration individual differences in students including learning/pace and cultural/ethnic uniqueness within the context of the nursing paradigm. The curriculum foundation begins with the <a href="Mission Statement">Mission Statement</a> of the CSU, Chico, School of Nursing which states:

The purpose of the School of Nursing is to offer baccalaureate and master's educational programs in nursing. The baccalaureate program prepares graduates as generalists in clinical nursing and as leaders and managers for a variety of health care settings. Master's students are prepared with a focus in adult health and in nursing education. Graduates of both programs are prepared to practice in rural as well as urban areas. These programs provide a stimulus and foundation for progressing to the next level of academic preparation.

The next portion of the foundation of the nursing curriculum is the <u>Philosophy</u> which connects the mission statement with the beliefs and values of the faculty.

The philosophy for the CSU, Chico School of Nursing, identifies the underlying beliefs and values regarding how this mission can be met, describing beliefs about the

components of nursing's meta-paradigm, persons, health, nursing, environment and nursing education.

#### Persons:

Person includes the assumption that: persons are unique, dynamic, complex, and they are interconnected with others and the environment. As products of their culture, persons are at the center of their own experiences and create meaning for themselves.

#### Health:

Health consists of evolving life experiences of a person which implies continuous adjustment to stressors in the internal and external environments through optimum use of one's resources to move toward achievement of maximum potential for daily living (Adapted from King, 1986).

#### Nursing:

Nursing is a caring, dynamic health care discipline strongly committed to nurseclient relationships. Nursing is goal-directed to support and empower clients to achieve desired health and wellness outcomes. Professional nurses assist individuals, families and community groups to promote, restore, and rehabilitate their health and well-being throughout the life span.

As an art and applied science, nursing promotes a holistic view of persons and requires a substantial knowledge base in the sciences and humanities. Nursing requires critical and creative thinking for independent and collaborative decision-making, and clinical skills.

Nurses establish a caring presence which can deeply impact the well-being of the client. This caring presence is enacted through advocacy, nursing therapeutics and leadership/management roles.

Professional nurses are accountable for nursing practice as set forth by evolving legal, ethical, and professional standards. The profession expands and refines nursing knowledge through practice, research, and theory development.

#### Environment:

Florence Nightingale viewed environment as central to the practice of professional nursing. Viewed broadly, environment includes all contextual/cultural aspects in which persons and communities live. The faculty believe that environment is a complex integration of physical, political, social, and cultural factors. Because health care is strongly influenced by environmental forces, nurses must be cognizant of the ever changing environments in which health care is delivered. Faculty believe health care should be accessible to all. Nurses must actively participate as advocates for health care access and for the establishment and enforcement of quality environmental standards and conditions.

#### Nursing Education:

The faculty believe that baccalaureate and graduate nursing education is a learning-centered, collaborative exchange between teacher and student which results in a change in knowledge, values, and attitudes. The teaching-learning process facilitates the development of critical thinking, communication skills, leadership qualities and the commitment to lifelong personal and professional growth.

Learning is a continuous process that includes the cognitive, affective, and psychomotor domains. The learner has a personal responsibility requiring effort and accountability. Teaching is a complex process characterized by planning, implementing and evaluating. Faculty endeavor to provide a supportive environment that considers individual student goals, uniqueness, culture/ethnicity, learning style, and learning pace.

Because nursing is an applied discipline, teaching also takes place in a variety of settings which represent the diversity of professional nursing roles. Each of the clinical settings used in the teaching-learning process provides the faculty with the opportunity to incorporate the constant changes that are occurring within science, health care, and technology into the current clinical experiences of students. Important also to the educational process is collaboration within the profession and the exchange between nursing education and nursing service which allows students to interact with practicing professionals.

The <u>Organizing Framework</u> for the CSU, Chico, School of Nursing reflects the philosophy and the meta-paradigm of nursing. The organizing framework is depicted pictorially in Appendix A. The four elements of the meta-paradigm of nursing are represented with the person as seen as central and interactive with the environment and health. Nursing is interwined with and links all three components.

#### Person

Person includes individuals, families and communities. Person implies a genetic endowment that sets the stage for subsequent growth, development and health potential, is strongly influenced by the environment and provides the baseline or foundation for health. Communication among and between persons, which influences development, health choices, decisions and meanings, is central to human connectedness. Person also

includes development which is a process that continues throughout the lifespan and encompasses the physical, emotional, spiritual, social, and cultural.

#### Environment

Environment provides the context in which person and health connect.

Environment includes: physical, political, economic, social, and cultural realities that must be considered in planning the delivery of comprehensive health care for individuals, families and communities.

#### Nursing

Nursing is composed of knowledge and caring processes which foster the health of persons in their environment. This knowledge base is derived from nursing theory and research, as well as the basic and applied sciences and humanities. The nurse applies knowledge through caring and the processes of: nursing therapeutics, critical thinking, decision making, teaching, advocacy, leadership/management and research.

Nurses practice in accordance with evolving legal, ethical and professional standards.

#### Health

Health is persons' actualization of inherent and acquired human potential and is influenced by life experiences, environment, resources and stressors. Health includes a sense of well-being, satisfying relationships and behavioral adjustments necessary to maintain structural integrity. Future health is determined by current decisions and behaviors as well as the impact of the environment.

Reflecting the mission statement, philosophy and organizing framework are the <a href="Program Goals">Program Goals</a> and the <a href="Program Objectives">Program Goals</a> for the CSU, Chico, School of Nursing are to:

- Present a dynamic, humanistic curriculum that will lead to the integration of knowledge, skills and attitudes beneficial to the individual graduate and the society in which he/she will function now and in the future.
- Implement a nursing program which prepares the graduate to meet the professional and societal demands placed on him/her.
- Provide an environment that is conducive to positive student/faculty
  relationships and provide opportunities for intellectual stimulation of students
  and faculty. This positive environment will also increase understanding and
  mutually beneficial relations between the School of Nursing and its affiliations.
- Perform continuing process and outcome evaluation of the nursing curriculum.
- Direct school resources to the support and facilitation of high quality nursing education, including teaching, professional and scholarly activities, and community services.

The Program Objectives for the CSU, Chico, School of Nursing elaborate on how the Program Goals will be met. These program objectives include:

- Provide knowledge derived from the sciences and the humanities upon which professional nursing practice is based.
- Enable students to synthesize knowledge through application of the nursing process.
- Provide learning experiences for students to use the nursing process with persons of all ages in a variety of care settings.
- Assist students to become knowledgeable consumers of current research, to apply research findings to practice, and as master's students, to analyze and contribute to research.
- Provide learning experiences which enable baccalaureate students to acquire the skills needed to perform as generalists in clinical nursing, and as leaders and managers; and enable master's students to perform as leaders in adult health and in nursing education.
- Foster the legal, ethical, and political practice of nursing.

- Promote collaboration between students and faculty throughout the teaching/learning process and in program implementation.
- 8. Promote collaboration between the School of Nursing and its affiliates.
- Foster the concept of learning as a lifelong process.
- 10. Provide the foundation for ongoing graduate study.

The final component of the curriculum foundation is the <u>Terminal Objectives for</u> the <u>Baccalaureate Program</u>. These outcomes reflect the program goals and objectives, the organizing framework, the philosophy, and the mission statement in a measurable format. The terminal objectives state that the baccalaureate graduate will:

- Demonstrate critical thinking for effective problem solving and independent decision-making.
- Use scientific knowledge, research, and nursing theory as the basis for professional nursing practice.
- Apply knowledge of the changing health care delivery system in fostering the health of persons in their environment.
- Empower clients by engaging in caring relationships, assuming appropriate nursing roles, and facilitating access to available resources.
- Demonstrate effective written and verbal communication skills with clients, the health care team, interdisciplinary colleagues, and the public.
- Apply the nursing process and professional standards of care in nursing practice.
- Demonstrate professional leadership/management capabilities needed to guide nursing practice.
- Provide leadership in the demonstration of respect for diverse cultural, spiritual and religious practices related to health care.

- Develop self confidence in the baccalaureate nursing role embracing change to advance quality professional nursing.
- Promote respect for nurses' needs for personal self-care and life long learning for professional growth.
- 11. Participate in ongoing evaluation of the nursing program in preparing graduates for the nursing role.

#### I. ADMINISTRATION

#### SECTION 1424(b)

The policies and procedures by which the program is administered shall be in writing, shall reflect the philosophy and objectives of the program, and shall be available to all students.

The general philosophy and objectives of the School of Nursing are reflected in the structure of all policies. The School of Nursing, as a part of CSU, Chico functions in accordance with all general University policies. In some instances, because of the special requirements of a professional program, the School of Nursing has implemented requirements which are more stringent than the University requirements. A minimum cumulative GPA of 2.5 is required for admission to the nursing major, and a cumulative Nursing GPA of 2.3 is required for progression in the major, as compared to the university standard of 2.0. Grades less than "C-" are not acceptable in any course in the Nursing major, whereas a "D" grade is considered passing by general University criteria. Policies for progression, retention, and for clinical safety reflect the overall goals of the School of Nursing to prepare a graduate who can function safely and professionally in meeting the health care needs of society. These policies are published and available to all Nursing students.

The policies and procedures pertaining to the administration of the nursing program are documented in the <u>University Catalog</u>, the planning guide for pre-nursing students and the <u>Student Guidelines</u>. All students receive the <u>Student Guidelines</u> at the beginning of the program. Subsequent policy changes are distributed to students in later semesters if such policy changes are applicable to those students. In addition, the updated <u>Student Guidelines</u> are available to all on the School of Nursing web site.

The <u>University Catalog</u>, published every two years, contains procedures for general admission to the University (pp. 98-104), general grievance procedures (p. 595), and graduation requirements (pp. 132-134).

Policies for Nursing admissions and degree requirements are found in the <a href="Nursing Planning Guide">Nursing Planning Guide</a>, in an information sheet sent out with application forms, and in the <a href="University Catalog">University Catalog</a> (pp. 467-469). In addition, the <a href="Planning Guide">Planning Guide</a> and general information for advising pre-nursing students are sent to community college counselors.

The <u>Student Guidelines</u> describes academic policies for advising, academic standing, and academic honesty (pp. 27-28); guidelines for leaving the program and retention (p. 32); guidelines for student behavior, violations, and the student grievance procedures are also included (pp. 33-37).

Challenge policies for all courses are kept in a central file in the School Office.

Copies for individual courses may be obtained from the course instructor or from the School office at the request of the student.

#### Specific policies are summarized below:

#### Admission Policies and Procedures:

Students admitted to the baccalaureate nursing degree program in the School of Nursing must meet the admission requirements of the University as well as the School of Nursing. All applications for admission to the University are processed through the Office of Admissions. A supplemental application to the Nursing major is processed by the School of Nursing.

Once admitted to the University, students who register as "Pre-Nursing" majors are assigned a nursing faculty adviser. The adviser then works with each individual to plan the pre-nursing coursework. Eight courses are required before admission to the Nursing major. These courses are Human Anatomy and Physiology, Microbiology, Inorganic and Organic Chemistry, Child Development, Principles of Psychology, and Nutrition. These are the basic natural and social science courses which form the biophysical and psychosocial/ spiritual foundation for the Nursing major. These courses may be taken at other institutions.

Transfer students follow general University procedures for admission (University Catalog, p. 100). Transfer credit is granted for all college level courses completed at other regionally accredited educational institutions. Equal access to degree programs is mandated by state law. Transfer students compete for the available spaces in the Nursing Program on the same basis as do CSU, Chico pre-nursing students.

Articulation agreements have been established with the community colleges, other units of the California State University System, and the University of California. These agreements identify the specific courses offered in those systems which can be accepted as equivalent to the Nursing prerequisite courses at CSU, Chico. Community college advisers use the articulation agreements as a guide to assist potential nursing students in planning for their prerequisite courses. Applicants wishing to transfer courses which are not on an articulation agreement must petition the School of Nursing for approval of the substitute course or courses.

Since Fall, 1991, the Nursing major has been declared 'impacted,' by the Chancellor's office of California State University; based on a history of receiving many more applicants than can be accommodated, special selection criteria were developed in accordance with guidelines for impacted programs. These criteria were

approved by the Chancellor's office in Fall, 1991, and have been used continuously since then to select students. Only slight modifications have been made since initial approval. All modifications have been approved by the Chancellor's office and published a year in advance of implementation. Under these selection criteria, students must:

- be California residents (a Chancellor's requirement for impacted programs);
- b. meet required timelines for submission of applications;
- c. meet minimal grade point requirements (2.5 cumulative);
- d. have completed at least five of seven specified prerequisite courses with grades of "C-" or better and any remaining courses must be in progress at the time of the application.

Students who meet these criteria are considered eligible for admission. Ranking of all students who qualify for admission is based on a scale with 100 possible points which reflect academic achievement, foreign language proficiency, health-related experience, disadvantaged backgrounds, and rural residence. Academic criteria were selected based on longitudinal study of our graduates to determine the best predictors of success in the program and in subsequent job performance. The Scholastic Achievement Verbal Score (SATV) and grades in prerequisite courses were the best predictors of success. Additionally, criteria were added to increase the numbers who have foreign language proficiency, who come from disadvantaged backgrounds or who live in rural areas. Those who have demonstrated aptitude for and commitment to a health care career by volunteering or working in a health-related areas are given points. These criteria provide an objective ranking system which allows us to select a diverse group of applicants who have high level academic skills. Two exceptions exist for the ranking process—the admission of veterans and licensed vocational nurses. By California law, California veterans discharged within the past four years who meet the minimal requirements must be given priority for admission.

In an effort to recruit more LVNs to the program, three spaces are reserved for LVNs who meet the minimal criteria. If more than three LVNs apply, they are ranked

according to the point system. The top three LVNs are guaranteed one of the reserved LVN spaces; the remainder compete for admission spaces with the generic nursing applicants.

The criteria are described generally in the catalogue, the Nursing Planning Guide, on the Web, and in yearly publications for the CSU listing impacted programs. The specific criteria and timelines are available to all pre-nursing students on request and are routinely mailed to those who inquire.

At the end of the application cycle, all student data are entered into a computer data base which tallies points and ranks the students by points. The top 30 students are offered admission; the remaining students are given a number as alternates. If any of the 30 declines admission, the space is given to the next student in line on the alternate list. Students who are not admitted in a given cycle must reapply; students are informed of this in writing.

### Admission of LVN Students:

LVNs accepted into the program have the opportunity to advance through the program in two ways: completing the 30 Unit Option or by completing the BSN Program. LVN to BSN applicants are admitted to the School of Nursing after meeting the same criteria as the basic student. Three spaces in each class are reserved for the three LVNs with the highest point ranking; all other LVNs are ranked with the generic applicant. The LVN student typically does not take the Semester I practicum course, but must take some components of the Semester I class.

LVNs applying to the 30 Unit Option pattern submit applications during the regular filing period. Based on satisfactory completion of Physiology and Microbiology and space availability, they are admitted into Semester II. No more than 10 students can be accommodated in each clinical section of Semester II practicum.

Continuing students are given first priority for these spaces, and since these spaces are only infrequently available, the chances for admission as a 30 unit option student are not good. Most LVNs prefer admission through a guaranteed space by meeting the regular selection criteria.

#### LVN Challenge:

The LVN can challenge any theory course with documentation of verifiable formal education equivalent to the theory hours of the course and at the discretion of the Director of the School of Nursing and the course faculty. The LVN can challenge any clinical course with documentation of work experience comparable to the clinical hours of the course and at the discretion of the Director and the course faculty. The transfer and challenge process is described in detail in Section 1429 and Section 2786.6.

### RN Challenge:

Because of the nature of the practice of nursing, and the many opportunities for nurses to gain education outside of the University, the faculty believe it is essential to provide a mechanism for the Registered Nurse to receive credit in the major for acquired knowledge in Nursing. The RN student submits transcripts of prior education and describes clinical experience. Based on evaluation of these two areas, the Director and the RN adviser decide which courses may be accepted for transfer credit, which might be challenged, and which must be taken in part or in full.

Many RNs have nursing course credits which are acceptable to the School of Nursing for transfer to meet lower division degree requirements. However, by University policy, these lower division credits cannot be transferred to meet upper division degree requirements. The School of Nursing has established a challenge policy that allows the RN student to challenge upper division Nursing courses based on prior

education or experience. The challenge process is based on the criteria established for each course and implemented at the discretion of the Director of the School of Nursing and the course faculty. The criteria and procedure for challenge examinations are on file in the Nursing Office and with the RN adviser. This challenge process facilitates the acquisition of upper division credits for the RN who has had previous specialty course content and clinical experience.

#### Progression and Retention:

Once admitted to the Nursing Program, progression and retention are dependent on maintaining good academic standing in all courses. Grades of "C-" or better are required in all nursing courses, and students must maintain a GPA of 2.3 in nursing courses. Students who do not maintain a 2.3 average in nursing courses will be placed on School of Nursing academic probation for the next semester. Students who do not achieve the 2.3 in that semester must petition, in writing, to the Executive Committee which will decide if and how the student may proceed in the program. By policy, a student receiving "D+" or less in a Nursing course, may not continue in the Nursing Program. The student may petition the Executive Committee to review the application of the policy in his/her situation, if serious and compelling conditions contributed to the poor grade. The Executive Committee will then determine if and how the student may proceed in the program. If allowed to proceed, the student is placed on School academic probation for the following semester. A letter with all the specifics is sent to the student. A student may repeat no more than two nursing courses for grades of "D+" or less. These specific nursing policies are published in the Student Guidelines (p. 27-28).

The Nursing progression and retention policies are more stringent than general University policies, in which a "D" grade is considered minimally acceptable, a cumulative GPA of 2.0 is considered adequate for progression, and a student may repeat courses (University Catalog, p. 159). The stringent nature of these criteria are

deemed appropriate for a professional degree, in which knowledge and practice performance below the "C-" level is considered potentially hazardous to patients. In addition, the faculty recognizes a responsibility to both the student and potential patients to produce graduates whose behavior indicates suitability for carrying out professional functions. If, in the professional judgment of the Executive Committee of the School of Nursing, a student appears to be potentially dangerous to patients and colleagues, the School will refuse to allow the student in the practice setting, thus preventing him/her from completing the program. Students also may be dismissed from the program for proven drug abuse (i.e., misdemeanor or felony conviction, or through University disciplinary action). This policy is in compliance with the guidelines of the State of California Board of Registered Nursing. Along with maintaining high standards for academic performance, the School of Nursing strives to enable students to achieve those standards. Special services are provided to help the student develop learning skills to the fullest. University sponsored Successful Outcomes for Students (SOS!) programs offer tutoring, workshops, courses and individual conferences (University Catalog, pp. 58-59). Counseling services are provided through the University Counseling Center (University Catalog, pp. 76-77). The Educational Opportunity Program (EOP) assists students from non-traditional populations to increase their access, retention, and graduation rates. Services include academic advising, peer counseling, tutorial assistance, workshops, social and cultural activities, and individual and group counseling (University Catalog, p. 53). Support services also are provided for re-entry students (p. 98), disabled students (p. 52), and veterans (p. 81).

# Grievance Policy:

The University has clear policies for student grievances, described in the University Catalog (p. 595) and detailed in EM 94-22 (Appendix B). These are described in detail in Section 1428(b).

#### Graduation:

There are 9 basic graduation requirements which all students must meet (<u>University Catalog</u>, p. 132). These include: total units (128 for BSN), 48 units of a prescribed General Education program, completion of courses in Ethnic and Non-Western studies, competence in U.S. History, Constitution, and American Ideals, Mathematics, and Writing Requirements, completion of an approved major, and at least a 2.0 cumulative GPA.

The Nursing major requires 94-95 units, 36-37 from the pre-nursing core, and 58 units in the major. Because the Nursing major, along with several other majors, is considered a high unit major, modifications in the General Education requirements have been approved by the University to keep the total required units to 128 (<u>University</u> Catalog, p. 138).

Each semester, students meet with their faculty advisers to assess their progress in meeting these graduation requirements. In addition, general studies evaluations are provided by the Office of Admissions and Records at the student's request. Students file for graduation early in the third semester of the program to obtain a preliminary evaluation of graduation requirements.

#### I. ADMINISTRATION

#### SECTION 1424(b)(1)

The nursing program shall have a written plan for evaluation of the total program, including admission and selection procedure, attrition and retention of students, and performance of graduates meeting community needs.

The School of Nursing has a well-developed plan for ongoing assessment, begun in the early 1980's. This plan is based on the Stufflebeam education evaluation model, which designates four major components for evaluation: context, input, process, and product. Context evaluation includes review of the philosophy, purpose, goals, and objectives in relation to the needs of the profession and society, as well as identification of unmet needs and opportunities within the service area. Input evaluation relates to the resources available for the program, including financial support, supportive services, student applicants, faculty, and community resources. Process evaluation serves to monitor the program during its implementation, to indicate whether the curricular plan is actually being operationalized as planned. Product evaluation relates to student and program outcomes as well as overall satisfaction with the product (faculty, employers, graduates). Initially, each of these components was addressed in successive cycles spanning a four year period. However, this successive cyclic process did not make full use of all the evaluation materials available on an ongoing basis. Additionally, a need was seen to have full faculty involvement in the evaluation process, rather than delegating the plan to one assigned faculty member, as had been done in the past. In 1991, full faculty evaluation workshops refined the model to more accurately represent the major sources of data available, and to designate desired intervals for ongoing evaluation. It was decided that full faculty would meet once yearly to examine data available and make determinations of priority areas for followup during the coming year. Specific designated projects may be accomplished by

assigned time to a designated faculty member if funds are available, or by grant funding.

Most of the data required for evaluation are maintained or compiled by the School of Nursing Director, who is assisted by the Offices of Admissions and Records and Institutional Research. A recent innovation in data maintenance for undergraduate nursing students is a large computer data base, which includes demographic data, admission data, nursing course grades, performance scores on achievement tests, NCLEX results, and retention/attrition data. This data base can provide targeted, concise summaries of multiple measures and will allow correlations to be examined.

At the yearly evaluation workshops, summaries of exit surveys from the past year's graduates are examined; NCLEX pass rates and detailed NCLEX Summary Profiles are evaluated. Admission criteria, demographics and performance of each incoming class are examined, along with data on retention. Each semester reviews end-of-course evaluations in semester meetings and reports issues related to the curriculum as a whole to the curriculum committee.

During the 1994-1995 school year, the Curriculum Committee was charged with evaluation of prior curriculum changes. Surveys of faculty and students were completed in December, 1994. Results were presented to faculty during the annual evaluation workshop. No differences were seen in student preparation in nutrition concepts; students preferred the new placement of the assessment course in the first semester, but requested more practice time. Students continue to desire more clinical time, but faculty evaluation indicates that students are meeting course objectives within the designated clinical hours. Overall, results indicated a positive response to the previous curricular changes made.

In Spring 1995, follow-up surveys were mailed to graduates and their employers of the classes of Fall 1992 through Spring 1994. This component of product evaluation is conducted at five year intervals. The product evaluation measures the competencies of School of Nursing graduates in their workplace. Data from the graduates, their immediate supervisors, and their employers are gathered. Similar data from previous cycles has provided the basis for subsequent curriculum change. The 1989-90 product evaluation project conducted by Bessie Marquis as part of a Chancellor's grant, was used as a model for outcome assessment for the state university system. Results of her study indicated graduates and employers were very satisfied with the competencies of graduates, similar to the 1982 study. No major curricular changes were indicated. Results of this follow-up survey were published in the Journal of Nursing Education, January 1992, "The Relationship Among Multiple Assessments of Nursing Education Outcomes" by Bessie Marquis and Charles Worth. A previous evaluation study conducted by Jean Wold, "Baccalaureate Student Nurse Success Prediction: A Replication," was published in the Journal of Nursing Education in February, 1990. These articles will be available for site visitors' review.

The 1995 alumni/employer survey was conducted in a similar fashion, and returned similar results as the prior students. Forty-five surveys were sent to alumni who were willing to participate (respondents to an invitation mailed to 142 alumni; inaccurate addresses contributed to a low response rate). From the 45 who indicated a willingness to participate, 29 completed pairs of alumni/supervisor surveys were returned (a response rate of 64.6 percent, but 20 percent of the total number of graduates). Ratings of both the alumni and supervisors indicated they were completely or very satisfied with alumni achievement of the terminal objectives. There were no significant differences between the supervisor and the alumni ratings. Discussion of these results in the January, 1997 evaluation workshop indicated no areas for change in the curriculum were needed.

Each semester, input from students is requested regarding the adequacy of clinical resources. In several clinical practica, students are required to keep a weekly journal where they are encouraged to evaluate their experiences. This information is often useful in making adjustments in teaching and in clinical practica.

Input is sought as well from clinical agency personnel. School of Nursing faculty who work with students in a particular agency, meet formally and informally with agency staff to review the clinical experience, discuss problems, and mutually develop plans to enhance student learning opportunities. These meetings have proven to be effective in dealing with specific agency/School issues. Faculty enjoy excellent relationships with the agencies used for clinical practica and this provides for an ongoing sharing and exchange of information pertinent to the goals of the nursing program. Minutes from formal meetings will be available to site visitors.

Faculty assigned to a designated semester meet together with elected student representatives on a regular basis for planning, coordinating, and developing the content and learning experiences for the particular semester curriculum. These groups continuously evaluate the program, resources, and facilities. Faculty use this feedback to make specific changes in their own courses and semesters. Items which pertain to the curriculum as a whole are reported back to full faculty or to the curriculum committee. Minutes of these meetings are available for site visitors.

Through this continuous and comprehensive evaluation model, faculty are fully involved in the process of evaluation, using multiple data sources. We are satisfied with the quality of the program and with student outcomes. Data indicate that students, employers, and the community are also satisfied. Published articles, evaluation workshop minutes, and the strategic plan with updates will be available for site visitors. Evaluation grids covering the entire evaluation process are attached.

# **EVALUATION GRID-STUDENTS**

MODE DATA NEEDED		HOW OFTEN	PROCESS	
CONTEXT	Demographics-students entering	Every class	Director compiles data from admissions data base; review at yearly evaluation workshops	
	Market Pool—pre-nursing characteristics	Even years	Report from Admissions and Records on pre-nursing pool; review at evaluation workshop	
INPUT	Learning Resources library, simulation lab, media lab, space	5 years, with strategic planning cycles	Director seeks input from faculty, Learning Resources chair	
	Selection process and criteria	Even years	Director compiles data from evaluation data base; review at evaluation workshops, even years	
PROCESS	Use of learning resources	5 years	Media Lab assistants compile student use surveys;	
	Student Guidelines	Yearly	Faculty-Student Affairs reviews and revises yearly	
	Retention	Yearly	Director compiles; reviews yearly in evaluation workshops	
PRODUCT	NCLEX pass rates Senior exit surveys	Yearly	Director compiles	
	Alumni/Employer surveys (BSN and MSN)	5 years (2000)	Special Project	
	Outcomes: Critical thinking Communication	Yearly	Faculty	
	Nursing Therapeutics Program Satisfaction Community Service			

# EVALUATION GRID-FACULTY

MODE	DATA NEEDED	HOW OFTEN	PROCESS
CONTEXT	Expertise needed for curriculum	Yearly;	Personnel committee reviews per university procedures
	Market pool/recruitment	Each hiring cycle;	Personnel/hiring subcommittee; Affirmative Action Committee Review
	Demographics	Yearly (AACN, NLN and BRN	Director
	Teaching Assignments and load	reports) Yearly	Director
INPUT	Prof. Devel. Resources Available	with each self- study process;	Faculty
	Selection Process	Each hiring cycle	Personnel Committee
PROCESS	Dean Review	Every 4 years	University Procedures
	Director Review	Every 3 years (1998; 2001)	University Procedures
	Student Evaluation of Faculty (SEF)	Yearly	Faculty (university procedures)
	Faculty Peer review	Every 1-5 years	University procedures
	Faculty development/ Professional development resources used	Every 5 years	Faculty (self-study)
	Faculty Activity Reports	Yearly	Faculty
PRODUCT	Faculty retention and promotion outcomes	Yearly	Director, Personnel Committee
	Curricula Vitae Continuing education courses completed; Certification; degree advancement; Faculty Service Survey	With self- study (NLN, 1998; BRN, 2000; NLN 2003)	Faculty

## EVALUATION GRID--CURRICULUM

MODE	DATA NEEDED	HOW OFTEN	PROCESS
CONTEXT Philosophy; stranding of content through semesters		With self- study (1994- 1997; 1998- 2000)	Curriculum Committee
INPUT	Philosophy With self- study (1994- 1997; 1998- 2000) Curriculum C		Curriculum Committee
PROCESS	Implementation of organizing framework (exit surveys, course evaluations)	Yearly evaluation workshops	Full faculty; semester groups
PRODUCT	End of program objectives achieved;	5 years (1995; 2000)	Special Project (alumni survey)
	Philosophy, purpose, organizing framework realized	Exit surveys every semester	Director

# **EVALUATION GRID-COMMUNITY**

MODE	TOOLS	HOW OFTEN	PROCESS
CONTEXT	Politics Demographics	With strategic planning (1998; 2003)	Director; faculty
	Health Care Facilities	Yearly	Semester groups; full faculty; health care agency meetings
INPUT	Other programs Butte Shasta Yuba	With strategic planning and self study	Director compiles admission statistics; input from Advisory Committee and University Outreach
	On-campus pre-nursing courses	University 5- year review	University protocols
PROCESS Facility use		Yearly	Director; faculty; health care agency meetings
PRODUCT Community satisfaction with product		5 years (1995; 2000)	Special Project (alumni/employer surveys); Advisory Committee input

## **EVALUATION GRID-UNIVERSITY**

MODE	DATA NEEDED	HOW OFTEN	PROCESS
CONTEXT	University/college environment	With strategic planning (every five years (1996; 2001) with yearly updates	Director; faculty
	Budget	Yearly with strategic plan updates	Dean; Director; faculty
INPUT	Strategic plan	Yearly	Director
	Union Contract (CBA)	Yearly	Faculty-Student Affairs Committee
	Constitution/bylaws	With self- study	Full faculty
PROCESS	Strategic plan implementation;	Yearly with updates;	Director; faculty
	Implementation Constitution/ bylaws	With self- study	Full faculty
PRODUCT	University satisfaction with product	5 year review by University	University Protocol
	Preparation and employment of graduates	Yearly	Advisory Committee discussion

#### Admission and Selection Procedures

The School of Nursing implemented specialized selection procedures in Fall, 1991, based on having more qualified applicants than can be accommodated. These procedures remain in effect, with slight modifications made in response to state regulations. Students are selected based on an objective point system which is based on: grades in prerequisite courses, SAT or ACT verbal or English scores, foreign language proficiency, health related experience, disadvantaged background, and residence in our rural service area. Prior to the passage of proposition 209 in 1997, students were given points for ethnicity or for male gender. These elements are no longer used in the selection process. However, the demographics of the student body indicate no adverse effect from this change. The student body is currently comprised of approximately 15.6 percent students from non-white backgrounds, and approximately 14.8 percent male (see Table I).

It is noted that a few students do not meet the same criteria for admission as the majority of the applicants. By Chancellor's office mandate, recently discharged California veterans must receive priority for admission to impacted programs if they meet the minimal criteria of the program. Thus, a recent veteran with a minimum cumulative GPA of 2.5, who has completed all prerequisites with grades of "C-" or better, receives priority admission. Only a small percentage of the student body has been admitted under this rule. Most of the veteran applicants enter with a strong health career background and high motivation and are successful.

TABLE I STUDENT DEMOGRAPHICS (From BRN Annual Reports)

RACIAL BACKGROUND	1999 Number	1998 Number	1997 Number	1996 Number	1995 Number
American Indian; Alaskan Native	1	4	3	0	0
Asian or Pacific Islander	9	7	7	15	18
African-American, Non-Hispanic	2	2	2	1	1
Filipino	0	0	2	1	2
Hispanic	10	11	8	2	6
White, other than Hispanic	100	101	122	130	117
Other/Unknown	19	15	0	0	0
Total White/other, unknown	119 (84.4%)	116 (82.8%)	122 (84.7%)	130 (87.2%)	117 (81.2%)
GENDER					
Female	120	114	119	116	117
Male	21 (14.8%)	26 (18.5%)	25 (17.3%)	33 (22.1%)	27 (18.8%)
Total Census	141	140	144	149	144

# Applicant Pool:

The applicant pool remains strong, but number of qualified applicants has declined somewhat in the past five years, from a total of 160 in 1995 to 136 in 1999. The selection criteria described above do successfully select for students who are well-qualified to meet the academic demands of the program, as seen by the retention data below (see Table II).

TABLE II APPLICANT POOL

YEAR	NUMBER OF APPLICATIONS	NUMBER QUALIFIED	NUMBER ADMITTED
1999	150	136	60
1998	159	137	60
1997	197	146	60
1996	215	101	60
1995	273	160	60

#### Retention Statistics:

The School of Nursing achieves excellent retention rates. Retention for the generic undergraduate program ranged from 79.9 percent to 100 percent for the past five years, as reported in BRN annual reports (see Table III). In the undergraduate program, the use of supplemental selection criteria helps to assure high academic potential for most students. Additionally, the difficulty of getting into any nursing program in the state adds to the motivation and commitment to the chosen major exhibited by the majority of students. Data on those who leave the program indicate that the predominant reason for leaving is a change in career plans or personal reasons. Few leave the program due to academic failure.

TABLE III
RETENTION STATISTICS
(From BRN Annual Reports)

Year	Percent Retaind	
1999	86.8	
1998	95.0	
1997	100.0	
1996	79.6	
1995	95.9	

An aid to successful retention is the implementation of a retention coordinator. A faculty member is assigned a modest number of weighted teaching units (1-2) per semester (approximately 30-50 hours), to provide assessment, advising, and tutorial guidance to students who appear at high risk for academic difficulty. Such students are referred by the faculty, usually based on poor test results or poor clinical performance. In the past few years, the students who have experienced the most difficulty have been students with English-as-a-second language (ESL). The retention coordinator has worked with listening and speaking skills as well as vocabulary, and has made referrals to the Speech Department's accent reduction groups and to the university writing

center. Such efforts have helped to the extent that all such students have successfully completed the program. However, four subsequently failed the NCLEX. Faculty continue to express concerns related to the most effective ways to work with ESL students to achieve adequate writing, speaking, and listening abilities.

#### SECTION 1424(c)

There shall be an organizational chart which identifies the relationships, lines of authority and channels of communication within the program, between the program and other administrative segments of the institution with which it is affiliated, and between the program, the institution and clinical agencies.

#### ORGANIZATION WITHIN THE SCHOOL OF NURSING

The faculty of the School of Nursing work together through a process of shared governance, based on an organizational structure which allows for extensive intradepartmental communication and shared decision-making (See Appendix B, Organizational Chart).

The faculty of the School of Nursing consists of all persons holding full-time or part-time appointments to the School; the voting faculty consists of all those with full-time appointments. Administration of the educational unit in Nursing is the major function of the Director. The Assistant to the Director is responsible during the absence of the Director and, in addition, is assigned specific administrative duties. Faculty of the School are assured opportunity for joint planning and decision-making in academic and personnel matters through the committee structure.

The purposes, functions, and membership of the Standing Committees are included in the School's Constitution and Bylaws which will be available to the site visitors. Minutes of all Standing Committees are available for review by site visitors.

Students in the School of Nursing are encouraged to participate in policy-making and curriculum review. Students in each semester are asked to elect four representatives, one each to attend faculty meetings, the Curriculum and Faculty-

Student Affairs committees and semester meetings. Curriculum and program decisions have been initiated in part as the result of student input, and students have responded to faculty-identified problems primarily through the mechanism of School committee meeting involvement.

## SCHOOL OF NURSING RELATIONSHIPS WITHIN THE UNIVERSITY

The School of Nursing is an academic unit of the College of Natural Sciences, administered by Dean Roger Lederer. The College is the functional administrative unit in the University. Chairs of academic units report to the Dean of the College, and relationships with Central Administration are through the Office of the Dean. Major resources to conduct the academic mission of the University are allocated to the respective colleges on the basis of enrollment and other factors. The academic and personnel phases of the Strategic Plan are centered in the respective Colleges.

The Constitution of the College of Natural Sciences provides for an Executive Committee, made up of the Chairs of the Departments of Biological Sciences, Chemistry, Geology and Physical Sciences, Mathematics and Statistics, Physics, and the Director of the School of Nursing. The function of the Executive Committee is to advise and assist the Dean in the administration of the College. Chairs are nominated by the respective units in accordance with that unit's constitution or bylaws, and appointed by the Provost and Vice President for Academic Affairs. The term of service is no less than two years and no greater than three years.

A block of time is set aside weekly for Chairs to meet with the Dean, usually as a group and with a published agenda. Occasionally, the Dean meets with individual Chairs when the matters for discussion/decision are specific to only one academic unit. Communications between the departments/school and other University units are generally processed through the Office of the Dean either for transmittal or copy for informational purposes. The Dean is highly supportive of the School of Nursing's

rights and responsibilities for curriculum and program decisions and has a firm policy that the Director be included in central administration planning and/or discussion sessions which could have an impact upon the programs or personnel.

## Faculty Representation on University and College Committees:

The Constitution and Bylaws of the College of Natural Sciences (CNS) provides for the involvement of all School and departmental faculty in the functioning of the College.

## There are five CNS Standing Committees:

- Academic Policies and Status
- Affirmative Action
- College Personnel
- Faculty Leaves and Development
- Learning Resources

Each department/school must have representation on each College Standing

Committee with each department/school designating an official nominee. The one
exception to this procedure is the Learning Resources Committee; membership of that
committee consists of the current Chairs of the department and school Learning
Resources Committees.

School of Nursing faculty have many opportunities to serve on University-wide committees. Whenever the College is eligible for representation on University-wide Committees/Councils nominations are requested by the Dean from each unit. Included are the Faculty Senate, University Personnel Committee, and numerous advisory committees. The Faculty Senate announces vacancies on Senate Committees which are open to volunteers. Faculty are also invited to participate on some committees by virtue of their expertise.

## University Faculty Organizations:

The Constitution of the Faculty of California State University, Chico provides that the faculty shall consist of the following:

Professors, Associate Professors, Assistant Professors, Instructors, Lecturers, Coaches. The President, Professional Librarians, and Student Affairs Officers II, IV, and V.

The Constitution further provides that "It shall be the duty and responsibility of the Faculty to formulate, recommend, review, and revise all academic, personnel and professional policies, including fiscal policies related thereto, broadly and liberally defined." These and other duties and responsibilities are delegated by the faculty to the Faculty Senate.

#### The Academic Senate:

The Academic Senate, comprised of 29 elected and eight ex-officio members, was formed to exercise those legislative and advisory powers that rest with the faculty. Six members are elected at-large, three of whom are system-wide Senators, and 23 members are distributed among the schools and divisions, including the Meriam Library and Student Affairs. Regular elections are held annually, during the month of April or May, as the Executive Committee decides.

There are two Standing Committees of the Faculty Senate: Faculty and Student Policies Committee, and Educational Policies and Program Committee. Other committees are organized by the Faculty Senate to carry out continuing projects, and these committees function and report through one of the Standing Committees. Ad-hoc committees for the purpose of carrying out special assignments can be created only by Standing Committees. The Faculty Senate can, however, direct a Standing Committee to create an ad-hoc committee.

The Nursing Faculty are actively involved in the Academic Senate, its Standing Committees, and Ad-hoc Committees. For the current 1999-2000 school year, one nursing faculty member, Shelley Young serves as a member of the Executive Committee of the Academic Senate as past Chair of the Academic Senate (1997-99), on the Budget Committee, Graduate Coordinators Committee, and is a member of the Educational Policies and Programs Committee. Another nursing faculty member, Linda Land-Smith is serving her second term as a Senator and is active on the Faculty and Student Policies Committee. Becky Damazo is Chair of the Affirmative Action Committee. Janet Brown serves on Academic Status; Irene Morgan is on Student Evaluation of Faculty.

## California Faculty Association:

The Higher Education Employer-Employee Relations Act (HEERA) provides for collective negotiation between the Trustees of The California State University and an "exclusive representative" of the faculty concerning terms and conditions of employment. In elections held in 1981-82 the California Faculty Association (CFA), a coalition of education and state employee associations, won the right to bargain exclusively for the faculty of the System. The first Memorandum of Understanding (MOU) became effective in academic year 1983-84. The current contract, which began on July 1, 1999, will be in effect until June 30, 2001. A copy of this MOU will be available for site visitors.

This Association provides a direct and powerful mechanism for faculty to communicate with administration on matters directly pertaining to working conditions. Recent legislation mandated that all those who are represented by the union be dues paying members, unless they qualify for specific exemptions.

## Student Representation:

Students in the School of Nursing have the same opportunities for participation in University-wide organizations as any student on campus. University policy (Executive Memorandum 77-2) mandates that students shall have the opportunity to participate in the formation of policies, rules, and sanctions pertaining to them. Student representation to University councils and committees is through the campus Associated Students organization. All students automatically become members of the Associated Students upon registration for classes and payment of fees each semester.

# COMMUNICATION BETWEEN THE NURSING PROGRAM AND THE CLINICAL FACILITIES

Visits are made by the Director of the School of Nursing to many of the health agencies used in the program each year. Acute care agencies meet yearly with all nursing faculty in the agency as well as the director of the School of nursing, to discuss education and practice issues and policies.

The individual faculty members who work with students in each agency have ongoing and frequent contacts with the nursing, administrative, and medical personnel as they teach students in these clinical settings. The nursing program has enjoyed excellent relationships with the agencies used for clinical practica. Effective joint planning between involved faculty members and agency personnel has made student placements a pleasant and easy task. Much of the credit for such good relations must go to the faculty members involved, and those nursing and other health agency personnel responsible for direct involvement with students in their settings. In addition, the Director participates in meetings of Northern California Directors of Nursing which meets bi-monthly. Periodically, the Director gives a report to the Northern Sierra Hospital Council, composed of the administrators of 25 acute hospitals in the region. Community Health agencies are invited to a yearly meeting on campus to discuss recent

changes in the community health curriculum and to exchange ideas on the best ways to provide community health experiences for students.

The School of Nursing established an Advisory Board in 1995. This board is comprised of representatives of clinical agencies, alumni, and community college nursing representatives. This group provides very effective input to the School related to curricular issues, clinical placements, and feedback on the capabilities of graduates in meeting employer expectations. The board meets twice each year.

Formalized agreements between the clinical agencies and the School of Nursing provide written policies for each institution, which cover maximum student/faculty ratios for each semester level, guidelines for types of instructor/staff supervision, and overall responsibilities of the agency and the School in the implementation of the course objectives. Agency contracts with each clinical facility are reviewed every three to five years, offering an opportunity for assessment and evaluation of the student program from the standpoints of the University and the health care agency (current contracts will be available for review by site visitors). Annual conferences of clinical instructors and each agency's key personnel are held to review student experiences and agency relationships. Minutes of those meetings are available for review by site visitors.

## SECTION 1424(d)

The program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment to achieve the program's objectives. There are adequate resources to assist the student to achieve the program objectives.

#### FACULTY

The School of Nursing has 14 full-time faculty positions, one faculty on the Faculty Early Retirement Program who teaches .33 time, and five part-time faculty covering the equivalent of 3.3 full-time positions.

The School has gradually recovered from the lean budget years of the early 90's, when hiring was frozen, and we were unable to replace retiring faculty. In the past four years, we have been able to hire two tenure-track faculty, and currently are advertising for a third faculty position (which we were unsuccessful in filling last year). The faculty:student ratio is 10:1 in all clinical courses. Most lecture courses are team taught, with 30 students in each course. We have consistently offered every course requirement every semester. With the current state resources, we can serve a student populace of 150 generic students, plus 15-20 master's students, and 10 RN-BSN students. Federal grant funding for the next five years will support an increase in the numbers of RNs we can add to the student body. We have a sufficient pool of parttime faculty to help us absorb these increased numbers. Faculty are creative and productive, and though a very hardworking faculty, they do have the time to excel. Modest time has been assigned to faculty for completion of special projects, including research and on-line course development. The success of the students, based on completion rates, NCLEX pass rates, and student exit surveys which indicate their satisfaction with achievement of program objectives, all indicate that the faculty resources are sufficient to meet program goals.

#### LIBRARY RESOURCES

The mission of the Meriam Library is to support the learning, teaching, research, and service functions of California State University, Chico. In support of this mission, the Library offers services, collections, and programs which facilitate the effective use of information and information literacy. The Library provides information in all formats to meet these needs and embraces appropriate new technologies to enhance the electronic learning community.

The Library's primary clientele includes: faculty, students (both on-campus and at remote sites), and staff of the California State University. The Library also endeavors to serve the community and region and thus commits itself to the principle of open access to its collections. Library orientations are available at the beginning of each semester to acquaint students with the many services offered. In addition, the campus teaching/learning center offers training sessions for both faculty and students. These sessions include hands on workshops to assist users in the development of computer/research skills.

Meriam Library and the Instructional Media Center are housed in a 249,000 square foot building that was completed in 1974. Seating capacity of the facility is 2,233. The Library provides a variety of forms of print, non-print, and electronic instructional resources.

The Meriam Library houses approximately 1,200,000 items, including over 600,000 volumes in the general collection. In addition to serving as a resource for books, journals, references, newspapers, government documents, microfilm and microfiche, the Library provides study areas and individual carrels, photocopy machines, instructional services for students and faculty concerning library resources,

online computer catalogue, and several electronic periodical indexes. The Library maintains a nonprint media library which contains over one hundred audiovisual resources that can be easily accessed by faculty. These resources are also available on limited loan to students.

Students have ready access to the Library and its many services. The Main Collection of Meriam Library is open M-Th from 7:30 AM until Midnight; Friday from 7:30 AM until 5:00 PM; Saturday from 9:00 AM until 5:00 PM and Sunday from 9:00 AM until Midnight. The first floor library computer lab is open 24 hours a day from Sunday AM through Saturday evening at 6:00 PM throughout the academic year. The Meriam Library has recently added hundreds of computer terminals to allow students access to on-line information 24 hours a day. The Library has more than 900 terminals, both Macintosh and PC, that can be accessed by students.

CSU, Chico participates in an Interlibrary exchange with North State Library Co-Operative. Through this cooperative agreement a student or faculty may obtain copies of materials or books not available at CSU, Chico from other universities that are part of this Library Co-Operative. Interlibrary loans with libraries nationwide are available through the Meriam Library. Reciprocal borrowing agreements are in effect that enable photocopies of periodical articles to be obtained.

Online literature searches with access to numerous biomedical indexes are available to both faculty and students. Faculty may order articles not owned by the Library through CARL UnCover, free of charge. Faculty have access from their office or home computers and students have access at hundreds of terminals throughout the CSU, Chico campus. If a student or faculty member has difficulty locating an educational resource the Library has on-line help with the "ask a librarian" service on the Library Home Page.

The Library is frequently used by nursing faculty and students, both graduate and undergraduate. In addition to the extensive use of the Meriam Library, students may access local community and medical libraries. It is possible to do a computerized search of library resources in many communities throughout Northern California from the Meriam Library Home Page.

The School of Nursing has a faculty member assigned each year to work directly with library personnel to facilitate acquisition of materials, coordinate instructional sessions, and to communicate changes within the Library. The Library has been very responsive to the School of Nursing requests.

The School of Nursing library representative reviews standard formula acquisitions that relate to Nursing. The library holdings are classified according to the Library of Congress (LC) as medical science and are noted in Table IV.

TABLE IV

MERIAM LIBRARY HOLDINGS IN MEDICAL SCIENCES
BY LIBRARY OF CONGRESS CLASSIFICATION
OCTOBER, 1997

LC Classification	Topic Area	Number of Titles
R	Medicine (General)	1,818
RA-RB	Public Aspects of Medicine	5,443
RC-RS	Medical Specialty Areas	17,303
RT	Nursing	1,946
RV	Other Systems of Medicine	2
Total		26,512

Many nursing volumes or those significant to nursing are also catalogued in other library classifications. Example subject areas include ethics, culture, family, gerontology and social contexts related to nursing.

Each academic unit within the University receives a portion of the Library Materials Budget according to formula allocation, based on FTE and Average Cost/Volume. The School of Nursing library acquisitions budget has remained fairly stable over the past several years. Expenses for Journal titles have remained stable, with a slight increase in total dollar amounts. Journal holdings have remained stable for the last five years (See Table V). The School of Nursing has more than 70 journal titles that are purchased from the Library Budget. The School of Nursing has added ten new journal titles within the past two years. Current journal holdings and library budget are adequate to meet the needs of both faculty and students.

TABLE V
LIBRARY EXPENDITURES FOR THE SCHOOL OF NURSING

Year	Allocation
1995-1996	\$1,176
1996-1997	\$1,324
1997-1998	\$1,306
1998-1999	\$1,430
1999-2000	

CSU, Chico joins other leading-edge campuses to offer a Web Catalog. In October, 1997 the Web Catalog became the only way to access the library collection. The Web Catalog allows users to access the following: web catalog, circulation, cataloging, reserve, serials, and acquisitions information on-line.

The Meriam Library Research Station is the gateway to the Library and offers one-stop access to the Library Catalog, fifteen periodical indexes, such as the Extended Academic Index, InfoTrac, Lexus-Nexus, CARL UnCover, ERIC as well as numerous other search tools, more than a thousand full-text journals, and a variety of reference and Internet resources. Faculty and students have ready access to the Cumulative Index

to Nursing and Allied Health (CINAHL) volumes as well as CD-ROM version and electronic access. In addition, the Library offers Web-based catalog with hyperlinks to related subjects and authors and many more databases available outside the Library.

These resources are available for easy printing and downloading to a floppy disc.

The Library's 24-hour computer lab allows students to access the library catalog at any time for their research needs. Faculty have computer terminals in their offices with network capabilities. Many faculty also have library connection from their homes. This service is available to all faculty at no charge.

The Library offers many training sessions for faculty and students to encourage optimum use of its resources. The School of Nursing has sponsored faculty training sessions on: Lexus/Nexus, CARL UnCover, and Commonspace.

Faculty assume responsibility for submitting library selection requests.

Faculty communicate with the collections development librarian on an ongoing basis regarding additional journal requests and the librarian seeks faculty input regarding changes. Book and journal selections by faculty are based upon relevance to the curriculum. Library resources are processed by the School of Nursing according to the following procedure:

## Selection of Library Resources:

- The Chair of the Library Committee will initiate and coordinate the selection of library resources according to an established time schedule. Fifty percent of the learning resources allocation budget should be spent by December, with the remaining amount spent by April.
- Requests may be submitted throughout the year as long as the financial resources remain.

- Ongoing review of potential library resources is conducted by individual faculty for their respective courses.
- Book and journal requests are submitted to the Library Book Chair for review and recommendation.
- Subscription information should be included with journal requests.
- All book and journal requests are reviewed with consideration given to budget, curriculum, and trends in education, research, and practice.

#### STAFF SERVICES

One full-time Administrative Support Coordinator and one full-time

Administrative Support Assistant serve the needs of the faculty of the School of

Nursing. These staff assist with the administrative, budgetary, scheduling, and
recordkeeping tasks of the School. They handle correspondence, type course outlines,
materials, tests, and meeting minutes. Much time is devoted to answering phone and
drop-in inquiries about the program. Additionally, since the program returned to
impaction status in Fall 1991, the Administrative Support Coordinator has assumed
responsibility for handling all application and admission correspondence and managing
the computerized admission data base. The hardware and software in the School of
Nursing office are up-to-date and allow rapid turn-around time for printing of course
materials. Secretarial service is also available in the College Dean's office for faculty
activities related to personnel matters and College Committees.

## SUPPORT SERVICES

California State University, Chico has approximately 16,000 full-time equivalent students. The University provides a wealth of human and physical resources, facilities and services which are available to augment the programs of the School of Nursing.

Support services used by faculty, staff, and students include: meeting and conference

facilities, Meriam Library, the Bell Memorial Union Bookstore, food services, catering services, parking facilities, city bus service, security services, and sports, cultural, recreational and educational activities. University services used by faculty and staff in the School include: the computer center, continuing education, print shop, testing center, plant operations, telephone and mail service.

The Office of Institutional Research (OIR) has been particularly helpful to the Nursing program and its faculty. Data are available from ongoing studies on admission, retention, and graduation, and student perceptions of the educational experience. The director of OIR has worked closely with faculty who are designing research projects. In addition, the Office of Sponsored Programs is available to assist faculty in procuring grants for research projects. There are also several support services available to new faculty including: (1) reduced teaching load the first year; (2) mentoring by a designated Master Teacher; (3) instruction and support in use of computer technology; and (4) extensive orientation to campus resources. An University Ombudsman service was initiated in 1987 as a resource for faculty and students. The role of the Ombudsman is to informally assist in the resolution of campus problems.

Some additional University services used by students in the School include: counseling services, student health services, financial aid, career and placement services, child development laboratory, student employment services, and the dormitories.

#### MEDIA LABORATORY/SIMULATION LABORATORY

## Media Laboratory:

The Nursing Media Laboratory first opened in 1974, to provide an accessible multi-media learning site for nursing students. The laboratory contains a wide variety of media software, including: videotapes (many of which have been produced by

School of Nursing faculty), audio cassette tapes, computer assisted instruction programs, and interactive videodiscs. Students also use the materials for self-paced review and for use in special projects. The media software and reference materials are stored within the laboratory. Four computers have internet connections.

The laboratory contains the media hardware necessary to run the various types of software. This includes two, 3/4 inch and five 1/2 inch videotape machines with television monitors, one slide projector, one Wollensak, one filmstrip projector, seven computers for computer-assisted instruction and two interactive video computers. All audio formats have individual headphones so that noise is kept to a minimum in the laboratory.

The laboratory houses the equipment for classroom videotaping capability.

There are two color television cameras with recorders for use within the School.

Repair and maintenance for all equipment is accomplished for a nominal charge by the University Instructional Media Center.

Reference materials included in the Media Laboratory are current books, a variety of nursing journals including the American Journal of Nursing, Nursing, Morbidity and Mortality reports, Nursing and Health Care, Journal of Family Nursing, and Image. Limited editions of Nursing Outlook, Nursing Research, Journal of Professional Nursing, and Journal of Nursing Administration are also available.

Anatomical models are available for student use. Each semester course has a drawer in the laboratory file cabinet for additional reference materials placed there by instructors.

The Media Laboratory is open approximately 20 hours per week for student use. Student attendance averages about 90 visits per week. Since tables for individual or group study are located in this room, many students use the lab as a convenient place to study. A laboratory student assistant is available whenever the laboratory is open to

assist students to locate materials, to set up media for student use and to protect the security of the materials housed in the laboratory.

## The Simulation Laboratory:

The Simulation Laboratory, located in the Skills Laboratory, first opened in 1980. Ample materials are available for students to use to practice a wide variety of skills including intravenous therapy, catheterization, tracheostomy care, administration of medications, and dressings. Two state-of-the-art manikins have recently been added to the laboratory, with capability to generate normal and abnormal heart, lung, and bowel sounds. To cover costs of consumable supplies, students are charged a modest laboratory fee for courses which require heavy use of supplies for practice. Faculty open and staff the laboratory to provide for additional practice for their clinical group as needed.

## PHYSICAL SPACE AND EQUIPMENT

## Office Facilities:

The School of Nursing is part of the College of Natural Sciences and is located in Holt Hall. Holt Hall was built in 1971, and is within close proximity to most campus support services that are used by the School. Holt Hall houses the Office of the Dean of Natural Sciences and two other departments in the College: Biological Sciences and Mathematics. The other three departments in the College: Chemistry, Physics, and Geological Sciences are located in the Physical Sciences Building, a short distance from Holt Hall. The close proximity of the various departments within the College affords opportunity for all College of Natural Sciences faculty to exchange ideas and to consult on research and on classroom instruction. A large conference room in the College office is occasionally used by the School of Nursing for committee meetings and is heavily used by College committees for their meetings.

## The School Office:

The School of Nursing office is on the third floor of Holt Hall. It includes the desks and chairs for the Administrative Support Coordinator and the Support Assistant, two file cabinets, phones, plus multiple closed shelves for storage. The School Director has her office adjacent to the main office. It includes a desk, file cabinets, bookshelves, chairs, and a phone. The office staff have networked computers with laser printers.

## Faculty Offices:

All full-time faculty members have a single office in Holt Hall and all but one are located on the third floor. The offices are spacious and are equipped with a phone, desk, file cabinet, bookcase and several chairs, computers, and printers. All full-time faculty have network connections for e-mail and access to internet resources.

The single offices for faculty provide privacy for conducting the numerous individual student conferences required in the nursing program. While the part-time faculty may share their office space, they are able to provide for private conferences by coordinating their office hours.

#### School Classrooms and Laboratories:

The Nursing School uses a large classroom, Holt 359, for most classes. There are about 45 chairs in the room that can be easily moved to accommodate formal lectures or group work. The room is spacious with adequate blackboard space. This classroom is fully mediated, with computer and power point projector. Other classes are held in Holt 277. Seminars are held in Holt 365 or 363.

Classes involving skills practice are held in Holt 363. This room contains hot and cold running water, hospital beds, bedside and overbed tables, and curtains around several of the units. There are 30 chairs that can be easily moved to accommodate a

variety of instructional approaches. There is adequate blackboard and poster board space for classroom displays. There are locked storage cabinets for securing supplies. The current allocation of classroom and laboratory space is adequate for the current size of the student body.

## SECTION 1424(e)

A sufficient period of time shall be set aside, by the institution, exclusively for the use of the director or his or her designee in the administration of the program.

The Director of the School of Nursing is normally assigned 75 percent to administration and 25 percent to teaching during the academic year, and 75 percent to administration during the summer (when no regular instruction occurs). The normal teaching assignment of the Director includes teaching one, three-unit course per semester. Currently, the Director is assigned 25 percent to administer grant projects, thus has no teaching assignment during the school year.

The Assistant Director is responsible for the administration of the program in the absence of the Director. The Assistant Director is not normally given assigned time for administration. Assigned time is occasionally available for special projects which may be assigned to the Assistant Director.

The time allotted for administration is sufficient for meeting the responsibilities of the positions. Job descriptions for the Director and Assistant Director are included in Appendix C.

## SECTION 1424(f)

The program shall have a registered nurse faculty member who is knowledgeable and current regarding the program and the policies and procedures by which it is administered and who can perform the director's duties in that person's absence.

## Qualifications and Responsibilities of the Assistant

The Assistant Director is a full-time faculty member, has been on faculty for at least three years, is willing to serve in the position, and has approval of the Director. It is the responsibility of the Assistant Director to conduct School meetings and attend College and University meetings in the Director's absence. The Assistant Director also assists with preparation of preliminary class schedules and faculty assignments, confers with Semester Coordinators, serves on the School of Nursing Executive Committee, and is an ex-officio member of the School Personnel Subcommittee for purposes of hiring.

The position of Assistant Director is unique to the School of Nursing. There are no official provisions by the University for assigned time to implement these administrative responsibilities. Those faculty who have occupied the position have done so because of commitment to the needs of the School.

## SECTION 1424(g)

There shall be a faculty organization which has the primary responsibility for developing policies and procedures, planning, organizing, implementing and evaluating all aspects of the program.

The faculty organization of the School of Nursing consists of all persons holding full-time or part-time appointments to the School. Faculty of the School are assured opportunity for joint planning and decision-making in academic and personnel matters through the committee structure. There are six committees which focus on policy, procedure, planning, organizing, implementing, and evaluating all aspects of the program.

Policies related to governance and the conduct of the program are outlined in the Constitution and Bylaws of the School of Nursing. Article 5, Section 1 describes the purpose, membership, and function of each of the Standing Committees of the faculty. There are six policy-making committees within the School of Nursing; Executive, Graduate, Curriculum, Faculty-Student Affairs, Personnel, and Scholarship. There is student representation on three of these committees to insure that the students' views of issues are being considered as well as to provide for the raising of specific questions identified by the student body. The primary responsibility for the development and conduct of the academic program rests with the faculty.

The Executive Committee is made up of the five Semester Coordinators, the Director, the Assistant Director, and the Graduate Coordinator. Students do not serve on this Committee due to the nature of its functions. One purpose of the Committee is to make decisions related to the academic and clinical status of students who are encountering academic or other difficulties. A student having difficulty submits information concerning his/her position in writing to the Committee. The Committee's

decision is conveyed in writing to the student via the Director. The Committee advises the Director on matters which require rapid decision-making from a representative faculty group. The Committee also reviews program needs and makes policy recommendations to the faculty.

The Curriculum Committee has as its membership four faculty members elected at-large, a Library Representative, Honors Adviser, and one laision faculty member from the graduate level and from each semester if not already represented. The Director of the School is an ad-hoc member. One student representative from each semester is elected to serve on this Committee. The Curriculum Committee reviews and recommends curricular changes as indicated by ongoing program evaluation. This Committee also provides for review of the philosophy, organizing framework, and objectives, as well as to ascertain their congruence with the University policies and the current curriculum offerings of the School of Nursing. Student representatives take issues back to their class and bring to the Committee the views of the larger student group. In recent years, the entire faculty comprised the Curriculum Committee.

The Faculty-Student Affairs Committee is made up of at least four elected faculty and a student representative from each semester. A liaison from the Scholarship Committee, the California Nursing Student Association, and the Graduation Organization for Nursing Students will serve as necessary. The Committee elects a Chair and a Treasurer. The Committee provides for the review and development of policies regarding a wide variety of faculty and student needs and activities. Examples are: immunization and health policy, career day, maintaining the Student Guidelines, awards, student admission, recruitment, and retention, faculty continuing education and professional development, and the orientation and social functions of the faculty. Student representatives are quite active on this Committee as they give information to their classes and bring back the views of the larger student group.

The School Personnel Committee membership is restricted to tenured full professors who delineate policies and procedures related to recruitment, hiring, retention, and promotion of faculty. Special circumstances are listed in the Constitution and Bylaws (Article IV, Section 1). No students serve on this Committee, in compliance with the University Personnel Policy.

The Graduate Committee membership consists of the Director, the Graduate Coordinator, three faculty members selected by the faculty and one nursing service representative. A graduate student serves as the student representative. The goal of the Graduate Committee is to develop and implement a quality Master's Program which is congruent with the philosophy of the School of Nursing, the goals of the University, and which meets the needs of nurses in Northern California. The function of the Committee includes curriculum review and recommendations to the full faculty if revisions are needed. The Committee also evaluates all graduate thesis proposals prior to their implementation.

The Scholarship Committee membership consists of three or four faculty members elected by the faculty. Three members shall provide representation from Semesters I, II, and III and the Director is an ad-hoc member. Students do not serve on this Committee. The purpose of this Committee is to notify faculty and students of available scholarships, select students who meet the criteria, communicate, and coordinate with the various community organizations and the University to offer scholarships to nursing students.

The Standing Committees of the School of Nursing review and discuss specific issues related to the responsibilities of each Committee. This includes ascertaining students' viewpoints when appropriate to the issue being considered. Recommendations are then formulated by the Committee and presented at a full Faculty Meeting for further discussion and vote.

In addition to the Standing Committees, ad-hoc committees are formed as needed to implement the overall organizational thrust of the School. The five semester groups each constitute a working committee meeting at scheduled intervals to exchange ideas, formulate course outlines, review student needs, and evaluate course and student progress. The Semester Coordinators then transmit matters for consideration to the appropriate Committee Chairs or to general faculty. Through committee and semester work groups, all faculty is actively involved in the routine functions and key decision-making of the faculty.

Minutes of the standing committees and the full faculty meetings are recorded and on file for review. Copies are given to all members. Included in faculty minutes are reports given by the Chairs of the standing committees.

#### SECTION 1424(h)

The faculty shall be adequate in type and number to develop and implement the program approved by the board, and shall include at least one qualified instructor in each of the areas of nursing listed in Section 1426 who shall be responsible for the educational program in that area. Nursing faculty members whose teaching responsibilities include subject matter directly related to the practice of nursing shall be clinically competent in the areas to which they are assigned.

## Type and Number of Faculty

There are currently 14 full-time faculty positions assigned to the School of Nursing including the Director's. Five faculty are temporary part-time faculty, covering the equivalent of 3.3 full-time positions; one tenured faculty is on the Faculty Early Retirement Program, teaching 4 units per semester. Nursing faculty meet the University's requirements for faculty appointment plus the special requirements for teaching in nursing theory and practicum courses. Six faculty have earned doctoral degrees; all others have a minimum of the master's degree. Part-time faculty are hired on a temporary basis, usually to provide replacements for faculty on sabbatical leaves or special projects. Our temporary pool of faculty is master's prepared and clinically proficient. Most hold clinical practice positions in addition to their teaching positions. They provide a stable pool of qualified faculty, familiar with the curriculum and with School of Nursing policies. They are an excellent complement to our full-time faculty. Qualifications for appointment to the faculty are attached at the end of this section.

The faculty is composed of persons fully qualified in at least one of the specialty content areas: medical-surgical, maternal-child, mental health/psychiatric, community health, and gerontological nursing. We are attempting to fill a full-time tenure track position in Adult Health Nursing (medical-surgical) with gerontology expertise. In the meantime, we are fortunate to have Lani McManus serving as a gerontology content

expert since the retirement this year of Jean Wold. For the 1999-2000 academic year, Mrs. McManus is nearly full-time (14/15). Her workload includes assigned time for participation in committees and provides for input on the gerontology content for the program. She has been teaching the gerontology content in Semester I and Nursing 163 for several years. She is a stable and consistent part-time faculty member who is fully familiar with the overall curriculum plan and its implementation.

## Content experts include:

Medical-Surgical -- Brown, Persaud, Land-Smith, Leedom

Maternal-Child -- Richter, Morgan Mental health/psychiatric -- Hoban, Hookins

Geriatric -- McManus

All of these faculty are clinically competent in their areas of expertise.

The teaching assignments of faculty are determined by the Director of the School in conjunction with the individual faculty and, where appropriate, with the Semester Coordinators. The academic preparation and professional experience of the faculty member are the primary criteria for assignment with expressed interest in the course a secondary criterion. All full-time and part-time faculty are assigned to areas which reflect their clinical expertise.

The faculty in the School of Nursing have multiple responsibilities. These include:

- Developing class objectives and student learning experiences for assigned classes, which meet the overall curriculum objectives of the School of Nursing.
- Using current theory and practice in the teaching of course content and objectives.
- Using a variety of teaching methods which are appropriate to course objectives and content.

- Evaluating student achievement in meeting course objectives.
- Assuming a teaching load as defined in the University <u>Faculty and</u>
   Procedures (FPPP) and the Memorandum of Understanding between the faculty union and the University.
- Assuming responsibility for the orientation, assignment, supervision, conduct, discipline, and evaluation of students in the clinical area to which they are assigned.
- Ensuring safe and continuous care to patients selected for student experiences; ensures that students and self conform to agency policies and procedures.
- Facilitating and supporting students toward their individual professional development in nursing.
- Contributing as a team member in planning, implementing, and evaluating course offerings in the semester group(s) in which he/she is a member.
- Promoting cooperative School-Agency relationships with the clinical agencies in which he/she works with students. In consultation with agency nurses, plans for the clinical learning experiences.

The academic qualifications of the faculty are enhanced by professional experience appropriate to areas of responsibility. Approximately one-half of the faculty are employed in area agencies for limited periods during vacations and summers.

Many faculty serve as consultants in the community or conduct workshops for nurses in the region. The faculty maintain their expertise in curriculum by attending conferences on nursing education and innovative teaching methods. In addition, all faculty participate in curriculum review and development through semester area meetings and in the full faculty meetings. The Curriculum Committee rotates membership so that all faculty gain experience in reviewing and planning curricular recommendations to be discussed by the full faculty. During the most recent curriculum revisions, the faculty as a whole functioned as the curriculum committee.

The faculty is committed to the concept of continuing professional growth, and participation in workshops, seminars, short courses, as well as University courses, is beyond the mandatory continuing education requirements for relicensure. As evidenced by the Report on Faculty (See Appendix D), faculty participate in continuing education courses directly related to their specialty teaching areas. The faculty maintain an excellent record of scholarly achievement which enhances teaching and contributes to the development of the profession. Full Curriculum Vitae will be available to the site visitors.

#### OUALIFICATIONS REQUIRED FOR FACULTY APPOINTMENT

Qualifications for appointment to the faculty of the School of Nursing are as follows:

#### Full-Time Faculty Position:

- A current, valid license to practice professional nursing in the State of California.
- b. A Master's or higher degree appropriate to their area of responsibility from an accredited college or university that includes one or more of the following areas of preparation:
  - (l) Nursing or education with preparation for teaching
  - (2) Clinical nursing specialty
- c. Has had at least one school term experience as an assistant instructor under the direction of a qualified instructor in a state accredited school of professional nursing preparing for registered nursing, or a course in practice teaching.
- d. Has had at least one year's continuous experience in the practice of professional nursing.
- e. Has current expertise in their area of teaching responsibility.

## Part-Time Faculty Position:

- A current, valid license to practice professional nursing in the State of California.
- b. Academic and/or professional experience related to area of assignment.
- c. M.S. Degree in Nursing with one year of professional practice.

#### SECTION 1424(i)

When non-faculty individuals participate in the instruction and supervision of students obtaining clinical experience, their responsibilities shall be described in writing and kept on file by the nursing program.

Nursing faculty retain the primary responsibility for supervision and evaluation of students in all clinical practica throughout the curriculum. The School of Nursing uses some non-faculty persons to augment, enrich, and expand selected learning opportunities for students at the upper division level only, in the third, fourth, and fifth semesters. These experiences are conducted by registered nurse preceptors under the guidelines of the Board as described in EDP-B-04. The faculty is responsible for the planning of the clinical objectives, directing the preceptors and evaluating the students as well as evaluating the preceptor experience and the individual nurses who serve as preceptors. This evaluation is on-going in order to maintain and enhance clinical instruction.

The use of nursing preceptors has been evolving, as the struggle to find clinical opportunities for certain nursing specialties has intensified. In our rural setting, large units for obstetrics and pediatrics are not available. Limited hospital stays, home care and changing hospital admission standards have contributed to low patient census in the units available to us. It is often not possible to place 10 students in one clinical facility at the same time with one instructor.

Use of non-faculty preceptors was first implemented several years ago to augment labor and delivery experiences, which were inconsistent, and often minimal or even absent due to changing and low census. The unit chosen was the busiest labor and delivery unit of our clinical facilities (Fremont Medical Center in Yuba City). The

Perinatal Services Supervisor is an adjunct faculty member of the School of Nursing and holds the education of pre-professionals as a priority for her staff. She participated with the faculty to establish a preceptor program in which each third semester student has the opportunity to work individually with a designated RN preceptor for one or more 12 hour shift(s).

The preceptors are required to hold a valid California nursing license, have been employed in labor and delivery for at least one year and have demonstrated expertise in the care of laboring women and an ability to supervise and direct students. The faculty and the Perinatal Supervisor work together to continually evaluate the effectiveness of this experience for the students and the staff's role. The students consistently evaluate this opportunity as "outstanding," "the best I have had in nursing school," and "a real confidence builder." This model has now been adopted for the bulk of the students' obstetric experiences at Enloe Medical Center, due to a declining birth rate, the reorganization of the perinatal unit, and the success of the experience at Fremont Medical Center described above. The hospital clinical coordinator is a former part-time faculty member who worked with faculty to establish the preceptor protocols. The faculty member spends the first part of the semester orienting the staff both orally and with written materials to understand the course objectives, desired clinical learning experiences and School of Nursing regulations. Students are prepared prior to the preceptor experience by education from the faculty in theory and group laboratories where skills such as physical assessment of labor and newborns, labor coaching, IV insertion, and other skills are practiced with direct faculty supervision. The trial period for this clinical has been highly praised by the students and the staff alike. In Spring 2000, faculty will explore the possibility of using the preceptor model to strengthen the clinical experiences for pediatrics, a specialty rotation which has been plagued by low pediatric census.

The need for students to plan, implement, and evaluate the care of groups of patients led to the implementation of a preceptor model in Nursing 124, Practicum in Patient Care Management. Traditionally 10 students and one faculty were assigned to this practicum on two fixed clinical days. Sometimes, a limited patient census would make it impossible for each student to carry a patient load adequate to achieve course objectives. In addition, units felt overwhelmed by the number of patients assumed by students on any one given day. As a result, a decision was made to use a preceptor model which would allow students, under a preceptor's direct supervision, to complete this clinical during all shifts and throughout the seven day work week. Currently, the leadership/management clinical occurs with each student assigned to a designated preceptor for a rotation of 112 hours. The student works with the preceptor on the preceptor's regular schedule to meet the clinical hours (slightly over 2 shifts per week). By working directly with the preceptor, the student has access to a workload comparable to that assumed by a registered nurse as well as all the leadership and management issues encountered by that staff nurse during their regular work. The faculty conduct the selection, orientation, and evaluation of the preceptors with close attention to the nurse's ability to guide, and encourage students to grow as they acquire the leadership role. Preceptor responsibilities are clearly delineated in a preceptor packet, along with course objectives, student responsibilities, clinical experience guidelines and evaluation criteria. The faculty is available to the students and preceptors by phone or by pager, and meet with them at least weekly (one faculty visit per 16 hours of clinical time). Students also interact with the faculty through weekly journals. Both student and staff give high praise to this type of practicum for students at this advanced level.

A preceptor model is also used on a limited basis for selected sections of Nursing 199, Independent Study Courses, for students who desire extra practicum experience in a specialty area. In this instance, a faculty member is assigned to supervise the experience. The faculty and student determine the desired objectives and learning experiences. The faculty selects an agency preceptor, orients the preceptor, and monitors the student experience. The preceptor must have an RN license, at least one year experience in the assigned unit and current certification required for the designated specialty. Sample objectives and course materials will be available to site visitors.

The work-study elective (Nursing 289) is designed for supervision by an agency preceptor under the direction of assigned faculty, in the same manner as Nursing 199 preceptorships. The role of the preceptor is clearly established in the course design. No students are enrolled in this course currently.

All required documentation of preceptors and their vitae, orientation, direction and evaluation of preceptors as well as the clinical objectives and faculty evaluation of students are on file in the office of the School of Nursing.

## SECTION 1424(j)

The assistant director shall function under the supervision of the director. Assistant instructors and clinical teaching assistants shall function under the supervision of an instructor.

The Assistant Director functions directly under the supervision of the Director.

The Assistant Director participates on the Executive Committee, and handles any administrative tasks delegated by the Director. The Assistant Director becomes the Acting Director in the Director's absence.

Each semester has their own faculty cohort group that meets regularly under the direction of a Semester Coordinator. This close teamwork facilitates the orientation and growth of new faculty members, and allows close supervision of Assistant Instructors. Although the School employs no Assistant Instructors (e.g., faculty who do not have a Master's degree in nursing and clinical teaching experience), in the event that an Assistant Instructor, a temporary substitute, or an inexperienced faculty person is hired, the Semester Coordinator provides the direct supervision necessary. The Semester Coordinator is responsible for the orientation of these individuals to the course, the clinical agency, and to the school. The Semester Coordinator discusses relevant policies and procedures of the agency and the school and serves as a reference person for the Assistant Instructor throughout the semester.

#### I. ADMINISTRATION

#### SECTION 1424(k)

The student/teacher ratio in the clinical setting shall be based on the following criteria:

- Acuity of patient needs;
- Objectives of the learning experience;
- (3) Class level of the students;
- (4) Geographical placement of students;
- (5) Teaching methods; and
- (6) Requirements established by the clinical agency.

The faculty/student ratio in the clinical setting does not exceed 1:10. The acuity of patients admitted into the acute care setting, discharged to skilled nursing facilities, and discharged home has remained consistently high. A faculty/student ratio of 1:10 was set by faculty as the maximum number of students that faculty could safely supervise at any one time. With high patient acuity levels, students in all settings are caring for the needs of very ill to critically ill patients, which in turn, requires close faculty supervision.

The objectives of the learning experience are another factor in the faculty/student ratio decision. It is important to provide each student equitable access to learning experiences that would facilitate meeting course objectives. Given the size of inpatient units available, any more than 10 students at one time would decrease the number of opportunities available and hamper the student's chance to participate in multiple learning activities. Meeting objectives of the learning experience was also a factor in the implementation of clinical preceptors for N124 students in Semester IV. Intense faculty involvement in student learning of N124 objectives, even during preceptored experiences has necessitated the maintenance of the 1:10 faculty/student ratio.

A further consideration in the faculty/student ratio is the class level of the student. Semester I students need close supervision as they begin their initial clinical experiences. They need frequent guidance in the performance of skills and in the beginning use of the nursing process. As the semesters progress the students' caseloads increase, the complexity of patient needs increases, and demands on the student increase. The senior student dealing with these complex experiences needs the same opportunity for guidance as novice students. They are refining their skills and integrating all of their past experiences into the role of the graduating professional nurse. Faculty have difficulty providing for either level of need with more than 10 students. Teaching methods such as one-to-one clinical rounds, chart discussions, and role modeling of assessment or interviewing techniques become difficult if not impossible with more than 10 students.

Two final considerations in the faculty/student ratio relate to the clinical agencies themselves. Many of the clinical facilities that are used by the School of Nursing provide excellent patient experiences, yet are small agencies. Therefore, the agency may limit the number of students that may be placed on each unit at any one time. To use such facilities requires that the students be assigned throughout the available units within an institution. For example, in Semester II, students may rotate to four separate areas to provide for a broad medical-surgical clinical experience and yet not violate agency space limitations. The faculty person must then supervise the student in each of those separate areas. Having more than 10 students would make safe supervision difficult. The agencies support the 1:10 ratio because it prevents the agency and/or areas within an agency from being over-used to the detriment of patient care. Maintaining a 1:10 ratio has ensured a long term positive relationship with all the clinical agencies used by the School of Nursing and students have benefited from adequate breadth and depth in clinical assignments within agencies.

#### **SECTION 1425**

A program shall report to the board all changes in faculty prior to employment of or within 30 days after termination of employment of a faculty member. Such changes shall be reported on forms provided by the board.

The teaching assignments of faculty, and any changes, are reported to the BRN on form 15M-32.1. These forms are available as evidence for the site visitors.

SECTION 1425(a)

A nurse faculty member appointed on or after the effective date of these regulations shall hold a valid, active license issued by the board.

All faculty including the Nursing Director meet the BRN requirements of California licensure. Licensure data will be available to site visitors.

#### SECTION 1425(b)

The registered nurse director of the program shall have:

- A Master's or higher degree from an accredited college or university which includes course work in nursing, education or administration.
- A minimum of one year's experience in an administrative position.
- (3) A minimum of two year's experience teaching in pre or post-licensure nursing programs.
- (4) At least one year's experience as a registered nurse providing direct patient care, or
- (5) Equivalent experience as determined by the board.

Sherry D. Fox was appointed Director of the School of Nursing effective August 21, 1989. She has been reappointed at three year intervals, based on faculty review and recommendation to the President of the University.

Dr. Fox earned her BSN from the University of California, San Francisco in 1970, and has been licensed in California as a registered nurse since 1970. In 1975 she received her Master of Arts degree in Physiological Nursing with a minor in Physiology from the University of Washington, Seattle. Both programs are accredited by the National League for Nursing (NLN) and Western Association of Schools and Colleges (WASC). Master's coursework focused on nursing theory and practice, and nursing education, including a practicum in teaching baccalaureate nursing.

Doctoral work was completed at the University of California, San Francisco, School of Nursing, in Medical Sociology, December, 1990. Coursework at the doctoral level included extensive research preparation, a strong focus on health, and

advanced nursing theory in stress, social support, and women's health. Her doctoral dissertation is entitled "Dimensions of Health in Blue Collar Workers."

Prior to her two terms as Director of the School of Nursing, she served four years as Assistant Director of the School of Nursing at CSU, Chico. She has served on all of the School's Standing Committees and has chaired the Curriculum and Graduate Committees. She has taught full-time since September 1974 except for a four-year sabbatical/leave of absence to pursue doctoral education. Dr. Fox has taught undergraduate and graduate students in both theory and clinical courses. She has taught in an external degree program for registered nurses, and has taught continuing education courses for nurses. In addition, she has been a consultant in curriculum development for one associate degree program, and two baccalaureate programs in Oregon and in North Dakota.

Dr. Fox has extensive clinical experience in many nursing care settings. Prior to master's education, she worked as an intensive care staff nurse and charge nurse for three years. During her master's education and doctoral education, she worked part-time as an intensive care nurse. In addition, from 1986 to August, 1989 she worked part-time as a Health Promotion Nurse in an employee wellness program, providing health assessments, education, and counseling to factory workers.

The Curriculum Vita of Dr. Fox is available to site visitors.

#### SECTION 1425(c)

The registered nurse assistant director shall meet the education requirements set forth in subsection (b)(l) above and the experience requirements set forth in subsections (b)(3) and (b)(4) above or such experience as the board determines to be equivalent

Irene S. Morgan was elected Assistant Director for the academic years 19982000. She has a Bachelor of Science Degree in Nursing from California State
University, Chico (1978), a Master of Science Degree in Nursing from the University
of California, San Francisco (1988) and a Ph.D. in Nursing from the University of
Colorado Health Sciences Center (1998). Each of the programs was fully accredited.
Her Master's degree is in Family Primary Care with an emphasis in child and
adolescent health care. Dr. Morgan's doctoral work revolved around health promotion
assessment and theory generation with special attention given to the needs of midlife
women.

Dr. Morgan has taught full-time for eleven years in the School of Nursing as the Child-Health and Family Nursing specialist. She has 21 years of experience as a registered nurse with past employment in medical-surgical nursing and intensive care nursing. For the past fourteen years she has been nationally certified as a family nurse practitioner. Dr. Morgan currently maintains a two afternoon per week clinical practice as a family nurse practitioner serving Butte County Health Department clients.

Dr. Morgan has taught full-time for eleven years in the School of Nursing as the Child-Health and Family Nursing specialist. She has 21 years of experience as a registered nurse with past employment in medical-surgical nursing and intensive care nursing. For the past fourteen years she has been nationally certified as a family nurse practitioner. Dr. Morgan currently maintains a two afternoon per week clinical practice as a family nurse practitioner serving Butte County Health Department clients.

#### SECTION 1425(d)

An instructor shall meet the following requirements:

- (l) Those set forth in sub-sections (b)(l) and (b)(4) above; and
- (2) Completion of at least one year's experience teaching courses related to nursing or a course which includes practice in teaching nursing.

The School of Nursing is funded for 14 full-time faculty, including the Director.

Currently, all but one of those positions are filled with tenured/tenure track faculty, who meet the minimum requirements for appointment, as set forth in the School of Nursing Personnel Document. One temporary full-time faculty member also meets these requirements. These include:

- Current, valid license to practice professional nursing in the State of California.
- A Master's or higher degree appropriate to their area of responsibility from an accredited college or university that includes one or more of the following areas of preparation:
  - (a) Nursing or education with preparation for teaching
  - (b) Clinical nursing specialty
- Have had at least one school term experience as an assistant instructor under the direction of a qualified instructor in a state accredited school of professional nursing preparing for registered nursing, or a course in practice teaching.
- Have had at least one year's continuous experience in the practice of professional nursing.
- 5. Have current expertise in their area of teaching responsibility.

One tenure-track position in Adult Health Nursing is open and recruitment efforts are underway. Candidates will be interviewed in Spring 2000, to fill the position for Fall 2000. The individual selected for this position will be required to meet the above criteria.

In addition to the tenured/tenure track faculty, the School of Nursing hires parttime or full-time replacement faculty, to cover sabbatical leaves, or to cover release time for faculty who are assigned to special administrative, research, or educational projects. All of the part-time faculty currently employed meet the requirements for instructor and the School of Nursing requirements for full-time appointment.

## SECTION 1425(e)

An assistant instructor shall have:

- A baccalaureate degree from an accredited college which shall include courses in nursing, or in natural, behavioral or social sciences relevant to nursing practice.
- (2) At least one year's continuous, full-time experience in direct patient care practice as a registered nurse.

Currently, the School of Nursing has two assistant instructors. All faculty have a minimum of master's degree preparation. This is the minimum requirement for hiring.

#### SECTION 1425(f)

A clinical teaching assistant shall have had at least one year's experience, within the previous five years, as a registered nurse providing direct patient care.

The School of Nursing maintains a file of qualified Instructors or Assistant
Instructors who are able to fill all anticipated positions. No clinical teaching assistants
are currently employed by the School, nor have they been required in the previous five
years.

#### III. FACULTY RESPONSIBILITIES

#### SECTION 1425.1(a)

Each faculty member shall assume responsibility and accountability for instruction, evaluation of students, and planning and implementing curriculum content.

Each nursing faculty assumes full responsibility and accountability for nursing students. This includes instruction, advising, and evaluation of students. All instruction is provided by qualified faculty whose preparation, experience and current teaching assignments are documented and available to site visitors.

All full-time faculty participate in academic advising. From the time a student is registered as a pre-nursing or nursing major, they are assigned a faculty academic adviser. The adviser guides the student from pre-admission or admission through completion of the nursing program. The adviser assists the student through academic difficulties where necessary and can be an informal "sounding board" for social or emotional difficulties as well. Faculty refer students with serious academic, social, or emotional problems to the appropriate resources. As student advisers, faculty are kept informed about student needs, opportunities and programs available, both at the University level and the School level. Faculty document student conferences on an individual basis.

Evaluation is a continuous process. In the classroom students receive verbal feedback as well as written comments on projects, papers, and examinations. Formative student evaluation in the clinical setting is done verbally on a routine basis to encourage students toward success. Formative written feedback is provided on clinical care plans/worksheets and in student journals. Summative written evaluations are provided at the end of each clinical

rotation. Mid-rotation feedback is also provided in many clinical courses. The student is encouraged to participate in all phases of his/her evaluation and to meet with the instructor as often as necessary to reach an understanding of course objectives and performance goals. Student written evaluations are maintained in the permanent student files in the Nursing Office. Anecdotal records on which written evaluations are maintained by faculty. Permanent student files will be available for review.

All Nursing faculty function actively in all phases of program development, implementation, and evaluation through the committee structure. Faculty are totally responsible for planning and implementing curriculum content. Planning begins with the Curriculum Committee. The Curriculum Committee keeps the full faculty appraised of potential curricular changes and possible ways to implement these changes. All curricular issues are brought before the full faculty for input and approval.

The semester teaching group is the key to implementation of the nursing curriculum. The courses within each semester are closely interrelated and require that faculty work cooperatively. The teaching groups are cohesive and have developed excellent working relationships. The Semester faculty is committed to the curriculum and are continually evaluating their semester's content and effectiveness. Based on the organizing framework, course objectives, content organization, and evaluation measures are mutually developed and cooperatively implemented. While individual faculty is responsible for those students enrolled in their assigned laboratory sections, the criteria and requirements are standardized for all students in the semester. For example, courses with more than one section will have different instructors and/or clinical settings, but student requirements for projects, papers,

presentations, evaluation criteria, and grade scales are the same. Complete course outlines for each semester are on file and available for review.

The regularly scheduled semester group meetings (referred to as area meetings) serve as a coordinating medium. Chaired by the group-elected Coordinator, the meetings are attended by full and part-time faculty assigned to the semester and by student representatives elected by their peers. The meetings are used to plan, discuss mutual and individual problems, adjust to unexpected situations, and exchange information. Minutes of semester meetings are on file and available for review.

#### III. FACULTY RESPONSIBILITIES

SECTION 1425.1(b)

The registered nurse faculty member shall be responsible for clinical supervision only of those students enrolled in the registered nursing program.

Cooperating agreements/contracts with a variety of clinical facilities stipulate that School of Nursing faculty will supervise only those students enrolled in the baccalaureate nursing program at California State University, Chico. While they are fulfilling the role of supervising students, faculty do not assume responsibility for any tasks in the agency other than those directly related to the supervision of baccalaureate nursing students. During this time, faculty do not supervise any other personnel or groups of students and have no assigned role by the agency. The concept of supervision is interpreted to include cooperative planning, assignment, evaluation, and discipline where indicated. Cooperating agreements/contracts with each of the agencies are current and available for review by the site visitors.

## IV. REQUIRED CURRICULUM; PRIOR APPROVAL

#### SECTION 1426(a)

The curriculum of a nursing program shall be that set forth in this section. A program's curriculum shall not be implemented or revised until it has been approved by the board.

The current curriculum pattern of the School of Nursing was approved by the Board of Registered Nursing in May, 1989, with minor revisions approved in September, 1993 and September, 1994. The current pattern, as listed on BRN Form 15M-41, is as follows:

## Supporting Courses - 38 Units

The following courses, or their approved transfer equivalents, are required of all candidates for the Bachelor of Science in Nursing degree

BIOL 3	Human Anatomy	3.0 Units
BIOL 4	Human Physiology	3.0 Units
BIOL 11	General Microbiology	4.0 Units
CHEM 27	Elem. Inorganic Chem.	4.0 units
CHEM 28	Elem. Organic Chem.	4.0 Units
CD 52	Child Development	3.0 Units
PSY 1A	Principles of Psychology	3.0 Units
ENGL 001	Freshman Composition	3.0 Units
HCS 011 or	Speech Communication	3.0 Units
HCS 012	Small Group Communication	
	and one of the following:	
NFSC 25	Basic Nutrition - 3 units )	
NFSC 125	Human Nutrition - 3 units )	3.0 to 4.0 Units
FSC 128	Nutrition Health/Disease - 4 units )	
	and one of the following:	
ANTH 013	Intro. to Cultural Anth. )	
SOCI 1	Principles of Sociology )	3.0 Units
ANTH 103	Cultural Anthropology )	

# 2. Nursing Sequence - 58 Units

Semest	er I		
NURS	082	Nursing Role I	2.0 Units
NURS	083	Nursing Foundations	4.0 Units
NURS	084	Practicum in Nursing Foundations	4.0 Units
NURS	102	Nursing Assessment	2.0 Units
Semest	er II		
NURS	103	Nursing Concepts for Acute Care	6.0 Units
NURS	104	Practicum in Acute Care	4.0 Units
NURS	112	Nursing Role Concepts	2.0 Units
Semest	er III		
NURS	113	Maternal-Child Nursing	4.0 Units
NURS	114	Pract. Maternal-Child Nursing	4.0 Units
NURS	115	Family Nursing	1.5 Units
NURS	132	Nursing Research	2.0 Units
Semest	er IV		
NURS	122	Leadership/Mgmt./Prof. Issues Nurs.	3.0 Units
NURS	124	Pract. In Patient Care Mgmt.	2.5 Units
NURS	133	Nurs. Mgmt. Maladaptive Behavior	4.0 Units
NURS	134	Pract. Mgmt. Malaladaptive Behavior	2.0 Units
Semest	er V		
NURS	163	Nurs. Care Gerontology Patient	1.0 Unit
NURS	173A	Community Health Nursing Theory	2.0 Units
NURS	173B	Caring for the Family in the Comm.	2.0 Units
NURS	174	Pract. Comm. Health Nursing	3.0 Units
NURS	193	Integrative Nurs. Theory	1.0 Unit
NURS	194	Pract. Integrative Nurs.	2.0 Units

#### IV. REQUIRED CURRICULUM; PRIOR APPROVAL

#### SECTION 1426(b)

The curriculum shall reflect a unifying theme, as outlined in Title 16, California Administrative Code, 1424(c), which includes the nursing process as defined by the faculty, and shall be designed so that a nurse who completes the program will have the knowledge and skills necessary to function in accordance with the minimum standards for competency set forth in Title 16, California Administrative Code, 1443.5.

The curriculum structure is based on the philosophy and organizing framework described in detail in Section 1424(a). The School of Nursing has a Philosophy statement, which identifies and describes the beliefs of our faculty about persons, health, nursing, environment, and nursing education. The philosophy was refined through the curricular self-study process. Faculty engaged in numerous discussions about beliefs related to the meta-paradigm of Nursing.

The nursing curriculum is ordered around the Organizing Framework, which is composed of the four elements of the meta-paradigm of the discipline of nursing:

Persons, Nursing, Health, and Environment. The Organizing Framework (see Appendix A) which was derived from the Philosophy provided guidance for the development of the Terminal Objectives for the Bachelor of Science degree.

#### The Baccalaureate Graduate Will:

- Demonstrate critical thinking for effective problem solving and independent decision-making.
- Use scientific knowledge, research and nursing theory as the basis for professional nursing practice.
- Apply knowledge of the changing health care delivery system in fostering the health of persons in their environment.
- Empower clients by engaging in caring relationships, assuming appropriate nursing roles and facilitating access to available resources.
- Demonstrate effective written and verbal communication skills with clients, the health care team, interdisciplinary colleagues and the public.
- Apply the nursing process and professional standards of care in nursing practice.
- Demonstrate professional leadership/management capabilities needed to guide nursing practice.
- 8. Provide leadership in the demonstration of respect for diverse cultural, spiritual, and religious practices related to health care.
- Develop self confidence in the baccalaureate nursing role, embracing change to advance quality professional nursing.
- Promote respect for nurses' needs for personal self-care and life-long learning for professional growth.
- Participate in ongoing evaluation of the nursing program in preparing graduates for the nursing role.

The Terminal Objectives identify the desired characteristics and abilities of the graduate from the program and provide for direction in curriculum development to support the graduates' achievement of the objectives.

The new Philosophy and Terminal Objectives were then screened through all courses (objectives, content, and process) to determine areas of congruence or dissonance. The courses were revised to achieve congruence with the Philosophy and reflect the Terminal Objectives. This process occurred over a two-year period. All outcome evaluations indicated the structure and content of the program were sound.

## Learning Experiences and Instructional Approaches:

The selection of learning experiences and instructional approaches for each course is dependent on a variety of factors. These include the course objectives, the content, placement in the curriculum, and whether it is a theory or clinical course. A majority of the theory classes use a team teaching approach. This provides the student with the opportunity to benefit from the wide range of nursing and teaching expertise within semester faculty groups. Faculty use lecture-discussion, case studies, role-play, in-class writings, and student presentations, as well as group work and seminar group discussions to present content and enhance learning. As we develop online courses, many of the same approaches will be used with students but adapted to the world of web-based learning (for example; discussion via chat rooms, in-class writing assignments posted to the bulletin board, etc.). Classrooms are equipped or can readily be supplied with media capability. This allows faculty to use slides, transparencies, audiotapes, videotapes, and Power Point to facilitate learning.

The learning experiences and instructional approaches for clinical are dependent upon the objectives of the course and the clinical agency. For example, in Semester I, the clinical faculty is initially responsible for student assignments although students progress to selecting their own patient assignments using faculty guidelines by the end of the semester. In Semesters II through V, students generally select their own patient care assignments with guidance and approval by the faculty or preceptor they are working with that day. Assignments are used to assist each student to meet the course

objectives and to challenge him/her based on current skills and knowledge. As students learn to organize and to think critically, clinical assignments become more complex. In Semester V, all students make their own assignments in the acute care setting. This offers students the opportunity to assess their own skills and knowledge and to select experiences which provide the student's individual learning needs.

Clinical faculty use a variety of techniques for assisting the student to become competent in meeting the Terminal Objectives. Individual discussions with the student using the patient record and/or problems that have come up during the day is one approach used by many faculty. Use of systematic questioning techniques to help the student answer his/her own questions is another approach. Clinical worksheets are used in some semesters to prepare for the clinical practicum. Making rounds with the student on his/her patients can serve as an opportunity for the student to demonstrate assessment and interviewing skills. Nursing rounds offer an opportunity for the faculty to role model professional behaviors. Role-playing is also a valuable clinical learning technique. Post-clinical conference time is especially useful since students can share patient care experiences and teach each other. Journal/logs are used by students to analyze clinical experiences, to document learning activities, and professional growth. Individual conferences with students provide an arena to foster insight regarding student performance in the clinical setting.

Self-directed, self-paced study is available through the Media Laboratory.

Interactive video instruction, video and audio tapes, journals and anatomical models are used by the students to enhance their own learning. Computers with internet access are available to the students.

#### Evaluation Methods:

Many of the theory courses use examinations as the primary evaluation tool. These exams consist of various combinations of multiple-choice items and/or short answer and essay questions. In addition, individual courses use in-class writings, case studies, history/physical write-ups, family assessments, teaching-learning papers, research critiques, and oral presentations as methods for evaluating student learning of theory content.

Clinical evaluation is based on successful accomplishment of the clinical objectives. Competency testing of skills, nursing care studies, clinical worksheets, clinical logs, physical, emotional, and developmental assessments, process recordings, and family/community studies along with student self-evaluation are components of the clinical evaluation process.

## Nursing Care Plans:

The nursing process is a component of both the theory and clinical courses. In the theory courses, faculty use the steps of the nursing process to teach students to plan care for individual patients. In the clinical setting the nursing process is implemented in a variety of ways.

- In Semester I, students complete weekly worksheets addressing the nursing process, including nursing diagnosis, as well as a comprehensive case study.
- In Semester II, students prepare activity sheets every week in which they are required to identify four priority nursing diagnoses for their specific patient and develop a care plan based on the nursing process as reflected in these diagnoses. In addition, lecture content in theory classes emphasizes relevant nursing diagnoses and interventions specific to each body system or

pathological process. Students also develop comprehensive nursing case studies on patients with multi-system problems using the nursing process.

- In Semester III, the nursing process, including nursing diagnosis, are applied in clinical worksheets, problem-oriented care plans, family assessments, oral presentations, agency care plans, and case study analyses.
- In Semester IV, students complete care plans on those patients they have cared for during their acute care and mental health practica based on the nursing process. Students use nursing diagnoses for problem identification and focus.
- Semester V students incorporate nursing process in the care of patients in the clinical setting to help guide and evaluate their care. Nursing diagnoses are included in agency care plans as well as in the students' logs/journals. The emphasis is on diagnoses, interventions, and goals mutually identified with the client. Students are very creative in adapting nursing diagnoses to the family and community setting. (Nursing diagnoses are often more pertinent to the ill patient than to the family and community setting.)

#### NCLEX Performance Results:

The curriculum provides the student with the knowledge and skills necessary to function in accordance with the minimum standards for competency as measured by NCLEX performance. Review of detailed Summary Profiles for NCLEX indicate no areas where students have consistent, systematic problems. Most content areas indicate students perform within or above the national norms.

The great majority of students pass the NCLEX Examination (NCLEX) on the first attempt. The pass rates for the past five years are summarized in Table VI below.

TABLE VI NCLEX RESULTS: Percentage Passing

Period Reported	Number of Graduates tested (First time)	Number passing	Percent passing
Oct. 1994 - Sept. 1995	52	49	94.2
Oct. 1995 - Sept. 1996	47	40	85.1
Oct. 1996 - Sept. 1997	60	53	88.3
Oct. 1997 - Sept. 1998	59	57	96.6
Oct. 1998 - Sept. 1999	41	34	82.9

Quarterly pass rates are usually well above both state and national norms, but on occasion have slipped below these norms. The pass rates consistently exceed a 70 percent level. Students who speak English-as-a-second language (ESL) experience greater than average difficulty in passing NCLEX on the first attempt. In 1996, fifty percent of the failures were attributed to ESL students. For the period 1997-1999, 44 percent of the failures were ESL students. We have not yet resolved the issue of how to assist ESL students to achieve better NCLEX results. It appears that success in recruiting and retaining ESL students tends to lower NCLEX pass rates. However, other factors must be examined. In 1992, following an unexplained dip in pass rates, an extensive survey was conducted of two graduating classes. The predominant factors for those failing the NCLEX seemed to be family demands and stress, along with an over-confident approach to the testing. However, students did indicate they needed more practice with NCLEX type questions. Based on their feedback, faculty instituted a mandatory NCLEX pre-test during the senior year, and began designing test questions in an NCLEX format. The retention coordinator began offering NCLEX study tips

classes. In Spring, 1997, we began requiring that all students take a computer adaptive practice test during their fourth semester. These data will be used to determine if we can predict those at high risk for NCLEX failures, and to determine if the practice test itself has any impact on improving pass rates on NCLEX. Our goal is to achieve better pass rates and more consistency in our NCLEX performance. We also offer independent study units for a guided self-study for NCLEX preparation. The students meet with the instructor who reviews the NCLEX test plan, study tips, and available resources for studying, including computer resources in the media laboratory. The students document their study hours, and participate in some form of testing, either the computer adaptive practice test in the media laboratory, or commercial practice tests. The instructor reviews the results with the students. About 20 4th and 5th semester students participate each semester. We believe one major outcome of this process is to make the students much more cognizant of NCLEX format, and more conversant with the testing process.

## IV. REQUIRED CURRICULUM; PRIOR APPROVAL

#### SECTION 1426(c)

The curriculum shall consist of not less than fifty-eight (58) semester units, or eighty-seven (87) quarter units, which shall include at least the following number of units in the specified course areas:

- (l) Art and science of nursing, thirty-six (36) semester units or fifty-four (54) quarter units, of which eighteen (18) semester or twenty-seven (27) quarter units will be in clinical practice.
- (2) Communication skills, six (6) semester or nine (9) quarter units. Communication skills shall include principles of verbal, written and group communication.
- (3) Related natural, behavioral, and social sciences, sixteen (16) semester or twenty-four (24) quarter units.

The Nursing major consists of 94-95 total units. In addition, the nursing student must complete approximately 32 units of University requirements. Completion of a total of 128 units allows the student to receive a Bachelor of Science degree. The 95 units in the major are in the following configuration:

- Art and Science of Nursing -- 58 semester units. For the curricular
  pattern instituted in Fall, 1994, 21.5 units are clinical practice units and
  36.5 units are nursing theory.
- Communication Skills -- 6 units of lower division coursework outside of the professional Nursing courses. The required courses are English 001 (Freshman Composition) and Human Communication Studies, either HCS 11 - Speech Communication Fundamentals or HCS 012 - Small Group Communication. Communication skills are emphasized throughout the Nursing curriculum. Communication theory and skills

are introduced in N82, Nursing Role I. Principles of group communication are introduced in N112, Nursing Role and reinforced in the leadership management courses (Nl22/Nl24) and the mental health nursing courses (Nl33/Nl34). In addition, more complex therapeutic communication strategies are taught in N133 in dealing with individuals.

The University mandates a certification of writing proficiency for all majors. Writing proficiency is required for graduation and is certified in N122. A student who cannot demonstrate such writing proficiency must seek remediation; a nursing student who ultimately cannot pass the proficiency course will be dismissed from the program.

3. Related Natural, Behavioral, and Social Sciences --27 units. The natural sciences comprise 22 semester units, including inorganic and organic chemistry, anatomy and physiology, microbiology, and nutrition. The social and behavioral sciences, 9 units, consist of psychology, child development, and sociology or cultural anthropology. These courses also fulfill general studies requirements of the University, which include 9 semester units of natural sciences and 9 semester units of behavioral and social sciences. The net effect of these requirements is a well-rounded individual, prepared not just in the major, but able to experience the unity and wholeness of knowledge acquired in the University.

## IV. REQUIRED CURRICULUM; PRIOR APPROVAL

## SECTION 1426(d)

Theory and chinical practice shall be concurrent in the following nursing areas: medical-surgical, maternal/child, mental health, psychiatric nursing and geriatrics.

Theory and clinical practice are concurrent in all areas of the curriculum, and are organized by semesters as follows:

SEMESTER	THEORY CONTENT	CONCURRENT CLINICAL PRACTICUM SETTING
I	N83 - Nursing Foundations (Beginning Med-Surg, Basic Gerontology Concepts) N102 - Nursing Assessment	N84 - Practicum in Nursing Foundations (Young, middle, and older adult patient)
п	N103 - Nursing Concepts for Acute Care (Med-Surg and Gerontology Theory)	N104 - Practicum in Acute Care (Acute Hospital Unit - Young, middle, and older adult)
ш	N113 - Maternal-Child Nursing N115 - Family Nursing	N114 - Practicum Maternal-Child Nursing (In-patient and community, normal and high risk obstetrics, well-child assessment, acute pediatrics, and developmentally disabled children)
IV	N122 - Leadership/Management and Professional Issues in Nursing N133 - Nursing Management of Maladaptive Behavior (Psychiatric Nursing)	N124 - Practicum in Patient Care Management N134 - Practicum in Management of Maladaptive Behavior
V	N163 - Nursing Care of the Gerontology Patient  N173A - Foundations of Community Health Nursing  N173B - Caring for the Family in the Community  N193 - Integrative Nursing Theory	N174 - Practicum in Community Health Nursing (Complex families; groups; communities, including young, middle, and older adult)  N194 - Practicum in Integrative Nursing (Practice in acute care settings - complex patients, including young, middle, and older adult)

Instruction in the curriculum includes all required components, as specified in the table below:

Personal Hygiene	Objectives	
Nursing 83	<ul> <li>Describe scientific principles and concepts underlying nursing interventions, including the basic nursing skills used in health maintenance and preventive care for an individual.</li> </ul>	
Human Sexuality	Objectives	
Nursing 83	<ul> <li>Define human sexuality as a holistic concept and discuss the influence of sexuality on health, aging, and healthcare.</li> <li>Discuss the importance of nurses' sexual self-awareness.</li> <li>Discuss the role of the nurse related to the issues of abortion, contraception, different sexual lifestyles, sexual abuse, sexually transmitted diseases, and sexual dysfunction.</li> </ul>	
Nursing 102	<ul> <li>Describe the process of obtaining a sexual history.</li> </ul>	
Nursing 103	<ul> <li>Identify pathophysiological changes that affect sexual functioning in selected body systems.</li> <li>Describe body image changes, secondary to surgery or disease process, that affect an individual's self-concept.</li> </ul>	
Nursing 113	Identify and explain the physiological, hormonal, and psychological changes of pregnancy, postpartum and the other major periods in a woman's life; puberty, menarche, and menopause, as well as the use of hormones/prostaglandins in the health care of women including contraception and hormone replacement therapy.	
Nursing 133	<ul> <li>Identify major sexual dysfunctions, etiology and treatment principles.</li> <li>Describe nursing roles in sexual counseling and psychiatric home health.</li> <li>Differentiate homosexuality as a preference from Ego Dystonic homosexuality.</li> <li>Identify major sexual deviation/paraphilias from the DSM IV.</li> </ul>	
Nursing 163	Discuss older adult treatment modalities for:sexuality issues.	

Client Abuse	Objectives
Nursing 113	<ul> <li>Explain the nurse's role in primary, secondary, and tertiary settings in the detection, prevention, and treatment of domestic violence and/or child abuse.</li> </ul>
Nursing 133	<ul> <li>Recall the basics of professional adult abuse mandatory reporting.</li> <li>Describe the role of the nurse in reporting abuse to appropriate agencies.</li> <li>Describe the cyclic stages of spousal battering.</li> <li>Identify background factors which contribute to the role of the victim.</li> <li>List factors which allow victims of family violence to remain in the situation.</li> <li>Discuss domestic violence reporting responsibilities and documentation of injurer.</li> <li>Discuss care planning for the dysfunctional family which will include nursing diagnoses, identification of child and adult abuse, and therapeutic interventions.</li> <li>Discuss community crisis intervention services available for the dysfunctional family.</li> <li>Identify personality and development outcomes of adults who were victims of physical and sexual abuse as children.</li> <li>Describe the nurse's role in relation to intervention and treatment goals in developing a care plan to identify nursing diagnoses for the abused child.</li> </ul>
Cultural Diversity	Objectives
Nursing 83	<ul> <li>Describe appropriate spiritual interventions that reflect varied cultural and religious needs.</li> </ul>
Nursing 102	<ul> <li>Identify developmental and cultural considerations in assessment.</li> <li>Identify cultural, ethnic, and religious factors that affect patient care.</li> </ul>
Nursing 103	<ul> <li>Assess the differences across family cultures in the definition and management of pain.</li> </ul>
Nursing 115	<ul> <li>Present the common health beliefs and practices of select cultural groups.</li> </ul>
Nursing 163	<ul> <li>Recognize current demographic trends and cultural diversity among older adults and describe stereotypes that apply to these populations.</li> </ul>

Nutrition	Objectives	
Nutrition course prerequisite		
Nursing 83	<ul> <li>Identify factors influencing dietary patterns. Describe common problems in nutrition and therapeutic diets. Identify goals of enteral and parenteral nutrition.</li> </ul>	
Nursing 102	<ul> <li>Identify purpose and components of nutritional assessment. Describe clinical and laboratory indications of nutritional deficiencies.</li> </ul>	
Nursing 103	Describe therapeutic diets prescribed for specific disease processes.	
Nursing 113	<ul> <li>Explain assessment parameters, including cultural variations of mothers and children during normal childbearing and childrearing, recognize alterations and plan appropriate nursing actions, including nutrition, patient education</li> </ul>	
Pharmacology	Objectives	
Nursing 83	Describe concepts of pharmacotherapeutic support for health maintenance and restoration.	
Nursing 103	<ul> <li>Describe mechanisms of pathophysiology, diagnosis, and nursing therapeutics for care of adults with selected disease processes.</li> </ul>	
Nursing 113	<ul> <li>Describe the medical and nursing interventions used in the treatment of the high-risk conditions for the pregnant woman/fetus/neonate and child.</li> </ul>	
Nursing 133	<ul> <li>Apply knowledge of indications, actions, and usual dosage of major psychotropic drugs.</li> </ul>	
Nursing 163	Discuss older adult treatment modalities fordrug abuse, polypharmacy	
Nursing 193	♦ (Integrated through case studies)	

Legal, Social & Ethical Aspects of Nursing	Objectives	
Nursing 82 &122	Discuss the legal and ethical aspects of nursing practice	
Nursing 82	<ul> <li>Discuss the major historical and social factors and individuals which influence the growth of professional nursing.</li> </ul>	
Nursing 122	<ul> <li>Identify the impact of legislative process upon the implementation of nursing practice and the leader/manager role.</li> </ul>	
Nursing 133	<ul> <li>Demonstrate an understanding of historical, legal and ethical issues in the treatment of maladaptive behavior.</li> </ul>	
Nursing 173A	Be aware of ethical principles which allow the contemporary community health nurse to made decisions	
Nsg. Leadership & Management	Objectives	
Nursing 112	<ul> <li>Describe leader techniques and member behaviors that facilitate or impede effective group functioning.</li> </ul>	
Nursing 122	<ul> <li>Differentiate between leadership roles and management functions.</li> <li>Relate management process to management practice at the unit level.</li> <li>Develop political and personal power building techniques which enhance leadership and management.</li> </ul>	

#### IV. REQUIRED CURRICULUM; PRIOR APPROVAL

#### SECTION 1426(e)

The following shall be integrated throughout the entire nursing curriculum.

- (l) Nursing process;
- Basic intervention skills in preventive, remedial, supportive, and rehabilitative nursing;
- Physical, behavioral and social aspects of human development from birth through all age levels;
- (4) The knowledge and skills required to develop collegial relationships with health care providers from other disciplines;
- (5) Communication skills including principles of verbal, written and group communications;
- (6) Natural sciences including human anatomy, physiology, and microbiology; and,
- (7) Related behavioral and social sciences with emphasis on societal and cultural patterns, human development, and
- (8) Behavior relevant to health-illness.

The nursing process is used in the curriculum as the systematic process for providing nursing care to individuals, families, and communities. Emphasis is placed on assessment skills throughout the program. Planning and the identification of nursing diagnoses are critical themes in practicum courses. Basic interventions in remedial, supportive, and rehabilitative nursing care are integrated throughout the program, as are the natural, physical, behavioral, and social sciences and communication. Evaluation is used as further assessment as well as outcome criteria.

All of the prerequisite and co-requisite natural, behavioral and social science courses are basic components of the nursing program. Prior to entry into the Nursing

Program all nursing students must successfully complete Anatomy (Biology 003),
Physiology (Biology 004), Inorganic Chemistry (Chemistry 027), Organic Chemistry
(Chemistry 028), Microbiology (Biology 011), and Nutrition (NFSC 25, 125 or 128).
These courses were selected because they give breadth and depth to the Nursing
courses. The concepts and information from these courses are integrated into, built
upon, and applied throughout the program in every semester.

Nursing students are required to take written English (English 001) and verbal communication (HCS 0111 or 012) prior to entering Semester IV. Additionally, all students take courses in Sociology (Sociology 001) or Anthropology (Anthropology 013 or 103), and Child Growth and Development (CD 052). All prerequisite courses can be taken at community colleges or other senior colleges.

In the <u>First Semester</u> of the nursing sequence, the primary emphasis is on the care of individual adults in simple, largely predictable situations. The nursing process is introduced in N82, Nursing Role I, and N102, Nursing Assessment. The focus is on concepts related to basic physical, social, cultural needs and mechanisms for health maintenance. The nursing process is applied in N84, Practicum in Nursing Foundations. The students care for one or two patients and practice basic assessments, identify common problems, and provide basic interventions. There is an emphasis on the assessment and nursing diagnosis phase of the nursing process, while students begin to define goals and choose basic nursing interventions. The students write a case study and a care plan reflecting the care of one of their patients.

The skills of interpersonal communication and assertive behavior are presented in N82. Lecture/discussion, exercises, and role play are used along with actual communication practice in the clinical setting. The students write and analyze one process recording. Students begin to interact with the nursing team as well as other disciplines.

In N83, Nursing Foundations and N84, Practicum in Nursing Foundations, the focus is on the use of the nursing process to meet basic physical, psychological, social, and spiritual needs. Prerequisite knowledge from the behavioral, social, and natural sciences is applied. In N83, the students study the theory, principles, and concepts underlying basic nursing skills, criteria for assessment of the basic needs of individuals including basic pharmacology. Physical and behavioral aspects of aging are presented at a beginning level and applied during the students' clinical contact with the older adult. These theories, principles, and concepts are then applied in N84 in the care of primarily middle-aged and older adults in acute care hospitals. Students also have experiences observing other nursing roles and disciplines within the health care setting; including surgery, social services, respiratory therapy, and infection control.

In N102, Nursing Assessment, students learn to perform a physical examination using a head to toe or body systems approach. The course focuses on the assessment of the adult client encompassing the adult developmental cycles from the younger to the older adult. The knowledge the student obtains in this course is an essential ingredient in the assessment component of the nursing process. It is used in the concurrent clinical practicum (Nursing 84) and in subsequent clinical practicums in both the acute setting and while performing basic health screening.

Behavioral, social, and natural sciences are applied during the Second Semester of the nursing curriculum by the students in Nl03, Nl04, and N112. In Nl03, Nursing Concepts for Acute Care, the students examine pathophysiology, clinical manifestations, and therapeutic interventions in selected body systems with an emphasis on nursing theory. Basic preventive, remedial, supportive, and rehabilitative nursing concepts are addressed from physical, behavioral, and social perspectives using the nursing process. The primary focus in this course is on the adult client. The effects of physiological aging and pain management are incorporated into the content. The importance of developing collegial relationships as a team member and using a team

approach to patient care is expressed. Critical thinking, physical assessment, basic skills, and the nursing process in the promotion, restoration, and rehabilitation of health are emphasized.

Nl04, Practicum in Acute Care, focuses on the adult client in acute care settings. Students provide direct patient care to one or two individuals using the nursing process. Physical, behavioral, and social aspects of care again focus on the adult and aging population. The importance of developing a collegial relationship with one's peers is stressed and students communicate closely with other members of the nursing staff. At this level, students are also introduced to the basic concepts of discharge planning and they are expected to use multiple resources such as pharmacy, laboratory, social workers, and physicians in planning and carrying out patient care and education.

N112, Nursing Role Concepts, focuses on the nursing roles of teacher, advocate, change agent, collaborator, decision-maker, and group member. The students are asked to prepare a lesson plan and a paper that demonstrate the principles of patient education. Students also observe and analyze group behavior applying principles of group process. Nursing problems related to advocacy, change, values, and decision-making are presented.

The following are integrated throughout the <u>Third Semester</u> of nursing in maternal-child nursing, family nursing, and nursing research: the nursing process; health promotion, maintenance, and restorative and rehabilitative care; communication; physical, behavioral, and social human development from the prenatal period through the care of adolescents; family nursing and interdisciplinary planning for health care, including nursing research. The nursing process is used in the community as students assess children and childbearing adult women in their homes, clinics, and schools. Acute obstetrical and pediatric care is practiced in the hospital where assessments, nursing interventions, medications, teaching, and collaboration

with the health team are carried out. N113 presents maternal-child theory (including growth and development of the fetus, infant, child, adolescent), physiologic alterations, maladaptation, and therapeutics. Principles of home visiting and the referral process are taught.

A major emphasis of Semester III is health promotion and advocacy. Students work with expectant and new parents from diverse cultures to improve pregnancy outcomes and foster healthy child growth and development. Students participate in prenatal care, immunization clinics, and well baby care. Students in child nursing evaluate the unique growth, developmental, and educational needs of the developmentally challenged child. There is an important focus on collaboration with others on interdisciplinary teams. These include: speech therapists, school nurses, psychologists, physical and occupational therapists, social workers, nutritionists, and public health staff as well as physicians and staff nurses in clinics and the hospital.

Students take two other lecture courses during the third semester. In Nursing 115, Family Nursing, focuses on family theories and the practical application of family theory in assessing the family as a unit. Nursing care for families with cultural backgrounds different than the majority culture are discussed as well as issues in the aging family. Students prepare a family assessment paper in which these aspects of family behavior are assessed. In Nursing 132, Nursing Research, students are introduced to formal research methodology. This course builds on theoretical and empirical knowledge from nursing, the basic sciences, and humanities to explore problems and solutions in nursing practice. Students are introduced to research as a form of critical thinking and ethical and legal considerations are emphasized. Verbal communication skills are further refined and applied in presenting research critiques.

In <u>Semester Four</u>, the content is focused on management and leadership skills and on nursing management of maladaptive behavior. The nursing process is used in

all courses in the Semester IV pattern. In N122, Leadership/Management and Professional Issues in Nursing, the nursing process is identified as one of the decision-making models that may be used to provide a framework for solving leadership and management case studies. The social and behavioral sciences are drawn upon in an examination of organizational, motivational, and change theories. In N124, Practicum in Patient Care Management, the nursing process is stressed with special emphasis on the intervention and evaluation of patient care. Discharge planning and patient teaching are also emphasized. Natural, social, and behavioral sciences provide the theoretical foundation for patient care. Students are encouraged to make appropriate multidisciplinary referrals. Collaborative relationships and communication skills are stressed. Students learn to apply their decision making, communication, and nursing therapeutic skills to planning, carrying out, and evaluating nursing care to groups of acutely ill patients.

The application of the nursing process to planning care for mental health clients is emphasized in both N133, Nursing Management of Maladaptive Behavior, and N134, Practicum in Management of Maladaptive Behavior. In N133, the format for writing nursing care plans is reviewed, and nursing diagnoses specific to mental health clients are presented. Case examples of clients with various maladaptive behaviors or conditions are reviewed in class and students are given the opportunity to determine appropriate nursing diagnoses and then formulate goals with evaluative criteria and corresponding nursing interventions. These plans are discussed with the class as a whole.

In NI34, one of the requirements for completing the weekly student logs is to write brief assessment data on selected clients followed by nursing diagnoses, objectives and interventions. Students receive written and verbal feedback on the accuracy and appropriateness of these logs, which gives direction and assists them to improve the quality and applicability of their client care. Preventive, remedial, supportive, and

rehabilitative nursing are integrated throughout the nursing care section of the psychiatric nursing course. Major psychiatric disorders are discussed and therapeutic nursing interventions are taught to assist the student to deal with a variety of behaviors with the acute and chronically mentally ill population. Nursing students are also placed in various clinical sites which affords them the opportunity to observe and/or participate in treatment modalities ranging from crisis intervention, acute in-patient stabilization, out-patient clinical case management, and day treatment programs. Additional emphasis is placed on students working with patients in order to increase their self-esteem, communication skills, coping mechanisms, and utilization of available support systems, and resources.

Several of the factors which influence human development are explored in the maladaptive behavior nursing courses. Phenomena of dysfunctional families and the resultant co-dependency issues, the effects of physical, emotional and sexual abuse and neglect, the stigma of mental illness, the increasing duality of chemical abuse and mental illness, the effects of organic syndromes on mental functioning, and other examples of somatopsychic and psychosomatic conditions are explored. The students use their theoretical knowledge as a basis for their therapeutic practice on mental illness as seen in childhood, adolescence, adulthood, and within the older adult population. During their clinical experiences at community mental health centers, students have a unique opportunity to observe and participate in the development of collegial relationships with health care providers from other disciplines. In these settings the interdisciplinary team works together to plan and implement patient care. Students become familiar with the roles and functions of these team members both through material presented in theory class and from individual discussion with the various mental health disciplines.

All of the courses in the <u>Fifth Semester</u> use the nursing process as the basic decision-making tool in examining case studies and in the nursing care of individuals, families, and communities. All courses use content and theory from the pre- and corequisite courses.

Nursing 163, Nursing Care of the Gerontology Patient, focuses on the nursing process as it relates to the gerontological patient. Theories of normal aging, in conjunction with nursing practice implications are emphasized. This course includes the examination of emerging nursing roles within the interdisciplinary content of care for the older adult.

NI73A, Community Health Nursing Theory, is a study of the political, legal, and historical aspects and current issues and trends of Community Health and Community Health Nursing. The major community health sciences of biostatistics, epidemiology, and environmental health are introduced. Professionalism, issues, and trends are explored. Application of the nursing process in the care of the community as client is introduced.

The N173B, Caring for the Family in the Community, course builds upon the foundation provided by the Family Nursing (N115) course and explores the interaction of the nursing role and the family unit. This collaborative process seeks to facilitate the family's movement toward health. The focus is on stressed family systems and the needs of the family are studied within the framework of its developmental stages.

The focus of Nl74, Community Health Nursing Practicum, is the application of content from Nl73A and B in a variety of community health settings. The nursing process, health promotion, and primary prevention are emphasized in the nursing care of high-risk families which represent various developmental stages. The practicum activities promote the understanding of physical, behavioral, and social/cultural aspects

of human development, verbal, written, and group communication, and the development of collegial relationships with other health care providers. In the seminar of N174, the focus is on identifying interventions to promote community health, to prevent illness and disease, and to facilitate adaptive mechanisms of clients and families. Students use the group process for problem-solving related to their individual caseloads. The students focus on nursing care delivery to diverse cultural family systems with impaired adaptation mechanisms within a rapidly changing health care system.

In Nl93, Integrative Nursing, and Nl94, Practicum in Integrative Nursing, the students use the nursing process to care for patients and to discuss care of patients from conception through senescence with complex problems and needs. Students focus sixteen hours of their clinical experience on the gerontological patient. This is reflected in the care given and in the log/journal entries which include the increased risks, coping strengths, and specialized care required for the older adult. Verbal and written communication skills are emphasized in the preventive, remedial, supportive, and rehabilitative care of patients. Societal and cultural patterns and customs are incorporated. Students are encouraged to become part of the health care team through unit/case conferences, referrals, and interdisciplinary conferences.

In this final semester, whether the clinical site is an acute care facility or a community agency, the student is expected to demonstrate an integration of decision-making, communication, and nursing therapeutics in complex/high risk situations with clients across the entire life-span.

#### IV. REQUIRED CURRICULUM; PRIOR APPROVAL

#### SECTION 1426(f)

The course of instruction shall be presented in semester or quarter units under the following formula

- One (1) hour of instruction in theory each week throughout a semester or quarter equals one (1) unit
- (2) Three (3) hours of clinical practice each week throughout a semester or quarter equals one (1) unit.

The School of Nursing is consistent with the rest of the University in the number of hours of instruction equivalent to a semester unit. One hour of instruction in theory each week throughout a semester equals one unit. Three hours of clinical practice each week throughout the semester equals one unit.

#### V. CLINICAL FACILITIES

#### SECTION 1427(a)

A nursing program shall not utilize agencies and/or community facilities for clinical experience without prior approval by the board. Each program must submit evidence that it has complied with the requirements of subdivisions (b) and (c) of this section and the policies outlined by the board.

The agencies/community facilities used by the School of Nursing have all been previously approved by the BRN. BRN Clinical Facility Form 15M-46.6 is available for evidence. The use of clinical agencies has remained fairly stable.

Current clinical contracts or agency agreements are maintained with all agencies in use. The contracts or agreements are renewed every five years, or at the request of the School of Nursing, or the clinical agency if changes in the existing agreement becomes necessary. The Contracting Officer of CSU, Chico maintains the original agreement on file and initiates the contract or agreement renewal. A copy of each agreement is also kept on file in the School of Nursing Office.

#### V. CLINICAL FACILITIES

#### SECTION 1427(b)

A program which utilizes agencies and/or community facilities for clinical experience shall maintain written objectives for student learning in such facilities, stated in measurable performance terms, and shall assign students only to facilities which can provide the experience necessary to meet those objectives.

#### Clinical Resources:

Written behavioral objectives for each clinical practicum course are provided to the Director of Nursing, or her designee, and the Clinical Coordinator on each unit of each clinical agency involved in the teaching of students. These clinical agencies have been selected by the faculty because of their unique ability to provide the learning experiences necessary for students to meet specific course objectives. Discussions are held between faculty and staff to assure the objectives are understood and the appropriate clinical experiences are available.

#### V. CLINICAL FACILITIES

#### SECTION 1427(c)

Each such program shall maintain written agreements with such facilities and such agreements shall include the following:

- Assurance of the availability and appropriateness of the learning environment in relation to the program's written objectives;
- (2) Provisions for orientation of faculty and students;
- (3) A specification of the responsibilities and authority of the facilities staff as related to the program and to the educational experience of the students;
- (4) Assurance that staff is adequate in number and quality to insure safe and continuous health care services to the patients;
- (5) Provisions for continuing communication between the facility and the program; and
- (6) A description of the responsibilities of faculty assigned to the facility utilized by the program.

Agreements or contracts are used to establish proper interagency relationships. These agreements/contracts are approved by the Board of Registered Nursing, agency administration, and Fiscal Affairs Office of the University. The Director of the School of Nursing initiates the contract and assures maintenance and periodic review of these agreements or contracts. Agreements/contracts with each of the health agencies used by students are current and will be available for review by the site visitors.

Prior to the opening of an agency for clinical experiences, there is discussion to determine the value of the learning experiences available as well as the interest of the agency in a cooperative agreement. Guidelines are as follows:

- A senior faculty in the clinical area and the faculty member to be assigned to the agency contacts the Nursing Director or appropriate person in the desired agency to discuss placement of students. Faculty apprise the Director of the School of Nursing of the contact.
- 2. The initial conference with the agency includes the following:
  - Philosophies of the School of Nursing and of the agency.
  - Course objectives and student's level of preparation and experience prerequisite to the course.
  - Mutual benefits of the relationship.
  - Responsibilities and roles of nursing faculty, student, and agency.
  - e. Agency's expectations of the student.
  - f. Classroom or conference space and use of agency resources including consultation services, records, desks, library, telephone, in-service, staff meetings, bathrooms, storage, parking, and hours the agency is open.
  - g. Plan for ongoing communication between California State University, Chico School of Nursing and the agency to include evaluation of the experience for both the student and the agency.
  - h. Brief description of contract School of Nursing uses including student requirements for malpractice insurance and immunizations. The Director of the School of Nursing or a designee will initiate the agreement/contract process.

A standard California State University contract form is used in beginning negotiations for an agreement. In the event of specific clauses requested by the health agency, appropriate changes or additions are made to the document. A copy of the basic contract will be available for site visitors.

The agreement/contract documents the need for ongoing review and assures the current presence of the following:

- Assurance that the agency environment and learning experiences are appropriate to the clinical objectives.
- Orientation for new faculty assigned to a clinical area will be provided by other School of Nursing faculty with assistance from agency staff who have been working with students in that facility. Student orientation to a facility will be provided by the faculty member who will be responsible for students in the agency and by agency staff as appropriate.
- 3. The School of Nursing faculty will supervise the student's clinical learning experience. The concept of supervision is interpreted to include assignment, evaluation, and discipline where indicated. This responsibility of Nursing faculty does not preclude cooperative planning and evaluation. School of Nursing faculty supervise only those students enrolled in the baccalaureate nursing program at California State University, Chico.
- Staffing in all agencies used by the nursing program is adequate to meet patient care needs in that facility; students are not considered to be a part of the staffing pattern.
- 5. Continuous communication with the clinical agencies will be maintained by the faculty in each agency. Faculty meet with the directors of the agencies, with supervisory personnel, and with the nursing staff on a regular basis. Faculty members keep minutes of these meetings with agency personnel which are maintained in the School of Nursing. Informal day-to-day contact is equally important in maintaining rapport with the clinical agencies and assuring the proper types of learning experiences for students. Faculty maintain excellent relationships with clinical agencies. In the event that a learning experience does not prove to be satisfactory, meetings are established with the agency personnel, the faculty involved, and occasionally the School Director, to resolve any difficulties.

#### VI. STUDENT PARTICIPATION

#### SECTION 1428(a)

Students shall be provided the opportunity to participate with the faculty in the identification of policies and procedures related to students including, but not limited to:

- (1) Philosophy and objectives
- (2) Clinical facilities
- (3) Learning experiences; and
- (4) Curriculum instruction and evaluation of the various aspects of the program.

Students in the School of Nursing are strongly encouraged to participate in policy-making and curriculum study. Students in each semester are asked to elect representatives to General Faculty, Curriculum, Faculty-Student Affairs (FSA), and Semester meetings. These students provide a link between faculty and the student body and allow for expression of concerns or support. These students attend scheduled Committee meetings on a regular basis and their attendance is reflected in the meeting minutes. Long term curriculum and program changes have been initiated, in part, as the result of student input. In addition, more immediate concerns about learning experiences and clinical facilities can be dealt with in the semester meetings. These opportunities for ongoing student input into policies and procedures. In addition, the Director of Nursing conducts an exit survey which allows students to provide additional input into the various aspects of the nursing program.

#### VI. STUDENT PARTICIPATION

SECTION 1428(b)

The program-shall have a procedure for resolving student grievances.

#### Student Grievances

The rights of students related to academic programs or University services are governed by statute, rules, and policies adopted by the California Legislature, the Trustees, the Chancellor, the campus President, and their duly authorized designees. This judicial process provides procedures for **informally** resolving student complaints or, when necessary, for resolving **formal grievances**. Grievances arise when a student feels that a member or members of an academic community have failed to meet their obligations as agent of the university, thus resulting in an unjust or adverse impact on the student. Students are apprised of the grievance procedure in the following manner:

- A <u>Student Grievance Brochure</u> outlining the provisions and procedures available from the Office of the Coordinator for Student Judicial Affairs;
- (2) The University Catalog 1995-2001 (pp. 158 and 595); and
- (3) The School of Nursing Student Guidelines (p. 37).

The above information will be made available for the site visitors' review.

Within the School of Nursing, before the student may invoke the formal grievance procedures, he/she must meet on an informal basis with the faculty member directly responsible for the action which caused the complaint. The student then meets with the semester coordinator. If the matter is still unresolved, the student shall meet with the Director of the School of Nursing. Discussion with the Dean of the College of Natural Sciences is the final step in the informal process.

Most complaints/grievances are resolved during the informal process. If not, the student may meet with the Coordinator for Student Judicial Affairs in Kendall Hall (See Appendix E). If the complaint/grievance cannot be resolved by the Coordinator, formal grievance procedures are begun. All grievances will follow the <u>University</u> Grievances Procedure approved by the President and revised in 1994 (see Appendix E).

#### VI. STUDENT PARTICIPATION

#### SECTION 1428(c)

Tools used to evaluate students' progress and performance and clinical learning experiences shall be stated in measurable terms directly related to course objectives.

The faculty believe the key to objectivity in clinical performance evaluation is the use of behavioral objectives. Each semester uses evaluation criteria which directly reflect the course objectives. Policies and procedures for evaluation are printed in the specific semester syllabus. The specific evaluation tools will be available for review by the site visitors. Following are brief summaries for each practicum.

#### Semester I - N84, Practicum in Nursing Foundations

The N84 course grade is determined by evaluation of a written case study and a written care plan, competency assessments, and a dosages and solutions examination. Students are evaluated as "acceptable/unacceptable" on one process recording, and clinical performance in skilled nursing and acute care settings. Criteria for evaluation are included in the students' course supplement. Students also participate in self-evaluation at both mid-term and final individual conferences with their clinical instructor.

#### Semester II - N104, Practicum in Acute Care

The N104 course grade is obtained by evaluation of a written case study, including a written care plan, and clinical performance, which is reviewed at midand end-of-semester conferences. Evaluation criteria are based on course and unit objectives published in the student syllabus. Students are evaluated on their ability to: perform safely, to apply prerequisite and concurrent theory in providing nursing care,

to communicate skillfully in both written and oral presentations, and to individualize patient care using the nursing process.

#### Semester III - N114, Practicum in Maternal-Child Nursing

Student progress is evaluated based on the behavioral clinical objectives including applying nursing process; documentation; applying nursing concepts of growth and development, family-centered care, cultural aspects, and physiological adaptation and alterations; performance of nursing skill; and the demonstration of professional roles such as teacher advocate.

Evaluation tools addressing each objective are used by both students and faculty. Students receive ongoing evaluation through one-to-one supervision, discussion, and the use of student journals. Other professionals also have opportunity to comment on student performance such as teachers in special education schools, nurses, and nurse practitioners. Families whom the students are following have the opportunity to provide feedback to the faculty.

#### Semester IV - N124, Practicum in Patient Care Management

The N124 grade is based primarily on the achievement of 17 behavioral clinical practice objectives. Both the student and faculty evaluate the student's performance on a five-point rating scale. In addition, the completion of a written process recording and staff development inservice contribute to the final grade.

## Semester IV - N134, Practicum in the Management of Maladaptive Behavior

The N134 grade is based on the achievement of clinical behavioral objectives, analysis of student logs, and process recordings. Both the student and faculty evaluate the student on a five-point scale for each of 20 objectives.

#### Semester V - N174, Practicum in Community Health Nursing

The N174 grade is based on the student's ability to meet the stated course objectives. Course objectives are met by clinical performance and written assignments. A clinical evaluation tool lists expected behaviors in three major objective areas: communication, application of the nursing process, and the professional role. The grade is based on the student's ability to meet the goals and objectives of the course as reflected in logs, aggregate project paper, the instructor evaluation, and a self-evaluation.

#### Semester V - N194, Practicum in Integrative Nursing

N194 is the capstone course in the program. The grade is based on the student's ability to meet the goals and objectives of the course and their own goals and objectives, as reflected in the logs, the gerontology log, the instructor evaluation, and a self-evaluation.

#### VII. LICENSED VOCATIONAL NURSES

#### SECTION 1429(a)

An applicant who is licensed in California as a vocational nurse is eligible to apply for licensure as a registered nurse if such applicant has successfully completed the courses prescribed below and meets all the other requirements set forth in Section 2736 of the Code. Such applicant shall submit evidence to the board, including a transcript, of successful completion of the requirements set forth in subsection (c) and of courses in physiology and microbiology comparable to such courses required for licensure as a registered nurse.

The School of Nursing provides LVN students with a State Board of Registered Nursing 30 Unit Option that prepares them for RN licensure. The program was first approved by the School of Nursing faculty in May, 1984 and approved by the BRN in the Fall, 1984. The program was revised and approved in 1989 and again in September, 1994. The revised program totals 29.5 units (see Section 1429c). The program meets the BRN criteria approved for the LVN students.

Content includes theory and clinical and meets specialty area requirements in advanced medical-surgical, mental health, psychiatric, and geriatric nursing. The University official transcript reflects all courses taken or challenged including courses in Human Physiology and General Microbiology.

This curricular option is made available to LVN applicants in printed program materials. No students are currently enrolled in this option.

#### VII. LICENSED VOCATIONAL NURSES

#### SECTION 1429(b)

The school shall offer objective counseling of this option and evaluate each licensed vocational nurse applicant for admission to its registered nursing program on an individual basis. A school's determination of the prerequisite courses required of a licensed vocational nurse applicant shall be based on an analysis of each applicant's academic deficiencies, irrespective of the time such courses were taken.

Each LVN applicant is offered individualized counseling and student advisement for both the BSN program and the BRN approved 30 Unit Option. All former work obtained toward nursing theory and practice as an LVN student or practitioner is reviewed for proper student placement and progression in the CSU, Chico nursing major. The School of Nursing places no restrictions on the time courses were taken.

LVN applicants are carefully apprised of employment restrictions that are likely for the non-graduate RN taking the 30 Unit Option who seeks to practice as an RN outside the State of California. The LVN student is also informed that successful completion of the 30 Unit Option will allow him/her to sit for RN licensure. However, it does not provide the most direct sequence nor sufficient credits to complete the Bachelor of Science degree in professional nursing at CSU, Chico. LVN students are encouraged to determine their career goals to decide their need for and interest in advancement in the profession. One designated faculty member (Richter) handles advising for all LVN students, to assure consistent and comprehensive advising.

## VII. LICENSED VOCATIONAL NURSES AND OTHER HEALTH CARE WORKERS

#### SECTION 1429(c)

The additional education required of licensed vocational nurse applicants shall not exceed a maximum of thirty (30) semester or forty-five (45) quarter units. Courses required for vocational nurse licensure do not count toward fulfillment of the additional education requirement. However, other courses comparable to those required for licensure as a registered nurse, as specified in section 1426, may be counted toward fulfillment of the additional education requirement.

Nursing courses shall be taken in an accredited school and shall be beyond courses equivalent to the first year of professional nursing courses. The nursing content shall include nursing intervention in acute, preventive, remedial, supportive, rehabilitative and teaching aspects of nursing. Theory and courses with concurrent clinical practice shall include advanced medical-surgical, mental health, psychiatric nursing and geriatric nursing. The nursing content shall include the basic standards for competent performance prescribed in Section 1443.5 of these regulations.

The CSU, Chico School of Nursing is accredited by the California State Board of Registered Nursing, the National League for Nursing, and the Western Association of Schools and Colleges. Courses in the 30 Unit Option begin with Semester II content. This content is beyond the first year level of professional nursing. The nursing content in the theory and practice courses includes acute, preventive, restorative, adaptive (remedial supportive, rehabilitative), and teaching aspects of nursing. Theory and clinical courses are concurrent and include advanced medical-surgical, mental health, psychiatric nursing, and geriatric nursing. (See Transfer and Challenge Policies, Appendix F.)

The LVN 30 Unit Option as approved September, 1994 follows:

## APPROVED 30-UNIT OPTION FOR LVN's

Prerequisites	s 7 Units	
BIOL 004 BIOL 011 (or	Human Physiology General Microbiology acceptable transfer courses)	3.0 Units 4.0 Units
Nursing 2	3 Units	
NURS 103 NURS 104	Nursing Concepts for Acute Care Practicum in Acute Care (Nl03 and l04 must be taken concurrently)	6.0 Units 4.0 Units
NURS 122 NURS 124	Leadership/Mgmt. & Professional Issues in Nsg Pract. in Pt. Care Management (N122 and 124 must be taken concurrently)	3.0 Units 2.5 Units
NURS 133 NURS 134	Nurs. Management Maladaptive Behavior Pract. Management Maladaptive Behavior (NI33 and I34 must be taken concurrently)	4.0 units 2.0 units
NURS 163	Nursing Care of the Gerontology Patient	1.0 Unit
	TOTAL	29.5 Units

#### VIII. TRANSFER AND CHALLENGE

#### SECTION 2786.6(a)

The board shall deny the application for approval made by, and shall revoke the approval given to, any school of nursing, which does not give to student applicants credit, in the field of nursing, for previous education and the opportunity to obtain credit for other acquired knowledge by the use of challenge examinations or other methods of evaluation.

#### TRANSFER

A student who has taken a course at an accredited college which is equivalent to any of the CSU, Chico nursing courses will receive transfer credit for such a course. The student is responsible for submitting a course description and a course syllabus for transfer credit. These items, plus a petition to substitute a course in the major, must be submitted to the Director of the School of Nursing. The Director decides on the transferability of courses with input from the coordinator and/or instructor for the course being petitioned.

#### CHALLENGE

All courses in the nursing major have written procedures for challenge which are kept on file in the nursing office. Students who can document prior education or nursing experience equivalent to a given course may apply to challenge the course. The student submits documentation to the Director. The Director makes a decision with input from the instructor or coordinator as to whether the student may challenge the course. Once approved, the student contacts the instructor of the course to arrange a plan for challenge. The student enrolls for the course being challenged and receives a letter grade, based on the criteria in the course challenge procedures.

### TRANSFER AND CHALLENGE FOR REGISTERED NURSE APPLICANTS

Applicants who have graduated from associate, or diploma nursing programs may be eligible for advanced placement by transfer credit, credit-by-examination or a combination of both. RN policies will be available for site visitors.

# SECTION 7 PART B COMPLIANCE WITH BRN POLICIES

#### Transfer And Challenge

See Sections VII and VIII, Sections 1429(a), (b) and (c) and 2786.6.

#### **Ethical Practices**

#### 1. Recruitment activities:

The school has not been widely involved in recruitment activities for the generic program in the past, given the large numbers of applicants who cannot be accommodated. Recruitment trips are made regularly to local community colleges and hospitals, primarily to recruit RN-BSN students. Transfer students for the generic program occasionally do participate in these recruiting sessions. Additionally, more efforts are being directed at recruitment for the profession in general. Several faculty have made presentations in K-12 schools to discuss nursing as a career.

The recruiting materials are standard handouts, with clear, unambiguous information. Faculty clearly present the benefits of this program enthusiastically, but always recognize that other programs are sound programs, fully accredited, and that the choice of program often relates to situational dynamics and lifestyle preferences. Derogatory statements about other programs do not occur.

#### 2. Accurate Information:

Published information is updated frequently. The catalog is revised and reprinted every two years; the class schedule is reprinted yearly; the University and Nursing web page are updated even more frequently. Students have ready access to updated information on admission requirements, costs, and curriculum. Since the program has been on impacted status, the chancellor's office requires that any changes in admission criteria must be approved and published a year prior to changes. The School complies fully with this policy.

#### Refund Policies:

The <u>University Catalog</u> contains refund policies which are clearly stated on pp. 113-115.

#### Civil Rights Act:

Civil Rights Act provisions are adhered to. Admission, retention, and evaluation procedures are all based on non-discriminatory criteria.

#### Confidentiality:

Faculty and staff with access to student files are aware of the need for confidentiality and follow University policies. All student files are in locked filing cabinets, accessible only to office staff and to faculty during regular office hours. Student information in computer data bases is accessible only to those individuals with authorized computer codes, and those individuals are reminded when information is confidential.

#### Policies:

The catalog and the <u>Nursing Student Guidelines</u> cover progression and graduation policies, as well as grievance procedures.

#### CSU, Chico Catalog:

- Graduation, p. 132
- Academic policies, pp. 166-168
- Academic probation, pp. 158-159
- Grievance procedures, pp. 158, 595

#### School of Nursing Student Guidelines:

- Academic Policies, pp. 27-28
- Leaving the program, p. 32
- Retention, p. 32
- Student Rights and Responsibilities, pp. 33-37
- Graduation, p. 46
- · Grievance procedure, p. 37

#### 7. Eligibility for NCLEX:

All students who complete program requirements are certified as eligible for the NCLEX.

#### 8. ANA Code for Nurses:

The faculty endorse and teach ethical practices, based on the American Nurses' Association Code for Nurses. These standards are presented in the School of Nursing Student Guidelines, pp. 1-2, and are introduced to the students on their first day in the program. They are subsequently reinforced throughout the program.

#### Research protocols:

Research is undertaken only with full compliance with university protocols, which include Human Subjects Review.

#### 10. Counseling:

Provisions for tutorial and remedial services are provided by the university for general skills. See pages 58-59 of the CSU, Chico catalog. In addition, one faculty member is assigned as Retention Coordinator, with the role of assisting students who are referred because of concerns about performance in nursing theory and

practica. The Retention Coordinator works individually with students who are experiencing difficulty, providing study skills pointers, individual skills laboratories as needed, and clinical decision making scenarios. Retention and graduation rates are excellent. We still see a need for more resources for students who speak English as a second language (ESL). One useful resource has been the American Language and Culture Institute on campus, which assists students to master language and cultural nuances.

The School of Nursing frequently assists foreign educated nurses to acquire missing content needed for NCLEX licensure. In the past few years, two students have participated in mental health nursing courses to become eligible for NCLEX. This process works on a space available basis only. Since we have good retention rates, it is not always possible to accommodate nurses at the time they may need a clinical space. Faculty is willing to provide these clinical experiences through summer session when space is not available during the regular school year. The School Director works closely with the Office of Records and Admissions to evaluate foreign transcripts and to determine equivalence and transferability of units taken in other countries. We feel we give the student a very fair and thorough assessment of credits. In cases where prior work does not clearly meet the criteria for equivalence, students are offered the mechanism of challenge examinations.

#### Full-time/Part-time Faculty Statement

The majority of faculty is full-time. Fourteen faculty are in full-time positions; five faculty are in part-time positions, covering the equivalent of 3.3 faculty positions; one tenured faculty on the early retirement program teaches .33.

The full-time faculty participate in all faculty meetings and serve on at least one, and usually two of the standing committees. The faculty are involved in the planning, organizing, implementation, and evaluation of the nursing program, as well as participating in all major decisions. All tenured/tenure track faculty have student advising responsibilities in addition to their teaching. Faculty must establish five hours of office hours each week, for availability to advisees and students in their courses.

Part-time faculty are not required to participate in faculty meetings or committees. However, most of them do so out of interest and commitment to the program. They are kept fully informed through e-mail and minutes. Part-time faculty have no official advising responsibilities. However, they must maintain office hours, pro-rated based on the percentage of their appointment, e.g. a half-time faculty member is required to keep 2.5 office hours per week. Minutes of faculty meetings and committee meetings are available to demonstrate the full participation of faculty.

#### Content Expert

The nursing faculty has an adequate number of content experts in the areas of medical-surgical, obstetrics, pediatrics, psychiatric, and geriatric nursing. Content experts are as follows:

Medical-Surgical -- Brown, Persaud, Land-Smith, Leedom

Maternal-Child -- Richter, Morgan Mental health/psychiatric -- Hoban, Hookins Geriatric -- McManus

#### Delivery of Health Care

The School of Nursing adheres to and teaches the ANA Code of Ethics (Student Guidelines, p. 1). These guidelines support the right of all consumers to receive dignified and competent health care. The role of nursing advocate is discussed throughout the curriculum.

Students are taught universal precautions early in Semester I. These procedures are reinforced in every clinical course. Students work with patients with many communicable diseases, and learn to respect both the disease and its modes of transmission, as well as how to work compassionately and respectfully with the patient. It is not acceptable for students to refuse assignments on the basis of the patient's age, religion, sex, national origin, sexual orientation, or disability. The only exceptions made for assigning students to patients may occur when pregnant students are involved in patient care. Efforts are made to prevent exposure to communicable diseases which could harm a developing fetus, or when known treatments for exposure to such diseases would be contraindicated.

#### **Impaired Students**

The School of Nursing fully adheres to BRN policies regarding impaired students. Faculty attended a workshop conducted by Jill Thomson Skeoch, and articles on dealing with impaired students were shared. The BRN policies are included in the <a href="Nursing Student Guidelines">Nursing Student Guidelines</a>, pp. 25-27. First semester students are advised of these policies and are informed of a no tolerance policy regarding alcohol and drug use. Campus resources (Campus Alcohol and Drug Education Center-CADEC) for students who may have problems are discussed. Students who are suspected of having problems are referred to CADEC.

The faculty recently approved a policy statement on chemical impairment which will be added to forthcoming <u>Nursing Student Guidelines</u>. (See Appendix G). Faculty have had discussions of student problems, including signs and

problems are discussed in School of Nursing Executive meetings, and faculty involved with each student are made aware of concerns. Two impaired students were able to graduate from the program in recent years. This followed a period of close monitoring with each student on a contract. The policies seem to be working well in providing a fair and compassionate approach to impaired students, while safeguarding patients and adhering to nursing standards as well as BRN policies.

#### Curriculum Guidelines

During the self-study process, faculty reviewed all curriculum guidelines distributed by the BRN. We are in full compliance with these recommendations. In preparation for the accreditation visit, we compared our current curriculum to the BRN guidelines to determine where specific content is taught and how many hours are devoted to this content. The focus of this review was on chemical dependency, client abuse, pain\_management, and geriatric content. Location of content in each course and time spent on the content will be available to site visitors. A summary of the formal time spent on each area is listed below.

♦ Chemical dependency: 20 hours

Client abuse: 12.5 hours and variable hours in clinical

dealing with client abuse

Pain management:
 9 hours. Additionally, pain topics are

covered extensively in the clinical area

(conferences and patient care)

Geriatric content:
 41 theory hours and 67 clinical hours

#### CONCLUSIONS AND SUMMARY

The School of Nursing is thriving and moving in new directions as we begin to explore the implementation of new teaching/learning technologies. Faculty is on a rapid learning curve to incorporate computer-based technologies into the curriculum. Although these changes are currently being made in the RN-BSN program as part of a grant project, the benefits will ultimately impact the generic program as well.

The program remains impacted and continues to use special criteria to select those students most likely to succeed in nursing. Our retention rates, demographics, and NCLEX pass rates indicate that these criteria are working well.

Growth is occurring in RN-BSN enrollments, and this growth is supported by grant funding which also enhances the generic program. Faculty positions are gradually being refilled with tenure track positions.

#### Strengths:

The quality of the faculty continues to be a major strength of this program. The faculty is proud of the program and committed to its excellence. The faculty work as a highly collegial, cohesive team who enjoy their work. This pleasant working environment naturally affects the learning environment. Faculty is supportive of student learning needs and provides assistance on an individual basis. In addition, students perceive the faculty's enthusiasm for nursing which helps strengthen the students' commitment to the profession. The faculty is very active in grant writing, research, publication, University and community service, and practice. Two more faculty recently completed doctorates. These activities enhance teaching and serve as positive examples for students.

- 2. The Nursing student body is outstanding, representing a diverse group of men and women who are academically capable as well as committed to health care. The student nurse organization, CNSA, is very active in providing students an avenue for mutual support, structured social activities, and opportunities for exploring professional leadership roles. This organization has been active in campus blood drives and in projects to assist AIDS patients, as well as other projects to improve Nursing's visibility on campus and in the larger community.
- 3. Data from follow-up studies of graduates and employers indicate that both groups are satisfied with the product of the program. Alumni feel well-prepared and are appreciative of the in-depth background provided by the curriculum. The broad variety of clinical experiences provided in the curriculum is perceived by the graduate as valuable. Nursing administrators in agencies, both in rural and urban areas, welcome our graduates and reinforce the positive reputation of the School.
- 4. The School of Nursing maintains excellent relationships with clinical agencies. Because of the relatively small size of the facilities available to us, we use a variety of diverse agencies. Agency personnel have been very accommodating to the program in developing experiences to facilitate meeting clinical objectives. The growth of home health and community agencies has broadened the types of clinical opportunities for students and provides an additional employment opportunity for graduates. Our graduates have been actively sought by these rapidly expanding agencies.
- 5. The facilities in Chico provide broad-based health care to a large geographical area. Several ethnic and cultural sub-groups are part of this rural/urban mix. The agencies welcome our students and provide very rich and nurturing nursing experiences for students.

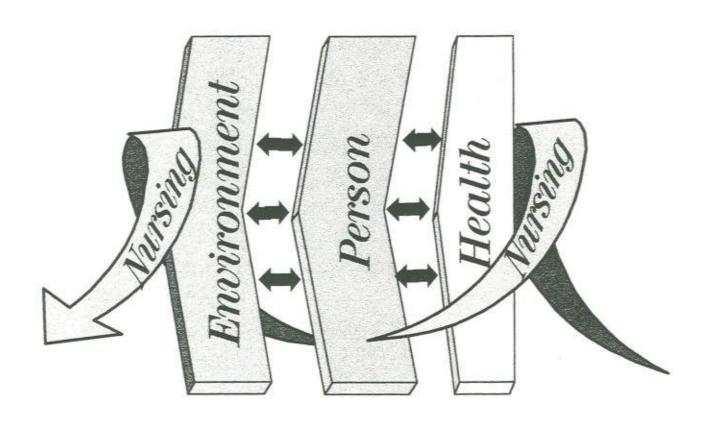
#### Areas for Improvement and Plans:

- Continue to assure that course changes are made with curriculum committee discussion and approval.
  - Institute regular curriculum committee review of course syllabi and course supplements as part of the evaluation process.
- Clarify student expectations and course matriculation patterns for RN-BSN students; refine written policies and procedures for the RN-BSN program through development of a handbook.
  - Develop student handbook for RN-BSN students; continue updating the Nursing Home Page with the most current data.
- Strengthen orientation and mentoring procedures for new and part-time faculty.
  - Develop faculty handbook.
  - · Continue faculty mentoring by semester faculty groups.
  - · Encourage involvement with University mentoring program.
- Continue to refine outcome criteria and evaluation processes.
  - In conjunction with yearly evaluation workshops, continue to analyze data on outcome criteria, along with publications on outcome assessments, to determine the best and most appropriate measures for this curriculum.
  - Consider feasibility of subscribing to professional assessment testing services developed for nursing outcome measures.
- Promote recruitment and retention resources for a diverse student body and faculty.
  - Expand relationships with high schools and middle schools, particularly in our rural service area with high ethnic populations.
  - Involve CNSA in recruiting visits to hometown schools.
  - Through support of RN-BSN grant, target recruitment efforts expanding faculty diversity.
- Renew media lab resources
  - Replace outdated media laboratory resources with state-of-the-art resources through active faculty review of new products.

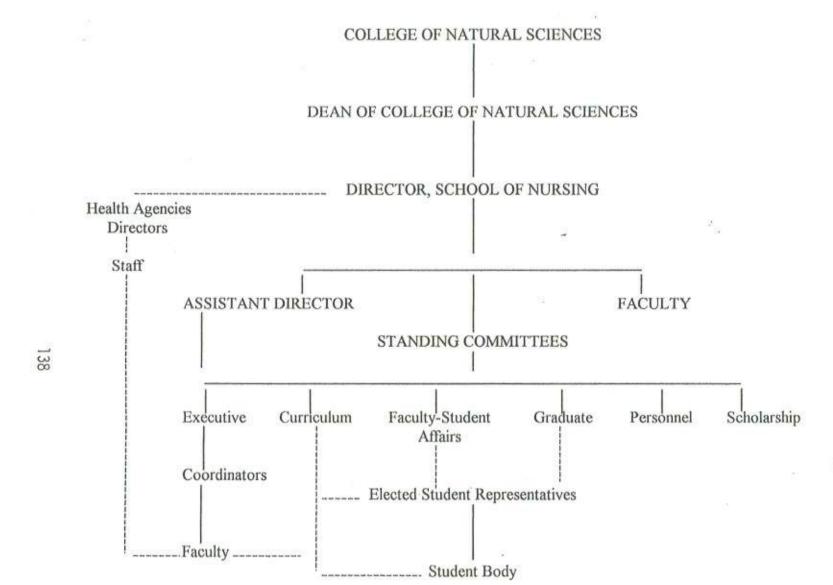
#### Plans for the Next Five Years

- Focus on service learning and leadership in community service activities.
   Establish a nursing clinic for the underserved.
- Seek expanded external funding for community service projects, master's projects, distance education projects, and learning technology projects.
- Continue innovation in application of electronic learning capabilities.
- Strengthen our leadership role in providing research assistance to community agencies.
- Strengthen master's and RN-BSN outreach efforts through current and future grant funding; expand collaborative efforts with other programs to increase options for advanced nursing education in rural areas.
- Engage in discussions of faculty workload and faculty renewal.
- 7. Expand recruitment efforts for the profession.
- Expand use of Internet/home page as information source for applicants, current students, and alumni.





APPENDIX B



----- Advisory Input

APPENDIX C

#### CALIFORNIA STATE UNIVERSITY, CHICO SCHOOL OF NURSING

#### **OUALIFICATIONS AND RESPONSIBILITIES OF THE DIRECTOR**

#### Qualifications:

- Holds a current and valid license to practice professional nursing in the State of California.
- Holds an earned doctoral degree and a master's degree from an NLN accredited master's program in nursing or an accredited school of public health.
- Holds a valid public health certificate in the State of California or is eligible to obtain it.
- Has a clinical specialty at master's level from an NLN accredited master's program in nursing or a public health concentration in an accredited school of public health.
- Has had preparation for teaching in nursing which includes practice teaching at master's level from an NLN accredited master's program in nursing or an equivalent experience in past employment.
- Has had at least one year's experience in an administrative position in a baccalaureate nursing program.
- Has had at least three years of recent experience in teaching in a baccalaureate nursing program.
- Has had at least one year's full-time, continuous employment in the practice of professional nursing.
- 9. Has had past experience in curriculum development.
- Has broad and current knowledge of trends in nursing, nursing education and higher education.
- Has the physical and emotional capability to manage the demands of a directorship in a complex educational system.
- 12. Meets minimal full-time faculty qualifications of the School and the University.

#### Job Responsibilities:

- Assumes leadership for promoting curriculum development and for implementation and evaluation of the curriculum in existing and new programs within the School of Nursing.
- Initiates and/or encourages research projects conducted by the School of Nursing.
- Plans faculty workload which effectively utilizes faculty expertise in curriculum offerings.
- In collaboration with the Assistant Director, develops and coordinates class and final examination schedules for nursing courses.
- Assumes responsibility for implementing a program of academic recruitment, registration, and advising for students.
- Coordinates curriculum and administrative activities with other University units.
- Identifies present and future needs of the School of Nursing and interprets these to the University administration and to the community.
- Assumes leadership in developing and managing the budget for the School of Nursing.
- Assumes leadership in preparing reports for the National League for Nursing and the California Board of Registered Nursing and other groups.
- Represents the School of Nursing at national, statewide, regional, University, and community activities.
- Fosters cooperative relationships with nursing programs in other institutions of higher learning.
- 12. Fosters cooperative relationships with health agencies in the region; assumes responsibility for contracted agreements; instigates periodic program review with agencies utilized by the School of Nursing and with consumer groups in the community.
- Supports professional organizational and legislative activities which promote high standards of professional nursing practice.

- 14. Supports continuing education and alumnae activities of the School of Nursing.
- Maintains a climate which stimulates and encourages faculty professional development.
- 16. Participates in recruitment and hiring of new faculty.
- 17. Evaluates faculty performance as a part of the personnel process.
- 18. Hires, supervises, and evaluates supporting staff.
- Serves as Director of School faculty meetings and the School Executive-Coordinators Committee. Provides focus and direction for other School committees.
- Facilitates the democratic process within the School of Nursing.
- Demonstrates teaching competence of a senior faculty member in assigned instructional courses.
- 22. Acts as a liaison between the students, faculty, administration, and community.
- 23. Coordinates orientation of new faculty and staff.
- 24. Implements policies developed at higher levels within the University. The Director of the School of Nursing is a faculty member with designated administrative functions. The position represents 75 percent administrative and 25 percent teaching, which is the equivalent of three WTU's per semester.

#### QUALIFICATIONS AND RESPONSIBILITIES OF THE ASSISTANT DIRECTOR

#### Qualifications:

- 1. Is willing to serve.
- Has been on faculty for three years.
- Is a full-time faculty member.
- Has approval of the Director.
- Meets the minimal criteria for a temporary position within the School.

#### Responsibilities:

- 1. Attends School and University meetings in Director's absence.
- Conducts School meetings in Director's absence.
- Assists with preparation of preliminary class schedules and faculty assignments; confers with semester coordinators.
- Serves on the Nursing School Executive Committee.
- Coordinates budget expenditures for instructionally-related expenses.
- Updates current School policies manual.
- Is an ex-officio member of the School Personnel Sub-Committee (for purpose of hiring).

The purpose of Assistant Director is unique to the School of Nursing. There are no official provisions for released time to implement the responsibilities and those faculty who have occupied the position have done so because of commitment to the needs of the School.

APPENDIX D

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Name & Title - California License Number with Expiration Date Board Approved Faculty Classification/Clinical Assignments	Date of Appointment to Current Position	Educ. Prep. thru Highest Earned Degree (start with basic RN prep. to highest earned degree) List Degree - Year	Professional Experience & Continuing Education Activities for Past 5 Years (Summary demonstrating clinical competence)  (Start with most recent) List year, course title, and number of units/hours	Teaching Assignment Clinical & Theory (List each course and responsibility for content, clinical, and/or theory)
Janet Brown Assistant Professor  RN License #377374 Expires: 10/31/01  Board Approved Classification: Instructor for Medical and Surgical	September 1989	AA in Nursing - 1984 Front Range Community College BSN - 1988 The Univ. of the State of New York MSN, With Distinction - 1989 (Adult Health) CSU, Chico	Professional Experience:  1984-Present:  Employed 32 hrs. per month as staff RN at Enloe Medical Center providing bedside nursing care.  Additional:  Receive & read 4 nursing journals related to current practice & teaching content.  Clinical Nurse Specialist Certificate: 1165. Expires 10/31/01.	N82 - Nursing Roles Theory (teach 50% of content)  N83 - Nursing Foundations Theory (teach 33% of content)  N84 - Nursing Fundamentals Clinical Practicum (full assignment)  N102 - Nursing Physical Assessment Theory (teach 100% of content)
		· · · · · · · · · · · · · · · · · · ·	Continuing Education: 1999: (18+ hrs)  Medical-Surgical Nursing Conference Antibiotic Resistant Bacteria  Nursing Education Update 1998: (45+ hrs)  American Pain Society Conference Clinical Symposium: Wound Care UAL's Impact on Quality Indicators End of Life Care Differentiated Nursing Practice 1997: (24+ hrs) Pain Management – 10/97 Protecting Your Patient	

Janet Brown (Continued)	Acute MI Patient in 2000
TOTAL SECTION AND AND AND AND AND AND AND AND AND AN	Chronic Neuropathic Pain
	Communication Nursing Research
	Online with Research
	Pain Management – 1/97
K K	
	1996: (24 hrs)
	Searching the Net with AJN
	Pain Management at Home
	Oncology Care
	Neuro Assessment
	1995: (32+ hrs)
	American Pain Society Conference
	Sigma Theta Tau Regional Assemblies

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Becky Damazo Professor  RN License #246775 Expires: 3/1/00  Board Approved Classification: Instructor for Child	August 1989	BSN - 1974     Loma Linda University     PNP - 1975     Loma Linda University     MSN - 1977     Loma Linda University	Professional Experience:  1994-1995: Clinical practice as a Pediatric Nurse Practitioner at the Chico Children's Center  1998: International Programs: Presented a class entitled "The Impact of Women's Health on the Economic Development of Nations" at Rangsit University, Thailand.  Professional Consultancies: Glenn County Health Collaborative California Distance Learning Project Coordinator  Publications & Presentations: (See Vita)	N173 - Foundation of Community Health Nursing (Theory) N174 - Community Health Nursing Practicum (Clinical) HCSV/Nurs/WST 168-05 - Women's Health Issues (nonmajors) Biol 118 - Biology of Childhood (nonmajors)
			Continuing Education:  Pharmacology for Nurse Practitioners (40 hrs)  Pediatrics (30 hrs)  Community Health Nursing (35 hrs)  Women's Health (10 hrs)  Nursing Education (10 hrs)  Technology training to improve instruction (40 hrs)	

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Ruth Terry, MPH, RN Executive Officer (916) 322-3350 (626) 575-7080

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Sherry D. Fox Director  RN License #209344 Expires: 11/30/01  Board Approved Classification: Director	August 1989	BSN - 1970     U.C., San Francisco     MA in Nursing - 1975     University of Washington     (Physiological Nursing)     PhD 1990     U.C., San Francisco     (Medical Sociology)	Presentations & Publications: (See Vita) Continuing Education: 1998-1999: (48 hrs) National Healing Web Conference California Nursing Summit Rocky Mountain Nurse Educators' Conference The New Bottomline: Role Competenices for Differentiating Practice Western Institute of Nursing 32nd Annual Communicating Nursing Research Conference Educational Mobility Workshops 1997: (46 hrs) CACN/COADN Annual Meeting NLN Celebration of Learning Immunization Update Financial Management for Nurses On Line with Research Center for Excellence in Teaching 1996: (25 hrs) Educating Nurses for the Future Immunization Update California Nursing Outcomes Coalition Effects of Estrogen 1995: (10 hrs)	No current teaching assignment; 100% administrative.

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Janelle Gardner Lecturer  RN License #321238 Expires: 11/01  Board Approved Classification: Instructor in Obstetrics and Child	January 1993	<ul> <li>BSN - 1979 CSU, Chico</li> <li>MSN - 1994 (Adult Health) CSU, Chico</li> <li>Post-Graduate - 1999 U.C., San Francisco (High Risk Obstetrics)</li> </ul>	Certification: Maternal-Newborn Specialty     Staff Nurse – Fremont Hospital, OB/Women's Health, 1999     Staff Nurse – Enloe Hospital, Perinatal Nurse, Perinatal Home Care Coordinator, Foster Parent Educator, 1980-1996  Presentations & Publications: (See Vita)	N82 – Nursing Role I (content: written communication, nursing diagnoses, legal issues)  N84 – Nursing Fundamentals, Skills Labs (content: injections, hygiene, IV's, foleys, dressing changes, etc.), and Med-Surgical clinical  N114 – OB clinical		
		130	Continuing Education: 1999: (19+ hrs)  Women's & Children's Health Issues  Self Study Computer Module: Nursing Application 1998: (21 hrs)  Perinatal Nursing  The Replacement of Registered Nurses 1997: (22+ hrs)  On Line with Research  The 30th Annual Western Institute of Nursing Assembly - "Nursing: Changing the Environment" 1996: (26 hrs)  Acute Care Pediatrics: Assessment & Care of Children	V IVII4 - OB CHIICAI		

Janelle Gardner (Continued)	Community Health Nursing: Trends     & Opportunities     Bridging Cultures & Building
	Understanding  Career Workshop
	1995: (27+ hrs)
	Women & HIV
	Neonatal Resuscitation Program     (Recertification)
	♦ Celebration of Nursing
	♦ The 28th Annual Western Institute of
	Nursing Assembly - "Innovation & Collaboration: Responses to Health
	Care Needs"

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Sheila Hoban Assistant Professor  RN License #211390 Expires: 1/31/02  Board Approved Classification: Instructor for P/MH	August 1999	BSN - 1970     U.C., Los Angeles     MSN - 1972     U.C., San Francisco     Ed.D 1989     U.C., San Francisco     (Educational Psychology & Counseling)	Professional Experience: 1997-1999:  Nursing Supervisor, Placers County Health & Human Services. Supervised psychiatric RNs & LVNs in an outpatient clinic setting; developed nursing policies & procedures; developed Standardized Practice to expand nursing role; supervised Public Guardian's office and In-Home Supportive Services; trained & supervised Senior Peer Counselors 1995-1997:  RN-Psychologist, Pacific Applied Psychology Assoc., Sacramento, CA. Brief therapy for clients in a managed care setting; facilitated behavioral therapy group on coping with anxiety & panic disorder; worked closely with psychiatrics & primary care physicians in monitoring psychiatric medications.  1995:  Case Management, Heritage Oaks Hospital, Sacramento, CA. Performed psychosocial assessments on new patients; chart review & coordination with managed care requirements; discharge planning for geriatric patients.	<ul> <li>N133 – Nursing         Management of         Maladaptive         Behavior (Theory)</li> <li>N134 – Practicum in         Management of         Maladaptive         Behavior (Clinical)</li> </ul>

Sheila Hoban (Continued)	Continuing Education
Continued)	Continuing Education:
	1999: (34 hrs)
	State of the Art Update on the
	Management of Depression: Long-
	Term Treatment of Depression
	Dialectic Behavioral Therapy: An     Effective Approach to Borderline
	Personality Disorder
	Wraparound Training
	Using Research in Practice
1	Treatment of Depressed Geriatric
	Patients
	Gender & Antispychotic Medications:
	Focus on Neuroendocrine Side Effects
	♦ 5150 Training
	1998: (12 hrs)
	♦ Nursing & The Law
	Atypical Antisychotics & Mechanisms
	of Drug Interactions
	◆ Future Directions in Treatment of
	Bipolar Disorders
	1997: (42 hrs)
	The Physiology of Stress
	Detection & Treatment of Alcoholism
	& Chemical Dependency
	The Basic Brain  Colling to the
	California Mental Health Managed  Care for the Managed
	Care for the Mentally III & Alcohol & Medication Use/Misuse in Older
	Adults
	Suicide Prevention Workshop
	1996: (20 hrs)
	ADHD: Evaluation & Assessment
	Advanced Weight Control

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Sue Hookins Assistant Professor  RN License #134471 Expires: 1/31/01  Board Approved Classification: Assistant Instructor for P/MH	January 1990	Diploma RN - 1961     Highland School of     Nursing     BSN - 1966     Simmons College     MS - 1967     UC, San Francisco     (Adult Psychiatric     Nursing)     Post MS Certificate - 1969     UC, San Francisco     (Community/Mental     Health)	Professional Experience: 1993-Present: Provided psychiatric nursing & education for clinical home care agencies 1992 & 1996-Present: Taught psychiatric nursing for local community college 1993-1997: Developed & implemented psychiatric nursing program for Home Care Agency	N133 - Mental     Health Theory     N134 - Mental     Health Clinical     N173B - Community     Health Theory     N174 - Community     Health Clinical     N134 - RN-BSN     Mental Health     Clinical
		10 E	Continuing Education: 1998: (30 hrs)  Alternative Medicine 1996: (37 hrs)  Care of the Elderly  Beyond Prozac 1995: (6 hrs)  Mental Health & Aging – Caring for our Future	

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Carol L. Huston Professor  RN License #285068 Expires: 8/31/01  Board Approved Classification: Instructor for Medical and Surgical	August 1982	<ul> <li>BSN - 1977         <ul> <li>Univ. of Iowa</li> </ul> </li> <li>MSN -1982 (Adult Health)             <ul> <li>CSU, Chico</li> <li>MPA - 1997</li> <li>Univ. of Southern</li> <li>California</li> <li>DPA - 1997</li> <li>Univ. of Southern</li> <li>California</li> </ul> </li> </ul>	Professional Experience:  Per diem employee – Chico Community Hospital as staff nurse, charge nurse, & relief house supervisor. (1982 – 1998)  Nursing Instructor – Western University of Health Sciences teaching graduate level courses in health systems, health finance, & nursing research. (1998 to present)  Advanced nursing administration certification by American Nurses Credentialing Center (1995-1999 and again 2000-2004)  Ph.D. examiner for University of South Australia & University of New England, Armidale  Manuscript reviewer for American Journal of Nursing and Journal of Nursing Scholarship  Author/co-author of two leadership/mgmt. Nursing textbooks & 13 articles in refereed nursing journals since 1995.  Master teacher, CSU, Chico (1999- 2000)	<ul> <li>N122 – Leadership,         Management and         Professional Issues in         Nursing (theory)</li> <li>N124 – Leadership/         Management         (clinical)</li> <li>N341 – Advanced         nursing strategies         (theory). Graduate         level course</li> </ul>	

Carol L. Huston (Continued)	1996: (13+ hrs)
	Unlicensed Assistive Personnel
	Community Health Nursing
	Symposium
	Contrast Media Infusion Certification
	Hmong Medicine Lady
	1995: (17+ hrs)
	Dealing with the Chemically Impaired
	Nurse/Student
	Nursing Research Day
	AIDS in Butte County

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	Name & Title - California License Number with Expiration Date Board Approved Faculty Classification/Clinical Assignments	Date of Appointment to Current Position	Educ. Prep. thru Highest Earned Degree (start with basic RN prep. to highest earned degree)  List Degree - Year	Professional Experience & Continuing Education Activities for Past 5 Years (Summary demonstrating clinical competence)  (Start with most recent) List year, course title, and number of units/hours	Cli (List re	ching Assignment inical & Theory each course and esponsibility for ontent, clinical, and/or theory)
157	Brenda Johansson Lecturer  RN License #336113 Expires: 8/31/01  Board Approved Classification: Instructor for Medical and Surgical	August 1999	ADN - 1981 Contra Costa College  BSN - 1990 CSU, Chico  MSN - 1995 CSU, Chico (Adult Health)	Professional Experience:  Staff Nurse, Emergency Room; Staff Educator – Enloe Medical Center, 6/92 to present  Medical/Surgical Nursing/Leadership Nursing Instructor – Butte College, 1993 to present  Certification: Pediatric Advanced Life Support Instructor Advanced Cardiac Life Support Instructor Critical Care Registered Nurse	1000 1550000	14 – Pediatric nical
			18	Continuing Education: 2000: (in progress)  Gerontology Certificate Program 1999: (20 hrs)  ACLS 1998: (20 hrs)  Neuroscience Update 1997: (16 hrs)  ACLS 1996: (20 hrs)  American Association of Spinal Cord Injury Nurses Conference  Staff Development – 1996 1995: (20 hrs)  Cornucopia of Care  Application of Research to Practice		

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Ruth Terry, MPH, RN Executive Officer (916) 322-3350 (626) 575-7080

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Name & Title - California License Number with Expiration Date Board Approved Faculty Classification/Clinical Assignments	Date of Appointment to Current Position	Educ. Prep. thru Highest Earned Degree (start with basic RN prep. to highest earned degree) List Degree - Year	Professional Experience & Continuing Education Activities for Past 5 Years (Summary demonstrating clinical competence)  (Start with most recent) List year, course title, and number of units/hours	Teaching Assignment Clinical & Theory (List each course and responsibility for content, clinical, and/or theory)
Carol L. Leedom Professor  RN License #205539 Expires: 1/02  Board Approved Classification: Instructor for Medical and Surgical and Child	January 1978	BSN - 1970     CSU, Chico     MSN - 1978     U.C., San Francisco     (Medical/Surgical)	Professional Experience:  Part-time Staff Nurse, Emergency Room – 1997 to present, Enloe Medical Center; 1994 to 1997 – Chico Community Hospital; 1979 to 1994 – Oroville Hospital  Teaching full-time	N193 – Theory (generic & RN-BSN)  N194 – Clinical (generic & RN-BSN)  N114 – Pediatric Clinical
			Continuing Education: 1998-1999: (76 hrs)  American Association of Spinal Cord Injury Nurses Conference  ACLS  Domestic Violence Awareness  Advanced Physiology  Advanced in Emergency Medicine  Pathophysiology of Shock  Respiratory Crisis  Nurse Educator Conference 1997: (61 hrs)  Oncology  High Risk Labor  ACLS  Mega Code Review	

Carol L. Leedom (Continued)	American Association of Spinal Cord  Injury Names Conference
	Injury Nurses Conference  Systems Disorders of Newborns
	1995-1996: (56 hrs)
8	Metabolic & Endocrine Derangements
	Pediatric Medical Problems
	Spinal Cord Injury
	♦ Mega Code Review
	* ACLS

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Name & Title - California License Number with Expiration Date Board Approved Faculty Classification/Clinical Assignments	Date of Appointment to Current Position	Educ. Prep. thru Highest Earned Degree (start with basic RN prep. to highest earned degree)  List Degree - Year	Professional Experience & Continuing Education Activities for Past 5 Years (Summary demonstrating clinical competence)  (Start with most recent) List year, course title, and number of units/hours	Teaching Assignment Clinical & Theory (List each course and responsibility for content, clinical, and/or theory)
Leilani McManus Assistant Professor  RN License #308909 Expires: 7/31/01  Board Approved Classification: Instructor for Medical and Surgical and Geriatric	August 1990	BSN - 1979     CSU, Chico     MSN - 1989     CSU, Chico     Post-graduate Geriatric     Specialty - 1992     U.C., San Diego School of     Medicine     Advanced Faculty     Development: Geriatric     Health in Culturally     Diverse Populations - 1997     U.C., Los Angeles     (5 days)	1990-2000:  Part-time Staff Nurse - Oroville Hospital  Supervisor - SWAT  Clinical Expertise: Neuro ICU Cardiac Rehab Geriatric Assessment Med/Surg	N84 - Fundamentals N83 - Theoretical Concepts in Pharmacology, Fluid & Electrolytes, Oxygenation, Grief/Dying, Immunology, etc. N163 - Theoretical Concepts in Normal & Abnormal Aging Process N199 - NCLEX Self Study Course N199 - Retention Coordinator (98/99)
		,"	Continuing Education: 1999: (28+ hrs)  ◆ 24th Annual Creative Teaching for Nurse Educators  ◆ Peripherally Inserted Central Catheters & Midlines: Selections, Insertion & Management 1998: (51+ hrs)  ◆ Communicable Diseases  ◆ Emotions  ◆ Community Health Partnerships: Putting the Pieces Together	

eilani McManus (Continued)	Brooke Army Medical Tour
	Ostomy Care
	Picc Central Line Dressing Changes
	1997: (52 hrs)
	UCSD Alzheimer's Disease Research
	Center
	California Geriatric Education Center
	at U.C., Los Angeles Health & Aging
	Faculty Development Program:
	"Exploring Cultural Diversity"
	Teenage Prevention of AIDS
	Protecting Your Patients & Your
	Profession
	1996: (66+ hrs)
	Memory Loss Program
	Sigma Theta Tau: Career Workshop
	The Powers of Estrogen
	Bridging Cultures & Building Bridges
	Community Health Nursing: Trends     Community Health Nursing: Trends
	& Opportunities  Pain Management at Home
	Pain Management at Home     Gerontological Nursing Annual
	Conference
	American Society on Aging: "Alcohol,
	Medications & Other Drug Abuse &
	Misuse"
	CDC Training Course:
	"Immunization Update 1996"
	Surveillance of Vaccine-Preventable
	Diseases
	1995: (71 hrs)
	Foundation for Critical Thinking
	Events & Resources for Educators
	Nursing Education, Review, Update
	Orotho Update '95     Night A good Older A Lak G
	Ninth Annual Older Adult Symposium     Sigma Theta Tou "Calabantian of
	Sigma Theta Tau "Celebration of Nursing"
	Fluid & Electrolytes
	Basic Wound Care
	Nursing Education of America – New
	Drugs '94

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Irene S. Morgan Associate Professor  RN License #302320 Expires: 2/28/01  Board Approved Classification: Instructor for Child; Assistant Director	August 1988	BSN - 1978     CSU, Chico     FNP Certification - 1985     U.C., Davis     MSN - 1988     U.C., San Francisco     (Family Primary Care     with an emphasis on Child     & Adolescent Health)     Ph.D. in Nursing - 1998     University of Colorado     Health Sciences Center	Professional Experience: 1998-Present: Clinical practice year-round two afternoons/week as a family nurse practitioner with Butte County Health Department. Mostly serving low income children and women. 1999: Summer Camp Nurse providing care for 100 children from ages 8 to 16 years old for two-week sessions. Worked a total of 8 weeks (4 sessions)	N115 - Family Nursing Theory  N114 - Maternal- Child Clinical (child portion is my responsibility)  N113 - Maternal- Child Theory (child portion of content)  N326 - Dynamics of the Advanced Nursing Role (graduate course)
<del>2</del> 3		83	Continuing Education:  1999: (36 hrs)  32nd Annual Communicating Nursing Research Conference  Low Dose Contraceptives  Asthma Therapy into the 21st Century  Immunization Update Seminar  Adolescent Sport Injuries  Nursing Education Review & Update 1998: (21 hrs)  31st Annual Communicating Nursing Research Conference  Benefits & Risks of Oral Contraceptives  Estrogen Replacement Therapy & Alzheimer's Disease	

Irene S. Morgan (Continued)	♦ Red Eye
	♦ Osteoporosis
	1997: (16 hrs)
	♦ 30 <sup>th</sup> Annual Communicating Nursing
	Research Conference
	Asthma/COPD
	1996: (27 hrs)
	29 <sup>th</sup> Annual Communicating Nursing
	Research Conference
	Irritable Bowel Disease
	Obsessive-Compulsive Disorder
	Management of Urinary Tract
	Infection
	The Powers of Estrogen
	1995: (1 hr)
	Male Impotence/Erectile Dysfunction
1	1993-1998: (69 graduate academic credits)
	Ph.D. in nursing coursework
	Th.D. in nursing coursework

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	Name & Title - California License Number with Expiration Date Board Approved Faculty Classification/Clinical Assignments	Date of Appointment to Current Position	Educ. Prep. thru Highest Earned Degree (start with basic RN prep. to highest earned degree) List Degree - Year	Professional Experience & Continuing Education Activities for Past 5 Years (Summary demonstrating clinical competence)  (Start with most recent) List year, course title, and number of units/hours	Teaching Assignment Clinical & Theory (List each course and responsibility for content, clinical, and/or theory)
A F E E	reggy G. Pegg Associate Professor AN License #226489 Expires: 1/31/02 Foard Approved Classification: Instructor for Medical and Surgical and Assistant Director	August 1990	ASN - 1972 Ventura College BSN - 1975 CSU, Los Angeles MN - 1978 U.C., Los Angeles PhD - 1993 U.C., Santa Barbara	Professional Experience: 1996-1997:  Director of Nurse Practitioner Program – Western University of Health Sciences (Chico Campus)	N124 - Leadership     Management     Practicum     N199 - NCLEX     Review     Retention     Coordinator
				Continuing Education:  1999: (30 hrs)  Kappa Omicron Research Day  Mindfulness-Based Stress Reduction Workshop  1998: (4 hrs)  Career Workshop – Kappa Omicron  1997: (14 hrs)  Nursing Research – Kappa Omicron  Critical Thinking Workshop  1996: (31 hrs)  Nursing Horizons in Higher Education  Nursing Informatics  1995:  Celebration of Nursing – Kappa Omicron  Black Nurses Symposium – Disparity in Health Outcomes	

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Deanna Persaud Professor  RN License #227273 Expires: 4/3/00  Board Approved Classification: Instructor for Medical and Surgical	August 1979	ADN - 1972 Shasta College BSN - 1976 Long Island University MSN - 1979 Bellevue School of Nursing	Professional Experience: 1989-Present: Per diem Staff Nurse at Butte Home Health & Hospice	N103 – Theory & Pathophysiology for perioperative general specific problems; neuro, renal, endocrine, ortho, eye/ear, & G.I.  N104 – Clinical practicum for acute med/surg nursing  N112 – Patient teaching, instructional design group process
			Continuing Education: 1999: (41 hrs)  AASCIN Annual Educational Conference  Nurse Educators Conference  Reporting Elder Abuse 1998: (20 hrs)  AASCIN Annual Educational Conference  Outcome Evaluation in Nursing 1997: (35 hrs)  AASCIN Annual Education Conference  Evaluation of Faculty Conference  Diabetes Mellitus Update: Glucometer Calibrations	

Deanna Persaud (Continued)	1996: (33 hrs)
AND THE PROPERTY OF THE PROPER	Think First Coordinators Conference
	AASCIN Annual Educational
	Conference
28.1	♦ Rehabilitation Referrals
	1995: (26.5 hrs)
	♦ AASCIN Annual Educational
	Conference
	Spiritual Assessment
	Safety in the Workplace
	Productive Communication
	Head Injured Clients
	Oxygen Update
	Lower Extremity Ulcers
	Psych Update
2.	Community Resources

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Elagrace Reekie Professor (Emeritus since 1983, FERP)  RN License #229506 Expires: 2/29/00  Board Approved Classification: Instructor for Geriatrics	September 1972 1983 – Faculty Early Retirement	BSN - 1953     University of Washington     M.Ed 1958     University of Minnesota     (Public Health Nursing)     Ph.D 1970     University of Washington     (School & Counseling     Psychology; Nursing     Education)	Continuing Education: 1999: (6+ hrs)  Special Education on ADD & ODD 1998: (69 hrs)  Community Health Partnerships  High Touch Acupressure - Theory & Practice  Holistic Nursing  Biogram Therapy - Relief from Pain & Depression 1997: (21 hrs)  Natural Health Conference  On Line with Research (1996-1999: 230 hrs total)	N114 – Special Education Schools     N174 – Seminar in Community Health Nursing

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	Name & Title - California License Number with Expiration Date Board Approved Faculty Classification/Clinical Assignments	Date of Appointment to Current Position	Educ. Prep. thru Highest Earned Degree (start with basic RN prep. to highest earned degree) List Degree - Year	Professional Experience & Continuing Education Activities for Past 5 Years (Summary demonstrating clinical competence)  (Start with most recent) List year, course title, and number of units/hours	Teaching Assignment Clinical & Theory (List each course and responsibility for content, clinical, and/or theory)
168	Gwin Richter Professor  RN License #173679 Expires: 12/31/02  Board Approved Classification: Instructor for Obstetrics and Child	September 1972	ADN - 1966     City College of San     Francisco     BSN - 1971     CSU, Chico     MSN - 1975     CSU, Chico     Post Masters - 1976     U.C., San Francisco     (Normal & High Risk     Maternal-Child)	Professional Experience: 1991-Present:  Coordinator & Case Manager Comprehensive Perinatal Services Program.	N113 - Maternal-Child Nursing Theory (OB)     N114 - Maternal-Child Nursing Practicum. Schedule Coordinator     N114 - RN-BSN Maternal-Child Nursing Practicum     Independent Study Students     M.S.N. Thesis Students
				Continuing Education: 1999: (36 hrs)  Beyond Kegals  Lactation 1998: (22 hrs)  Nursing Research  Immunization  Fetal Alcohol Syndrome  Community Health 1997: (30 hrs)  Progesterone Therapy 1996: (12 hrs)  Drug Abuse Pregnancy  OB Complications 1995: (12 hrs)  Therapy Post Traumatic Stress  Hepatitis C	50

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Julia Shovein Professor  RN License #D200456 Expires: 5/30/01  Board Approved Classification: Instructor for Medical and Surgical	August 1981	BSN - 1969     University of Portland      MSN - 1976     U.C., San Francisco     (Community Health     Nursing & Medical/     Surgical Nursing)	Community: 1997-2000:  American Lung Association – Volunteer Nurse Consultant. 1995-2000:  Member, Butte County Tobacco Coalition. Practice community health nursing for Butte County Tobacco Education Coalition by speaking to community groups, attending political policy meetings, etc. 1995-2000:  Project Flint at Four Winds for Education, advisory board member and service provider for monthly Multidisciplinary Team Meetings for Project Flint. 1995-1996:  Paradise Hospice & Homecare.	N173B - Caring for the Family in the Community (Theory) N174 - Community Health Practicum
25			Continuing Education: 1999: (13 hrs) Sudden Infant Death Syndrome Nursing Education Review Update Public Health Symposium 1998: (14+hrs) Community Health Partnerships Differentiated Nursing Practice 1997: (33 hrs) Protecting your Patients & Your Profession	

Julia Shovein (Continued)	AIDS & Infectious Diseases     Symposium
	Epidemiology & Prevention of Vaccine-Preventable Diseases
	On-line with Research – Getting Connected
	1995: (8 hrs)
	Tuberculosis Conference
	♦ Women in HIV

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Linda P. Land-Smith Professor  RN License #217530 Expires: 4/30/01  Board Approved Classification: Instructor for Medical and Surgical	8/82	BSN - 1971     CSU, Chico     MSN - 1981     U.C., San Francisco     (Biodysfunctions)	1996-1999:  Worked for VNA (Visiting Nurse's Association) – flu shot clinics 1994-1995:  Worked per diem Chico Community Hospital critical care	N104 Practicum – 5 units of clinical at Enloe Medical Center. Use entire hospital and rehabilitation hospital Team Teach N103 – Adult patho- physiology. 6 unit Pathophysiology and Theory course. Team Teach N112 – 2 unit Role course. In the past taught N102 – Physical Assessment.
			Continuing Education: 1999: (21 hrs)  Annual Cardiology Update  Respiratory Symposium  Breast Cancer Conference 1998: (19 hrs)  Alternative Medicine  An Objective View  Nursing Summit on Differentiated Practices  CELT Conference  Annual Cardiology Update	

Linda Land-Smith (Continued)	1997: (19 hrs)
	Brain Attack Symposium
	Protecting Your Patients & Your     Profession (a workshop on nursing     trends, issues & the need for policy
	development in an era of downsizing & restructuring
	Pediatric Neuro, Respiratory, Gastro     Intestine & Trauma Update     1996: (8 hrs)
	♦ The Powers of Estrogen
	Clinical Practice Guidelines of Hemodialysis 1995: (22 hrs)
	A Tool for Quality Improvement Dialysis
	♦ Women in HIV
	Twenty-Fifth Annual Respiratory     Medicine Symposium
	Pain Management Symposium
	♦ Breast Care - The Swedish Experience

### REPORT ON FACULTY

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Name & Title - California License Number with Expiration Date Board Approved Faculty Classification/Clinical Assignments	Date of Appointment to Current Position	Educ. Prep. thru Highest Earned Degree (start with basic RN prep. to highest earned degree) List Degree - Year	Professional Experience & Continuing Education Activities for Past 5 Years (Summary demonstrating clinical competence)  (Start with most recent) List year, course title, and number of units/hours	Teaching Assignment Clinical & Theory (List each course and responsibility for content, clinical, and/or theory)
Chris Sylvain, RN, MSN Lecturer A  RN License #277336 Expires: 4/30/01  Board Approved Classification: Assistant Instructor Medical and Surgical	August 1994	BSN - 1977     Humboldt State      MSN - 1997     CSU, Chico     (Adult Health)	Professional Experience:  Per diem Staff Nurse, 1998 to present - Enloe Medical Center, ICU/CCU.  Staff Nurse, Charge Nurse, Supervisor - Special Care Unit; Coordinator of Staff Development, 1982 to 1998 - Chico Community Hospital  LVN Instructor, Plumas Unified School District - Summer 1998  LVN Instructor, Butte College - Summer 1996	N104 - Clinical Instructor Acute Care Practicum
			Continuing Education 1999: (60+ hrs)  Evaluation Workshop (NERU)  Sigma Theta Tau - Region I Conference  Kappa Omicron Research Day  Sigma Theta Tau International - 35 <sup>th</sup> Biennial Convention 1998: (9 hrs)  Replacement of RN by VAP  The Impact on Select Indicators 1997: (32+ hrs)  Sigma Theta Tau International - 34 <sup>th</sup> Biennial Convention  Understanding Cardiac Testing  ACLS	

### REPORT ON FACULTY

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Name & Title - California License Number with Expiration Date Board Approved Faculty Classification/Clinical Assignments	Date of Appointment to Current Position	Educ. Prep. thru Highest Earned Degree (start with basic RN prep. to highest earned degree)  List Degree - Year	Professional Experience & Continuing Education Activities for Past 5 Years (Summary demonstrating clinical competence)  (Start with most recent) List year, course title, and number of units/hours	Teaching Assignment Clinical & Theory (List each course and responsibility for content, clinical, and/or theory)
Sharon A. Walsh Lecturer  RN License #: 187786 Expires: 8/31/01  Board Approved Classification: Assistant Instructor for Medical- Surgical	February 1997	Diploma RN - 1964     Halstead Hospital School     of Nursing     BSN - 1985     University of Phoenix     MSN - 1993     CSU, Dominguez Hills     (Administration)  Certificates:     California PHN - 1987     California NP - 1976	<ul> <li>Public Health - 3 years</li> <li>Community &amp; Home Health (13 yrs)</li> <li>Acute Care (13 yrs)</li> <li>Outpatient Clinic (6 yrs)</li> <li>Administration (12 yrs)</li> <li>Current:         <ul> <li>1999-Present:</li> <li>Western University - Part-time instructor - health promotion</li> <li>1997-Present:</li> <li>CSU, Chico - Part-time lecturer - community health; pt. care mgmt; home health</li> <li>1995-Present:</li> <li>CSU, Dominguez Hills - Part-time lecturer; community health</li> <li>1994-Present:</li> <li>Consultant: health care systems - 1994 to present.</li> </ul> </li> </ul>	N126 - Perspectives on Gender (non-major course)  N124 - Patient Care Mgmt. Practicum  N174 - Community Health Practicum
			Continuing Education: 1999: (60 hrs)  Home Care Interventions & Outcomes  Online Course Development 1998: (6 hrs)  Community Health Partnerships 1997: (19 hrs)  Pediatrics Update  Women's Health Update	

Sharon A. Walsh (Continued)	Teaching & Assessing Critical     Thinking     Getting Online with Research
	1996: (25 hrs)  Discharge Planning for Nurse Case Managers  Communication & Team Building in Nursing
	1995: (24 hrs)  Total Quality Management in Nursing

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Name & Title - California License Number with Expiration Date  Board Approved Faculty Classification/Clinical Assignments	Date of Appointment to Current Position	Educ. Prep. thru Highest Earned Degree (start with basic RN prep. to highest earned degree) List Degree - Year	Professional Experience & Continuing Education Activities for Past 5 Years (Summary demonstrating clinical competence)  (Start with most recent) List year, course title, and number of units/hours	Teaching Assignment Clinical & Theory (List each course and responsibility for content, clinical, and/or theory)
M. Shelley Young Professor  RN License #171814 Expires: 11/30/01  Board Approved Classification: Instructor for Medical and Surgical	August 1988	BSN - 1966     University of San     Francisco     MSN - 1972     U.C., San Francisco     (Medical/Surgical     (Nursing)     PhD - 1984     Oregon State University     (Education)	Continuing Education: 1999: (25+ hrs)  Nurse Educators Conference in the Rockies (10th Annual) - Copper Mountain, Colorado  Kappa Omicron Research Day  Evaluation Workshop - Nursing Education, Review, Update 1998: (6+ hrs)  Nursing Summit: Differentiated Nursing Practice - CSPCNCC & BRN 1997: (23 hrs)  NLN: Celebration of Learning  On Line with Research  Brain Attack 1996: (7 hrs)  Education of Learning  Critical Care Cornucopia - Enloe Hospital  New Avenues in Managing the Research Day	Undergraduate:  N132 - Nursing Research (Theory)  N194 - Practicum in Integrative Nursing (Clinical)  Graduate:  N352 - Curriculum & Instructional Process in Adult Health (Theory)  N354 - Practicum for the Instructional Process in Nursing (Clinical)  N344 - Advanced Practicum in Nursing Care (Clinical)  N340 - Advanced Theoretical Concepts for Nursing Care of Adults (Theory)  N322 - Theoretical Foundations in Nursing (Theory)



### EM 94-22 STUDENT GRIEVANCE PROCEDURES

#### STATEMENT OF PURPOSE

The relationship of the student to California State University, Chico is one governed by statute, rules, and policies adopted by the California Legislature, the Trustees, the Chancellor, the campus President, and their duly authorized designees. The document establishes and describes procedures that are to be used for resolving student complaints and grievances arising from a student's claim that a member of the faculty, staff, or administration has in some material way failed to meet their official obligations as agents of the University, thus resulting in an unjust or adverse impact on the student. Only those claims arising from official actions taken by faculty, staff, or administrators on behalf of California State University, Chico can be considered legitimate, and the grievability of such claims is to be determined through the procedures specified in this document.

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Procedures for informally resolving complaints or, when necessary, for resolving formal grievances are specified herein. Students are encouraged to resolve complaints informally, and to this end an impartial coordinator from the office of the Vice President for University Advancement and Student Affairs will provide students with assistance and guidance. Should informal attempts to resolve a complaint fail, formal grievance procedures may be invoked. In all cases, these procedures are designed to effect reasonable and orderly resolutions of student complaints and grievances in a fair, consistent, and timely manner.

The procedures specified herein are to be followed when no other specific campus policy or procedure exists that would more appropriately and effectively bring about a resolution of a student's complaint or grievance.

#### II. DEFINITIONS

"Attorney" means a person admitted to the practice of law before any state or federal court.

"Complainant" means a student who has filed a complaint at the informal level.

"Coordinator" means Coordinator for Student Judicial Affairs, the member of the University staff assigned responsibility by the President for negotiating the informal resolution of disputes.

"Facilitator" means Formal Proceedings Facilitator, the member of the university staff assigned responsibility by the President for managing those cases in which informal resolution of differences has not been achieved and formal proceedings are invoked.

"Grievance" means a complaint that was not satisfactorily resolved at the informal level. The official action taken on behalf of CSU, Chico must have occurred when the individual was a registered student at the University.

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"Grievant" means a student who has filed a complaint which is proceeding to the formal level and a grievance hearing. The student must be presently or previously enrolled at CSU, Chico.

"Instructional days" means days on which regularly scheduled classes or examinations are held at CSU, Chico.

"Notice of Inquiry" is a form designed by the Coordinator to record information to start the informal resolution procedures. The Notice of Inquiry will contain a description of the complaint and the desired outcome written by the affected student.

"President" means the President of CSU, Chico or his or her designee.

"Provost" means the Provost or his or her designee.

"The Request for a Formal Student Grievance Hearing Form" is a form designed by the Coordinator to record a description of the grievance and the desired outcome. The written Request for a Formal Student Grievance Hearing Form, including any supporting documentation, signals the start of the formal proceedings and must be written by the affected student.

"Respondent" means the faculty, staff member, or administrator (as determined by the Coordinator) against whom the grievance is filed.

"Student" means a person who has paid fees and is registered at California State University, Chico.

#### III. DECISION AUTHORITY

- Unless otherwise provided, the Coordinator is responsible for making procedural decisions during informal resolution.
- B. Unless otherwise provided, the Facilitator is responsible for making procedural decisions during the formal proceedings. All parties involved, including the grievant and respondent, should consult directly with the Facilitator.
- C. If the grievance involves a staff member or an administrative employee, throughout this document "full-time tenured faculty" must be substituted with "full-time permanent staff member," and "Department Chair" or "Dean" must be substituted with "appropriate supervisory personnel," Coordinator, Director, or Administrator as determined by the Coordinator.
- D. If the grievance concerns an area within Administration or Student Affairs, the Provost must consult with the Vice President for Business and Administration or the Vice President for University Advancement and Student Affairs, respectively.
- E. Recommendations resulting from the Grievance Hearing are forwarded to the Provost, who renders a decision based on those recommendations. This decision may be appealed to the President, whose decision is final.

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#### IV. INFORMAL RESOLUTION

Before filing a grievance, a student who has a complaint must follow these steps to attempt to resolve the matter informally. The student is encouraged to keep in constant contact with the Coordinator throughout the informal resolution.

#### A. Grievable Action

#### 1. Limits

A Notice of Inquiry must be filed with the Coordinator within thirty 30 instructional days after the student has discovered or reasonably should have discovered the grievable action.

### 2. Additional Time Limits

The Coordinator, under extraordinary circumstances, may extend the time limit, but for not more than one calendar year from the date of the discovery of the grievable action.

#### B. Limitations

- Nothing from these proceedings can be entered into the personnel files of the parties involved.
- Remedies indicated by these proceedings will be implemented as directed by the President.
- These procedures cannot be used for actions for which other remedies are being sought.
- These procedures cannot be used for actions arising out of previous grievances.
- These procedures cannot be used in allegations of professional misconduct which require formal personnel action as specified in a university employee personnel policy.
- C. The student must meet with the Coordinator to file a Notice of Inquiry (see IV.A.1).
- The Coordinator informs the student of the steps in attempting an informal resolution.
- E. The Coordinator will determine who the respondent will be and will notify the respondent that a complaint has been launched against him or her and forward appropriate documents explaining the nature of the complaint. The respondent may choose to contact the Coordinator of Judicial Affairs for an explanation of rights and proceedings.

- F. The student should meet with the respondent to attempt to resolve the matter informally. The Coordinator may be present during the meeting between the respondent and the student.
- G. If the matter remains unresolved, the student must meet with the appropriate department chair and attempt to resolve the matter informally.
- H. If the matter still remains unresolved, the student must meet with the appropriate college dean and attempt to resolve the matter informally.
- If the dean is unable to resolve the matter informally, the student may then invoke the formal Grievance Proceedings. In this case, the grievant and respondent shall each contact the Coordinator for information on the formal grievance proceedings.

### V. FORMAL PROCEEDINGS

- A. Grievability will be determined by the Formal Grievance Hearing Committee.
- B. Grievability
  - The grievant must show that he or she has been adversely affected by the action, and
  - 2. The grievant must show that the remedy sought will not effectively result in (1) special favoritism for him or her and (2) prejudice against others.
  - The grievant must demonstrate with reasonable certainty that an official action was taken which was either unreasonable or not generally or specifically authorized; and
  - If the action follows a written policy, the grievant must demonstrate that the policy is either unreasonable or not generally or specifically authorized; or
  - If the action is not related to any written policy, the grievant must demonstrate that the action is either unreasonable or not generally or specifically authorized; or
  - 6. If the action is not related to any policy and a policy may be implied, the grievant must demonstrate that the implied policy is either unreasonable or not generally or specifically authorized, and further, the lack of such policy does not, standing alone, imply grievability of the action.
  - No one may seek to establish university policy through the grievance process.

### C. Filing of Grievance and Rebuttal

- The Coordinator must provide both grievant and respondent with copies of these procedures and be available for instruction in or interpretation of these procedures.
- To initiate a grievance, the affected student must complete the Request for a Formal Student Grievance Hearing Form and deliver it to the Coordinator, who will immediately transmit sealed copies to the respondent, the Facilitator, the Department Chair, and the Dean.
- At any point in the proceedings, the grievant may withdraw the grievance or accept an informal solution.
- After receiving the written Grievance Form, the Dean must notify the Coordinator in writing within five instructional days that all informal means for resolving the complaint have been exhausted.
- The respondent will provide the grievant with a written answer to the grievance, with a copy sent to the Coordinator within five instructional days of receipt of the Grievance Form.
- 6. After receiving notification from the Dean that all informal means for resolving the complaint have been exhausted, and after receiving the written answer from the respondent to the grievance, the Coordinator will forward all materials to the Facilitator and notify the Facilitator that formal grievance proceedings can begin.

### D. Representation

The grievant and the respondent may each name a representative from the campus to accompany him or her in the grievance hearing. The name of the representative must be given to the Facilitator prior to the grievance hearing. Attorneys may not appear in the proceedings as representatives. However, if either the grievant or respondent is an attorney, both parties may be represented by attorneys who need not be from the campus. A party being represented by an attorney may seek no reimbursement of attorney's fees.

### E. Naming of Witnesses

- Grievant and respondent are responsible for obtaining their own witnesses and documentation. Participation in this process by prospective witnesses is voluntary.
- The names of witnesses, if any, for either party and signed statements of their willingness to testify at the hearing must be submitted in writing to the Facilitator at the meeting of the selection of the Grievance Hearing Committee.
- 3. The names of witnesses will be shared by the grievant and the respondent.

- 4. The representative for the grievant or respondent may not be a witness.
- 5. Every effort should be made to ensure the witnesses appear in person. However, if the witness cannot be present, written evidence must be submitted. The witness submitting written evidence must sign the following statement: "I hereby declare that the foregoing is true and correct and that this declaration is executed at (location of signing) on (date of signing)."
- 6. Witnesses who will be presenting evidence in person to the committee must submit to the Facilitator, forty eight hours prior to the grievance, a summary of witnesses' testimony including its source along with any other written evidence they may be submitting. If evidence is not submitted to the Facilitator forty eight hours prior to the start of the hearing, then the evidence should not be admitted unless the Facilitator rules on the admissibility of the evidence out of the committee's presence.
- An exhibit or witness declaration should be labeled and an index of all the
  evidence being presented should be prepared by the grievant and the
  respondent and presented to the Facilitator prior to the hearing.
- Copies of materials witnesses will be referring to (regulations, statements in catalogs, or student handbooks, etc.) should be included as exhibits.

### F. Selection of Grievance Hearing Pool

- The Grievance Hearing Pool will consist of forty eight members: a total of sixteen full-time tenured faculty selected to represent all the academic units; sixteen students selected from the most recent five percent random sample who have completed twenty-four units at CSU, Chico and who are not on academic or disciplinary probation; and sixteen full-time permanent staff. The Grievance Hearing Pool shall be selected at the beginning of each academic year and members shall be notified of their responsibilities in the event they are selected to serve on the committee.
- Academic deans, in consultation with their chairs, will select sixteen faculty members. The Coordinator will select the sixteen student members. The Staff Council will select the sixteen staff members. Faculty and staff members will be appointed for the academic year on a two-year rotating term. Student members will be selected at the beginning of each formal grievance hearing.

### G. Formation of the Grievance Hearing Committee and Eligibility

- The Facilitator will hold a meeting to select the panel for the Grievance Hearing Committee after the response to the Request for a Formal Student Grievance Hearing Form is received from the respondent. The grievant and respondent must attend this meeting.
- Grievance Hearing Membership. Each Grievance Hearing Committee will consist of four members selected from the Grievance Hearing Pool

consisting of two faculty members and two students. In the event the grievance is against staff, two staff members will be selected from the Grievance Hearing Pool in place of the two faculty members.

If the grievance involves grading, the committee will consist of the two students and two faculty members only.

The following persons cannot serve on the Grievance Hearing Committee:

a. friends of either party;

b. persons involved with the grievance;

 any person who is serving as an advocate for faculty, staff, students, or administration;

 staff members, administrators, and nonteaching faculty when the grievance involves a grading dispute.

### Challenges

Each party to the grievance is permitted to exercise challenges for cause to the proposed committee membership; the Facilitator must grant or deny the challenge.

#### Committee Formation

The first two faculty names or the first two staff names (when appropriate) and the first two student names to survive challenge and who are available at the time of the hearing form the Grievance Hearing Committee. The remaining names are alternates. If an original committee member cannot or will not serve, a replacement is made by taking the first alternate who is available in the respective category to fill the vacancy. If a committee cannot be formed, the Facilitator, the grievant, and the respondent will meet again to select a new committee.

### H. Grievance Hearing Procedures

### Hearing Date

- a. Grievance hearings are held only during the fall and spring semesters. If the grievance was filed less than five weeks before the first day of finals, the hearing may be held early in the following semester. Under extraordinary circumstances, at the discretion of the Facilitator, an exception may be allowed if it is requested by the grievant and the respondent, provided that the committee and witnesses, if any, are available.
- b. The Facilitator must inform the grievant, respondent, the Dean, and the Department Chair of the time, date, and location of the hearing as well as information on other matters which affect the hearing.

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- c. The committee may be convened by the Facilitator one-half hour before the hearing for briefing or other purposes.
- The committee will normally convene within five instructional days of its selection.

#### 2. Quorum

Three of the four members of the committee constitute a quorum. When the grievance involves grading, both faculty members must be present to constitute a forum.

### Closed Hearing

Attendance in the closed hearing is limited to the grievant, the respondent, and their representatives, if any, witnesses while giving evidence, the Facilitator, the committee, and the recording machine operator. The content of the proceedings and the committee recommendations resulting therefrom must not be made public by any participant in the hearing. In the event these matters should become public, however, such public statements as are appropriate may be made by the President. This policy of confidentiality does not preclude subsequent action following appropriate procedures on the basis of evidence developed at the hearing.

#### Facilitation

The Facilitator must present all written material for the committee to study and provide relevant information if so requested by the committee. The Facilitator chairs the hearing and makes rulings on procedural matters. In the event of a tie vote, the Facilitator will vote to break the tie. All testimony will be recorded. The recording will remain on file.

#### Process

- a. The Facilitator shall be responsible for conducting the hearing in such a manner that the rights of the grievant and the respondent are observed throughout and that fair play and due process are accorded all parties.
- b. The hearing shall not be conducted according to technical rules relating to evidence and witnesses or rigid procedural guidelines. The Facilitator shall admit evidence on which responsible persons are accustomed to rely in the conduct of serious affairs, but shall exclude evidence that is irrelevant, inappropriate, or unduly repetitious.

#### Witnesses

 Each witness must leave the room after giving evidence and must not hold discussions with others.

- b. At the request of the committee, a witness may be recalled only to provide clarification. The Facilitator must make a decision on the importance of the potential testimony against the inconvenience of recalling excused witnesses.
- c. Additional witnesses, beyond those previously named by the grievant and the respondent, may not be called to present evidence at the hearing unless approved by the Facilitator.

#### 7. Committee Deliberation

- a. Deliberation occurs among committee members only. The Facilitator may be present for consultation. However, when the grievance involves a grade dispute and the committee finds in favor of the student, student members of the committee may not participate in the deliberations to determine the final grade to be assigned.
- Committee members must consider the case based only on evidence accepted at the hearing.
- A committee member seeks procedural advice only from the Facilitator.
- The Facilitator must not allow unreasonable or unnecessary coercion of any member of the committee by another member.
- e. The Committee will, by secret ballot, determine the grievability of the grievance using the guidelines established in Section V.B. on grievability. The Facilitator is responsible for ensuring that each member clearly understands the guidelines given in Section V.B. on grievability. The Facilitator records the vote.
- f. The Facilitator must write a report consisting of the finding of facts and recommendations made by the Grievance Hearing Committee to the Provost. This report will be signed by all the committee members. Dissenting committee members may write a minority report.
- g. The recommendations and all materials on file form the report to be submitted to the Provost within five instructional days after writing of the report.

### Decision by Proyost

1. Within five instructional days from receipt of the committee's report, the Provost makes a decision on the grievance. Written copies of the committee's report and the decision must be furnished to the grievant and the respondent. The Department Chair and the Dean will receive written copies of the decision. In the event that a grade change has been Executive Memorandum 94-22 April 27, 1994 Page 11

recommended, the Provost will then replace the instructor of record as the initiator of the change of grade form. The grade change procedure will then continue as noted in Section X of The Grading Policy, EM 92-13.

 Decisions not implementing the recommendations of the committee must contain reasons for that lack of implementation.

### VI. APPEAL PROCEDURES

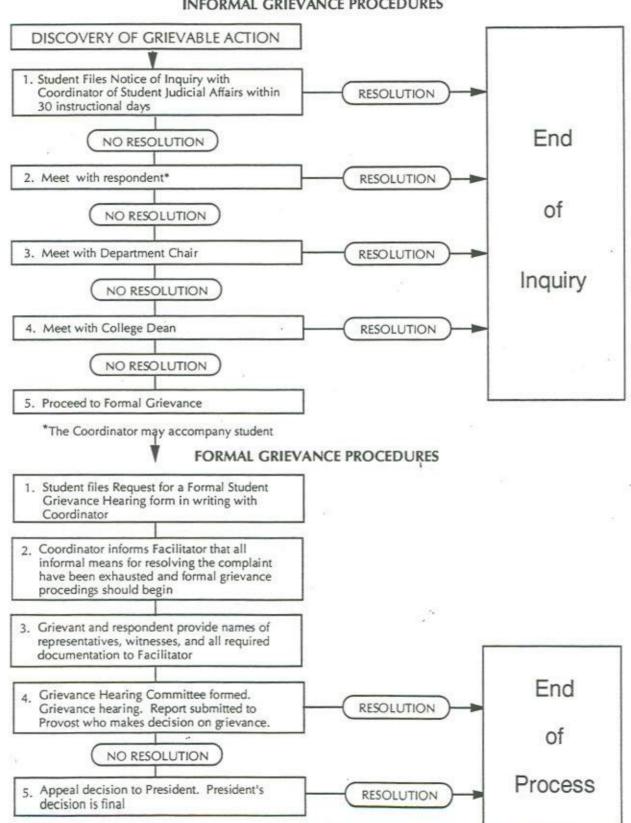
- Either the grievant or the respondent may appeal the decision of the Provost.
- B. The party wishing to appeal the decision must deliver a written appeal to the President with copies to the other party and to the Facilitator. This appeal must be delivered within five instructional days from the date of the decision of the Provost.
- C. The appeal must specify the following:
  - that it is an appeal;
  - the name of the appellant;
  - the reasons for the appeal and the facts supporting those reasons.
- D. Within five instructional days of receipt of a copy of the appeal, the Facilitator must forward all grievance materials to the President.
- E. Within five instructional days of receipt of the appeal, the other party may deliver a written response to the appeal to the President, with copies to the appellant and to the Facilitator, setting forth the reasons why the appeal should be denied and any facts supporting those reasons.
- F. Normally, within ten instructional days of receipt of the appeal, the President renders a decision thereon, which is final for all purposes.
- G. Tapes pertaining to the Hearing will be available in the Office of the Coordinator for Student Judicial Affairs. Requests for copies of the tapes must be made three working days in advance. There will be a charge for the tapes. Only the grievant or respondent may request tapes and the use of the tapes shall be limited to subsequent administrative and judicial proceedings held in connection with the matter.

#### VII. OTHER PROVISIONS

Ordinarily, the outcome of the formal Grievance Hearing shall not be overturned because of technical departure from the procedures or because of errors in their application. However, if technical departures or errors were such that a fair and just determination of the issues might have been compromised the President may reject the recommendation or call for a new hearing.

### STUDENT GRIEVANCE PROCEDURES

#### INFORMAL GRIEVANCE PROCEDURES



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# REQUEST FOR A FORMAL STUDENT GRIEVANCE HEARING FORM

### (Please Print)

Name	Date
Last First	M.I.
Address	Phone
Social Security No	Class Level
Student's Major	#*
Department in Which Complaint Arose	
Semester in Which Complaint Arose	
Course Name	Course No
Members of the University Community	Involved in Attempting an Informal Settlement:
	120
Referred by	
8	
*	Nature of Grievance
	<u> </u>
Remedy Sought	
Please attach any supporting doc	cumentation if necessary.
I certify that I have met with the	Dean and Department Chair.
(a)	The section of the s
Signature	Date

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### NOTICE OF INQUIRY (Please Print)

Name	Date
Last First	M.I.
Address	Phone
Social Security No	Class Level
Student's Major	
Department in Which Complaint Arose	
Semester in Which Complaint Arose	
Respondent (Grievance Against)	
Course Name	Course No
Members of the University Community I	nvolved in Attempting an Informal Settlement:
	Nature of Complaint
	· · · · · · · · · · · · · · · · · · ·
Remedy Sought	
	5.
<u> </u>	

Please attach any supporting documentation if necessary.



# CALIFORNIA STATE UNIVERSITY, CHICO

### SCHOOL OF NURSING

### OPTIONS AVAILABLE FOR LVN APPLICANTS

# SCHOOL OF NURSING CALIFORNIA STATE UNIVERSITY, CHICO CHICO, CA 95929-0200

(530) 898-5891

### SCHOOL OF NURSING CALIFORNIA STATE UNIVERSITY, CHICO INFORMATION FOR LVN APPLICANTS

LVNs may select either an LVN-BSN option, or the LVN 30-unit option. Regardless of the pattern selected, the LVN must apply to the University during the initial filing periods (November for the following Fall; August for the following Spring). A second application must be submitted to the School of Nursing (January for the following Fall, and October for the following Spring).

### A. LVN-BSN OPTION

The LVN must complete the prerequisite courses required for admission, with grades of "C-" or better. The LVN applies as a basic student and is accepted into Semester I. The LVN-BSN student must meet all requirements for graduation. The LVN may challenge certain courses (See Challenge Policies for LVNs - available in the School of Nursing Office).

A designated number of spaces will be reserved for LVN applicants (based on the total number of admission spaces) each semester. LVN applicants must meet all the criteria for admission into the BSN program. The supplemental selection criteria for admission to Nursing will be used to rank LVN applicants. These criteria include grades in prerequisite courses, SAT or ACT scores (verbal or English portions) and additional points based on health-related experience, language proficiency, and disadvantaged backgrounds. The LVNs with the highest ranking will receive the reserved LVN spaces. More LVNs may be admitted if they qualify through the normal ranking process. LVNs who are not admitted must follow designated procedures for reapplication in the same manner as generic applicants.

### Pattern Options:

- If the LVN has transferable college credit for previous nursing courses equivalent
  to Semester I courses, the LVN will be admitted to the program in a Semester I
  space. The LVN enrolls in only two Semester I courses--Nursing 82 and Nursing
  102, for a total of 4 units. To complete a full-time load, the LVN may enroll in
  other general education or upper division theme courses required for the Bachelor
  of Science Degree in Nursing. The LVN will validate knowledge of immunology,
  fluid and electrolytes by taking an examination.
- 2. The LVN who does not have transferable credit equivalent to the Semester I coursework, will enroll in Semester I courses and follow challenge procedures, including taking the NLN mobility exam (Foundations of Nursing) and achieving a passing score. Nursing 82 and Nursing 83 theory may be challenged by taking a comprehensive examination; Nursing 84 may be challenged by passing three skills competency tests and writing a comprehensive care plan based on an actual patient care experience.
- 3. The LVN who has not completed an IV certification course will attend Nursing 84

IV skills lab and Nursing 83 fluid and electrolyte lectures. Competency will be demonstrated to faculty using the criteria set forth in the Nursing 84 supplement.

#### B. 30-UNIT OPTION

LVNs who select this option are admitted into Semester II as transfer students on a space available basis. Progression in clinical courses is dependent on space available. The 30-Unit Option provides the minimal preparation for RN licensure as designated in Section 1435.5 of Laws Relating to Nursing Education Licensure-Practice in the State of California. The LVN who selects this option will <u>not</u> be a graduate of the Nursing program and will take the licensure examination as a non-graduate. Other states may not grant reciprocity for this type of RN licensure.

LVN students are encouraged to determine their career goals over the long term to decide their need for and interest in the degree program which can allow for a more direct route to advanced education and practice in the profession.

Required courses for the 30 unit option:

BIOL 004	Human Physiology	3.0 Units
BIOL 011	General Microbiology	4.0 Units
(or acceptable tra	ansfer courses)	
These courses m	ust be completed with a grade of "C-" or better pr	ior to entering
Nursing courses.		ă.
NURS 103	Nursing Concepts for Acute Care	6.0 Units
NURS 104	Practicum in Acute Care	4.0 Units
(N103 and 104 m	ust be taken concurrently)	
NURS 122	Leadership/Mgmt and Prof. Issues	3.0 Units
NURS 124	Pract. in Pt. Care Management	2.5 Units
(N122 and 124 m	ust be taken concurrently)	
NURS 133	Nurs. Management Maladaptive Behavior	4.0 Units
NURS 134	Pract. Management Maladaptive Behavior	2.0 Units
(N133 and 134 m	ust be taken concurrently)	
NURS 163	Nursing Care of the Gerontology Patient	1.0 Unit
	TOTAL	29.5 Units

. . . . .

### Transfer and Challenge Policies for LVNs:

The LVN student who wishes to challenge any portion of the curriculum based on prior education and experience as an LVN:

- 1. Must maintain current California licensure as an LVN.
- Must have grades of "C-" or better in all prerequisites and Nursing courses, and a 2.3 GPA in LVN Nursing courses.
- May use a credit-by-examination option for N113.
- 4. Other courses may be challenged at the discretion of the instructor and the Director.

Such challenges should be based on prior formal education or clinical experience equivalent to the course being challenged.

#### Nursing Mobility Tests

The National League for Nursing Mobility tests are administered twice a year, in November and June. Profile I, Book I covers Foundations of Nursing (only for students who do not have transferable credit for Semester I). Students who wish to challenge Semester III, Maternal/Child Theory (N113) must take Profile II, Book II, Care of the Client During Childbearing and Care of the Child. Each test requires four hours; the cost is approximately \$50.00 per test, plus an administrative fee, payable at the time of registration. The deadline for application for testing is four weeks prior to the test date. Application is made through the School of Nursing.

#### ADVISING

Gwin Richter is the LVN adviser. She can be reached at (530) 898-6368; e-mail: grichter@csuchico.edu.



### CALIFORNIA STATE UNIVERSITY, CHICO SCHOOL OF NURSING

# POLICY FOR STUDENTS SUSPECTED OF DRUG OR ALCOHOL ABUSE/DEPENDENCY

Alcoholism and drug dependencies are prevalent in American society, and are of major concern when they occur in nurses and nursing students. Drug and alcohol abuse and dependency are recognized as illnesses and major health problems. They are also a threat to patient safety. Recognition of these problems is a key to protecting patients, as well as for obtaining proper treatment for the nursing student. Nursing faculty, nursing staff and nursing student peers have an obligation to act on concerns regarding alcohol or drug abuse or dependency when encountered in the nursing student. The School of Nursing follows the California Board of Registered Nursing guidelines for dealing with nurses impaired by drugs or alcohol.

The School of Nursing adheres to the following clear prohibitions regarding drugs and alcohol.

- Students may not possess, or be under the influence of alcohol while in clinical or nursing classroom settings.
- Students may not be under the influence of drugs, i.e. controlled substances, or prescription drugs, when there is the possibly that such use may impair the student's ability to safely perform nursing care, or impair the learning in a classroom setting.
- Students may not be involved in the illegal possession, distribution, sale, diversion or purchase of a controlled substance.

Nursing faculty are obligated to take immediate action if a student involved in School of Nursing courses is suspected, based on inappropriate conduct, physical symptoms, or other indicators, of being under the influence of drugs or alcohol. The following policy describes actions that may be taken when students are suspected of violating drug or alcohol policies. The School of Nursing Student Guidelines describes risk factors, signs and symptoms, and resources for dealing with alcohol and drug abuse and dependency.

#### Procedures:

1. Faculty or peers who suspect a student of alcohol or drug use/dependency (based on a pattern of behavior consistent with impairment) will document specific behaviors or confirmed evidence of such impairment. This will be submitted in writing to the Director who will determine the action to be taken. If the Director and involved faculty feel the evidence is compelling and indicates violation of drug and alcohol policies, the student will be confronted with the concerns and evidence. The Director and involved faculty will decide what type of follow-up is indicated, based on the outcome of this conference. Options include, but are not limited to:

- a. A warning, with continued observation; consultation with all other nursing faculty who have contact with the student will occur, to involve them in continued observation.
- b. Immediate request for a body fluid screen for alcohol or drugs. All costs of testing will be borne by the student. Refusal to comply with testing will result in dismissal from the nursing program. Subsequent re-entry into the program will be contingent on approval of the School of Nursing Executive Committee.
- c. Referral to a drug or alcohol counselor for assessment of drug or alcohol problems. Resources will be suggested to the student; choice of counselor will be made by the student. All costs will be the responsibility of the student. The student will be asked to release the results of this assessment to the School of Nursing.
- d. Immediate administrative probation, resulting in removal of the student from all clinical courses. The student will be subject to a contract which must be signed and adhered to for continued participation in any portion of the nursing program.
- The student's transcript will be marked to indicate School of Nursing Administrative Probation.
- 2. If reasonable suspicion of alcohol or drug use occurs in the classroom or clinical setting, the student will be immediately removed from that setting. The faculty member will discuss the concerns with the student. If reasonable suspicion still exists, the Director of the School of Nursing (or assistant director or Nursing Executive Committee member in her absence) will be informed and will determine what actions need to be taken. Screening for drugs or alcohol will be required. The student will have to give consent for such testing, and authorization for results to be made available to the School of Nursing.
  - a. If use of alcohol is suspected, the student will be transported to campus and will be required to submit to a breath test administered by campus police. If the student is in a clinical setting distant from campus, a blood alcohol may be drawn at an available health care agency.
  - b. If drugs are suspected, the student will be required to provide a witnessed urine sample or a blood sample. Such testing may occur at the Student Health Center during regular hours, or at a healthcare agency such as a hospital emergency department or a prompt care center.
  - All testing costs will be borne by the student.

#### 3. Contract Procedure

Any student with admitted or proven drug/alcohol abuse/dependency, or who has a strong pattern of impaired behaviors witnessed by two or more faculty, staff or students, will be subject to the terms of a contract in order to continue in the Nursing program. The contract will include, but is not limited to:

- a. A requirement for psychological counseling and rehabilitation, with verification provided to the School of Nursing. Costs of such counseling will be the responsibility of the student. Periodic reports from the counselor to the Director of the School of Nursing will be required.
- b. Consent by the student for random body fluid screens at the request of the School of Nursing. Any costs for testing will be the responsibility of the student. Refusal to submit to testing or failure to appear when requested for testing will be considered a positive test result and will lead to immediate and permanent dismissal from the nursing program.
- Agreement by the student to absolutely refrain from use of involved substance(s)
   (e.g. alcohol, controlled substances and illicit drugs) during the period of the
   contract.
- d. Program requirements for licensure will not be considered met until the student is determined to be rehabilitated by the School of Nursing Executive Committee, even if all coursework has been completed (i.e., the student will not meet the presumption of meeting the professional/ethical requirements of the program until a program of rehabilitation is complete). Normally, a student will not be certified to the Board of Registered Nursing as having met all the program requirements for licensure until one full year of negative random body fluid screens have been obtained.
- e. Agreement that the concerns and conditions imposed for rehabilitation may be released to the Board of Registered Nursing at the time the student applies for Licensure (this includes all state boards where nursing licensure is applied for).
- Violation of the terms of the contract will result in permanent dismissal from the program.
- General Guidelines Governing Re-entry of Impaired Students into Classroom and clinical settings.
  - a. A student with known or suspected chemical impairment may participate in on-campus nursing courses if a contract is in place, and the student adheres to the terms of the contract.

- b. Normally\*, a student with known chemical impairment will be restricted from participation in clinical courses until one year of negative random body fluid screens have been obtained.
- c. A student with known chemical impairment will be restricted from access to controlled substances in the clinical setting. The student absolutely will not administer narcotics, will not work with PCAs, narcotic patches, or other drugs with abuse potential as specified in an individual contract. Students must notify the clinical instructor immediately when patients have changes in narcotic orders.
- d. An impaired student who is readmitted to clinical courses must agree to inform immediate nursing supervisors on the day of care regarding the chemical impairment contract. All nursing faculty involved with the student will also be informed of the conditions of the contract.
- e. Depending on the nature of the chemical impairment, the student may be restricted from participating in those clinical courses where supervision is less available, where the student might have access to prescription drugs in client homes, or might be exposed to illicit drugs in client homes.

\*"Normally" is used to allow discretion based on type of impairment, course of rehabilitation, and recommendations of the School of Nursing Executive Committee.

### Indications for reasonable suspicion of drug/alcohol abuse or dependency:

#### Behaviors

- Observed/reported possession or use of a prohibited substance
- 2. Apparent drug or alcohol intoxication
- Observed abnormal or erratic behavior
- Deterioration of classroom or clinical performance
- Medication diversion
- Unusual behavior such as verbal abuse, physical abuse, extreme aggression or agitation, withdrawal, depression, mood changes, or unresponsiveness; inappropriate responses to questions or instructions; other erratic or inappropriate behavior such as hallucinations, disorientation, excessive euphoria, confusion.

### Physical signs or symptoms

- 1. Possessing, dispensing, or using controlled substance
- 2. Slurred or incoherent speech
- 3. Unsteady gait or other loss of physical control; poor coordination
- Bloodshot or watery eyes
- 5. Dilated or constricted pupils or unusual eye movement
- Extreme fatigue, drowsiness, sleeping
- 7. Excessive sweating or clamminess of the skin
- Flushed or very pale face

Approved Jan. 2000

- 9. Highly excited or nervous
- 10. Nausea or vomiting
- 11. Odor of alcohol on breath, body or clothing
- 12. Odor of marijuana
- 13. Dry mouth
- 14. Dizziness or fainting
- 15. Shaking of hands or body tremor/twitching
- 16. Irregular or difficult breathing
- 17. Runny sores or sores round nostrils
- 18. Inappropriate wearing of sunglasses
- 19. Puncture marks or "tracks"
- 20. Disheveled appearance

### Behavioral patterns

- Repeated absences
- 2. Frequent absences from work area
- 3. Frequently coming in late or leaving early
- 4. Alternate periods of high and low productivity
- 5. Complaints from patients, families, staff or other students
- Making poor decisions or using poor judgment
- 7. An increase in errors, forgetfulness, and difficulty following instruction
- 8. Accidents related to apparent lack of concentration.

APPENDIX H

EDP-P-05 (Rev. <u>1</u>40/977)

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ANTH 13 or 103	H	Ħ	Ħ	Ħ	Ħ	Ħ	3.0	3.0	3			45			
OR	-H	Ħ	Ħ	Ħ	Ħ	Ħ	3.0	1 3.0				1			
SOC 1	-Ħ	Ħ	Ħ	Ħ	Ħ	Ħ									
NFSC 25 or 125 or 1	128	П	$\Box$	$\Box$	Ī	ī	3.0	3.0	3			45			
To		I	Ele	ctiv	7es		3.0 16.0	3.0	14	2.0	6	210	90		
Quarter(Semester)							10.0	114.0		max		1	Hours		
	M	S	0	C	P	G									
NURS 82 Role I	X	X					2.0	2.0	2			30			
NURS 83 Found.	X	X					4.0	4.0	4			60			
NURS 84 Pract.	X	X					4.0			4.0	12		180		
NURS 102 Assess.	X	X				X	2.0	2.0	2			30			
Gen. Stud.		$\sqcup$			$\vdash$	님	3.0	3.0	3			45			
To	 tal				Ц	ш	15.0	11.0	11	4.0	12	165	180		
Quarter/Semester											8.5				
<b>C</b>	M	S	0	C	P	G									
													1		
								H							
	_Ц	$\Box$	Ц												
Т.,	_니	Ш	Ш	Ш	Ш										
								11	1 1			1	1		

EDP-P-05 (Rev. 140/977)

Name of School:									Date	Submitte	ed:		
CALIFORNÌA STATE UN	NIVE	RSI	TY,	CE	IICO				MA	RCH 25,	1994	-	
Type of Program:  ☐ Entry Level M	acte	-				ছ	Baccalaur	este [	□ Associa	te Degree	□ App	For BRN Office	of the state of
☐ Elitty Level IV	iasic.	1				<u> </u>	Daccasaus	cate [	_ Associa	ac Degree	By: Date:		
List name and nur academic term. In								in sequer	nce, <del>begini</del>	nningbegi	nning with	the first	
Check appropriate  Vear: Quarter/Semester  Check:  ▼ Semester						Total	Lea	cture	I	<u>ab</u>	Total Hrs		
1 2 X3 4 Quarter						<u>Units</u>	Units	Hr/Wk	<u>Units</u>	Hr/Wk	Lec	Lab	
Quarter/Semester	М	S		C	P	G							
NURS 103 Concept.	X	X				X	6.0	6.0	6			90	
NURS 104 Pract.	X	X				X	4.0			4.0	12		180
NURS 112 Role Con							2.0	2.0	2			30	
Gen. Stud.							3.0	3.0	3			45	
1													
Tot	al						15.0	11.0	11	4.0	12	165	180
Quarter/Semester					T				Total	Hours			
3 1	M	S	0	C	P	G							
NURS 113 Mat-Chld			X	X			4.0	4.0	4			60	
NURS 114 Pract.			X	X			4.0			4.0	12		180
NURS 115 Family			X	X		X	1.5	1.5	1.5			22.5	
NURS 132 Research							2.0	2.0	2			30	
Gen. Stud.		ppe		v	sio	1	3.0	3.0	3			45	
Elective							3.0	3.0	3			45	
Tot	al						17.5	13.5	13.5	4.0	12	202.5	180
Quarter/Semester												1	
	M	S	0	C	P	G							
		П	П		П								
	ī	П	ī	Ī	Ī						1		
	Ī	F	Ī	Ī									
W. 41	ī	F	Ī	F	Ī	ī		1					
	一	Ī	Ī	Ī	Ī	ī							
	ī	F	F	一	Ī	F							
Tot	al	_	_	_	_	_							

EDP-P-05 (Rev. 140/977)

Submit in duplicate													
Name of School: CALIFORNIA STATE	UNI	VERS	SIT	Y, (	CHIC	00			100000	e Submitte			
Type of Program:						_					□ Appı	For BRN Office roved $\square$ No	
Entry Level Master						Baccalaur	eate [	_ Associa	ate Degree	By:			
List name and nu academic term.								in sequer	ice, <del>begin</del>	inningbegi	nning with	the first	
Check appropriate		hec							AK 91				
<u>vear:Quarter/Semester</u> <u>X Semester</u>						Total		cture	-	ab	Total Hrs		
	34	10	uart	er		_	Units	Units	Hr/Wk	Units	Hr/Wk	Lec	Lab
Quarter Semester	1	10	10	Ic	15								
	M	S	0	C	P	G			-				-
NURS 122 Role IV	-님	$\vdash$	님	H	님	님	3.0	3.0	3			45	
NURS 124 Pract.		X	H	H	님	X	2.5			2.5	7.5		112.5
NURS 133 Mal. Bel	14	$\vdash$	님	$\vdash$	X	님	4.0	4.0	4			60	
NURS 134 Pract.	-님	H	H	$\vdash$	X	님	2.0			2.0	6.0		90
Gen. Stu	1d	$\vdash$	$\sqcup$	$\vdash$	닏	님	3.0	3.0	3			45	
Elective	s	Ш	Ш	Ш	Ш	Ш	3.0	3.0	3			45	
To	tal						16.5	13.0	13	4.5	13.5	215	202.5
Quarter (Semester)												Total	Hours
	M	S	0	C	P	G							
NURS 173A CHN Four	nd						2.0	2.0	2			30	
NURS 173B CHN Theo	) TV						2.0	2.0	2			30	
NURS 163 Gero						X	1.0	1.0	1			15	
NURS 174 Pract.						X	3.0			3.0	9.0		135
NURS 193 Integ.	X	X	X	X	X	X	1.0	1.0	1			15	N==
NURS 194 Pract.	X	X	X	X	X	X	2.0			2.0	6.0		90
Elective							4.0	4.0	4			60	
Quarter/Semester			_	IATC	-		15.0	10.0	10	5.0	15.0	150	225
	M	S	0	C	P	G							
		Ц	Ш	Ц	Ц	$\Box$							
	_Ц	Ц	Ц	$\sqsubseteq$	$\sqcup$	$\Box$							
	_凵	Ц	$\sqcup$	$\perp$	Ц	$\sqcup$							
*		Ц	Ш	Ц	Ш								
	_Ц	Ц											
	_[_]												
To	Int							1					T

APPENDIX I

State of California

Department of Consumer Affairs Board of Registered Nursing

### COURSE OF INSTRUCTION

EDP-P-06 (Rev. 9/99)

Ruth Terry, MPH, RN Executive Officer (916) 322-3350 (626) 575-7080

NEC

Please submit in DUPLICATE.

TOTAL UNITS FOR LICENSURE

Other Degree Requirements

TOTAL UNITS FOR GRADUATION

For	BRN	Office	Use	Only
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Approved by:

Date:

			□BRI	N Copy Program Copy
PROGRAM NAME:	Chica			DATE:
California State University,	evis et inspector	date(s)]		March 25, 1994  EFFECTIVE DATE OF PROPOSED CURRICULUM:  Fall, 1994
REQUIRED FOR LICENSURE AS 1426	STATED IN SE	CTION	CURRENT BRN- APPROVED CURRICULUM	PROPOSED CURRICULUM REVISION (*Place asterisk next to proposed change)
	Semester Units	Quarter Units	1.0	
Nursing Units	36	54	48.0	
Theory	(18)	(27)	29.5	
Clinical	(18)	(27)	18.5	
Communication Units	6	9	6.0	
Science Units	16	24	18.0	

SEMESTER LENGTH IN WEEKS:	QUARTER LENGTH IN WEEKS:	SUMMER SESSION IN WEEKS:	
15			
SIGNATURE OF PROGRAM DIRECTOR:	)[	Director	

87

72.0

56.0

128.0

58

APPENDIX J

For Board Use Only

# CONTENT REQUIRED FOR LICENSURE

CALIFORNIA STATE UNIVERSITY, CHICO

EDP-P-07 (Rev. 9/98)

Program Name:

Ruth Terry, MPH, RN Executive Officer (916) 322-3350 (626) 575-7080

Please submit in DUPLICATE.

Psych/Mental Health

Geriatrics

N133

N134

Type: Entry Level Mas	ster X Baccalaureate	Associate				
Academic System:	X Semester	Quarter		, NEC		
Last BRN Curriculum App	roval: Major	Minor				
Last BRN Curriculum Approval (Date):			Date:			
MARCH 6-7, 1995	1		1000000	53 255		
Total Content for Licensure Units:	Effective Date: MARCH 7, 1	1995	BRN Copy	Program Copy		
aliformation needed to evaluate alifornia Code of Regulation) ame(s) and the number(s) of the	is listed in the left column	n below. Please indicate i				
REQUIRED CONTENT	Number		E TITLE	UNITS		
	BASI	C SCIENCES				
Anatomy	Biol 003	Human Anatomy	3			
Physiology	Biol 004	Human Physiology	Human Physiology			
Microbiology	Biol 011	General Bacteriolog	General Bacteriology			
Societal/Cultural Patterns		See Attached #1		3		
Psychology	Psy 001A	001A Principles of Psychology				
Other		See Attached #2		15		
	COM	MUNICATION				
Group		See Attached #3		3		
Verbal		See Attached #3				
Written	Engl 001/Engl 003	Freshman Composit	ion	3		
	N	URSING				
Medical/Surgical	N83/N84/N103/N104		Nurs. Found/Pract. In Nurs/Found/ Nurs. Acute Care/Pract. Acute Care			
Obstetrical	N113	Maternal-Child Nur		4		
Pediatric	N114	Pract. In Maternal-	act. In Maternal-Child Nursing			

Nurs. Mgmt. Of Maladaptive Beh.

Pract. In Mgmt. Of Mal. Behavior

4

2

9

See Attached

For the following required content areas, please list the course number(s) and title(s) in which content may be found. Please complete this section independently of the listing on the previous page.

REQUIRED CONTENT	NUMBER	COURSE TITLES
Alcohol & Chemical Dependency	N133	Nurs. Mgmt. Of Maladaptive Behavior
Personal Hygiene	N83	Nursing Foundations
Human Sexuality	N103, N113, N115	Nurs. In Acute Care; Reprod. Nsg; Family Nurs.
Client Abuse	N115, N133	Family Nursing; Nurs. Mgmt. Of Mal. Beh.
Cultural Diversity	N103, N115	Nurs. In Acute Care; Family Nursing
Nutrition	NFSC 128	Nutr. In Health & Disease
Pharmacology	N83, N103, N113	Nursing Found; Nurs. In Acute Care; Maternal-Child Nsg.
Legal Aspects	N82, N102, N122, N133, N112	Nurs. Role I; Nurse Assessment; Nurs. Role IV; Nurs. Mgmt. Of Mal. Beh; Nurs. Role Concepts
Social/Ethical Aspects		Same as Legal Aspects
Management/Leadership	N103, N122, N124	Nurs. In Acute Care; Nurs. Role IV; Pt. Care Mgmt.

# LVN 30 UNIT OPTION

Please complete the section below for the LVN 30 Unit Option Curriculum Plan.

REQUIRED CONTENT	Number	Course Title	UNITS
	BASIC	C SCIENCES	
Physiology	Biol 004	Human Physiology	3.0
Microbiology	Biol 011	General Bacteriology	4.0
	N	URSING	
Advanced Med/Surg	N103 N104	Nurs. In Acute Care Pract. In Acute Care	6.0
Psych/Mental Health	N133 N134	Nurs. Mgmt. Of Mal. Behavior Pract. In Mgmt. Of Mal. Behavior	4.0
Advanced Geriatric	N103; N163	Nurs. In Acute Care; Nurs. Care of Gero Pt.	1.0
Management/Leadership	N122 N124	Nurs. Role IV Pract. In Pt. Care Mgmt.	3.0 2.5
		TOTAL UNITS	29.5

Please answer the following question.

What is your passing grade for all Content Required	for Licensure courses? C-
Signature of Person Completing This Form	Position Title  Director

### ADDENDUM

#1	SOCIETAL/O	CULTURAL PATTERNS			3 Units
	SOCI 001	Principles of Sociology	3 Units		
	ANTH 013	Introduction to Cultural Anthro.	3 Units		
	ANTH 103	Cultural Anthropology	3 Units		
#2	OTHER			2	15 Units
	CHEM 027	Elem. Inorganic Chemistry	4 Units		
	<b>CHEM 028</b>	Elem. Organic Chemistry	4 Units		
	CD 052	Child Development	3 Units		
	NFSC 128	Nutrition in Health & Disease	4 Units		
	NFSC 025	Basic Nutrition	3 Units		
#3	VERBAL CO	MMUNICATION		::	3 Units
	HCS 011	Speech Communication Fund.	3 Units		
	HCS 012	Small Group Communication	3 Units		
	-	SEC.			
		or			
	NURS 082	Nursing Role I	1 Unit		
	<b>NURS 102</b>	Nursing Assessment	2/5 Unit		
	<b>NURS 112</b>	Nursing Role Concepts	1 Unit		
	NURS 115	Family Nursing	1/5 Unit		
	NURS 133	Nursing Management of Maladaptive Behavior	2/5 Unit		
		Total	3 Units		

Gerontology content is integrated in the following courses:

N83 2 HOURS THEORY

. N102 3 HOURS THEORY RELATED TO ASSESSMENT

N103 3 HOURS THEORY RELATED TO PATHOPHYSIOLOGY

N115 7 HOURS THEORY RELATED TO FAMILY

N163 15 HOURS ADVANCED THEORY

### TOTAL THEORY = 30 HOURS

N84	12 HOURS PRACTICUM IN INSTITUTIONAL AND ACUTE
	CARE
N104	18 HOURS (MINIMUM) PRACTICUM IN ACUTE CARE
N124	15 HOURS PRACTICUM IN ACUTE CARE
N194	15 HOURS PRACTICUM IN ACUTE CARE

TOTAL Gerontology PRACTICUM = 60 HOURS in prelicensure courses

(An additional 22.5 hours of gerontology in the community is contained in the community health course (N174), not required for licensure).

APPENDIX K

EDP-P-11 (Rev. 9/99)

Ruth Terry, MPH, RN Executive Officer (916) 322-3350 (626) 575-7080

NAME OF SCHOOL: CALIFORNIA STATE UNIVERSITY, CHICO	SIGNATURE (Director of RN Program):	DATE: 11/10/99
LAST BRN-APPROVED CURRICULUM REVISION:  CLASSIFIED AS:   MAJOR X MINOR	ACADEMIC SYSTEM:  ☐ QUARTER X SEMESTER	
DATE APPROVED: MARCH 6-7, 1995		

NURSING COURSE	M			P M		III	NITS	LEAD INSTRUCTOR	CLINICAL LAB INSTRUCTOR(S)	#STUDENTS/ SECTION	CLINICAL SITE
(Name & Number)	S	0	C	Н	G		1	(Name)	(Name)	bection	
SEMESTER I	COR						Various Switz				
Nursing 82 (Comm)				Total Transition		2		Brown		30	None
Nursing 83	X			1	X	4		Brown/McManus		30	
Nursing 84-1	X				X		4		Brown	10	Skills Lab/Enloe Med Center
Nursing 84-2	X	10000		100	X		4		McManus	10	Skills Lab/Oroville Hospital
Nursing 84-3	X	1			X		4	IN.	Gardner	9	Skills Lab/Feather River
Nursing 102	X	more	1		X	2		Brown			
SEMESTER II			1000								
Nursing 103	X				X	6		Land-Smith/Persaud		29	None
Nursing 104-1	X	-			X		4		Land-Smith	9	Enloe Med Center
Nursing 104-2	X				X		4		Persaud	10	Enloe Med Center
Nursing 104-3	X				X		4		Sylvain	10	Feather River Hosp.
Nursing 112 (Tch./Dec.)		-				2		Land-Smith/Persaud		29	None

EDP-P-11 (Rev. 9/99)

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M /			P M		UN	NITS	LEAD INSTRUCTOR	CLINICAL LAB INSTRUCTOR(S)	#STUDENTS/ SECTION	CLINICAL SITE
S	0	C	H	G	LEC	LAB	(Name)	(Name)	CANADAMA AS DOWN	
	X	X			4		Richter/Morgan		27	None
	X	X				4		Richter/Morgan	9	Fremont Hosp., Enloe Med Center, Comm. Agencies
	X	X				4		Richter/Morgan/ Johansson	9	Fremont Hosp., Enloe Med Center, Comm. Agencies
	X	X				4		Richter/Leedom	9	Fremont Hosp., Enloe Med Center, Comm. Agencies
				X	1.5		Morgan		27	None
					2		Young		28	None
		-		I						
	- 1000	- 100	-							
-	-	- 19292	- 1000	_						
	1	/ s o	/ S O C C   C   X X X   X X X	/ S O C H  X X X  X X	/ S O C H G  X X C  X X C  X X C  X X C	/ S O C H G LEC  X X	/ S O C H G LEC LAB  X X	/         NM         UNITS         INSTRUCTOR (Name)           S         O         C         H         G         LEC         LAB         (Name)           X         X         I         I         A         Richter/Morgan           X         X         I         I         A           X         X         I         I         A           X         X         I         I         A           X         X         I         I         A           X         X         I         I         A           X         X         I         I         A           X         X         I         I         A           X         X         I         I         A           X         X         I         I         A           X         X         I         I         A           X         X         I         I         A           X         X         I         I         A           X         X         I         I         A         I           X         X         I         I         A <td>/ S O C H G LEC LAB         INSTRUCTOR (Name)         INSTRUCTOR(S) (Name)           X X I G X X G X X G X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X X G X</td> <td>/ S O C H G LEC LAB         INSTRUCTOR (Name)         INSTRUCTOR(S) (Name)         SECTION           X X I G X X G X X G X X G X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X X G X</td>	/ S O C H G LEC LAB         INSTRUCTOR (Name)         INSTRUCTOR(S) (Name)           X X I G X X G X X G X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X X G X	/ S O C H G LEC LAB         INSTRUCTOR (Name)         INSTRUCTOR(S) (Name)         SECTION           X X I G X X G X X G X X G X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X G X X X X G X

EDP-P-11 (Rev. 9/99)

Ruth Terry, MPH, RN Executive Officer (916) 322-3350 (626) 575-7080

NAME OF SCHOOL: CALIFORNIA STATE UNIVERSITY, CHICO	SIGNATURE (Director of RN Program):	DATE: 11/10/99
LAST BRN-APPROVED CURRICULUM REVISION:  CLASSIFIED AS:   MAJOR X MINOR	ACADEMIC SYSTEM:  ☐ QUARTER X SEMESTER	
DATE APPROVED: MARCH 6-7, 1995		

NURSING COURSE	M /			P M		UN	IITS	LEAD INSTRUCTOR	CLINICAL LAB INSTRUCTOR(S)	#STUDENTS/ SECTION	CLINICAL SITE
(Name & Number)	S	0	C	Н	G	LEC	LAB	(Name)	(Name)	7.	
SEMESTER IV											
Nursing 122 (Pt. Care Mgmt.)						3		Huston		30	None
Nursing 124-1 (Pt. Care Mgmt.)					X		2.5		Pegg	10	Variable Agencies
Nursing 124-2 (Pt. Care Mgmt.)							2.5		Pegg	10	Variable Agencies
Nursing 124-3 (Pt. Care Mgmt.)							2.5	NO.	Walsh	10	Variable Agencies
Nursing 133				X		4		Hookins		30	None
Nursing 134-1				X			2		Hookins	10	Butte Co. Mental Hlth.
Nursing 134-2				X			2		Hoban	9	Butte Co. Mental Hith.
Nursing 134-3				X	-2.1		2		Hoban	10	Butte Co. Mental Hith.

EDP-P-11 (Rev. 9/99)

Ruth Terry, MPH, RN Executive Officer (916) 322-3350 (626) 575-7080

NAME OF SCHOOL: CALIFORNIA STATE UNIVERSITY, CHICO	SIGNATURE (Director of RN Program):	DATE: 11/10/99
LAST BRN-APPROVED CURRICULUM REVISION:  CLASSIFIED AS:   MAJOR X MINOR	ACADEMIC SYSTEM:  ☐ QUARTER X SEMESTER	(A)
DATE APPROVED: MARCH 6-7, 1995		

NURSING COURSE				P M		UNITS		LEAD INSTRUCTOR	CLINICAL LAB INSTRUCTOR(S)	#STUDENTS/ SECTION	CLINICAL SITE
(Name & Number)	S	0	C	Н	G	LEC	LAB	(Name)	(Name)		
SEMESTER V											
Nursing 163					X	1		McManus		25	None
Nursing 173A (Com. Hith)						2		Damazo		25	None
Nursing 173B (Com. Hlth)						2		Hookins		25	None
Nursing 174-1 (Com. Hith)							3		Damazo/Hookins	8	Butte/Yuba Co. Hlth Dept.
Nursing 174-2 (Com. Hlth)							3		Shovein/Reekie	9	Tehama/Glenn Co. Hith Dept.
Nursing 174-3 (Com. Hith)							3		Shovein/Reekie	8	Butte/Tehama Co. Hith Dept.
Nursing 193-1 (Integ. Nur)						1		Leedom		19	None
Nursing 193-2 (Integ. Nur)						1		Leedom		5	None
Nursing 194-1 (Integ. Nur)		-			X		2		Leedom	10	Enloe Med Center
Nursing 194-2 (Integ. Nur)					X		2		Young	9	Oroville Hosp.
Nursing 194-3 (Integ. Nur)					X		2		Leedom	5	Enloe Med Center