

MINUTES

**UTAH
EDUCATION COMMITTEE
BOARD OF NURSING**

February 11, 2010

**Room 474 – 4th Floor – 7:30 a.m.
Heber Wells Building
Salt Lake City, UT 84111**

CONVENED: 7:42 a.m.

ADJOURNED: 10:03 a.m.

Bureau Manager:
Secretary:

Laura Poe
Shirlene Kimball

Conducting:

Diane Forster-Burke

Committee Members Present:

Diane Forster-Burke
Peggy Brown
Mary Williams
Gigi Marshall
Pam Rice

Guests:

Tasha Hardy, Provo College student
Ashleigh Pray, Provo College student
Jennifer Self, Westminster College
Amy Sampson, Westminster College
Beth Cramer, Westminster College
Kelsey Johnson, Provo College

TOPICS FOR DISCUSSION

DECISIONS AND RECOMMENDATIONS

ADMINISTRATIVE BUSINESS:

January 14, 2010 Education Committee minutes:

A Motion was made to approve the minutes as written. All Committee members voted in favor of the Motion.

NEW BUSINESS:

Allen Hanberg and Katie Baraki
University of Utah – Presentation of a research project regarding Innovations in Nursing:

Dr. Hanberg and Ms. Baraki met with Committee members to present a clinical nursing model that would integrate simulation with the clinical and didactic components. Dr. Hanberg reported that their research found that in the clinical setting in 1995-1996, approximately 44% of the student's time was spent in direct patient care with only 25% of the time in the presence of a supervisor. The rest of the time was spent unsupervised. Dr. Hanberg stated they are

looking at restructuring the clinical experience to provide more guidance for the students. He indicated the goal is to have the student enter the profession as an expert instead of as an advanced beginner graduate.

Dr. Hanberg reported there are a lot of different definitions of simulation and they will be working to define the different levels of simulation. He indicated their model is designed to use the technology to bring the experience to life and to focus on the methodology. Ms. Baraki stated they have developed a mirrored model, the simulation and clinical mirror each other and occur in the same context. The objectives are the same for both the simulation and clinical. Dr. Hanberg indicated they take a clinical group, divide this group into two smaller groups with one group being placed in the simulation environment for one week and the second group in a clinical setting for one week. Then the groups switch for another week.

Dr. Hanberg and Ms. Baraki indicated this will be a pilot program with a four semester roll out. They hope to have a comprehensive evaluation completed in 2011. Dr. Hanberg reported they took into account the institution and practitioners and how this model would impact their clinical partners.

Ms. Brown stated the University has been having the students do this on a smaller scale and reported the students like the model. The students and faculty members will be submitting an evaluation regarding their perceptions on the quality and the delivery of the model. Ms. Brown also indicated the clinical partner perception will also be gathered. Dr. Williams questioned if there is 50% simulation and 50% in clinical in the first and second semesters, and looking at including simulation in all four semesters, how will the model fit into the Rule that states no more than 25% of the clinical hours can be simulation. Dr. Hanberg stated the current model is front loaded with simulation the first and second semester, then simulation drops down to 11% for the third and fourth semesters. This brings the number under the 25% in simulation. He stated there would still be clinical labs, but it does not count in simulation or clinical time.

Dr. Hanberg and Ms. Baraki requested a letter of support for the model from the Board to be submitted to NCSBN. Dr. Williams questioned whether or not the model violates the Utah Practice Act or Rule. Ms. Poe stated not the way the model is currently being handled; however, there are potentially three Rules that would be a barrier to expanding the proposal. Ms. Brown made a Motion to provide a letter of support. Ms. Marshall seconded the Motion. All Committee members in favor.

Everest College, Rebekah Lynch:

Dr. Lynch met with the Committee and indicated they are still waiting for the final approval letter from the ACICS accrediting body. Committee members questioned the admissions standards and why are they accepting students with low GPAs. Dr. Lynch stated they accept a low GPA, but that they look at high school GPA. She indicated the student would be given points for experience, how well the individual does on the HESI A2 examination and that the program will be implementing the COMPASS e-Write essay. Ms. Forster-Burke stated each institution determines their admission criteria, but Committee members would recommend a higher GPA. Ms. Rice stated most program do not use high school GPA, but the GPA from the pre-requisite courses and the recommendation has been a 3.0 GPA. Dr. Williams stated that historically, when a program struggles with NCLEX pass rates, the problem correlates with low admission criteria.

Dr. Lynch stated the program will be seeking CCNE accreditation. She reported they have made several minor changes to the curriculum and are moving forward hiring faculty members. She stated she will submit clinical placement contracts as soon as she has them.

Debra Edmunds,
Mountainland ATC written report:

The report was reviewed and accepted.

Traci Hardell and Vicky Dewsnup,
Stevens Henager College:

Ms. Hardell and Ms. Dewsnup met with the Committee to present their plan of action regarding the low NCLEX pass rates. Ms. Hardell reported the program sent out a survey to the students, faculty and

adjunct faculty and she indicated the students are very please with the quality of the faculty. Ms. Hardell also reported that 95% of the students complete the program within the 15 month period and they have a low attrition rate. She reported they have a 100% placement of students who have graduated and who have been license.

Ms. Hardell stated that most of the students who failed the exam the first time are passing the second time. She stated they have reviewed the philosophy of the program, and may need to find a way to weed out those students who will not be able to pass the NCLEX.

Ms. Hardell stated the action plan includes the following tactics. In order for the student to pass the course, he/she must have a 78% average on all tests. In the past, the student just had to have an 80% in the course. Ms. Hardell stated the school is putting the focus on passing the tests including unit tests and the NCLEX examination. She reported their attrition rate may go up in the beginning, but at the end of the program, the student will be more successful. Students are required to pass the ATI exam within 3 months of completing coursework or they will not receive a transcript. The student will have to pass the final test before the transcript will be issued. Ms. Poe questioned what will happen if the three months pass and the student has not passed the ATI examination. Ms. Hardell stated the student would not graduate and would not receive a transcript. Ms. Hardell stated she feels the curriculum content is there, but somehow have to narrow down the students who will be successful and feel the grading policy is the way to accomplish this. She stated they have hired a new clinical lab coordinator and have hired adjunct faculty who have taught at other institutions.

Ms. Hardell reported the next cohort of students will be taking the NCLEX exam the end of February or the first part of March.

Ms. Brown questioned what provisions the school makes for those students who have completed the pre requisite courses and are financially committed, but

cannot move forward. Ms. Hardell stated that some students do not do well in an accelerated program and they would look at other programs within their school, such as respiratory therapy, etc. Dr. Williams questioned whether or not they have looked at the basic curriculum. Ms. Hardell stated she feels the curriculum is good, it compares to the NCLEX test plan; the nursing advisory board looked to see if Stevens-Henager is teaching everything and NLNAC has reviewed the curriculum. Ms. Poe questioned how often they admit students. Mr. Hardell stated monthly for prerequisites and every two to three months for nursing. Some classes have 10 students, some have 15 students. The next graduation period is the end of April or the beginning of May.

Committee members discussed the next step for this education program. The Memorandum of Understanding only addressed the accreditation process. Committee indicated they will need to review the pass rate by graduation cohort to determine where the program stands according to the Rule. Ms. Poe indicated the program is willing to work with the Board and has submitted a plan of action addressing the NCLEX pass rate. If there is no improvement with the pass rate and the program doesn't meet the standards of the Rule (if the low pass rates occurs four times either after four consecutive graduation cycles or over a two year period of time) the program will have to stop accepting students. Committee members suggested sending a warning letter that clearly states where the program is in the Rule process and that the Committee will continue to monitor the graduation cohort NCLEX pass rates. Ms. Marshall made a Motion to accept the plan of action. Ms. Brown seconded the Motion. All Committee members in favor.

Ameritech College pass rates:

The pass rates were reviewed and are within the acceptable standards.

Connie Carpenter,
University of Southern Nevada:

The report from the University of Southern Nevada was reviewed and accepted.

Fortis College:

No report was received.

Utah Valley University:

Committee members requested that the director of nursing from Utah Valley University meet with the Board to clarify what type of program Utah Valley University is currently offering and the level being taught, i.e. associates level or baccalaureate level. Committee members would also like clarification regarding whether or not the nursing program dean/director has changed. Committee members would also like to discuss the declining NCLEX pass rates for the program.

Rule Draft:

Committee members questioned whether or not a program could participate in the innovations in nursing if the faculty does not meet the education criteria. Ms. Poe indicated there is a built in time frame if the faculty member is enrolled in a masters program and thus would meet the criteria in Rule. Committee members also questioned whether or not a provisionally approved program could participate in the innovations in nursing. Ms. Poe stated no, but she stated she feels if the program is nationally accredited, the Board should consider providing language that would allow such a program to participate in an innovations program.

Ms. Poe stated after today's discussion regarding innovations from the University of Utah, the Committee will need to decide if the three problem areas identified (number of simulation hours, student to faculty ratio and preceptorship) would be addressed. The current rules state that a preceptorship is only acceptable during the last semester which can limit an innovation project. Committee members indicated that preceptorship needs to be defined.

Committee members also indicated that a definition of simulation needs to be added and what the qualifications for simulation should be. If it is determined to allow more than 25% simulation, we would need to define the type of simulation such as high definition. Committee members indicated that the faculty to student ratio at any given time can not be greater than 1 to 10.

Ms. Forster-Burke suggested the proposed Rules be reviewed and placed on next months' agenda.

Note: These minutes are not intended to be a verbatim transcript but are intended to record the significant features of the business conducted in this meeting. Discussed items are not necessarily shown in the chronological order they occurred.

March 11, 2010
Date Approved

(ss) Diane Forster-Burke
Diane Forster-Burke, Chair, Education Committee, Board of
Nursing

March 11, 2010
Date Approved

(ss) Laura Poe
Laura Poe, Bureau Manager, Division of Occupational &
Professional Licensing