

Applied Baccalaureate Degree Program

Program Proposal

Forms C and D



Seattle Central Community College Bachelor of Science in Nursing

RN-BSN Program

March 7, 2014

Form C

**COVER SHEET
NEW DEGREE PROGRAM PROPOSAL**

Program Information

Program Name: Bachelor of Science in Nursing (RN- B)

Institution Name: Seattle Central Community College

Degree: B.S. Nursing Level: Bachelor Type: Nursing CIP Code: 51.3801
(*e.g. B.S. Chemistry*) (*e.g. Bachelor*) (*e.g. Science*)

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Chief Academic Officer

March 7, 2014

Date

Proposal criteria

Please respond to all 10 areas listed in proposal criteria Form D

Form D

NEW DEGREE PROGRAM PROPOSAL

Introduction

Seattle Central Community College (SCCC) is submitting this RN-BSN (RNB) program proposal to meet the expanding demand for BSN nurses that will give registered nurses credit for the significant work they have completed in getting their Associate Degrees in Nursing, passing the NCLEX national exam and becoming RNs. It will allow them to complete the RNB degree within four quarters for full-time students as well as allowing those RNs employed fulltime to finish their RNB as part-time students.

Seattle Central Community College is indebted to Bellevue College for allowing the SCCC to model its RNB after Bellevue College's own RNB program. We believe that the students will benefit from this collaboration in several ways. Similar RNB programs help students understand both the similarities and the differences allowing them to make choices that best fit their needs and desires. Similar RNB programs having many of the same course requirements allow students to take courses at different colleges as meets their needs and schedules and then transfer those courses after articulation agreements are developed. We may even be able to develop common courses that will fully transfer throughout the Washington State Community Colleges' RNB programs. We therefore gratefully acknowledge Bellevue College's generosity in sharing the work, ideas and curriculum for the RNB.

Criteria 1: Curriculum Demonstrates Baccalaureate Level Rigor

Program Learning Outcomes

The Seattle Central Community College RN-BSN (RNB) program has been developed based on the American Association of Colleges of Nursing's The Essentials of Baccalaureate Education for Professional Nursing Practice (<http://www.aacn.nche.edu/education-resources/BaccEssentials08.pdf>) and the associated Faculty Tool Kit (<http://www.aacn.nche.edu/education-resources/BacEssToolkit.pdf>). Students graduating from the program will meet all course and program learning outcomes. Graduates will be competent in Research and Scholarly Inquiry, Health Information Technology, Professional Values and Role Development, Leadership, Communications, and Community and Public Health. In addition, the Seattle Central RNB program, located in an urban setting with a diverse population, will focus on how nursing impacts social justice and how nursing can help to identify and overcome healthcare disparities.

Competencies in each outcome area will be based on measurable evidence. For example, successful graduates will:

1. Evaluate and apply evidence---based research to clinical practice (Research and Scholarly Inquiry outcome)
2. Appraise protective and predictive factors, including disparities, which influence the health of diverse individuals, families, groups, communities and populations (Community and Public Health outcome)
3. Develop and implement creative strategies to enable systems to change (Leadership outcome)
4. Support professional, positive working relationships through negotiation and conflict resolution (Communications outcome)
5. Use intra- and inter-professional resources to resolve ethical and other practice dilemmas within the immediate and larger environment of care (Professional Values and Role Development outcome)
6. Assess and fully use emerging technologies and healthcare information management systems within the immediate and larger environment of care to maximize patient outcomes (Health Information Technology outcome)
7. Advocate for social justice including a commitment to the health of vulnerable populations and the elimination of health disparities. (Clinical Prevention and Population Health Outcome)

Program Evaluation Criteria and Process

Internal and external forms of assessment will be used in evaluating the effectiveness of the program. These assessments are specified in Table I. Multiple systems are in place at Seattle Central Community College to assess program effectiveness and ensure academic rigor for all programs. Although all programs must get SBCTC approval, all courses get initial approval through the college's Course Approval Committee (CAC) who ensure that learning outcomes are in compliance with the college accreditation standards and in alignment with the college mission, values, and learning outcomes. A program review is conducted every four years by the program review committee to assess that the program objectives are being met and that they are meeting the missions and values of the college. Student evaluations are collected quarterly. The program director/associate dean is responsible to make sure all data is collected and assessments done. Surveys given, as described in Table I, are also the responsibility of the program director/associate dean. Faculty evaluations by the program director/associate dean are done on a schedule based on the faculty category (tenured, part-time, priority hire) of the collective bargaining agreement. Enrollment and completion data are obtained and analyzed by the program director/associate dean.

In addition to the college processes, the program will be evaluated based on the Standards for Accreditation of Baccalaureate and Graduate Nursing Programs published by the Commission on Collegiate Nursing Education (CCNE) (<http://www.aacn.nche.edu/ccne-accreditation/Standards-Amended-2013.pdf>). This organization has become the American Association of Colleges of Nursing (AACN) but it still uses the previous name on the Standards.

The program director is responsible for collecting data and working with faculty to submit reports, analyze the program based on the data, and to implement change to improve the program. Our Technical Advisory Committee reviews all reports, evaluates changes to the curriculum, evaluates the rigor of the program, and provides feedback and advice for improvement of the program.

TABLE I: PROGRAM EVALUATION CRITERIA AND PROCESS—PROGRAM EFFECTIVENESS: ASSESSMENT AND ACHIEVEMENT OF PROGRAM OUTCOMES	
Standards of Accreditation--CCNE/AACN	
Standard IV-A: A systematic process is used to determine program effectiveness.	
achievement of program outcomes	Faculty assessment of student learning (student test results and written evaluation collected quarterly); student assessment of student learning (student course evaluations collected quarterly); employer assessment of student learning (employer surveys collected yearly)
completion and employment rates	program statistics collected quarterly
Standard IV-B: Program completion rates demonstrate program effectiveness.	
Program completion greater than or equal to 70% within 3 years of starting the program	program statistics collected quarterly
Standard IV-D: Employment rates demonstrate program effectiveness.	
Employment within 12 months of program completion excluding graduates who have elected not to be employed.	graduate survey collected yearly; employer survey collected yearly
Standard IV-E: Program outcomes demonstrate program effectiveness.	
Student satisfaction with student learning outcomes	student course evaluations collected quarterly
Student satisfaction with program outcomes	student survey taken midway through program and at program end
Graduate satisfaction with program outcomes	graduate survey collected within one year of graduation
Employer satisfaction with student learning/program effectiveness	employer survey collected within one year of hire/promotion
Standard IV-F: Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness.	

Faculty performance meets expected levels of achievement. Expected faculty outcomes are identified, incorporate expected levels of achievement, and contribute to the program’s mission and goals.	Student quarterly evaluations of a variety of faculty outcomes using a Likert scale will be used individually and in aggregate to assess program effectiveness. Faculty classroom observation of a variety of faculty outcomes will also be conducted based on the collective bargaining agreement. Most faculty will be observed at least once per year. Actual faculty outcomes will be presented, analyzed and compared to expected outcomes yearly.
Standard IV-G: The program defines and reviews formal complaints according to established policies.	
Formal complaints are defined by the program. Complaints policy is published. Formal complaints records are maintained for the program.	Formal complaints follow college policy for “student complaint process.” The Dean of Student Development assists the student in seeking resolution of a complaint based on the Washington Administrative Code (WAC). Chapter WAC 132F 122 (377.10.70). The program faculty will analyze the complaints to improve program effectiveness yearly.
Standard IV-H: Data analysis is used to foster ongoing program improvement.	
Program uses data analysis for ongoing program improvement	completion data, employment rates, formal complaints, other program outcomes process: 1. actual outcomes compared to expected outcomes. 2. discrepancies inform areas for improvement 3. intervention identified and implemented 4. data gathered on intervention and analyzed 5. repeat cycle

Course Preparation Needed by Students Transferring with a Technical Associate Degree

All students entering the Seattle Central Community College RN-BSN program will be registered nurses in Washington State and will have completed all course requirements for the Associate Degree in Nursing (ADN). Once the new recommendations of the Statewide RN BSN DTA/MRP Work Group are fully implemented, our program will provide a path for those students, as well. The following table identifies the prerequisites all students entering the RNB program must meet.

TABLE II: ENTRY REQUIREMENTS FOR SEATTLE CENTRAL COMMUNITY COLLEGE RNB PROGRAM	
Prerequisites	Notes

Current Unrestricted Licensure as a Registered Nurse in WA State	Students in final year of an associate degree nursing (ADN) program may be admitted, but must take and pass the NCLEX prior to program start.
Associate Degree in Nursing	Students must have ADN from regionally accredited institution including 60 academic core credits and 75 nursing core credits. 90 of these credits will transfer into RNB.
NCLEX National Exam	Students must pass NCLEX prior to program start. 45 credits will be granted for passing this national exam.
Cumulative GPA of 2.5	Students must have a cumulative GPA of 2.5 or higher.
Minimum grade of 2.3 in all ADN required courses	Students will have a minimum grade of 2.3 in all courses required for the ADN.
Statistics Course-- MATH 146--	In order for students to be successful in the RNB program, a statistics course must have been passed. This requirement is
Elementary Statistics or higher	currently met in ADN programs. A higher-level statistics course is recommended.

General Education Components

The Seattle Central Community College RN-BSN program has been developed based on the American Association of Colleges of Nursing's The Essentials of Baccalaureate Education for Professional Nursing Practice and the associated Faculty Tool Kit. In addition, the program includes requirements of the proposed Direct Transfer Agreement/Major Related Program (DTA/MRP) pathway model for the RN to BSN. Finally, six QSEN (Quality and Safety Education for Nurses) competencies are embedded in our program outcomes. These include patient-centered care, teamwork and collaboration, evidence-based practice, quality improvement, safety, and informatics. For each of these competencies, there are expectations relating to the knowledge, skills, and attitudes to be achieved. Students graduating from the program will have achieved these competencies and will continue to address and utilize them in their professional practice role. Two tenured district nursing faculty who will be teaching in the RNB are QSEN trained and have attended the national QSEN conference.

A BSN nurse is a generalist who has a thorough knowledge of nursing theory and practice and both a deep foundation in science and a strong liberal education (Essential I of The Essentials

of Baccalaureate Education for Professional Nursing Practice). Seattle Central Community College’s RNB program has been designed so that the general education and the nursing requirements are met for BSN Nurses. The BSN program at Seattle Central expects nurses to engage in ethical reasoning and actions to reduce disparities, and promote advocacy, collaboration, social justice, and leadership as healthcare professionals. Therefore in all nursing courses embed these values and learning outcomes.

TABLE III: GENERAL EDUCATION REQUIREMENTS IN RNB PROGRAM		
DTA Area/Subject	SCCC Course or equivalent Requirement met in ADN	Credits
Communication	ENGL&101--English Composition	5
	Communication Elective from DTA list	5
	* Cultural communication in Nursing--Integrated	3
Social Sciences	PSYC&100--General Psychology	5
	PSYC&200--Lifespan Psychology	5
	* Mental Health Issues in Nursing--Integrated	5
Quantitative Skills	MATH 146--Elementary Statistics (or Statway—Math 136)	5
Natural Sciences	BIOL&160--General Biology with Lab	5
	BIOL&260--Microbiology	5
	CHEM&121--Introduction to Chemistry	5
	BIOL&241--Human Anatomy and Physiology I	5
	BIOL&242--Human Anatomy and Physiology II	5
Humanities	Humanities Elective from DTA list	5
	Humanities Elective from DTA list	5
	* Ethics in Nursing--Integrated	2
	* History/Trends and Legal Issues in Nursing--Integrated	5
Elective-restrictive area	From ADN Nursing Core	15
Total General Education Requirements		90

Coursework Needed at Junior and Senior Levels in BAS

Seattle Central’s RNB program is designed to allow students to complete as full-time or part-time students taking courses in a hybrid format requiring less time at the college. The RNB intends to have online components to all courses. Most will be approximately 50% online and 50% face to face. Hybrid courses go through additional requirements at Seattle Central to ensure content online meets the same rigor as face to face content. All hybrid courses

must not only be approved by the faculty run Course Approval Committee (CAC) but also by the dean for e-learning. Seattle Central has an e-learning curriculum designer to assist all faculty in developing hybrid and online courses. Studying full-time (twelve or more credits per quarter) a student could complete the program in four quarters. A part-time student would choose how quickly to complete the program but would likely complete in six to ten quarters. The following table shows the upper division coursework required of an RNB student. Students are required to take 180 credits in the program, including 90 transfer credits from the ADN, 45 NCLEX exam credits, 35 credits in upper---division nursing courses, and 10 elective credits, taken during the RNB program.

TABLE IV: SEATTLE CENTRAL COMMUNITY COLLEGE RNB JUNIOR/SENIOR	
Core Upper Division Nursing Courses	Credits
Note: Ethics learning outcomes are embedded in all nursing courses.	
NURS 301: Transition to Baccalaureate Nursing Practice	3
NURS 310: Diversity and Healthcare Disparities	4
NURS 350: Professional Communication	3
NURS 390: Nursing Management	3
NURS 400: Scholarship Inquiry: Connecting Research to Practice	5
NURS 401: Nursing Leadership	3
NURS 410: Family, Community and Public Health Nursing	4
NURS 411: Family, Community and Public Health Clinical	3
NURS 450: Health Information Technology	3
NURS 490: Senior Portfolio	1
NURS 497: Advanced Practicum in Nursing	3
Total Nursing	35
Upper Division Electives (two of the following)	
PHIL 365: Biomedical Ethics	5
ECON 315: Economics of Healthcare	5
ANTH& 235: Cross-Cultural Medicine	5
Other Approved Elective	5
Total General Education	10
Total RNB Upper Division Coursework	45

Table V, below, shows a typical schedule for a student taking a full load each quarter.

TABLE V: TYPICAL FULL-TIME RNB STUDENT SCHEDULE			
Fall (Quarter 1)	Winter (Quarter 2)	Spring (Quarter 3)	Summer (Quarter 4)
Transition to Baccalaureate Nursing Practice	Diversity and Healthcare Disparities	Nursing Management	Health Information Technology

Professional Communication	Family, Community and Public Health Nursing	Family, Community and Public Health Practicum	Advanced Practicum In Nursing
Biomedical Ethics	Cross-Cultural Medicine	Scholarship Inquiry: Connecting Research to Practice	Nursing Leadership
			Senior Portfolio

Table VI, below, shows a typical schedule for a student taking a part-time load each quarter.

TABLE VI: TYPICAL PART-TIME RNB STUDENT SCHEDULE			
Fall Y1	Winter Y1	Spring Y1	Summer Y1
Transition to baccalaureate nursing practice	Diversity and Healthcare Disparities	Nursing Management	Scholarship Inquiry: Connecting Research to Practice
Biomedical Ethics	Family, Community and Public Health Nursing	Family, Community and Public Health Practicum	Health Information Technology
Fall Y2	Winter Y2		
Professional Communication	Advanced Practicum In Nursing		
Cross-Cultural Medicine	Nursing Leadership		
	Senior Portfolio		

Students would also be encouraged to take electives that would give them additional skills for their profession and to transition to graduate school. One such elective would be a professional writing course which we will develop.

Criteria 2: Qualified Faculty

The Seattle Central Bachelor of Science in Nursing program will be led by a nursing administrator/educator with a PhD in nursing. This director of nursing programs will be an associate dean and will be responsible for complying with all applicable laws, meeting all NCQAC requirements, and fulfilling accreditation requirements for the CCNE. Responsibilities also include leading program improvement with faculty, budgeting for the program, supervising faculty and staff, scheduling classes, leading the tenure process, advocating for resources for the program, working collaboratively with faculty, staff and other administrators at the college and throughout the State, hiring faculty and staff as needed, and working to resolve any and all issues that arise including those between students, faculty and staff.

The current faculty in the ADN programs, both full and part-time, are generally teaching at their maximum loads so we will need to hire additional faculty. Seattle Central plans to hire an additional PhD trained full-time faculty for the RNB program. A total of 1.5 faculty FTE will be initially

required for the RNB. We will increase the number of faculty as needed depending on student demand and available faculty. The full-time faculty member will teach many of the courses in the RNB program. In addition, the full-time faculty member will hold office hours and offer consultation to students; participate in district, college, division and program committees; stay current in areas of assignment and teaching techniques; revise and update course content, assessments, and student assignments and activities when necessary; and work with the director of nursing programs on continual program improvement. Qualified current faculty in our ADN programs can apply for the full-time position or may teach specific courses in the RNB. Faculty and administrators responsible for technical courses must meet certification requirements for professional and technical administrators and instructors in the Washington State Administrative Code.

TABLE VII: QUALIFIED FACULTY			
Faculty Name/Credentials	Clinical Expertise	Status	Courses
Joyce Campbell MN, RN, CCRN, FNP	Critical care, ER, acute care & community pediatrics	FT	Family, Community and Public Health Nursing Transition to Baccalaureate Nursing Practice
Lana Marie Conrad PhD, MHSc (HCP), RN, CNS/NNP	Pediatrics, High Risk Maternity, Neonatology, Research, Leadership, Administration, Family Child Nursing, Health Disparities	FT	Diversity and Healthcare Disparities Nursing Leadership Family, Community and Public Health Nursing Advanced Practicum in Nursing Economics of Healthcare
Anthony Delos Reyes DNP, RN-BC (DNP = Doctor of Nursing Practice)	Med Surg, Mental Health, High Risk Maternity/Drug Addiction	FT	Transition to Baccalaureate Nursing Practice Diversity and Healthcare Disparities Professional Communication Nursing Management Scholarship Inquiry: Connecting Research to Practice Senior Portfolio Advanced Practicum in Nursing
Lena Hristova DNP, RN, CNE, OCN, MSRN	Oncology, Med Surg, Diversity and Health Disparities, Leadership	FT	Transition to Baccalaureate Nursing Practice Diversity and Healthcare Disparities
Linda Kelley MSN, BSN, RN	Leadership, Quality Improvement, Infection Control	FT	Diversity and Healthcare Disparities Nursing Management Nursing Leadership Cross-Cultural Medicine
Stephanie L. Nagai MSN, RN, CRRN, DNP	Long term care, Adult Medical surgical nursing, Spinal cord injury, Rehabilitation, Leadership	FT	Nursing Leadership Scholarship Inquiry: Connecting Research to Practice Senior Portfolio Advanced Practicum in Nursing
Denise Parker MN, BSN, RN	Oncology	FT	Diversity and Healthcare Disparities Scholarship Inquiry: Connecting Research to

			Practice
Martha Ryland MN, BSN, RN	Leadership, Med Surg, Mental Health, Obstetrics/Newborn	FT	Diversity and Healthcare Disparities Professional Communication Family, Community and Public Health Nursing Biomedical Ethics Cross-Cultural Medicine
Linda Baughman MN, BSN, RN	Critical Care, Cath Lab, Clinical Research, Neurology, Cardiac Management	PT	Scholarship Inquiry: Connecting Research to Practice Advanced Practicum in Nursing
Ann Chryst MSN, RN	Community/Public Health	PT	Family, Community and Public Health Nursing
Habi Diallo MN, BSN, RN	Obstetrics/Newborn	PT	Biomedical Ethics
Elvira Mendoza-David MSN, BSN, RN	Critical Care	PT	Transition to Baccalaureate Nursing Practice
Denise Filiatrault MN, RN	Intensive Care, Health Informatics	PT	Health Information Technology
Lisa Leurquin-Hallett MSN, BSN, RN	Renal, Dialysis, Med Surg, Industrial Nursing	PT	Advanced Practicum in Nursing Nursing Leadership Senior Portfolio
Marti Rickel MSN, RN, PMHCNS- BC	Mental Health, Management, Leadership, Health Promotion	PT	Professional Communication Nursing Management Nursing Leadership
Christopher Salatka MSN, RN	Critical Care, Med Surg	PT	Scholarship Inquiry: Connecting Research to Practice Nursing Management Nursing Leadership
Nancy Whittier MN, RN	Cardiothoracic , Critical Thinking	PT	Scholarship Inquiry: Connecting Research to Practice

Criteria 3: Selective Admissions Process

The new RNB degree will employ a selective admissions process. This process will reflect the Seattle Central's commitment to having a diverse student body. Applicants who meet the application deadline with complete applications, meet the entrance prerequisites (see Table I) and can demonstrate a minimum overall grade point average of 2.0 will be admitted to the degree program per the process below. If there are still cohort slots available after this process, additional applications will be accepted. Admission for these cohort slots then available will be on a first-come, first-served basis for those applicants that meet the criteria. Seattle Central has defined itself in providing for a diverse pool of students through the use of this first-come, first-served philosophy. A wait list will be maintained for possible openings.

Should there be more qualified applicants than there are openings in the program, the college will first consider offering additional course sections, if feasible. For example, if there were 50 qualified applicants and 25 openings, the college would consider adding an additional course(s) to accommodate all applicants, if appropriate faculty are available, so that all qualified students would be admitted.

If there are more qualified applicants than there are openings, but not enough applicants to add an additional section, or another section is not feasible, the college will admit some applicants and place the remainder on a wait list, based on the following criteria:

1. Fifty percent of the cohort slots will be awarded based on having graduated from one of the Seattle Community College District Associate Degree Nursing programs. These programs already serve a diverse population. If there are more of these applicants than 50% of the cohort slots, a lottery will be used to determine who is awarded the slots.
2. Twenty-five percent of the cohort slots will be awarded based on years of nursing experience, ranked from most to least, i.e., 10 years, 8 years, 7 years, etc. If there are more of these applicants than 25% of the cohort slots, a lottery will be used to determine who is awarded the slots.
3. The remaining twenty-five percent of cohort slots will be awarded by lottery, from the remainder of qualified applicants.
4. The remaining qualified applicants will be placed on a wait list. If additional program slots become available, admission will be determined by lottery from the wait list. The program will assess this process each year and determine if changes need to be made, based on student progress and retention, diversity of student group, and other factors as they emerge.

The bachelor's program will employ practices implemented by the college to attract a diverse student population to the college. These include:

- Recruit people of color who are program graduates and professionals to serve as role models, serve on the advisory committee and make presentations to currently enrolled associate degree students to encourage them to pursue the bachelor's degree;

- Coordinate program diversity efforts with the college's Office of Multicultural Services;
- Apply best practices for identifying potential hires from underrepresented groups;
- Work with hospitals and professional organizations to develop additional strategies to attract a diverse student body from workers in their employment ranks who do not have a bachelor's degree;
- Regularly assess recruitment/retention efforts with regard to underrepresented populations, and continually monitor and strive to improve the program's culture of appreciation and respect towards diversity; and

Assess, plan, and incorporate recruitment strategies via outreach events and activities to expand diversity in allied health programs.

The Seattle Central Community College Foundation will work to create RNB program scholarships to assist those that could otherwise not attend. Students will also be able to apply for existing scholarships that serve financially disadvantaged students and **underrepresented populations.**

Criteria 4: Appropriate Student Services Plan

Seattle Central Community College has a wide variety of student-focused support services that help students achieve success in accomplishing their educational goals. Students in the RNB program will be supported by the same high-quality student services that all students receive. Seattle Central RNB students will benefit from the five years of experience student services has had first with the BAS in Applied Behavioral Sciences and more recently with the BAS in Allied Health. Also, additional support staff have been added to provide transcript evaluation, advising, and registration for incoming applied-baccalaureate students.

The State has recently entered into a 30 year lease for the Pacific Tower with Seattle Central as the anchor tenant. Seattle Central will move our existing allied health programs and new BAS degrees to our 85,000 sq. ft. space **in the fall of 2015.** As a result Pacific Tower will become a satellite campus for Seattle Central's allied health programs. Seattle Central is still working with the architects on the remodel of the space. The ADN and RNB programs will be the largest programs, needing the most space, but the exact square footage is to be determined **but will be approximately 25% of the space.** **The RNB will have access to all of the nursing space but will also have access to and primarily use the general classrooms, library and computer labs that are not counted in the 25% building space for nursing.** The other tenants that will occupy Pacific Tower all have missions that are in alignment with our own and are supportive of our educational purpose. They want to partner with us and that is why they are leasing space in the tower. PacMed already is a tenant there and have committed to clinical placements for our ADN program. We intend to pursue agreements for the clinical placements in our ADN and RNB programs with the other tenants. **The RNB students will benefit from the close proximity to community partners as they will work**

with the partners in their Family, Community and Public Health Clinical practicums.

The State has appropriated funds of \$650,000 for unique student services and instructional support needs that are required for the operation of the Pac-Med site. The State appropriation is not included in the RNB budget sheet, which notes only tuition and operational fund sources. Students at the Pac-Med site will be able to use the student services at the site or our main campus. Between the main campus and the Pac-Med campus, all student services will be available from 8am-6:30 pm Monday through Friday. The following list describes the services most used by baccalaureate students on the main Seattle Central campus and expected to be used by baccalaureate students at the Pacific Tower site:

Access to student services

All student services will be available 8 AM – 6:30 PM, Monday through Friday. This includes registration, financial aid, learning support network, tutoring, writing center, science and math learning center, advising, transcript evaluation, degree audit, library services, disability support services, multicultural services, computer labs and help, student support programs and testing. Seattle Central's Veterans Affairs office helps veterans, guardsmen, and reservists take full advantage of all educational benefits available to them. We expect that many students will be working nurses who will be taking hybrid-delivery courses, with on-campus class time often in the evening and can have their student services needs met in the early evening hours. Tutors and advisors will be available and a single point of contact program manager will be available before classes by appointment and by email and phone. In addition to this, many online services are available to allow convenient access to all students. Some of these include online registration, degree audit and transcript requests, extensive research databases suitable for baccalaureate-level research, E-tutoring, grade lookup, CANVAS learning management system, paying for courses with a credit card, and "chatting" with a librarian 24/7 through "ask a librarian". We expect students who have served a significant time in the workforce to be supported by these services in their transition process back into academics. The advisor/program manager will guide these students in the transition.

Student Advising: Seattle Central College will use an imbedded program manager who will work one-on-one with students to facilitate their success in the program. The manager will assist students with their academic advising, educational planning and progress towards degree completion. Each student will have an individualized schedule and advising plan.

Student Success: A variety of support services will be used to assist students in achieving their educational goal of an RNB. Counseling services, the Learning Support Network which includes various types of tutoring/academic assistance, financial aid, disability support services, library services, advising, computer labs and assistance, In addition, program faculty will work with students who need additional assistance to develop personalized student success strategies.

Credentials Evaluation: Full-time credentials evaluators have extensive experience evaluating transcripts from accredited institutions. They will evaluate incoming students for compliance with admission requirements and student records for all degree requirements when students near graduation.

Financial Aid: The financial aid office prepares and disburses federal, state, and institutional aid

for all students. Baccalaureate level students require special processing so resources have been allocated for this purpose. For those students with need, a variety of financial aid is available including grants (Federal Pell and SEOG grants, State Need and Opportunity grants, and Seattle Central Community College grants), loans (Stafford Loan—Federal Direct Loan).

Career Center: Providing help with career advancement and job placement will be priorities for the new BAS. An effective advisory board comprised of regional healthcare employers will help to identify jobs. Through the required practicum courses, students will develop potential job contacts. When the program chair networks with hospitals and clinics to market the new degree program, it will create awareness of the program and opportunities for information on new employment. The Center for Career Connections has been successful in helping students find jobs by providing career planning and job placement assistance and conducting career fairs.

Student Services Positions

The RNB program budget has built in the support for student services with 1FTE advisor/program manager, .5 FTE financial aid staff member, and .5 FTE student services staff member. This level of support for student services was also built into the recently approved BAS in Allied Health degree. These are new positions and combined add two advisors/program managers, one financial aid staff member and 1 student services staff member. In addition, the following list contains other specific student services positions, serving all allied health programs, (that will be phased in) which are linked to costs of operating the Pacific Tower site. As such, these positions are subject to the separate State allocation and/or funded through the “Friends of Pacific Tower Foundation” (i.e., non-operational funds):

1. Director for Pacific Tower Student Services
Responsible for all functions of hiring, training, and supervising the student services staff that will be at the Pac-Med site. Additionally, this person will be the point for all aspects of program registration, academic planning, disability support services, and advising for all allied health programs. This person will also back-up her/his staff when student demand is at its highest levels.
2. Director for Student Financial Services and Student Accommodations
This person would manage, collect, and coordinate all aspects of tuition and financial aid. Additionally given the workforce structure of Allied Health programs, this person would also be responsible for assisting with workforce funding. This person also serves as the disability support and learning support coordinator.
3. Coordinator for Advising and Student Success
This person would handle all aspects of advising for students in all tracks. Furthermore, this person is responsible to coordinate all aspects of registration for the student (i.e., batch enrollment), including but not limited to conducting unofficial evaluations of transcripts, conducting degree audits.
4. Director for Credential Evaluations and placement services
This person would be reviewing needs for incumbent workers, training/partnership opportunities, and conducting credential evaluations for incoming and degree audit students. Identifying partnerships with clinical assignments (both within Pacific

Tower and outside of Pacific Tower). Coordinating Service Learning. Overseeing all processes with credit for prior learning and externships.

5. Welcome Center Reception

This person will work closely with the academic dean's office to make sure that students are sent to the appropriate person. This person could also answer the phone for general calls that go to the Pac-Med building.

6. Counseling

Based on the incremental increase of FTEs at the Pac-Med campus, counseling support will also be incrementally increased.

Criteria 5: Commitment to build and sustain a high quality program.

The Seattle Central RNB program will be sustainable after the second year. Implementation monies needed in the pre-program implementation year and the first year of students in the program will come from the colleges general funds. Funds used to support the program thereafter will come from tuition and fees and the existing FTE state allocation. We include these existing state allocated FTEs because Seattle Central is not currently hitting 100% FTE targets. Therefore the FTEs the program produces will be used to sustain the program until the program produces enough revenue from tuition and fees to sustain the RNB. Table VII below shows the projected revenues and expenses with conservative assumptions on enrollment. We consider enrollment projections conservative based on labor projections, the push to have 80% of all nurses holding baccalaureate degrees by 2020, our survey results and continual student requests for information on the RNB. We expect that place bound incumbent workers, current ADN students, and recent ADN graduates will be vying for the slots we will have in the RNB courses, especially because the hybrid model will work well for most of them. There are other programs, including online programs, but many students do not want fully online programs and there is a lot of demand currently. We do anticipate running full courses even with attrition as students will be able to take most courses without additional prerequisites. We expect that new students entering the program will fill any empty seats in any particular course. We will monitor wait lists and offer more sections as needed and have qualified faculty available. The tuition is based on the current state rates for upper division credits at community colleges.

Projected program expenses:

The financial planning for the program includes consideration of the phase-in of the program over a period of three years or more. The start-up costs for the pre-enrollment and program development period begin in 2014. The program becomes sustainable in the 2016-17 fiscal year and increases net revenue each year after. The budget addresses the primary elements

the college considers critical to developing and maintaining a quality program, excellence in instructional delivery, and effective student support and retention practices. Additional disability support services are included in the "Other Indirect" expenses. Pre-program approval costs for the application process are not included and have been covered by the college. These costs include faculty, staff, and administration effort for parts A and B, and C and D which included program and course development and reviewers stipends among other costs.

A key principle in the effort to develop and sustain a high-quality program is reliance on infrastructure and models that currently exist on the campus for incorporation into the instructional delivery model. The college intends to deliver course content with a combination of seasoned, tenured faculty and adjunct faculty who are proven, experienced content experts. In order to produce a coordinated curriculum that allows students to transition through the course sequence with minimal adjustment, an initial budget for curriculum development, a learning management system adaptation and faculty training cost has been established. Funds have been allocated for professional development and travel. These are in addition to existing district and college funds available to faculty and staff for these purposes. Funding for a program director to begin in advance of the opening of classes has been identified, along with other required program development costs (library, marketing, travel, etc.). A 1.0 FTE advisor is critical to help students negotiate the program requirements and understand how to efficiently move to completion. RNB students will require an additional .5 FTE in support in student services for registration, cashiering, transcript evaluation, and other services. These services are much more labor intensive for BAS students at this point. Financial aid processing is also very labor intensive and will require an additional .5 FTE staff member. The need for library services is significantly increased for BAS students and will require a .5 FTE librarian.

Instructional costs are calculated in the chart as a straight cost per hour of instruction. These could be taught by full-time or adjunct faculty, but Seattle Central plans to hire one PhD trained full-time faculty who will teach many of the courses. Other courses will be taught by part-time faculty or by ADN full-time faculty as part of their load. If the number of students increases to require additional sections greater than projected, we will reevaluate the faculty mix with the intent of hiring one or more additional full-time PhD trained faculty. Tuition and FTE revenue will cover the additional costs for the faculty. Faculty recruitment will take place during the phase-in period.

A program manager and an exempt program director/associate dean will provide the administrative support necessary for students and faculty to be successful in the program. The existing allied health staff and administration will provide additional support as needed.

A number of ongoing costs have been built into the budget including marketing,

library, curriculum development, travel, equipment, as well as general goods and services, which includes program materials and costs for accreditation. All budget numbers have been adjusted for a 2% annual inflation.

Projected program expenses are shown below in Table VIII. Personnel costs, including the program director, faculty, program manager, and support staff salaries and benefits, make the bulk of the costs of the program. Library database subscriptions, indirect costs, ongoing curriculum development, marketing, travel, professional development, and goods and services make up the rest.

Seattle Central is currently in the design phase for the move of all SCCC Allied Health Division programs into the Pacific Tower. The classroom/office/lab needs of both the currently approved Associate Degree Nursing program and the RNB program are going through an intense process involving nursing faculty from SCCC and the other district colleges. When completed, the new facility will have state of the art nursing simulation, nursing skills, and computer labs with the latest equipment.

TABLE VIII: RN TO BSN PROGRAM REVENUE AND EXPENSES

2% inflation assumed						
	FY 15	FY 16	FY 17	FY 18	FY 19	FY 20
	Implementation Year 0 (2014-15)	Implementation Year 1 (2015-16)	Year 2 (2016-17)	Year 3 (2017-18)	Year 4 (2018-19)	Year 5 (2019-20)
Student FTES	0.0	18.1	41.7	56.7	60.0	60.0
Administrative Salaries (+1FTE--Director/Associate Dean)	90,000	91,800	93,636	95,509	97,419	99,367
Faculty Salaries	-	28,875	67,320	77,250	78,795	80,371
Clerical Salaries (+1 FTE--PC--Range 37 step G)	-	34,260	34,945	35,644	36,357	37,084
Other Salaries: Student Services (+.5 FTE)	-	18,000	18,360	18,727	19,102	19,484
Other Salaries: Financial Aid (+.5 FTE)	-	18,000	18,360	18,727	19,102	19,484
Other Salaries: Advisor (+1 FTE)	-	52,000	53,040	54,101	55,183	56,286
Other Salaries: Librarian (+.5 FTE)	-	26,000	26,520	27,050	27,591	28,143
Curriculum Development Stipends	15,000	5,000	5,100	5,202	5,306	5,412
Benefits (33%)	34,650	90,339	104,703	109,629	111,822	114,058
Goods and Services	2,000	6,000	6,120	6,242	6,367	6,495
Travel and Professional Development	1,500	5,000	10,000	10,200	10,404	10,612
Accreditation	3,500	4,317	2,629	2,682	2,735	2,790
Equipment	-	-	5,000	5,100	5,202	5,306
Marketing, Outreach and Recruitment	5,000	5,000	5,000	5,100	5,202	5,306
Library Materials	-	40,000	40,800	41,616	42,448	43,297
Other Indirect	0	11,808	28,104	39,820	43,403	44,271
Total Expenses	151,650	436,459	519,638	552,600	566,438	577,767
RN to BSN Program Revenue						
	FY 15	FY 16	FY 17	FY 18	FY 19	FY 20
	Implementation Year 0 (2014-15)	Implementation Year 1 (2015-16)	Year 2 (2016-17)	Year 3 (2017-18)	Year 4 (2018-19)	Year 5 (2019-20)
SBCTC FTE Revenue (\$3,664 per average FTE--existing allocation)	-	66,441	155,886	216,015	233,296	237,962
Tuition	-	172,961	412,977	577,658	628,282	640,847
Fees	-	3,220	7,695	10,768	11,716	11,950
Total Revenues	0	242,622	576,558	804,441	873,294	890,759
Net	(151,650)	(193,837)	56,921	251,841	306,855	312,993

Criteria 6: Program Specific Accreditation

Seattle Central's associate degree nursing program is nationally accredited, a voluntary process that goes beyond the required state regulation of all clinical nursing programs. Seattle Central plans to seek national accreditation for its RNB program through the Commission on Collegiate Nursing Education—CCNE.

Accreditation Timeline

An RNB in Washington State must first get approved by the State Board for Community and Technical Colleges (SBCTC). It must then get approved by the Washington State Department of Health's Nursing Care Quality Assurance Commission (NCQAC) before offering courses. Seattle Central will file as soon as possible the [Nursing Education Program Approval Application](#) with the NCQAC if approved by the SBCTC. Seattle Central will work with the NCQAC to ensure all requirements will be met, all curriculum completed, and all faculty and staff qualified and hired so that the first RNB students will start in the fall of 2015. Seattle Central will then apply for a request for applicant status from the Commission on Collegiate Nursing Education (CCNE). If granted applicant status, Seattle Central must complete and submit an acceptable self-study document and host an on-site evaluation by CCNE within two years of the date of acceptance as an applicant to move toward accreditation. The program must have students enrolled for at least one year prior to hosting an on-site evaluation. Seattle Central plans on requesting applicant status by the fall of 2015 and plans on submitting the self-study and hosting the on-site visit in the second year of the program in the fall of 2016 or winter or spring of 2017. After this, the program will be continually improved, surveys completed, data analyzed, and reports filed to both the NCQAC and the CCNE to continue program accreditation.

The Northwest Commission on Colleges and Universities (NWCCU) accredits Seattle Central College. This would be the third BAS degree for Seattle Central. The College has already been reviewed by NWCCU as a 4-year institution. NWCCU requires this additional degree to go through the minor change accreditation review from NWCCU.

Criteria 7: Pathway options beyond baccalaureate degree

The RNB opens a pathway into higher education for nurses. The bachelor's degree is a crucial link to higher education. Increasingly graduate degrees in nursing are needed to respond to the changing demographics of the US population, to meet the anticipated increase in demand for health services as a result of the Affordable Care Act, and to transfer the benefits of health related research into change in the health status of our population.

Graduates of the RNB program who are interested in obtaining a graduate degree will be well

prepared for masters in nursing programs. Close sites for place bound students who want to pursue the Master in Nursing (MN) or the Master of Science in Nursing (MSN) include UW-Bothell, UW-Seattle, and Seattle University. In addition, nurses who complete the degree may want to pursue a master's in nursing informatics. The UW-Seattle offers an online program in Clinical Informatics and Patient-Centered Technologies (CIPCT) for which graduates with the BSN would be eligible to apply.

Seattle Central designed the program looking at entry requirements of the master level nursing programs in the area. It is our intent to develop articulation agreements upon approval to offer the RNB degree.

Criteria 8: External expert evaluation of program

RNB Program Evaluation—Gaylene Altman, RN, PhD

Background of the Evaluator

Gaylene Altman, RN, PhD is an Associate Professor in the Department of Biobehavioral and Health Systems, within the University Of Washington School Of Nursing. In addition, Dr. Altman has been a Professor at Seattle Pacific University and has taught at Seattle University School of Nursing. She has over thirty years of experience teaching in both undergraduate and graduate nursing. In the past she was assistant director of Curriculum revision at the University of Washington and has stayed active with undergraduate curricular changes.

Dr. Altman has continued to develop new courses in nursing as well as revising existing courses. She has actively stayed involved in teaching both theory and clinical courses in undergraduate and graduate education and is well versed in the needs of the local community. Dr. Altman has extensive experience in teaching undergraduates and is knowledgeable in local and national curricular models as well as teaching in nursing education graduate level tracks.

General Comments

There is a definite need for more BSN prepared nurses with a growing body of research indicating better educational preparation with lowered mortality rates in patients. In October, 2012 the Institute of Medicine reported that “an increase in the percentage of nurses with BNS is imperative as the scope of what the public needs.” I commend SCCC for taking on this endeavor.

In review, this proposal from Seattle Central Community College (SCCC) has taken into account other schools and has set up collaboration, a definite way to benefit from others experiences in initiating and sustaining such a program with inherent success. This collaboration in sharing some “common courses” can lead to cost containment, as well as strength in quality. SCCC also has the strength of many systems in place for standards of outcomes at a collegiate level. In addition SCCC has developed a clear articulation of the program outcomes in relation to the American Association of Colleges of Nursing (AACN) program evaluation aligned with the standards at a baccalaureate level, critical for national approval.

Appropriateness of Plan for Implementation

As previously stated the need for more baccalaureate prepared nurses is well defined nationally and locally. The proposal laid forward in these documents is clearly articulated using the American Association of Colleges of Nursing's Essentials for Baccalaureate Education for Professional Nursing Practice, a gold standard for collegiate nursing programs. The proposal also indicated the need for an additional public program citing general comments related to numbers of students turned away from other programs, both private and public in the State of Washington. The University of Washington turns away hundreds of qualified students each year. National and State numbers indicate the need for baccalaureate prepared nursing. Since the 1950s many community college developed programs for nurses to function at the bedside; however, the complexity and healthcare needs of patients have changed. Since Medicare was developed in 1965 the number of hospitalized patients has continued to increase. With advancement of medical care and needs of patients, better educated nurses have been directed by AACN as well the Institute of Medicine. Nursing has changed from basic bedside nursing to demands of understanding research and developing leadership skills to help the changing needs of patients and health care organizations. With the Affordable Health Care Act many nurses have advanced to nurse practitioner status increasing the gaps at the baccalaureate prepared level; therefore, timing of this proposal is appropriate.

Strengths and Areas for Improvement

There are many strengths in this proposal. First utilizing an existing successful program as a foundation to develop this program enhances success. In addition this proposal is very clearly aligned with the American Association of Colleges of Nursing's *Essential of Baccalaureate Education for Professional Nursing practice*, the gold standard for baccalaureate education. Each objective is constructed to be measurable with clear outcomes, hence adding internal evaluation criteria and standards. Strength is that SCCC has extensive resources and a plan in place for students, including access to services, advising, support services for student success, credential evaluation, financial needs, counseling, welcome center and a career center for both career advancement and job placement. These are established services in place to support the program and directly, the students. Since SCCC already has an existing nursing program the faculty have experience with success of a nursing program and with working with such students. The strength is also evident in faculty, all prepared at a masters level and one at a doctorate of nursing practice prepared faculty. An additional strength is that a clear plan has been articulated to build and sustain the Seattle Central RNB program. General college funds will be designated to sustain the program in the start up with plans of tuition, fees and existing FTE state allocations to sustain the program. Projected revenues and expensive are presented. Plans have accounted for some attrition. The projected program expenses have been outlined and seem very realistic.

Program specific accreditation has been outlined to meet state regulations as well seek national accreditation. The strength is that Seattle Central's associate-degree nursing program is already national accredited, hence staff and faculty are already on board regarding high quality standards and aware of requirements in meeting such national standards for the baccalaureate program.

Areas for improvement would be to increase the number of doctoral prepared faculty, a common goal and need of baccalaureate programs. Encouragement and plans for existing faculty to obtain doctorates or recruit doctoral prepared faculty would strengthen the proposal.

The courses outlined are in general common course gaps that are needed for RN to BSN. The curriculum appears very sound. Clear strengths are working with an existing program and for cost sharing courses with Bellevue Community College. The course descriptions align with AACNs standards. However, some suggestions regarding the curriculum are to outline how the leadership course could build upon the management course. Scholarship Inquiry is a 300 level course. Consideration could be given to a 300 level course in Scholarship inquiry with the goal of understanding basic research and ability to analyze existing research literature with a follow-up 400 level course. The follow-up course would build on the more general survey/analysis course with actual basic research instituted. Too often research inquiry courses only prepare nursing at a basic level to understand literature and never develop to the level of understanding the standards of developing evidence based research that can be translated into practice. Thus a 300 level course would be appropriate during the first year; however baccalaureate prepared nurses are better served by advancing the ability to actually conduct basic research that will be utilized to improve patient care. A PhD prepared faculty would add strength to this course since many master prepared programs do not require thesis, as they did in the past. Hence most masters prepared faculty have limits in teaching such research courses. Inclusion of Health Information Technology of Nurses is a strength as well as essential in the present time. Other strengths include the professional portfolio and leadership course. This not only helps the student understand the value of individual strengths, but also allows individuals to understand the need for progression and the responsibility for leadership. Many associate degree nurses have not been placed in leadership positions and do not understand all the complexities of different leadership models in running a successful organization. Another asset is the clinical practicum. Many RN to BSN programs do not include practicum which limits the translation of many of the management, leadership and technology courses into practice. Associate degree nurses have mainly functioned as skilled nurse in the clinical setting. Students may come from limited practice background and need strength in enhancing their chances for advancement as well as understanding a new way of evaluating practice. Including a course on economics and health care is essential as the field of nursing has changed regarding health care for all and yet considering health care cost containment. With the Affordable Health Care Act, changes in reimbursement and changes in third party payment, health care delivery has changed immensely over the last decade. Understanding the economic concepts assist the student to be an educated consumer and assist patient in understanding individual funding. The course in Cross-cultural Medicine would better serve the student as a Cross-cultural health care course which encompasses a much broader spectrum of disease vs. health care models of health promotion, prevention models and understanding the complexity between of cultural impacts with the changing US society, both in diversity and social economics.

In addition the proposal includes a pathway option beyond baccalaureate degree program, which

lists the masters programs within the Seattle Metropolitan area; however, no mention of how this will work is stated. This would most likely happen in the career development centers. One gap often seen for RN to BSN programs is a deficiency in writing skills and hence not prepared for the rigorous of graduate level education. Even though the students do have a 3 credit course on professional communication a separate professional writing course as an elective would help bridge this gap and create more success in transitioning into graduate programs. Clearer articulation of how this advancement would occur could be included in the proposal.

Another area for improvement would be the reconsidering the plan to admit on a “first come, first-served” basis. Developing a window of time for application and reviewing for the “best” applicants would most likely strength the peer group as well as leading to enhanced success of the program. The strength is that the plans are in place for variable numbers and anticipatory plans for dealing with the different numbers. Definite criteria are in place for requirements for entry; however, seeking the strongest applicants, especially when launching the program could add predictive success.

Using a lottery from the wait list might be easier tasks than determining the best candidates; however, this might be reconsidered. A plan to follow the cohorts after graduation could help evaluate success of student and the program.

Strength is that SCCC has experience in recruiting students of color and diversity and the proposal clearing outlines plans of working with agencies for recruitment. The proposal takes into account the necessary timing and recruitment, appropriate pre-requisites and quality of students. In addition the proposal considers best practices of potential hires from underserved groups. A plan is in place to regularly assess recruitment and evaluate strategies. This is especially essential to lead to a self sustaining program

In general this proposal is quite sound, well developed and prepared at an opportune time. I commend the team. It is critical that educational programs keep up with societal and professional needs. As health care has become more complex baccalaureate prepared nurses who understand the economics of health care, learn to apply the new technology and develop leadership skills can have greater impact on outcomes of patients and the health care delivery process. Associate degree prepared nurses are mainly skilled nurses and can be better prepared to deliver advanced health care and have an impact on changing the face of health care at many levels. As indicated in the report of Healthy People 2020 the goal is to improve health care for all. Understanding different cultural, socio economic classes and the recognition of vulnerable patients can be developed with appropriate advanced education. In addition a nurse who understands evidence based practice will understand the rationale for practice. An additional benefit of this program will be the ability for personal advancement with a higher level degree.

Seattle Central Community College’s Response

Response to Gaylene Altman, RN, PhD

We very much appreciate the evaluator's comments and are in agreement with the vast majority of her comments and suggestions. We will address each recommendation.

"Areas for improvement would be to increase the number of doctoral prepared faculty, a common goal and need of baccalaureate programs. Encouragement and plans for existing faculty to obtain doctorates or recruit doctoral prepared faculty would strengthen the proposal."

We are in total agreement that we should and will work toward increasing doctoral prepared faculty. We plan to recruit new faculty from recent PhD nursing graduates who have taught in BSN or RNB programs previously. The University of Washington in Seattle is our primary source for these graduates. It is a competitive market for doctoral prepared nursing faculty and we plan to use additional funding to meet the market rate as revenues exceed expenses.

"The course descriptions align with AACNs standards. However, some suggestions regarding the curriculum are to outline how the leadership course could build upon the management course. Scholarship Inquiry is a 300 level course. Consideration could be given to a 300 level course in Scholarship inquiry with the goal of understanding basic research and ability to analyze existing research literature with a follow-up 400 level course. The follow-up course would build on the more general survey/analysis course with actual basic research instituted. Too often research inquiry courses only prepare nursing at a basic level to understand literature and never develop to the level of understanding the standards of developing evidence based research that can be translated into practice. Thus a 300 level course would be appropriate during the first year; however baccalaureate prepared nurses are better served by advancing the ability to actually conduct basic research that will be utilized to improve patient care."

We are in agreement that the Scholarship Inquiry course should be at the 400 level. It was numbered that way in the chart, but in the descriptions in the appendix it was misnumbered. It has been corrected.

"In addition the proposal includes a pathway option beyond baccalaureate degree program, which lists the masters programs within the Seattle Metropolitan area; however, no mention of how this will work is stated."

We designed the program looking at entry requirements of the master level nursing programs in the area. It is our intent to develop articulation agreements upon approval to offer the RNB degree.

"Even though the students do have a 3 credit course on professional communication a separate professional writing course as an elective would help bridge this gap and create more success in transitioning into graduate programs."

We agree with this and will include it in the proposal.

“Another area for improvement would be the reconsidering the plan to admit on a “first come, first-served” basis. Developing a window of time for application and reviewing for the “best” applicants would most likely strength the peer group as well as leading to enhanced success of the program. The strength is that the plans are in place for variable numbers and anticipatory plans for dealing with the different numbers. Definite criteria are in place for requirements for entry; however, seeking the strongest applicants, especially when launching the program could add predictive success.

Using a lottery from the wait list might be easier tasks than determining the best candidates; however, this might be reconsidered.”

We have clarified the language of the admission process. We do not plan on using a “first come, first-served” process unless we don’t have enough applicants and we need to reopen the application period. Nevertheless, we have specifically chosen not to “seek the strongest applicants.” We believe that all nurses who have met our minimum qualifications will be strong RNB nursing students with strengths in different areas that will enrich the experience for all students. The application process we have developed will ensure a wide variety of students have access to getting their BSN, not just those who have the highest test scores or highest GPAs.

RNB Program Evaluation—Steven J. Palazzo, PhD, MN, RN

Background of the Evaluator

Steven J. Palazzo, Ph.D., M.N., R.N., is an Assistant Professor in the College of Nursing at Seattle University. Dr. Palazzo is one of just 12 nursing educators from across the United States to win a highly competitive grant from the Robert Wood Johnson Foundation (RWJF) *Nurse Faculty Scholars* program in 2013. Dr. Palazzo will receive a three-year, \$350,000 award to promote his academic career and support his research. The Nurse Faculty Scholar award is given to junior faculty who show outstanding promise as future leaders in academic nursing.

Dr. Palazzo earned an Associate in Nursing (ADN) from Shoreline Community College, a Bachelor of Science in Nursing (BSN), a Master in Nursing (MN), and a Ph.D. in nursing science from the University of Washington. He has eight years of clinical experience in critical care and has published research on the utility of biomarkers in diagnosing ventilator-associated pneumonia. Dr. Palazzo’s current research and scholarship focuses on developing and implementing a sustainable interdisciplinary program of cardiovascular health promotion and disease prevention aimed at creating a culture of wellness in adolescents from underserved communities.

Dr. Palazzo joined Seattle University College of Nursing in 2011. His other noteworthy achievements include recognition as the Sauvage Fellow with the Hope Heart Institute, Nurse Faculty Leadership Academy Fellow for Sigma Theta Tau International, and the recipient of the Hope Heart Endowed Fellowship. Dr. Palazzo was awarded the Achievement Rewards for College Scientist (ARCS) fellowship in 2007. Dr. Palazzo is keenly interested in establishing multidimensional service-learning opportunities for faculty and students interested in improving adolescent health literacy.

Dr. Palazzo's Teen Take Heart program was developed in partnership with the Hope Heart Institute and promotes science education and health behavior change for teenagers in underserved communities. Teen Take Heart combines science education and behavior change and presents it to the population for whom it can make the most difference: teenagers in underserved communities.

Dr. Palazzo chaired Seattle University's College of Nursing (CoN) Curriculum Architecture Committee and is actively involved with the CoN Curriculum Transformation Committee as SU CoN moves towards a conceptual-based and situated-learning model of nursing education. He is familiar with the current IOM, QSEN, NLN, CCNE, and AACN educational recommendations and standards and with many pedagogical strategies for student-centered learning.

General Comments

The Affordable Care Act is expected to provide additional insurance coverage to over 30 million Americans. The influx of newly insured patients seeking care will impact the current and future healthcare system. There is a need to elevate the education of registered nurses in the United States to the level of the BSN as they move to the front lines of preventative and primary care, working with sicker and more complex patients.

This is a very exciting and intriguing proposal for a RN-BSN (RNB) bridge program at Seattle Central Community College (SCCC) in the heart of Seattle, Washington. The SCCC RNB program has the potential to expand to other Seattle Community College District (SCCD) campuses (North and South) and to develop partnerships with community colleges region-wide. There are plans for nursing faculty throughout the SCCD to teach in the RNB program at their respective campuses and as visiting instructors at other district campuses, although, this plan is not articulated in detail in the proposal. Bridge programs are scarce in the Puget Sound region and there is a demand for these types of transition programs in Washington State. It is clear that the community is seeking graduates of BSN programs to populate the regional hospitals, especially those hospitals working towards Magnet status. Many hospitals are encouraging and incentivizing their ADN nurses to seek a BSN (some with agreements that ADN graduates will obtain a BSN within 5 years of employment). The landmark report from the Institute of Medicine (IOM) on the future of nursing (2010) and the work of Patricia Benner and colleagues, *Educating Nurses: A Call for Radical Transformation* (Benner et al., 2009) are seminal commentaries that will lead the next generation of nursing educators and leaders in the United States. The Quality and Safety Education for Nurses (QSEN) will guide nursing safety initiatives within systems of complex healthcare for the foreseeable future. QSEN competencies were not specifically addressed in this proposal. The National League for Nursing (NLN) standards will guide current and future nursing educators in the development and evaluation of new and novel nursing pedagogies. Seattle Central Community College is well positioned to become a regional trailblazer and leader in bridge programs.

Curriculum Component

The proposed curriculum is strong and aligns with the AACN's *Essentials of Baccalaureate Nursing Education for Professional Nursing Practice* and will be evaluated based on the AACN's *Standards for Accreditation of Baccalaureate and Graduate Nursing Programs*. A noted strength of the curriculum is the Transition to Baccalaureate Nursing Practice (NURS 301) course. This is especially important for nurses returning to academia after a prolonged absence and will support a successful transition. There are course offered in the RNB program that are essential elements of baccalaureate nursing education: Diversity and Healthcare Disparities (NURS 310), Professional

Communication (NURS 350), Nursing Management (NURS 390), Scholarship and Inquiry (NURS 400), Nursing Leadership (NURS 401), Family, Community, and Public Health Nursing (NURS 410) and associated clinical (411), Health Information Technology (NURS 450), and an Advanced Practicum in Nursing (NURS 497). In addition, there is a requirement for 10 credits of upper division electives offered with topics that range from Biomedical Ethics (PHIL 365) to Economics of Healthcare (ECON 315). This appears to be a well-rounded and robust offering of courses.

In reference to Criterion 1 (Curriculum Demonstrates Baccalaureate Level Rigor) the program learning outcomes are listed in the proposal. Reference to this criterion is adequately described. There is frequent reference to alignment with the AACN Standards, but a more detailed description of how the SCCC RNB program plans to specifically meet these standards. Highlighting the unique setting as an urban community college with partnerships within the district would strengthen the proposal. Program evaluation is mentioned, but there is not a clear indication of the rigor of this assessment and what specific entities will be performing the program review (internal, external, or both). It is unclear who in the program will be responsible for collecting and analyzing the quarterly and yearly data and distributing the results (i.e., a dedicated person in a dedicated office). A systematic evaluation plan should be developed and included in the proposal.

Entry requirements for SCCC RNB program are well defined in a table. The table indicating general education requirements in the RNB program is lacking a higher level statistics course necessary for BSN graduates. This may be a 3 credit prerequisite offered on campus specifically for registered nurses returning to education.

It is unclear what teaching pedagogies will be used in the SCCC RNB program. In nursing education, there is a move away from the traditional lecture format and teacher-centered instruction towards a more student-centered, situated-learning model of nursing education that explores concepts across the lifespan with less emphasis on content. It is not clear in this proposal how the SCCC RNB program will employ novel teaching pedagogies in the classroom. There is a brief mention of some pedagogical strategies at the end of the proposal and more specific strategies in Forms A and B. Clinical placement in the Puget Sound Region is competitive and restricted. Even with the establishment of a consortium that works towards equity in distribution of placements from the various nursing programs in the Puget Sound region there continues to be challenges finding compelling student placement sites. The addition of 25 to potentially 50 additional students in community settings and acute care units in the area hospitals seems challenging. The application does not address this fact or any strategies to place their students successfully. There is an assumption that it will not be problematic.

Coursework for the SCCC RNB program is well described with several tables providing information on courses and sequencing for both full- and part-time students. Clearly indicate that the program is using the AACN BSN Essentials as a guide for curriculum development, as this is the gold standard.

In reference to Criterion 2 (Qualified Faculty) there is a table listing the current full-time and part-time faculty. Criterion 2 asks for specific profiles of each faculty member (and potential faculty member) and what courses in the program they will teach. Clinical expertise is listed for each faculty member, but planned course assignments are not provided. The SCCC RNB program proposes to enroll 25 to potentially 50 students yearly without a clear indication as to how faculty workload will be adjusted or if there will be recruitment of additional faculty (full- or part-time). Currently, the SCCC nursing program employs four full-time nursing instructors and nine part-time

adjunct instructors. It is unclear whether any of the full-time faculty is tenured. The current ADN program relies heavily on a strong MN/MSN prepared faculty with one DNP prepared faculty, well suited for an ADN program. The proposal does not mention any attempt to recruit PhD faculty to the program who can assist with program development and grant writing or if the director/dean of the program will be doctoral prepared. This should be a goal.

Appropriateness of Plan for Implementation

The SCCC proposal calls for the implementation of an RN-BSN bridge program (RNB) beginning fall 2014. Seattle Central Community College seems well positioned to offer a BSN in a supportive academic environment with a variety of student resources available on a campus surrounded by the comforts of a large vibrant urban area (i.e., restaurants, coffee houses, music venues, and dance clubs). The proposal is well timed to coincide with the call from the IOM, NLN, and accrediting agencies (AACN) to create transition to higher academic degree programs in order for the profession to meet the workforce goal of 80% BSN prepared registered nurses by 2020.

Seattle Central Community College has experience in creating and implementing a Bachelor in Applied Science (BAS) program that will serve as a guide for the implementation of the RNB program. The relationship with Bellevue Community College, who SCCC relied heavily on for development of this proposal, will be an important mentor for this program. It appears SCCC has a substantial and long (30 year) lease agreement in a building as the anchor tenant. It is unclear how much space will be allocated for the RNB program or how far this building is located from the main SCCC campus. The partnership/arrangement with Pacific Medicine is unclear – this should be described further. Student support services including: advising, financial aid, and career planning are well described. The section on special student services positions demonstrates the understanding of the personnel needed to support the RNB program.

Strengths and Areas for Improvement

In reference to Criterion 3 (Selective Admissions Process) SCCC has an open enrollment process that admits students who meet minimum requirements on a first-come, first-served basis. Although this strategy seems counterintuitive to attracting and graduating the most academically qualified applicants, the NCLEX-RN pass rates exceed the state and national averages. This appears to be a very successful model for SCCC and one they plan to continue with the RNB program. The selection criteria are well described. SCCC resides in a major culturally diverse urban hub and offers opportunities for students who may not be able to afford the cost of private institutions such as Seattle University or Seattle Pacific University or compete with the very selective application processes of these universities and the University of Washington that heavily emphasize G.P.A.

The selection process is well described starting with priority given to graduates of ADN programs within the SCCD, followed by years of nursing experience. The remaining applicants will be drawn from a lottery and or placed on a wait-list. It is very clear that SCCC is committed to diversity and has several strategies in place to attract, retain, support, and graduate persons from various ethnic, racial, and gender backgrounds and experiences, including the creation of a scholarship program to serve financially disadvantaged and underrepresented students. This is a major strength of the program and should be applauded. The RNB program has a plan for oversight and accreditation.

There are several areas that require further elaboration and explanation.

In reference to Criterion 5 (Commitment to Build and Sustain a High Quality Program) initial funding for the RNB program will be provided by SCCC's general fund. There are plans in place to support

faculty through the transition to the RNB program through continuing education opportunities and faculty development. Funding is in place to hire support staff in the necessary capacities of financial aid processing and library services. The budget seems underrepresented. There is no clear allocation of funds for additional faculty or explanation as to how current faculty will be used to meet the teaching needs for the increased enrollment in this expanded program. The director/dean salary is not adjusted for inflation and merit raises, which will be expected each year. It is not clear how the program will respond to the educational needs (faculty) of potentially 60 new students a year with very little allocation of funds for faculty salaries. The plan to move Allied Health into a new facility and the opportunities this provides to enhance the infrastructure of the proposed RNB program is not well described.

There is some reference to faculty recruitment, but that is not accounted for in Criterion 2 and is not adequately represented in the budget. There is no indication of the impact the program will have on the existing allied health staff and administration with the addition of 25-50 students. There is an assumption they will accept the additional workload.

It is unclear what is meant by hybrid learning in this proposal, although there was a clearer explanation in Forms A and B. Does the RNB program propose an on-line component to some of the courses? Which ones? If so, who will be facilitating and managing these courses? Is there support in place at the college level for the use of on-line technology? Placing course material on CANVAS is not the same as a fully supported and primarily on-line course.

There is an explanation for pathway options beyond the baccalaureate degree, but they are not specific. It is unclear if there are articulation agreements in place with master's granting institutes to work with the RNB program to directly recruit from this pool of graduates or is there merely a recognition that there are master's programs available for students to apply to?

The application would benefit from consistent use of font and font size throughout the document. The consistent use of the active voice rather than the passive voice in the style of writing will improve the clarity of the message. Some grammatical and spelling errors need correcting. Headings and sub-headings should be consistent in font color and size throughout the document. Tables would benefit from larger font size. These seemingly minor details may distract reviewers from the otherwise strong vision for this program. The application allows up to 30 pages. There is room to be more specific in many areas mentioned in this evaluation. Some sections would greatly benefit from more specific and detailed descriptions.

Respectfully, Steven J. Palazzo

Seattle Central Community College's Response

Response to Steven J. Palazzo, PhD, MN, RN

We very much appreciate the evaluator's comments and are in agreement with his comments and suggestions. We will address each recommendation.

"The Quality and Safety Education for Nurses (QSEN) will guide nursing safety initiatives within systems of complex healthcare for the foreseeable future. QSEN competencies

were not specifically addressed in this proposal.”

We agree and have now addressed the QSEN in the proposal.

“There is frequent reference to alignment with the AACN Standards, but a more detailed description of how the SCCC RNB program plans to specifically meet these standards. Highlighting the unique setting as an urban community college with partnerships within the district would strengthen the proposal. Program evaluation is mentioned, but there is not a clear indication of the rigor of this assessment and what specific entities will be performing the program review (internal, external, or both). It is unclear who in the program will be responsible for collecting and analyzing the quarterly and yearly data and distributing the results (i.e., a dedicated person in a dedicated office). A systematic evaluation plan should be developed and included in the proposal.”

We believe we have addressed the assessment instruments and frequency in Table I. However, we had not addressed who was responsible. That has now been addressed.

“The table indicating general education requirements in the RNB program is lacking a higher level statistics course necessary for BSN graduates. This may be a 3 credit prerequisite offered on campus specifically for registered nurses returning to education.”

The committee had discussed this. All current WA state ADN programs require a statistics course. However, for those students who completed their ADN degree before this requirement was in place, we agree that this is an important course necessary for a student to be successful in the RNB. We have therefore added it to the prerequisites.

“The SCCC RNB program proposes to enroll 25 to potentially 50 students yearly without a clear indication as to how faculty workload will be adjusted or if there will be recruitment of additional faculty (full- or part-time).”

“The proposal does not mention any attempt to recruit PhD faculty to the program who can assist with program development and grant writing or if the director/dean of the program will be doctoral prepared. This should be a goal.”

It is our intention to hire more PhD trained nursing faculty. The current faculty in the ADN programs, both full and part-time, are generally teaching at their maximum loads so we will need to hire additional faculty. We plan to hire an additional full-time faculty either for the RNB. We have added this to the proposal. The cost had already been addressed in the revenue and expenses projection.

“It appears SCCC has a substantial and long (30 year) lease agreement in a building as the anchor tenant. It is unclear how much space will be allocated for the RNB program or how far this building is located from the main SCCC campus. The partnership/arrangement with Pacific Medicine is unclear – this should be described further.”

SCCC does have a substantial and long lease agreement in the Pacific Tower as the anchor tenant.

We are still working with the architects on the remodel of the space. 85,000 square feet is the leased space that will be allocated to SCCC's Allied Health programs. The ADN and RNB programs will be the largest programs, needing the most space, but the exact square footage is to be determined. The other tenants that will occupy Pacific Tower all have missions that are in alignment with our own and are supportive of our educational purpose. They want to partner with us and that is why they are leasing space in the tower. PacMed already is a tenant there and have committed to clinical placements for our ADN program. We intend to pursue agreements for the clinical placements in our ADN and RNB programs with the other tenants. This information has been added to the proposal.

"The budget seems underrepresented. There is no clear allocation of funds for additional faculty or explanation as to how current faculty will be used to meet the teaching needs for the increased enrollment in this expanded program. The director/dean salary is not adjusted for inflation and merit raises, which will be expected each year. It is not clear how the program will respond to the educational needs (faculty) of potentially 60 new students a year with very little allocation of funds for faculty salaries."

The budget faculty costs are based on the contact hours taught and are accurate for the projection. We plan to hire one PhD trained full-time faculty who will teach many of the courses. Other courses will be taught by part-time faculty or by ADN full-time faculty as part of their load. If the number of students increases to require additional sections greater than projected, we will reevaluate the faculty mix with the intent of hiring one or more additional full-time PhD trained faculty. Tuition and FTE revenue will cover the additional costs for the faculty. All budget numbers have been adjusted for a 2% annual inflation including the program director/associate dean.

"There is some reference to faculty recruitment, but that is not accounted for in Criterion 2 and is not adequately represented in the budget." Faculty recruitment is not a large expense for Seattle Central. SCCC does not fly in candidates, take them out to dinner, put them up in hotels, or provide transportation. Faculty search committees are staffed by tenured faculty and the dean as part of their professional obligations.

"There is no indication of the impact the program will have on the existing allied health staff and administration with the addition of 25-50 students. There is an assumption they will accept the additional workload."

The new program manager and the program director/associate dean will take the brunt of the impact of adding 25-50 students. Existing allied health staff and administration should be impacted minimally. If it proves more staff is needed, Seattle Central will assess that need and add more staff. There is room in the budget for additional staff if needed.

"It is unclear what is meant by hybrid learning in this proposal, although there was a clearer explanation in Forms A and B. Does the RNB program propose an on-line component to some of the courses? Which ones? If so, who will be facilitating and managing these

courses? Is there support in place at the college level for the use of on-line technology?"

This is an important point and the proposal has been revised based on these comments. The RNB intends to have online components to all courses. Most will be approximately 50% online and 50% face to face. Hybrid courses go through additional requirements at Seattle Central to ensure content online meets the same rigor as face to face content. All hybrid courses must not only be approved by the faculty run Course Approval Committee (CAC) but also by the dean for e-learning. Seattle Central has an e-learning curriculum designer to assist all faculty in developing hybrid and online courses.

"There is an explanation for pathway options beyond the baccalaureate degree, but they are not specific. It is unclear if there are articulation agreements in place with master's granting institutes to work with the RNB program to directly recruit from this pool of graduates or is there merely a recognition that there are master's programs available for students to apply to?"

We designed the program looking at entry requirements of the master level nursing programs in the area. It is our intent to develop articulation agreements upon approval to offer the RNB degree.

**Appendix I: Statement of Need for Bachelor of Science in Nursing:
RNB Program**

Statement of Need for the Bachelor of Science in Nursing

Forms A and B

Originally Submitted on

March 8, 2013

by

Seattle Central Community College



Modifications Submitted on March 18, 2013

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Appendix

**Form A COVER SHEET
STATEMENT OF NEED**

Program Information

Program Name: Bachelor of Science in Nursing (RN-B)

Institution Name: Seattle Central Community College

Degree: B.S. Nursing Level: Bachelor Type: Nursing CIP Code: 51.3801
(e.g. B.S. Chemistry) (e.g. Bachelor) (e.g. Science)

Proposed Start Date: Fall 2014

Projected Enrollment (FTE) in Year One: 27 At Full Enrollment by Year Five: 60
(# FTE) (# FTE)

Funding Source: State FTE Self Support Other

Mode of Delivery

Single Campus Delivery: Seattle Central Community College
(enter locations)

Off-site: Some classes may be offered across the Seattle Community College District (SCCD)
(enter locations)

Distance Learning: Some classes may be offered via Canvas LMS
(enter formats)

Statement of Need

Relationship to institutional mission

Employer demand

Student demand

Options for place-bound students

Please see criteria and standard sheet FORM B

Contact Information (Academic Department Representative)

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Chief Academic Officer

3/7/2013

Date

Introduction to the Degree

Seattle Central Community College (SCCC) proposes to develop a Bachelor's of Science in Nursing (RN-B) to meet the growing need for professional certifications that current holders of the professional credential (RN) and the associate degree in nursing (ADN) require. Seattle Central plans to admit students in fall quarter of 2014. The degree will provide a bridge for those who hold an RN to complete the RN-B (BSN). The RN-B (BSN) is also positioned within the SCCC's Nursing program so that our students who are working towards their ADN will be able to continue their ease-of-access to SCCC and build more marketable skills that are required in the health care industry. Additionally, this degree will be available to students in ADN degree programs throughout the Seattle Community College District (SCCD), thus addressing affordability and access issues for students who live or work in Seattle.

Throughout this proposal you will find RN-B (Registered Nurse Bachelor's) and BSN (Bachelor's of Science in Nursing) as being interchangeable. This interchangeability is based on the fact that both degrees are approved by the Nursing accrediting bodies and research on BSNs generally includes RN-B degrees as being synonymous. However, programmatically there are different academic paths for these degrees. The RN-B is considered a post-licensure program, whereas, the BSN degree is considered a pre-licensure program. These academic differences are significant in the context of the SBCTC baccalaureate degree granting authority [per RCW 28B.50.030(2)]. The baccalaureate granting authority requires that the program is designed for individuals who hold an associate of applied science degree. In this case, the ADN is the applicable degree. ADN graduates, who then obtain their licensure (i.e., ready to practice) are now provided this RN-B route to obtain their baccalaureate degree. Whereas, a traditional BSN is generally not based upon a 2 + 2 model - the student completes 4 years of a program and then sits for her/his licensure test. It is the intent of SCCC to award the RN-B degree, based upon the 2+2 model and adhere to the SBCTC degree granting RCW.

1. Relationship to Institutional Role, Mission, and Program Priorities

Seattle Central Community College requires that every new program align to its mission to “promote educational excellence in a multicultural urban environment [and] provide opportunities for academic achievement, workplace preparation, and service to the community.” SCCC aspires to become a regional leader in developing new health care workers as well as providing advanced credentials to meet the evolving qualifications that are required in the field.



How SCCC's Core Themes Are Reflected in the BSN Program Design

Responsive Teaching and Learning

- For our nursing program, current and innovative teaching is our benchmark. Most nursing programs cite high NCLEX (National Council Licensure Examination) pass rates as evidence of a quality program. NCLEX is a required national exam that permits students who have successfully completed their nursing program to become licensed to legally practice as a nurse. SCCC has maintained a high NCLEX pass rate, which has a 5-year average of 96.24% (2007-2011 NCLEX School Reports). Furthermore, our program is being responsive in addressing trends that show the BSN as being the key certification that is foundational to future professional opportunities for nurses.

Catalyst for Opportunities and Success

- SCCC has developed a strategic plan to leverage our highly successful associate degree programs with the growing need for advanced credentials. Furthermore, SCCC is building on our successful reputation as a BAS "pilot" school (based on the expansion of the legislatively enacted E2SHB, in 2008, to include Seattle Central within the second group with 2 other institutions). Our only current BAS program in Applied Behavioral Sciences has already graduated students who are now completing Master's degrees. Strategically, SCCC is leveraging our health care associate programs with growing needs based on the Health Care Reform Act. The Health Care Reform Act will bring about the re-authorization of the Title VIII Nursing Workforce Development program which will mean greater federal support for nursing education. We have already been approved for an innovative AAS-T in Allied Health and working on the C & D portion of our BAS in Allied Health that will address the needs in health care areas that do not require a specific degree in their program area. This BSN degree will further complement our proactive curriculum in allied health.

Diversity in Action

- SCCC is a multicultural learning environment with 54.9% of our college enrollments being students of color. We look to leverage the diversity of the college as a means to further diversify future employees within nursing and other allied health fields.

Communities Engagement

- SCCC is uniquely positioned in the heart of Seattle and also the heart of the area hospitals. Through this BSN program, we look forward to strengthening our partnerships with Group Health Co-op, Veterans Hospital, Virginia Mason, Swedish Hospital, and others, as we send our graduates to their sites and also provide ease of access for their LPNs to come to SCCC to obtain their BSN.

Over the past five years, SCCC has developed internal and external relationships to assess the feasibility of creating a regional health care learning center that maximizes our unique location near Seattle's hospitals, collaborating with smaller Seattle-area clinics, and with the variety of quality allied health programs that we currently offer (Respiratory Technology, Dental Hygiene, Opticianry, Surgical Technology, and Nursing). SCCC is also coordinating with our SCCD "sister-colleges" (North Seattle and

South Seattle) to have this BSN degree as a “district-based” degree. SCCD establishes that all BAS degrees have a single campus accreditation, but will be “district-based” through providing articulations between our sister-colleges, the possibility of having some select classes at our sister-colleges, sharing instructional equipment across our sister-colleges, and/or having faculty from the sister-colleges occasionally teach in the given BAS program.

Further BAS degree development is both supported by and vetted through SCCC’s President’s Cabinet. In 2012, all academic deans met and created an Instructional Master Plan. This master plan highlighted the need to grow the ADN program by providing a BSN degree. At that same time, our Instructional Master Plan was then ratified by the President’s Cabinet. In Nursing, and other programs, each year a program development and sustainability analysis is completed by the President’s Cabinet to ensure the programs are properly enrolled and supported.

In 2009, Seattle Central Community College was granted candidate status by the Northwest Commission of Colleges and Universities (NWCCU) to offer a baccalaureate degree in Applied Behavioral Science. Thereafter, in 2012, NWCCU completed a full 7-year evaluation of SCCC which affirmed our status as a baccalaureate-granting institution. Any additional BAS degrees will be seen as a minor change from NWCCU. Currently, SCCC has completed a review by the Washington State Nursing Quality Care Commission. Our Nursing program is currently undergoing a standard reaccreditation cycle by the National League for Nursing Accrediting Commission (NLNAC) which will be completed in fall 2013. In anticipation of eventual approval of the BSN degree, SCCC is restructuring our Nursing program by upgrading our former faculty coordinator position and creating a new Associate Dean of Nursing position that will have direct responsibilities for supervising, managing, and growing both the BSN and ADN programs.

In addition to continuing education, certificates, professional/technical degrees and transfer degrees, baccalaureate degrees are a means by which Seattle Central Community College will fill a critical gap for accessible education in health fields required by Seattle employers and citizens. The BSN degree meets the expressed needs of community college students seeking access to a bachelor’s degree, and many local and regional employers seeking BSN trained health workers. This degree supports SCCC’s role to provide high quality, flexible, accessible educational programs that strengthen the economic potential and workplace preparation of a multicultural urban community.

2. Support of Statewide Strategic Plans

According to the SBCTC website, “Applied baccalaureates are designed to fill specific skill gaps and serve students seeking degrees in technical areas with limited opportunities available at four-year colleges.” As noted in the introduction to this proposal, this RN-B (BSN) degree conforms with all RCW requirements and, in particular, with RCW 28B.50.030(2).

This BSN proposal supports the goals outlined in the State Board for Community and Technical College (SBCTC) Mission Study and the Higher Education Coordinating Board (HECB)/Student Achievement Council’s (WSAC) Strategic Master Plan for Higher Education in the following ways:

Although the HECB is no longer part of the review process, in 2006, the HECB created a report entitled, "State and Regional Needs Assessment" in which nursing was designated as a high demand profession. The report noted that half of all future health care employment demand would be for nurses and, hence, recommended increases in baccalaureate nursing programs. SCCC intends to moderately add to the supply of BSN nurses, but alone with the University of Washington-Seattle (UW) and SCCC as the only public BSN programs in Seattle - there will be a need for additional area schools to expand their BSN production.

Additionally the WSAC policies as articulated in the 2008 "Strategic Master Plan for Higher Education" (SMPHE) and the "Opportunities for Change: Implementing the 2008 Strategic Master Plan" call for the following actions (and then note how SCCC meets the WSAC plan):

1. "Increase degree and certificate attainment by more than 40% annually by 2018"

As noted in the SMPHE, Nursing is listed as an occupation "most impacted by baby boomer retirements." Thus, it is imperative to grow the pipeline of colleges offering BSN degrees to meet both the 2018 goal as well as meeting the current demand as nurses retire. With only the UW as the only public college in Seattle with a BSN degree, SCCC will be able to accommodate additional qualified BSN applicants in our proposed program.

2. "Promote economic growth and innovation by focusing on the skills and knowledge needed for prosperity in the 21st century"

On October 5, 2010, the Institute of Medicine (IOM) released its recommendations on Nursing in the United States, "The Future of Nursing: Leading Change, Advancing Health." The IOM Report cited the need to increase the proportion of RNs with BSN degrees from 50% to 80% by 2020. Therefore, the ADN degree will become the entry requirement for the profession but the 21st century is increasingly requiring the BSN. SCCC is following our core theme of "responsive teaching and learning" to upgrade our ADN program to provide skills demanded for future nurses.

3. "Emphasize accountability for results throughout the higher education system"

SMPHE also notes "expanding the capacity for our higher education system is the most direct route to raising the overall level of educational attainment in our society." Thus, by holding SCCC accountable not only for providing access for more nurses – but ensuring that they are able to pass the NCLEX exam in high rates (as noted earlier our pass rates are 96.24%) will lead to college accountability in meeting the state's needs.

According to data from "The Master Plan for Nursing Education in Washington" and "The Council on Nursing Education in Washington State" (CNEWS), only 43% of RNs in Washington hold a BSN. Thus, state councils have targeted significant increases in BSN attainment as a state priority.

A 2012 Legislative proviso directed the State Board for Community and SCCD to expand its BAS offerings. In that legislative proviso, allied health was listed as a broad category for the SCCD to establish BAS degrees in health programs. SCCC is meeting that statewide plan by completing the proposal for a BAS in Allied Health and also this separate proposal for a BSN in Nursing. Furthermore, by increasing the opportunity for education, a BSN will meet the growing need for highly skilled healthcare workers in the greater Seattle area. SCCC, being centrally located and being an ethnically and economically diverse college, through the offering of a BSN will meet the requirements of the SBCTC BAS goals, the WSAC goals, as well as contributing to the overall demand of more nurses holding the BSN.

3. Employer/Community Demand for Graduates with Baccalaureate Level of Education Proposed in the Program

According to the employment outlook from WOIS (WOIS/The Career Information System: a private, nonprofit organization that researches information about Washington State careers, schools, and training programs), King County's demand for registered nurses will continue to outpace all other occupations. Current employment in King County shows that 19,684 individuals are employed in this field. SCCC ADN graduates, who then pass the NCLEX, average about 32 students per year (based on a 5-year average). When data is combined for graduates within the SCCD, the District produces about 110 annual ADN graduates. If you include the amount of SCCD graduates with the annual graduates from the UW (which is about 132 annually) - the total amount of graduates from public ADN and BSN programs is only 242 annual graduates. According to WOIS, annual job openings for ADN and BSN nurses (in King County) are 917 nurses. Thus, there is a significant gap between the number of graduates in the greater Seattle area and those required for employment.

The above data is even more troubling when, according to WOIS, nursing employment growth over the next 10 years is estimated at 26.2% versus all other occupations that are expected to have a growth rate of 15.7%. Furthermore, WOIS data indicates that King County has the second highest rate of growth for nurses in Washington State versus all other counties.

According to the City of Seattle Office of Economic Development (OED), the highest demand for BSN nurses will be based within the city of Seattle (which is the service area for SCCD). OED noted that Seattle has a high concentration of healthcare professionals. Seattle's healthcare industry sector is also endowed with world-class hospitals, research institutions, academic medical centers, opportunities to collaborate with cutting-edge biotechnology research, and the ability to attract patients from around the world. Given that Seattle's healthcare industry is clustered geographically, it is listed by OED as one of the leading healthcare clusters in the nation. Many of the regional hospitals are within a short walking distance from SCCC. Conversations with officials at various hospitals have indicated that many are moving towards "all RN" hiring and have specific plans to increase the percentage of RNs with BSNs. According to data provided by Bellevue College (surveying employers/hospitals in SCCD's service area) there is relevant data to indicate employer demand:

Employer Survey Data - Bellevue College, 2012
[used by SCCC with the explicit permission of Bellevue College]

Employer Survey Question	Response
Q: When hiring a nurse with the RN credential, what level of degree do you look for?	50% (n=29) = More BSN than ADN graduates 26% (n=15) = Same number of BSN and ADN graduates 16% (n=9)= BSN and above exclusively
Q: Industry projections tell us that nursing is a high growth career area, and that the need for nurses with a baccalaureate degree is increasing. Is that your perception?	71% (n=39) = Currently the need for RNs with a BSN is growing 7% (n=4) = The need for RNs with BSN can be met by current program graduates
Q: Have you experienced problems finding RNs with a BSN to fill your employment needs?	58% (n=33) = Sometimes 14% (n=8) = Frequently 28% (n=16) = Never

According to OED, Seattle has the largest concentration of medical facilities and personnel in the Pacific Northwest; with over 74,600 medical workers with \$3 billion in labor income. OED noted that “the immediate problem in Seattle . . . is the inadequate supply of nurses and other support occupations.” SCCD’s service area has a demand for nurses holding the BSN; the following chart indicates how many hospitals are in SCCD’s service area and the size of the various hospitals.

City of Seattle Office of Economic Development Data on Seattle Hospitals

Hospital	Size (i.e., # of Beds)
Children's Hospital & Regional Medical Center Children’s/pediatrics	250
Group Health Cooperative, Central Hospital General	300
Harborview Medical Center Teaching & research/psychiatric	366/61
Kindred Hospital Seattle Long-term/acute care	80
Northwest Hospital General, acute care	345
Regional Hospital for Respiratory & Complex Care Long-term/acute care	27
Seattle Cancer Care Alliance General	20
Swedish Medical Center/Ballard Campus General	163

Swedish Medical Center/First Hill Campus General	697
Swedish Medical Center/Providence Campus General	436
University of Washington Medical Center Teaching & Research	450
VA Puget Sound Health Care System Veterans	536
Virginia Mason Medical Center General	371
West Seattle Psychiatric Hospital Psychiatric	40

While reviewing employer data from Bellevue College’s BSN proposal, Bellevue College used a radius of 25 miles of Seattle. Their search showed 378 new positions for RNs with BSN degrees. However, since Bellevue College included employers with SCCD’s service area, SCCD conducted a new search during the week of February 17, 2013. The new search included the same keywords (i.e., BSN and Nurse), the same employment website (www.indeed.com), but changed the radius to “exact location only” search (i. e, Seattle employers only). The results indicated a total of 320 open positions with 195 new postings.

Nationally, there have been recent claims from ADN graduates that the slow economy has made finding employment more difficult; research still indicates that substantial growth in nursing will continue. According to Modern Healthcare (2009) “Nursing shortage eases . . . but only while the recession lasts, experts warn,” an easing of the nursing shortage was reported, primarily because over 240,000 registered nurses rejoined the workforce. However, more than 50% of these nurses are over the age of 50, and many others are temporarily working while a spouse is unemployed. It is expected that with a continued improvement in the economy, current national production of nurses will not fill the gap left by those who exit the workforce. It is estimated that nursing programs would have to increase enrollments by 40% nationwide just to replace those nurses who will be leaving the workforce due to retirement. Thus, Washington State is facing a severe nursing shortage which will only worsen in coming decades.

In regards to wage progression - a wage report from nursingcenter.com indicates that BSN nurses with between 1-3 years of experience earn \$55,300 versus an ADN nurse, with the same experience, earning \$50,100. Seattle is the home of several magnet hospitals (Children’s Hospital and the University of Washington) which prefer hiring nurses with BSNs.

As such, wages at magnet hospitals are 18% higher than non-magnet hospitals (www.wacenterfornursing.org). Therefore, to meet current and expected future employer need and to provide students the opportunity for access, the SCCC BSN degree will be critical to Seattle economic development.

4. Applied Baccalaureate Program Builds from Existing Professional and Technical Degree Program Offered by the Institution

SCCC's nursing program is one of the signature programs for SCCD over the last several decades. The ADN program was established in 1970 and fully accredited in 1991. Our nursing program has 4 FT faculty and 14 PT faculty. SCCC's BSN program will be available to our ADN graduates, ADN graduates from across the SCCD, and capacity will be allowed for students who have completed their ADN elsewhere. We are anticipating that enrollment in the program for the first year will be 30 students. Even when the program has reached capacity – no more than 70 students will be in the program. Hence, there will still be greater demand than supply for this program.

All of SCCC's full-time nursing faculty hold master's degrees and are qualified to teach at the BSN level. Additionally, SCCC has been successful in finding clinical placements for all of our ADN students. It is anticipated with the current success of the ADN program and building upon that success for the BSN degree, SCCC will continue to be able to find appropriate clinical placements for our nursing students.

The following chart shows current enrollment trends in our ADN program. Based on data of interested students (which is noted in the following section) it would be reasonable to expect that at least 70% of SCCC graduates would be interested in applying for the BSN program.

**Seattle Central Community College's Nursing
Program
Enrollments
2007-2012**

Year	Enrollments	FTEs Quarterly	FTEs Annualized	Headcount
2011-2012	1,030	214	71	96
2010-2011	1,009	212	71	94
2009-2010	872	180	60	95
2008-2009	818	168	56	79
2007-2008	789	163	54	81

Source: SBCTC Data Warehouse Stuclass and Class tables

5. Student Demand for Program within the Region

Across Washington State, there are 28 ADN programs. In 2010-2011, there were 1,690 ADN graduates. In the same year there were 1,692 first time NCLEX test takers. Also, in that same year, there were 947 BSN graduates who took the NCLEX exam. Yet, when reviewing 2010-2011 data from the Nursing Care Quality Assurance Commission, it indicated that BSN programs received 1925 qualified applications and admitted only 1163 students (a 60.4% admission rate; five year data shows admission rates that vary between 47-60%). It is unclear what happens to those qualified applicants who are unable to gain admission into existing programs. Assuming those 762 BSN applicants from 2010-2011 remain in Washington State and assuming that SCCC and other area community colleges (that have recently obtained/soon to obtain BSN approval; e.g., Olympic, Bellevue, Centralia, Spokane, Wenatchee) can admit those students, the combined BSN-granting community colleges would

only be able to admit about one third of those qualified BSN applicants. Thus, even with the current proposed BSN programs within the community college system - there will continue to be a substantial Washington State demand for a BSN degree.

According to the following chart from a NCLEX report, SCCD is the largest producer of ADN graduates in Washington State. The following chart shows number of ADN graduates out of 1690 (from 2010-2011) who graduated from the greater Puget Sound region.

Colleges in Puget Sound Area offering ADN Degree	Graduates
Bellevue	41
Clover Park	24
Everett	84
Highline	72
Lake Washington	82
Pierce College	32
Renton	32
Seattle District	153
Shoreline	87
Tacoma	104

In February 2013, SCCC conducted a nursing student interest survey. The purpose of the study was to reach out to SCCC graduates and current students, and understand what issues would affect their enrolling in our proposed BSN program. Results from that survey were very encouraging: 79.1% of the respondents felt that having the BSN degree in close proximity to hospitals/medical facilities, as SCCC location permits, would be “somewhat-to-very important” for their enrollment decision (see appendix). Furthermore, 100% of the respondents noted that it was “somewhat-to-very important” that the BSN program was affordable (see appendix). Knowing that the University of Washington is the only public university in Seattle offering the BSN, current BSN students who aren’t admitted to the UW must then rely on more expensive options like Seattle University and Seattle Pacific University (both private colleges).

Although SCCC only surveyed our graduates and current students, in 2012 Bellevue College conducted a student survey within their BSN proposal. Bellevue College received 230 responses from students across the Puget Sound region (including surveying students enrolled in the SCCD). Bellevue College data indicated that 95% of their respondents would “definitely” or “possibly” be interested in enrolling in a BSN program (at Bellevue College). Thus, there is significant demand both within Seattle, the greater Puget Sound region, and across Washington State for the BSN degree.

The projected enrollments in SCCC’s BSN degree for the first five years are shown in the following chart. These estimates are based on students enrolled in a 2/3rd load, which is typical for our professional-technical programs that are not structured in a cohort model.

	Year 1 2014-2015	Year 2 2015-2016	Year 3 2016-2017	Year 4 2017-2018	Year 5 2018-2019
Headcount	30	40	50	60	70
FTEs	27	32	40	48	60

BSN Graduates (80% assumption)	0	24	32	40	48
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6. Efforts to Maximize State Resources to Serve Place-Bound Students

The BSN degree at SCCC will directly provide place-bound students in the SCCD service area access to a low-cost, high quality nursing program. Keeping with the SBCTC mission goal regarding servicing place bound students, currently out of all of SCCC's ADN students, 75% reside in Seattle (based upon zip codes).

Seattle Central Community College's Nursing Program Students By Residence Location 2007-2012

Year	Seattle	Other	Total	% in Seattle
2011-2012	78	18	96	81%
2010-2011	66	28	94	70%
2009-2010	74	21	95	78%
2008-2009	59	20	79	75%
2007-2008	56	25	81	69%
			5-year average	75%

Source: SBCTC Data Warehouse Student, Stuclass and Class tables

SCCC remains a popular choice for place-bound students given our central location close to nearby hospitals and ease of public transportation. Although the above chart indicates most of SCCC nursing students live in Seattle, it is important to also note that according to the student survey, 79.1% prefer to attend a BSN program close to where they work. Thus, with this program being funded through state FTEs, state resources will directly serve place-bound students.

Unlike other BSN programs (with the exception of the University of Washington), SCCC currently has multiple bus routes that service our Capitol Hill location. Additionally, SCCC will have a street car servicing the college in 2014. The street car will link the Amtrak/Sound Transit station with Capitol Hill. Two years later, a Sound Transit light-rail station will connect SCCC with UW and the existing light-rail line, which travels as far south as SeaTac Airport.

Beyond the benefits of location for SCCC's BSN students, we are planning to develop some of our coursework through hybrid or fully online instruction. SCCC's student survey indicated that 68.9% reported "somewhat-to-very important" that there is an online option. Also, 81.6% reported "somewhat-to-very important" that the program has a part-time option – we will consciously develop a part-time option. Currently many of SCCC nursing faculty utilize Canvas as a LMS for face-to-face courses. We will continue to use Canvas in this manner, gradually move more courses online, and always be receptive to part-time learning options.

One aspect that separates SCCC from all other ADN programs (and what we are planning for our BSN degree) is our innovative semi-open admissions process. We have found that our semi-open admission process has ensured continued access to both place-bound students and diverse students. SCCC's process provides nursing students who have met the standard grade-point and have completed all of their prerequisite courses an opportunity to be admitted into the program on a space-available basis. Many other colleges use the GPA as the defining factor in admitting only the highest credentialed applicant. However, SCCC has maintained the approach that what matters most is not initial GPA – but students' successful completion of the program. Through this innovative admissions process, our nursing students represent the greatest amount of ethnic and gender diversity in the state-system.

**Seattle Central Community College's Nursing
Program
Demographics
2007-2012**

Year	% of Women	% of color (regardless of gender)
2011-12	81%	41%
2010-11	75%	50%
2009-10	69%	48%
2008-09	71%	40%
2007-08	76%	43%

Source: SBCTC Data Warehouse Student, Stuclass and Class tables

In an effort to greater address the diversity of BSN holders, SCCC is uniquely positioned to continue to diversify the profession, which also reflects our core objective of "diversity in action." The Washington Center for Nursing (WCN) and the Washington Health Foundation (WHF) are convincing the Washington Nursing Action Coalition (WNAC) and the Master Plan for Nursing Education in Washington State (MPNEWS) that increasing ethnic and racial diversity in nursing education is a critical need. According to the WWAMI Center for Health Workforce Studies (<http://depts.washington.edu/wwamirc/>), only 11% of current Washington State RNs are "people of color." Contrast that data with 33.7% of the population in Seattle as "people of color" (according to the Seattle Department of Planning and Development). Additionally, according to the WWAMI Center for Health Workforce Studies, women account for 91.7% of all nurses. Thus, to have a nurse workforce that is representative of the population of the greater Seattle area is a critical goal of this new program to continue the inclusive culture of SCCC's nursing program.

Within the city of Seattle, the UW is the only public university that offers a BSN. As noted within this proposal, the UW is not able to meet the current demand of qualified potential BSN applicants. Although it was difficult to find the admission rate for the UW's BSN program, information from the UW's College of Nursing website indicate that "several hundred" of qualified students are turned away. Within the City of Seattle, the only private universities offering the BSN are Seattle Pacific University (SPU) and Seattle University (SU). Although SU and SPU are quality programs, both schools (combined) only have 90 students each year graduating and taking the NCLEX. Additionally both schools have tuition that is more than twice the tuition rate from SCCC's proposed BSN program.

Thus, the City of Seattle is grossly underserved with the limited public and private BSN options. Although Seattle's population (at 608,660) is nearly 475,000 greater than Bellevue's population (which is at 124,798), Bellevue is also served by three colleges offering BSN degrees (UW-Bothell, Northwest University, and Bellevue College [who has only recently been approved to offer this degree]). With the recent authority given to Bellevue College to offer the BSN degree, Bellevue will have two public college options for the BSN. Whereas, Seattle (should SCCC's proposal not be accepted) would have only one public college option.

Several options have been explored for collaboration with other institutions. The first collaboration occurs within the Seattle Community College District. Prior to proposing this BSN degree, North Seattle Community College (RN and LPN programs), South Seattle Community College (LPN program), Seattle Central Community College (RN program), and Seattle Vocational Institute (Medical Assistant program) all agreed that SCCC would be the lead college for the BSN degree; however, the degree would be supported across the SCCD. This district-wide collaboration will include qualified nursing faculty from across the District being able to teach within the SCCC's BSN program. Outreach and marketing of the SCCC's BSN program will happen across the District. Some classes might be taught across the District to best utilize the nursing labs from across the District. Curriculum from the ADN program will continue to be standardized across the District to ensure easy transfer and articulations.

The second collaboration is with other community colleges offering the BSN degree. There have already been connections between members of the SCCD and Bellevue College during the development of this proposal and their BSN proposal. The goal is, as more community colleges enter the BSN approval process, that we work closely to ensure that the curriculum is as common as each faculty body will permit. By working towards common curriculum, the goal is to show the state that all of the community colleges are willing to work together for the benefit of their students and also to prepare for the possibility that we might have students who transfer from one BSN program to another.

The third collaboration is with our area clinics and hospitals. SCCC has already started dialogues with hospitals that we use as clinical sites. In addition, we have been actively

involved with conversations with the Pacific Medical Center Association of Clinics to establish shared opportunities between their clinics and SCCC.

Closing Comments

Having only one public college in Seattle that offers the BSN will not address the IOM goal of 80% of all nurses at the BSN level by 2020. Furthermore, limited access exists for nursing students attempting to get in the UW's program. SCCC, by embracing a non-selective nursing application process, enables greater diversity in our nursing programs than many other institutions. SCCC is dedicated to our mission of "diversity in action" and appreciate that through our urban location we need to provide access to diverse and place bound students. Yet, at the same time, we are both physically and academically well positioned to support those working nurses that need to complete a BSN.

Appendix II: Course Descriptions

Bachelor of Science in Nursing – RN-BSN

Core Upper Division Nursing Courses

NURS 301 Transition to Baccalaureate Nursing Practice – 3 credits

This bridge course provides the conceptual background and essential skills for success in a baccalaureate nursing program and the professional nursing role. Course covers: critical thinking, scholarly writing, and leadership at the BSN level, as well as the relationship between research, theory, and evidence-based practice. Students will conduct a reflective analysis of life-long learning goals.

NURS 310 Diversity and Healthcare Disparities – 4 credits

This course explores cultural diversity and healthcare disparities to help students gain insight into causes and appropriate nursing responses. Through a cultural self-assessment, students explore how culture influences worldview. Students analyze components of complex cultural environments that relate to healthcare disparities. Students examine existing health disparities, systems and potential solutions. This course recognizes cultural competency as a basic requirement of any healthcare system and its constituents. Students will determine the importance of responding respectfully to and preserving the dignity of people of all cultures while working for social justice within and the healthcare systems and outside the healthcare systems as it impacts health.

NURS 350 Professional Communication – 3 credits

Provides baseline skills for progression to master's level work. Enhancing therapeutic communication with clients from diverse populations. Advancing professional communication with colleagues. Conflict management, team-building. Concepts and skills for oral and written communication. Tools for professional communication. Types of writing in different professional roles. (program outcomes: 4, 5)

NURS 390 Nursing Management – 3 credits

This course focuses on the development management skills assumed by professional nurses, including delegation of responsibilities, networking, facilitation of groups, conflict resolution, case management and collaboration. Management and organizational theories and concepts are studied, evaluated and applied. Concepts addressed include organizational structure, change, managing quality and performance, workplace diversity, budgeting and resource allocation, and delivery systems. (program outcomes: 3, 4)

NURS 400 Scholarship Inquiry: Connecting Research to Practice – 5 credits

Examines the nature of inquiry, basic research concepts, language and processes. Content and process will focus on how research contributes to the development of nursing knowledge, improves nursing practice, and enhances professional development and professional accountability. Qualitative and quantitative research methods are compared. Students will critically appraise and interpret nursing research studies in order to enhance their understanding of the research process. Ethical and legal rights of human subjects are explored. Student will explore the considerations of nursing research related to diverse populations. (Program outcomes 1, 3).

NURS 401 Nursing Leadership – 3 credits

Covers the analysis, integration and application of principles of leadership in healthcare organizations and to population-based efforts across the health care delivery system. Focus is on interaction and socialization into the professional role. Special emphasis is placed on the theoretical knowledge and practical skills needed for nurses to succeed as leaders in today's local, state, national and international health care environment. Explores nurse leadership roles: care/case manager, change agent, educator, contributor to policy development, etc. Project in an area of nurse leadership is required (program outcomes: 3, 4)

NURS 410 Family, Community and Public Health Nursing – 4 credits

Focuses on the role of the nurse in community and public health models. Introduces tools for community assessment. Concepts of health promotions, disease prevention and risk reduction are included. Evidence-based practice for the health of groups, aggregate populations and communities on a local to global scale. Analyzes epidemiological, economic, socio-cultural, policy, and political issues that impact local, national and global healthcare delivery. (program outcomes 5, 6)

NURS 411 Clinical for Family, Community and Public Health Nursing – 3 credits

This course provides the opportunity for the student to collaborate with communities to assess, plan and implement nursing interventions that will meet the needs of an agency or population group in the community setting. Group work and field experience provide application of community/public health nursing processes.

Practicum placements – 3 credits

Students will also complete at least 3 practicum credits in an area of interest such as health information technology for nursing.

NURS 450 Health Information Technology for Nurses – 3 credits

This course covers health information systems and informatics concepts encountered in healthcare settings. Course content focuses on healthcare information technology concepts, terminology and key health information systems and technology. Students will explore their own role as nurses in implementing patient-centered care in an environment of advancing technology. Students will critically evaluate health information systems and their role in patient safety, safe medication administration, maintenance of patient privacy, data security, and efficacy of health care processes. Course content will provide the student knowledge and skills to use information management and patient care technologies to deliver safe and effective care to diverse patient populations in a variety of settings. (RNB program outcomes 2, 3, 4, 5) (CCNE Essential IV)

NURS 490 Professional Portfolio – 1 credit

The senior nursing portfolio project is a purposeful collection of materials that communicates the student's academic and professional development throughout the RN-BSN program. The portfolio is designed to foster student empowerment through analysis and critique of one's own work and self-awareness through reflection and self-evaluation. It serves as a method of measuring achievement of course and program outcomes.

General Education—Upper Division

PHIL 365 Biomedical Ethics – 5 credits

Examine ethical issues that arise in healthcare, such as provider-patient relations, death and dying, reproductive issues, human and animal experimentation, and bioethics and public policy. Offers the knowledge and skills needed to research, analyze, and evaluate positions taken on these or related issues. Special attention is paid to the practical use of ethics in clinical practice and in public society.

ECON 315 Economics of Healthcare – 5 credits

Covers the principles of micro and macroeconomics as applied to the healthcare industry. Examines how healthcare demand differs from that of other goods. Major topic areas include identifying and measuring the cost and benefit of marketing and government solutions to various healthcare issues, the role risk plays in the demand for and supply of health insurance, the incorporation of general healthcare, medical care, government policies and health insurance in determining impacts on private profit and social economic well-being.

ANTH& 235 Cross-Cultural Medicine – 5 credits

Everyone gets sick at some point in their lives, but how this sickness is viewed and treated is a cultural phenomenon. View health, disease, sickness, and healing from a global lens through the consideration of biology, culture, and political and economic systems. Knowledge of the rapidly expanding field of medical anthropology is essential for future health practitioners for competency in dealing with diverse patients.