

Nursing

MARCH 2024 ALICIA BRIGHT EDD, CNS, RN

Year	# of	Completion	Attrition	NCLEX Pass
	Graduates	Rates		Rates
2022-2023	41	95.3%	4.7%	93.88%
			(2 students)	
2021-2022	41	100%	0	94.87%
2020-2021	42	97.7%	2.3%	95.24%
			(1 student)	

Student Success Continues (EMP Goal 1)

TABLE 1: COMPLETION AND NCLEX PASS RATES

Increased Diversity

Class of	White	Nonwhite	AA/AS	BS.BA
2022	68.2%	31.7%	30%	44%
2023	65.12%	34.9%	21%	51.16%
2024	47.62%	52.38%	50%	40.48%
2025	44%	55.81%	42%	42%

- In 2021, the weighing on the multicriteria admissions criteria was changed in an effort to diversity the student body
- This took effect for Fall 2022 (Class of 2024)
- We have started to evaluate the effects of the change and to assess the need for additional changes.
- Considering participation in an anti-racism study/project with the California Association of Registered Nurses

Nursing Assistant Program Update



Nursing provides faculty and curricular support

Cohort 1 graduated in October Cohort 1 graduated March 25th Cohort 3 starts March 29th



Career path into nursing

Plan to develop curriculum to present to Curriculum Committee



For-credit to be offered to a more diverse group of students

Currently groups are curated by The Canal Alliance

We hope to offer to the general public

Concurrent enrollment for high school students?

Other achievements:

Course SLO's and Course descriptions reviewed and updated in Elumen

- About half of classes have evaluated SLO's (some classes taught only once a year)
- Too early to evaluate based on new CSLO's

Renewed CEU provider number

- Lapsed in 2019
- Allows us to support faculty development (and keep up with the rapidly changing field)
- Allows us to provide professional development for the community

Applied for national accreditation with Accreditation Commission for Education in Nursing (ACEN)

- Lapsed in 2014
- Initial accreditation approval is anticipated in 2026
- Now aligned with BRN reapproval visits
- More access to clinical sites
- Needed by alumni for acceptance into military
- Supports a stronger program
- Successful accreditation extends approval for 8 years

Program overview

Full time faculty positions: 8

Open positions as of April 1st, 2024: 0 (!!)

Part time faculty: 24 active Temp Pool members

Non-instructional units

- Chair = 3 per semester
- Assistant Director/Clinical Placement Coordinator = 3 per semester
- Simulation Coordinator= 15 per semester

Staff:

- One full-time Administrative Assistant III
- One part time lab-tech (15 hrs/wk)

Program Overview

- Only 3 tenured faculty out of 8
- ► In 3 years:
 - Hired 5 new full-time faculty
 - Hired 10 new part-time faculty
 - Now using adjuncts to teach 50% of teaching units
 - CCC goal is for 75% of units to be taught by full time faculty
 - 10 full time faculty positions would cover about 69% of program units assuming a 15 unit per semester load
 - Full time faculty have significant programmatic obligations in addition to their teaching loads

Annual Budget Overview

District Funds: \$2,177,642

Discretionary \$48,125

Non-Discretionary \$2,129,517

Chancellor's Enrollment Grant: \$182,400

Instructional cost increases over the past three years

Changes in 2021-2022

- Number of clinical class groups increased
 - Covid clinical group size shrink began Added 1 med surg 1 group (6 units) and 1 Med Surg 3 (7.5 units)
 - Additional 13.5 units per year
- Per unit costs increased
 - 8 clinical courses went from 0.83 to 1:1 compensation Increased from a total of 180.57 units per year to 193.5 units per year
 - Additional 13.2 units

Instructional cost increases over the past three years

Changes in 2022-2023

- Unable to obtain placements for groups of 10-11
- Divided specialty groups in half (5-6) using supplementary clinical faculty

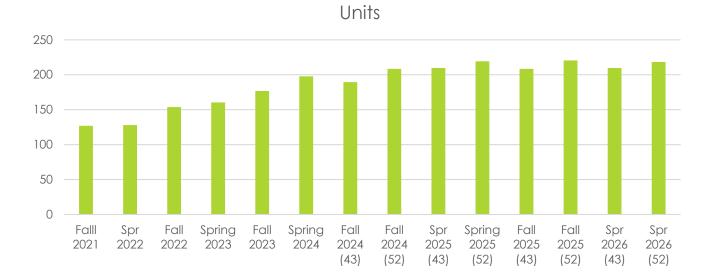
Changes in 2023-2024

- Split specialty clinicals to facilitate placement
- Health care has not recovered from Covid
- Clinical agencies refuse groups larger than 8-9
- Some agencies will not take more than 5-6

Spring 2023: Mandate to grow enrollment

- Chancellor's Office mandate to grow enrollment by 9 students from current levels or lose 15% of funding
- Chancellor's Nursing Grant has provided \$114,368 per year
- New Enrollment Grant would provide \$182,400 if we increase enrollment to 52 students per year
- If we do not increase enrollment, funding drops to approximately \$97,213 per year
- We currently turn away over 250 qualified applicants every year
- Private, for-profit colleges are growing enrollment
 - Tuition can cost \$80,000-\$300,000
 - Total program cost for COM students is about \$6,075

Total Teaching Units Projected through Spr.2026



Enrollment growth would add only 10.5 non-clinical units by splitting five theory classes. The rest of the growth is from clinicals. The growth in clinical units is determined by limits on class size imposed by our clinical partners.

Year	Number of students	Clinical section placements per school year	Preceptorships
2021-2022 (no longer feasible)	86	34	43
2023- 2024 (baseline)	86 (admitting 43)	50	43
2024-2025	95 (admitting 52)	52 (1 Funds., 1 MSI)	43
2025-2026 (and going forward)	104 (admitting 52	53 (as above plus 1 MSIII)	52

Growth in terms of clinical placements and number of students

TABLE 2: NUMBER OF CLINICAL SECTION PLACEMENTS NEEDED PER SCHOOL YEAR

- Multiple centralized clinical placement systems are now the norm
- Faculty Program Coordinator release time (1 unit) does not provide enough compensation to attract faculty to this work
- Full time faculty are on overload with teaching responsibilities
- Faculty must be engaged in identifying and evaluating clinical placements, however,
- Clinical placement requests and management are timeconsuming, technically demanding, and do not require teaching expertise
- Staff (clinical coordinator) can do this with 1 unit of faculty oversight
- Need administrative assistant in addition to clinical coordinator

Administrative work

Generativity sustains us (for now!)

A 3-unit Part-time Chair who accepts this as a full-time job

• 3rd Chair in 3 years

Co-Assistant Directors who each put in 3+ days a week for 1.5 units each

Full-Time + Administrative Assistant who has picked up clinical placement work because faculty are on overload

Fabulous student worker who will graduate in May

Requests from the Community

- Health care workers are in great demand
- Marin Community Clinics ,By the Bay health, Kaiser, Long-term care facilities, Santa Rosa Behavioral Health are all requesting more nurses, community health workers and allied health workers
 - RN'S
 - LVN'S (!)
 - Nursing Assistants
 - Home Health Aids
 - Mental Health Workers
 - Other community-based health roles
- Nursing Pathways: CNA, LVN, ADN
 - Supports access to lucrative careers for students from disadvantaged communities
 - Promotes diversity in nursing

The ask: Increased capacity

- Two additional Full time faculty positions
 - Provide consistency of instruction
 - Increase capacity for quality and growth
 - Nursing faculty are also teaching in the CNA program
- One Clinical Coordinator Position
 - Relieves faculty of the "heavy lifting" for clinical placements (centralized systems)
 - ► Faculty will still be involved in
 - Site identification
 - Relationships with sites
 - Evaluation of sites
 - Preceptorship placements
- I unit for faculty oversight of clinical coordinator role
- Add one unit to the Assistant Director call
- Increase lab tech from 15 hrs per week (0.4 fte) to 24 hrs per week (0.65 fte) to assist with Simulation and increased demand

Cost-saving alternatives

Shrink

Overall cost of programDecrease enrollment to 32-36 per year

Revise curriculum to avoid these smaller groups

• This would take a minimum of two years

Develop

Revise

Develop new programs with alternative funding sources

- •LVN to ADN apprenticeship program? (DEIA positive)
- •This will also take at least two years
- Could be developed within the limit of 104 students in the program
- Would need to accept 52 in Fall '24 then develop LVN to ADN program

Questions/discussion

THE WORLD AS WE HAVE CREATED IT IS A PROCESS OF OUR THINKING. IT CANNOT BE CHANGED WITHOUT CHANGING OUR THINKING.

—ALBERT EINSTEIN

References

- https://www.mckinsey.com/industries/health care/our-insights/assessing-the-lingeringimpact-of-covid-19-on-the-nursing-workforce
- https://healthforce.ucsf.edu/blogarticle/other/covid-19-reshaping-california-shealth-workforce