

Nursing



2019 ANNUAL REPORT OF PROGRAM DATA



UNIVERSITY of HAWAII®
KAUA'I
COMMUNITY COLLEGE

At a minimum, each program or unit Annual Program Review Update shall include measures described in [UHCCP 5.202](#). Additional measures may also be used for program or unit assessment.

1. Program Description

Program or Unit Mission Statement

The Kaua'i Community College Career Ladder Nursing Program provides access for the people of Kaua'i to quality nursing education within a caring environment. Our goal is to prepare nurses who, as critical-thinkers, can successfully practice in a 21st Century health care environment, and are prepared to progress upward through the career ladder.

Part I. Program Description

Date of Last Comprehensive Review	N/A because of Program Accreditation with Accreditation Commission for Education in Nursing (ACEN) thru 2025
Date Website Last Reviewed/Updated	October 2019
Target Student Population	All individuals interested in the Nursing Profession, including LPN's, recent high school graduates, and those seeking career changes
External Factor(s) that Affected the Program or Unit	Faculty shortage and difficulty in recruiting program needs; Program administrators are teaching full time and administering the program / division.

2. Analysis of the Program

Strengths and weaknesses in terms of demand, efficiency, and effectiveness based on an analysis of the Quantitative Indicators. CTE programs must include an analysis of Perkins Core indicators for which the program did not meet the performance level. Include Significant Program Actions (new certificates, stop outs, gain/loss of positions, results of prior year's action plan).

Include the Annual Review of Program Data (ARPD; all [Instructional programs](#) and [Academic Support](#) programs - Library, Technology Resources, Testing Center, Tutoring, and Financial Aid), program-developed metrics (Institutional Effectiveness programs, Office of Continuing Education and Training, campus committees), or metrics required by [UHCCP 5.202](#) that are not

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provided as ARPD ([Administrative Service](#) programs and some Student Support [programs](#)) under review in table format below (EP 5.202 and UHCCP 5.202).

The Overall Program Health is Healthy

Describe and discuss demand, efficiency, effectiveness, and overall health categories. What has been the trend over the past three years in each of these categories? What factors (internal or external) may have contributed to the program or unit health categories? For Career and Technical Education (CTE) programs, provide a discussion on any unmet Perkins Core Indicator that includes contributing factors (UHCCP 5.202).

Based on this analysis, what are the program's strengths and areas to improve regarding demand, efficiency, and effectiveness?

Describe any significant program actions that occurred in the prior year (e.g., new certificate(s), stop outs, gain/loss of position(s), reduction in funding, new or completed grant(s), etc.).

Career and Technical (CTE) programs should provide an analysis for any unmet Perkins Core Indicators.

Demand Indicators		2016 - 17	2017 - 18	2018 - 19	Demand Health
1.	New & Replacement Positions (State)	802	880	910	Healthy
*2.	New & Replacement Positions (County Prorated)	56	54	47	
3.	Number of Majors	43	43	48	
3a.	Number of Majors Native Hawaiian	8	8	9	
3b.	Fall Full-Time	41%	2%	0%	
3c.	Fall Part-Time	59%	98%	100%	
3d.	Fall Part-Time who are Full-Time in System	2%	5%	0%	
3e.	Spring Full-Time	31%	50%	64%	
3f.	Spring Part-Time	69%	50%	36%	
3g.	Spring Part-Time who are Full-Time in System	2%	14%	0%	
4.	SSH Program Majors in Program Classes	870	893	1,032	
5.	SSH Non-Majors in Program Classes	492	441	316	
6.	SSH in All Program Classes	1,362	1,334	1,348	
7.	FTE Enrollment in Program Classes	45	44	45	
8.	Total Number of Classes Taught	19	16	13	

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Efficiency Indicators		2016 - 17	2017 - 18	2018 - 19	Efficiency Health
9.	Average Class Size	16	18	21	Healthy
*10.	Fill Rate	74.6%	80.5%	88.2%	
11.	FTE BOR Appointed Faculty	8	8	7	
*12.	Majors to FTE BOR Appointed Faculty	5	5	7	
13.	Majors to Analytic FTE Faculty	5	5	7	
13a.	Analytic FTE Faculty	3	2	2	
14.	Overall Program Budget Allocation	\$0	\$0	\$0	
14a.	General Funded Budget Allocation	\$0	\$0	\$0	
14b.	Special/Federal Budget Allocation	\$0	\$0	\$0	
14c.	Tuition and Fees	\$0	\$0	\$0	
15.	Cost per SSH	\$0	\$0	\$0	
16.	Number of Low-Enrolled (<10) Classes	5	1	3	

Effectiveness Indicators		2016 - 17	2017 - 18	2018 - 19	Effectiveness Health
17.	Successful Completion (Equivalent C or Higher)	89%	90%	90%	Healthy
18.	Withdrawals (Grade = W)	10	10	13	
*19.	Persistence Fall to Spring	89%	89%	94%	
19a.	Persistence Fall to Fall	54%	68%	64%	
*20.	Unduplicated Degrees/Certificates Awarded	25	23	26	
20a.	Degrees Awarded	17	14	21	
20b.	Certificates of Achievement Awarded	20	22	24	
20c.	Advanced Professional Certificates Awarded	0	0	0	
20d.	Other Certificates Awarded	0	0	0	
21.	External Licensing Exams Passed	0	0	0	
22.	Transfers to UH 4-yr	3	2	5	
22a.	Transfers with credential from program	3	2	5	
22b.	Transfers without credential from program	0	0	0	

Distance Indicators		2016 - 17	2017 - 18	2018 - 19
23.	Number of Distance Education Classes Taught	0	0	0
24.	Enrollments Distance Education Classes	0	0	0
25.	Fill Rate	0%	0%	0%
26.	Successful Completion (Equivalent C or Higher)	0%	0%	0%
27.	Withdrawals (Grade = W)	0	0	0
28.	Persistence (Fall to Spring Not	0%	0%	0%

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Limited to Distance Education)

Perkins Indicators	Goal	Actual	Met
29. 1P1 Technical Skills Attainment	93	100	Met
30. 2P1 Completion	55	60	Met
31. 3P1 Student Retention or Transfer	81.9	84.85	Met
32. 4P1 Student Placement	66.25	75	Met
33. 5P1 Nontraditional Participation	23.5	18.75	Not Met
34. 5P2 Nontraditional Completion	23	10.53	Not Met

Performance Indicators

Demand for this program is Healthy! The number of replacement positions was 47 and we graduated 21, therefore we are only filling the workforce needs by 50%.

Efficiency was Healthy. Our class average size and fill rate has increased to 88%, demonstrating continued improvement with retention. Changes in our admission criteria have supported admitting students can handle the rigors of the program. The three classes that were under-enrolled were electives that are not required for the nursing degree; one lecturer and the program coordinator taught those classes.

Effectiveness is Healthy. Completion rates continue at 90%, graduated 21 students with a degree and 24 Certificates of Achievement, both increases from the prior year. Fall to Spring persistence improved to 94% although the Fall to Fall persistence dipped slightly from last year (68 % -> 64%). This decrease results from students not demonstrating readiness for the second year of the program.

Strengths include our eight year ACEN accreditation thru 2025, completion rate of 90%, and course fill rates at 88%.

Areas to improve are fall to fall persistence to increase graduation rates.

Perkins Indicators not met were 5P1 (Nontraditional Participation) and 5P2 (Nontraditional Completion). We had a smaller cohort of males to start and lost half of them for a variety of

reasons; recruitment of nontraditional students continues.

Impacts on our program were the unfilled two faculty positions (resignation and retirement) and unfilled Office Assistant position for the entire academic year. It is very challenging to find qualified applicants to meet our clinical needs and HSBON requirements to teach in those clinical areas; additionally, the high cost of living on Kauai does not entice applicants to move here.

3. Program Student Learning Outcomes

- a) List of the Program Student Learning Outcomes
- b) Program Student Learning Outcomes that have been assessed in the year of the Annual Review of Program Data.
- c) Assessment Results
- d) Changes that have been made as a result of the assessments.

Report on PSLO assessment for the prior year.

1. List of the PSLOs.
2. Indicate PLSOs that were assessed in the year of this APRU.
3. Assessment findings.
4. Changes that have been made as a result of the assessment findings.
5. Next planned assessment date.

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PSLO	Assessed During this APRU Cycle (Y or N)	Findings	Improvements Implemented	Next Assessment Date
A competent nurse's professional actions are based on core nursing values, professional standards of practice, and the law.	No	N/A	N/A	N/A
A competent nurse develops insight through reflective practice, self-analysis, and self-care.	No	N/A	N/A	N/A
A competent nurse engages in ongoing self-directed learning and provides care based on evidence supported by research.	Yes	94.3% cumulative assessment from all nursing courses	Every semester, every course, the results are reviewed, and assessment methods are revised or changed as needed to reach our benchmarks	2022-23
A competent nurse demonstrates leadership in nursing and health care.	Yes	95.6% cumulative assessment from all nursing courses.	Every semester, every course, the results are reviewed, and assessment methods are revised or changed as needed to reach our benchmarks	2022-23
A competent nurse collaborates as part of a healthcare team.	No	N/A	N/A	N/A
A competent	No	N/A	N/A	N/A

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nurse practices within, utilizes, and contributes to the broader health care system (including the Global Community).				
A competent nurse practices client-centered care.	No	N/A	N/A	N/A
A competent nurse communicates and uses communication technology effectively.	No	N/A	N/A	N/A
A competent nurse demonstrates clinical judgment / critical thinking in the delivery of care of clients while maintaining safety.	No	N/A	N/A	N/A

4. Action Plan

Include how the actions within the plan support the college's mission. In addition to the overall action plan for the program, include specific action plans for any Perkins Core Indicator for which the program did not meet the performance level.

Action Plan	Anticipated Outcome	Actual Outcome
Increase NCLEX- RN pass rate	85% or above the national average	89%
Increase NCLEX-PN pass rate	85% or above the national average	60%
Increase fall to fall persistence	75%	64%

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Increase on time graduation rates	100% time is 80% and 150% time is 60%	82%
Increase transfer to BSN	25% or more enrolled within one year of graduation	41.7%
Increase Job placement	50% will be employed as RN within one year	91.7%

List any additional significant actions that impacted your program (e.g., new certificate, loss or gain of faculty or staff, stop outs, etc.).

Faculty overloaded because understaffed.

Analysis of Alignment with CPR

List the goals that were identified to be initiated, continued, or completed during this APRU cycle, in your last CPR, and if they were achieved. Be sure to include the benchmark, desired outcome, actual outcome, and unit of measure. If you completed your last CPR prior to 2018, please refer to * in this section.

Goal/Strategic Goal or Priority**	Achieved (Y or N)?	Benchmark	Desired Outcome	Actual Outcome	Unit of Measure
Click or tap here to enter text.	Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

**All Strategic Goals and Priorities are Aligned to the College Mission.

Describe any impacts these goals had on your health indicator(s).

Click or tap here to enter text.

*Based on findings in Parts I – IV, develop an action plan for your program or unit from now until your next CPR date. This should include goals that align with the College Mission, measurable outcomes, benchmarks, and alignment to the College's Strategic Priorities, and/or Strategic Goals. Be sure to focus on weaknesses identified in ARPD data, PSLO outcomes, results of survey data, and other data used to assess your unit or program. This plan should guide your program and subsequent APRUs, but may be amended based on new initiatives, updated data, or unforeseen external factors.

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	Goal/Priority (List number)		Outcome	Measure	Implemented
Increase NCLEX- RN pass rate	8	89%	85% or above the national average	NCLEX_RN pass rates	Annually
Increase fall to fall persistence	1	64%	75%	Graduation rates	Annually
Increase NCLEX-PN pass rate	8	60%	85% or above the national average	NCLEX_PN pass rates	Annually
Increase on time graduation rates	6,7	ACTUAL	100% time is 80% and 150% time is 60%	Graduation rates	Annually
Increase transfer to BSN	4	41.7%	25% or more enrolled within one year of graduation	Graduate Survey	Annually
Increase Job placement	8	91.7%	50% will be employed as RN within one year	Graduate Survey	Annually.
5P1 Nontraditional participation	Perkins	18.75	23.5	Perkins Indicator	2019-2020
5P2 Nontraditional completion	Perkins	10.53	23	Perkins Indicator	2019-2020

5. Resource Implications

Resource Request(s) for next year (from CPR Plan for your program or unit, or one(s) developed in Part V above if CPR was completed prior to 2018).

I am NOT requiring resources for my program/unit.

5. Resource Implications

Resource Request(s) for next year (from CPR Plan for your program or unit, or one(s) developed in Part V above if CPR was completed prior to 2018).

List in the table below resource request greater than or equal to \$3,000.

Program Goal	Respond to accreditation recommendations
Resource Requested*	9 month Nursing Instructor
Cost and Vendor	\$71,160
Annual Recurring Cost	\$71,160
Useful Life of Resource	10-20 years
Person(s) Responsible and Collaborators	VCAA Harris, T Napoleon DC, M Tabura Program Coordinator
Timeline	Fall 2020

***An approved ITAC Request Form must be attached for all technology requests**