

**GUIDE FOR NEW  
ASSOCIATE DEGREE NURSING PROGRAM DIRECTORS**

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## FORWARD

This guide was developed as a project of the Health Workforce Initiative (HWI) with funding from the HWI. It is intended as a guide for new deans and directors of nursing programs. Since the HWI is funded through the California Community College Chancellor's Office the focus will be primarily on Community College Associate Degree Nursing (ADN) programs. However, most of the information may be generalized to be used by any new director of a public or private nursing program.

This is a very brief guide. It primarily provides direction on where to go for more complete information.

It is also meant to be used with the *Green Deans and Directors Guide* which is a much more in-depth guide written by Margaret Craig, Dean Emeritus of Napa College.

What is important to remember is that outside of the California Nurse Practice Act everything is open to interpretation. There is no one way to do curriculum, staffing, evaluation, student admissions and transfers or any of the myriad of activities and policies associated with nursing education programs. The director must work within the framework of the college, with the faculty and the students, and then make the best decisions for their program.

## INTRODUCTION

The purpose of this guide is to provide quick and easy access to information for a new ADN director. This is a brief outline. For more in depth information on each refer to the *Guide for Green Deans and Directors* by Margaret Craig RN, MSN, former program dean in California and Massachusetts.

There are a few key pieces of information you should remember at all times.

- The new ADN director is never alone. There are currently 90 ADN programs in California. Of these, 79 are community college programs. They all have deans and/or directors and these people are there to help. They are a very cohesive group and belong to the California Organization of ADN Program Directors (COADN). There is a COADN North and South group. The new ADN director needs to belong to this organization, attend the meetings, and team up with a mentor.
- The ADN director should maintain open lines of communication with the BRN nursing education consultant (NEC). It will prevent problems later on. The NEC is committed to new ADN director success and is there to help as needed. NEC contact information is included in “Module 13: Contact Information.”
- The ADN director uses the Nurse Practice Act as the ‘go to’ guide for nursing education. The BRN provides a Directors Guide to help explain the Nurse Practice Act. This is updated annually, includes contact information, and is distributed at the joint ADN and California Association of Colleges of Nursing (CACN) meeting in the fall. At this even, the BRN also holds a new directors meeting. Again, one must attend to get the necessary information. It is also good to hear the questions that are asked in addition to asking questions. This how the new ADN director learns what to expect.
- The ADN director must work with the faculty at the college. All curriculum and decisions must be developed with faculty input. This is a critical piece of the self-study process for both for the BRN and for the national accrediting commission. The ADN director treats all students the same. It is important to use guidelines that have been developed in conjunction with the faculty to make student decisions. If the ADN director fails to use the guidelines and treats students differently, he or she will be liable for legal action. If the ADN director singles out students for special treatment, positive or negative, it puts the ADN director and the program at risk for discrimination suits. It is best to use the rules to protect self, the student, the faculty, and the school. The rules should be written and given to the students. The students should sign that they have read the rules and that the rules were discussed with them by the faculty.
- “Document, document, document!” Just like charting one’s patient care, the ADN director must document objectively concerning student and faculty behavior. It is important that all nursing faculty understand and utilize appropriate student

documentation. The documentation should be on approved forms developed by faculty so that there is absolute consistency.

- The ADN director always follows due process with faculty and students. If there is any doubt or question about legal implications, the school's legal team and/or the legal team at the CCCCCO is available to give legal advice. Even better, the ADN director can ask in advance thus preventing problems later on in the process.

## MODULE 1

### REQUIREMENTS AND DUTIES FOR DIRECTORS OF A NURSING PROGRAM

According to the California Nurse Practice Act, the requirements for the director of a nursing program are:

Section 1425 (a) “A registered nurse faculty member and the director and assistant director shall hold a clear and active license issued by the board.”

Section 1425 (b) (1) “The registered nurse director or assistant director of the program shall have a Master’s or higher degree from an accredited college or university which includes course work in nursing, education, or administration.”

Section 1425 (b) (2) “A minimum of one (1) years’ experience in a position as an administrator with validated performance of administrative responsibilities consistent with section 1420 (h)”

Section 1420 (h) "Director" means the registered nurse administrator or faculty member who meets the qualifications of section 1425(a) and has the authority and responsibility to administer the program. The director coordinates and directs all activities in developing, implementing, and managing a nursing program, including its fiscal planning;

Section 1425 (b) (3) “A minimum of two (2) years’ experience teaching in a pre-or post-licensure registered nursing programs.”

Section 1425 (b) (4) “At least one (1) years’ continuous full-time experience, or equivalent, providing direct patient care as a registered nurse.

Source: <http://www.rn.ca.gov/regulations/npa.shtml>

Please note that the Nurse Practice Act is revised on a regular basis by the BRN. More in-depth explanations are available in the Directors’ Guide supplied by the BRN. It is updated every fall and presented at the fall Joint COADN and CACN meeting.

Duties of the nursing program director include the following:

- Hires and evaluates faculty and staff for the nursing program. The hiring and evaluation processes are set by the college/university.
- Participates with faculty in the development and implementation of curriculum. The BRN will not accept any curriculum or curriculum changes without the signature of the director of the nursing program. This will be a major responsibility.
- Serves as the ultimate enforcer of the curriculum including pre-requisite and co-requisite course work. If the director approves a course as meeting the requirements of the program the BRN will accept the course. The director must sign the graduate completion

form stating that the student has completed the requirements for the programs so it is important to have clear guidelines.

- Serves as the point of communication with the BRN. Only if the director of the program is unavailable does the assistant director contact the BRN.
- Controls the program budget. The director must have faculty input into the use of the monies but is ultimately responsible to maintain adequate funding for the program. For accreditation, you need line items for faculty development, supplies, faculty, and non-capital equipment.
- Develops grant proposals and obtain grants to supplement the nursing program budget. The director must work with the financial officer and faculty at their campuses to determine what grants they should apply for and any limitations.
- Handles student issues within guidelines outlined by school and program. Again it is very important that the guidelines are clear, the students and faculty have access to them, and they have signed a form indicating that they have been informed.
- Promotes the nursing program on the campus and the community.

For a complete listing of the duties of the director refer to the DACUM available on the Health Workforce Initiative website at <http://ca-hwi.org/> (click on “Job Analysis”).

## MODULE 2

### KEY POLICIES

#### 1. ADMISSION CRITERIA

- Criteria are developed with input from the faculty.
- Criteria should reflect criteria for the college in addition to the program.
- Criteria should allow for diversity.
- Programs must use multi-criteria, which can mean pre-requisites and a minimum GPA. They include use of a waiting list with ‘first come, first served’ as a criteria or random selection.
- Schools may also use the success formula. This formula was developed by a research team for the California Community College Chancellor’s Office (CCCCO). A large, retroactive study of ADN students from 20 community colleges, using a total of 5,007 records were analyzed and the following factors were associated with successful ADN completion:
  - Overall college grade point average
  - English courses grade point average
  - Composite grade point average of core Biology courses (Anatomy, Physiology and Microbiology)
  - Number of repeats in the core Biology courses
- The following formula is used to determine a predicted probability of success:

$$(1 + \exp(-1.3907 + .3465(\text{College GPA}) + .3139(\text{English GPA}) + .267(\text{Biology GPA}) - 1.0279(\text{Biology Repeats})))$$

This is a logistic regression formula; therefore, numeric weights are attached to each factor. Moreover, the “exp” function above enables the output to display a predictive probability of success between 0 and 1. Thus, colleges using the formula can view a predicted probability of success based on an easily understood statistic – a percentage.

- To use the formula, colleges need to collect the above data from college transcripts or their own management information system and enter the relevant information into the spreadsheet that you use. The data can be entered by hand into the system and the elements are as follows.
  - Student – college student identification name or number
  - College GPA – the GPA earned by the student in all courses at or above the collegiate level (basic skills courses are not included)

- Core Biology GPA – the combined GPA of the student’s grades in Anatomy, Physiology and Microbiology
- Biology repetitions – taken as a fraction or whole number and computed as follows: if a student attempts three core biology courses and has to repeat one, then the number entered would be .33 or one over three. The numerator is the number of repeats and the denominator is the number of core biology courses (usually two or three). In another example, if a student repeats all three core biology courses once, a college would enter “1” representing three divided by three. If a student has no repeats in core Biology courses, then the college would enter a “0”.
- Once data entry is complete, a predicted probability of success is displayed. This predicted probability represents the point at which the colleges can set their probability of completion
- The score that you choose must show that you researched disproportionate impact on the students in your program. If it does cause a disproportionate impact then you must raise the score or provide some sort of remediation to enable to students to eventually get into your program.  
*(This information is courtesy of Barbara Whitney, RN, MSN, former Dean, Allied Health for California Community College Chancellor’s Office)*

- Screening may be allowed as outlined by AB 1559

**AB 1559:** This bill allowed community college nursing programs to implement a multi-criteria screening process for admission to nursing programs.

- This allows for diagnostic testing, i.e., ATI TEAS, HESI and NLN testing. The CCCCCO, by way of 3C-NAC (California Community College Chancellor’s Office Nursing Advisory Committee) with input from testing specialists, developed the assessment scores for the tests approved by the CCCCCO. These are available on the HWI website (go to: <http://ca-hwi.org/> > Resources > Nursing).
- The school must pay for the cost of the testing if the program is receiving CCCCCO grant funding. In general any assessment tests for admission to the program are provided by the program, not the student. Generally, the schools only accept the first time score and not the repeat score. Per the Chancellor’s Office/Ed Code Title 5 (Student Fee Handbook, Chapter 1) when used as an admission requirement to the program, the school must pay.
- A school may use screening criteria if the following criteria are also used;
- Academic degrees or diplomas or relevant certificates held by an applicant
- Grade-point average in relevant course work
- Any relevant work or volunteer experience

- Life experiences or special circumstances, including but not necessarily limited to the following:
  - Disabilities
  - Low family income
  - First generation of family to attend college
  - Need to work
  - Disadvantaged social or educational environment
  - Difficult personal and family situations or circumstances
  - Refugee or veteran status
  
- Proficiency or advanced coursework in languages other than English that are identified by the chancellor as high-frequency languages.
  
- Additional criteria, such as personal interview, a personal statement, letter of recommendation, or the number of repetitions of prerequisite classes or other criteria, as approved by the chancellor, may be used but are not required.
  
- A community college RN program that uses a multi-criteria screening process shall report its nursing program admissions policies to the chancellor annually, in writing. This report shall also include the weighting given to any criteria used by the program. It shall also include demographic information relating to both persons admitted to the program and the persons of that group who successfully completed the program. More information on this may be found on the CCCCCO website: [www.CCCCCO.edu](http://www.CCCCCO.edu) (see Divisions > Workforce and Econ Development > Industry Partnership Practices > Nursing & Allied Health).

As director or a nursing program and working with your faculty you will develop your admission criteria. Before implementing, per CCCCCO, the program must give public notice a year in advance. Students have the catalog rights. This means if they can prove they were pre-nursing students they have the requirements that were posted when they began taking pre-requisites on your campus. If they do not take classes on your campus for a year then the catalog rights are null and void. Confirm with your college that this is their policy.

## **2. TRANSFER**

Each program must have a transfer policy for accepting students from other programs. Again these are variable. They may be based on space available, GPA, same admission requirements as for generic students, recommendations from the previous schools and whether they left in good standing or not. It also must be determined if the courses the students have taken are equivalent to the course in your program. As previously stated, the ultimate decision is the director's. However, the director is guided by policies that were developed by the faculty with director input. If these policies are used at all times it prevents litigation further down the line. The program may require a bridge program to introduce the students to the programs theoretical concepts, policies and care plans. The bridge program may also provide an avenue to test clinical skills in order to determine placement. If so, the

bridge program should be developed by the nursing faculty. If there is no such program at the college, it would be advisable to confer with other directors about their programs.

On occasion, the BRN will require a foreign graduate to take a specific course such as Obstetrics or Mental Health. A policy should be in place that clarifies how these students are integrated into the program for the one course or possibly two courses. In some cases, colleges require a bridge course. They may also be brought in on a 'space available' basis.

### **3. READMISSION**

As for all policies, the Readmission Policy should have been developed by the faculty with your input.

Issues to consider include, but are not limited to:

- The reason for student leaving the program: Personal reasons, clinical failure, academic failure etc.
- Will remediation be required, clinical and/or academic? Who will be responsible for developing the plan? Will there be a required GPA on the remediation plan and a time limit for completion of the remediation?
- When will the student be allowed to re-enter? Will it be based on space available?
- Finally, there should be a policy in place for the number of times a student may be readmitted. Again this is up to you and your faculty
- Again, documentation is the key. Students must have a copy of all policies and they should sign a statement to that effect. Due process means they are notified in advance of failing, what they must do to improve and the consequences of failure.

Again, the decision is based on what works for the director, the faculty, the success of the student, and the safety of the community.

### **4. LVN to RN**

All schools must have a policy in place for LVNs to enter the program with some sort of advanced placement. These are some of the requirements. You may use all, just a few, or add your own as long as it meets the requirements of the Nurse Practice Act.

- Use same admission requirements as generic students.
- Admit on a 'space available' basis.

- Admit to the third semester automatically or require academic and/or clinical testing to determine the semester.
- Require that they take a bridge course.

30 Unit Option for LVN to RN: For this option, the LVN takes a maximum of 30 units in the core program and then is eligible to sit for boards. About all that can be required is the LVN license. All pre-requisite courses and bridge courses count toward the 30 unit option. Upon satisfactory completion of the program, the student is eligible to sit for state boards. If the student should pass, these are the results:

- The student has a California RN license that reads RN without degree. This will ***never*** change even if the student should get the ADN degree or BSN later.
- This license has reciprocity in only one or two other states so the student will not be able to practice much outside of the state of California.
- Once the student chooses this pathway, the student cannot change their mind.

The student should sign a document reflecting that he/she was informed of these issues.

## MODULE 3

### STUDENT ISSUES

When dealing with students, the ADN director should always work within the policies of the program. They are a protection for the director, the faculty, and the student. The student knows what to expect and the policies allow for due process.

The ADN director follows these guidelines when working with students:

- Talks to the faculty first to get some information about the student concern.
- Meets with the student and faculty together if possible.
- Takes copious notes when meeting with the student. This helps to clarify and it helps the student recognize that the director is concerned about the student.
- Gives specific examples if the student has complaints about faculty or the program. For example, the director asks the student to state what the faculty said that made the student feels like the faculty member “had it in for me”.
- Decides if it warrants further investigation. Discusses the situation with faculty and decides together if a change in the policy is necessary or if the student needs to change.
- Follows due process and makes sure faculty follow due process.
- Uses faculty-developed forms to describe student behavior and makes suggestions for change along with consequences if the student does not change. Again, all students get the same chance. The director must make it clear to the faculty that if the faculty fails to adequately document the student issues and have forms signed by the student indicating they have been informed of the issues that their decisions cannot be supported.
- Refers students to the school’s lawyer if they indicate that they are getting a lawyer. Once done, the director can no longer speak to the student concerning the issue.
- Maintains confidentiality with all student records, including notes taken during any discussion with a student.
- Documents notes that are accurate, measureable and objective. The faculty should have developed tracking forms and grading forms that are standard within the program and

used from semester to semester. The forms should reflect the objectives for the semester and expected level of performance of the student. The forms should give an accurate picture of student progression.

- Informs faculty that they cannot discuss students with others. Faculty may ask staff if student performed duties as assigned and if there were problems and that is fine. If the faculty need to discuss students with other faculty or with the director then the discussion should focus on the issues and the best way to help the student. They can discuss what the students should be doing and at what level. Discussions should always be confidential and not in public. When faculty discusses issues with students it should be in a place where they will not be overheard by others.

## **MODULE 4**

### **FACULTY ISSUES**

The ADN director's relationship with the nursing faculty will be determined by whether the director is classified as faculty or administration. A director is required to be on the hiring team and the evaluation team. The BRN holds the director ultimately responsible for his/her faculty.

The hiring process and evaluation process is determined by the college. The director has no choice in the process but is part of the process. There are various levels of faculty according to the BRN: Instructor, Assistant Instructor, Clinical Instructor, and Assistant Clinical Instructor. The BRN Directors' Guide defines the educational and work experience requirements for all levels. What the BRN requires and what the National League for Nursing Accrediting Commission (NLNAC) requires are different. BRN will allow an ADN degree with 6 years' experience as an assistant clinical instructor. However, the NLNAC will not allow anyone with less than a BSN degree to be any kind of instructor.

The ADN director should consult with the college's human resources department when working with faculty. They are there to provide guidance when dealing with difficult or ineffectual faculty members. Any documentation concerning difficult or ineffectual faculty members should be objective and should include dates, times, and a description of specific behaviors. Due process requires that the faculty is made aware of deficiencies and given time and suggestions on how to improve.

It is important to get to know one's faculty in order to determine how best to deal with them. A director may not be able to be their friend or confidant but can certainly provide guidance. Support from faculty is a tremendous source of strength for a director.

## MODULE 5

### INTERACTIONS WITH CAMPUS AND COMMUNITY

The ADN director is the liaison between the nursing program, the campus, and the community. For the campus, the director must justify costs and needs. One of the most common issues at various schools is the misconception that nursing programs are expensive. The director needs to point out the number of nursing students that help support all those pre-requisite courses in other divisions. Policies must be explained to the counselors so that they can give prospective and current nursing students accurate information. A counseling check list might be advisable. Nursing faculty should be encouraged to become members of campus-wide committees so that the campus grows in awareness of just how awesome the nursing program is.

The biggest concern, so far as community, will be the program's clinical facilities. Each year seems to bring something new.

- **Background checks:** These are now required by all the hospitals. The college will need to go with Live scan or use a reputable vendor who does background checks to get a minimum of seven (7) years background information. The program's hospital partners and /or practice consortiums should provide the list of felonies and misdemeanors that preclude the student from obtaining clinical experience in their facility. Basically any felony or misdemeanor that involves violence toward another or theft (including shoplifting) will eliminate the student from a clinical facility. The BRN requires that the program still tries to find a facility to take the student. Having a list approved by the industry partner or consortium will be adequate. It is acceptable that students are required to pay for background checks.
- **Drug Screening:** Most hospitals require a drug screen. It is important to know if they require a 10 drug or 7 drug screen. When in doubt, the program should default to a 10 drug screen. It is acceptable to require the students to pay for drug screens.
- **Immunizations:** These are variable according to the hospitals but most will require proof of the vaccines and for certain diseases a positive titer. This includes hepatitis, measles, mumps, and chicken pox. The flu vaccine is a major requirement. Another vaccine requirement that is common is whooping cough. If the student chooses they may sign a waiver but then the hospital reserves the right to refuse the student access to the clinical area.
- **HIPAA:** The issue of patient confidentiality is becoming more complex with cell phones and computers. It is critical to have a policy in place concerning use of cell phones. Many schools are forbidding the use of cell phones in the hospital. Also, cell phones may be restricted in skills lab areas since the students themselves have confidentiality rights. There are also issues when a student records a lecture or records what is

discussed in post conferences. Again, policies need to be in place to deal with this. COADN is a great organization to turn to for different procedures and policies that can help deal with this.

- **Social Security Numbers:** Many hospitals are requiring the students have valid social security numbers. Green Cards may not be adequate. The student must have a legal right to work. When in doubt, the director should check with the individual hospitals. Some schools of nursing require a social security number for admission but some schools' legal departments say this is illegal and do not collect this information. If the latter is the case, the director may be able to get around this problem if it is clear that a student cannot get a clinical placement without a valid social security number. If the nursing program is a recipient of a Department of Labor grant, the students will need to provide a valid social security number as evidence of right-to-work in the US. The Chancellor's Office Legal Office will state that if a social security number is required to get the student into the hospital for needed clinical experience then a program may require it. It is important to understand the social security number situation at both the hospital level *and* the college level. The COADN is a helpful resource concerning this issue as is the CCCCO. The BRN, however, will not take a stance.
- **Clinical Placement:** With the increased number of new nursing programs, ADN, BSN, and entry-level masters (ELM) clinical placement sites have become difficult to find. Hospitals have the right to limit numbers of students on units and limit placement based on the educational level of the student. Some hospitals are only allowing BSN students in their facilities. The ADN director will need to work with the individual facilities and look for alternate sites such as clinics and long term care facilities. The best guarantee to keeping a site is the performance of faculty and students. The director should take part in the computerized clinical placement system (CCPS) if it is utilized within the program area. There are CCPS systems throughout the state. The California Institute for Nursing and Health Care (CINHC) funded the development of a chain of these systems throughout California. Again, to find which regions in California are served by a CCPS, the COADN can be of assistance. They will know. There may not be a system in the more rural areas. Depending on the clinical placements locations needed, a program may belong to more than one CCPS. There is a fee associated with the use of the CCPS.

## **MODULE 6**

### **CURRICULUM**

Curriculum must be developed by the faculty. All curricula must be based on a comprehensive nursing theory and have a conceptual framework. The theory and framework must address the concepts of nursing, the nurse, the patient (client), health, illness, wellness, the student, community and educational philosophy. How the faculty approaches curriculum development and the conceptual framework is very individualized but the theory and conceptual framework must be reflected in the program and course objectives. Something to be aware of is that the nursing process is not considered the nursing theory or the conceptual framework. The nursing process is applied within the structural guidelines of the theory and the framework.

The CCCCO developed a curriculum model that is available through the HWI (<http://ca-hwi.org> > “Product Ordering” tab). It was developed by ADN faculty and directors and the BRN. You may use all or part of it. It was developed so that whatever theory and conceptual framework is used, it can be adapted. For a new program, new faculty, and new director it can be a good starting point.

The BRN does not require minimum hours in any one topic such as pediatrics or mental health but the students must meet the objectives for these topics and be prepared to pass the NCLEX-RN and function as a beginning staff nurse on the units. The program may choose to put their time into clinic, theory and/or pharmacology. (You cannot do any more than 25% of your clinical time in any one course in the skills/simulator lab.) The latest requirements for the nurse practice act want the students to gain hands-on experience with real, live patients.

Pre-requisites required for the program are determined by the faculty but their reliability and validity must be proven for the CCCCO. Generally if it is used by other programs or required in the CSU system then you have met the requirements to be able to use the pre-requisites.

3C-NAC developed standard pre-requisites for ADN programs several years ago in response to the need to ease transfer among the schools. These four pre-requisites include:

- Anatomy 4 units
- Physiology 4 units
- Microbiology 5 units
- Transferrable English Course 3 units
- 2.5 GPA

Many schools have adopted these requirements. However, many have not so students have a difficult time transferring even if they are in good standing.

## MODULE 7

### DATA COLLECTION

Data collection is major requirement for nursing programs. The data is used to develop grant proposals, validate pre-requisites, to demonstrate success and/or failures in the program, and to provide information to various agencies such as the BRN. The BRN has an annual report due every **November 15**. This asks for information on students and faculty. Data requirements include:

- Number of students applying
- Number of students that met admission requirements
- Number of students actually admitted
- Ethnicity and gender of students
- Retention/Attrition. To determine these percentages, the director will need the number of students admitted to the class and the number of students that remain in that class with completion projected in the 2 years. That is retention. Attrition is the number of students that left that class. Even if they return they are counted as attrition since they won't complete as scheduled.
- NCLEX-RN pass rate
- Number and types of clinical facilities
- Shifts on which clinical experience occurs
- Days of week for clinical rotation
- Number of faculty – FTES. You will need to differentiate between full time and part time.
- Education level of faculty
- Age, ethnicity and gender of faculty
- Release time for administrators of the program
- Number of FTES for office staff
- Number and amount of money generated by grants and donations.
- Difficulties encountered with student retention, faculty recruitment and retention, finding clinical facilities and funding.
- Clinical Simulation facilities
- Articulation agreements
- The ADN director must be able to project enrollment for the future based on finances, space, clinical facilities and faculty.

For other agencies such as CINHC, or Song Brown (offers grants) you need to track employment of the students after graduation.

The BRN and other accrediting agencies request student satisfaction surveys during the program and after the program. They also request employer satisfaction surveys. The director should also have student evaluations of the clinical facilities used.

## MODULE 8

### ACCREDITATION

The BRN does not accredit programs. It approves programs. The requirements are well outlined in the BRN directors' guide. They have just completed moving the large self-study to every 8 years with an interim visit every 4 years. It is to the ADN director's advantage to view this as a way to learn about the program and the school. The director may find additional, helpful uses for the data such as justification for additional office staff, assistant administrators, faculty, and classroom space. The faculty must be involved in the self-study but someone needs to take responsibility to make sure it is cohesive. ADN directors should work closely with the NEC to make the process as painless as possible. The NEC generally tells the director what she/he will be examining and what the concerns may be.

NLNAC uses a form of accreditation that is more reflective of WASC accreditation. They are more stringent in some ways. Again, the director will learn from it and benefit from it. Directors from other NLNAC approved programs will share what they have learned from the process and from their self-studies. This information is very helpful for the new ADN director. NLNAC will assign a resource person for the ADN director's program. The director should use them for even the smallest question. The director should also attend the information sessions on accreditation offered by NLNAC since they are very helpful. The director may want to assign a faculty to chair the study. This makes the accreditation process more faculty-driven.

With all accreditation self-studies, state the facts and the documentation. Visitors should not have to search for anything or to make a leap of faith or an assumption. The director should make sure facts are the same in each section of the self-study. The facts should not vary according to the standard. The study should not be embellished with lots of words. The visiting members of the NLNAC get tired of reading and don't want to have to search for the facts. All effort should be made to maintain a collegial relationship to adversarial discourse. It does not do any good to put the visitors on the defensive. Instead, the director should simply say, "I will fix it".

Fellow directors are generally happy to share their self-studies with new ADN directors and to provide all sorts of support and advice. New ADN directors should pull on this resource liberally.

## MODULE 9

### GRANTS

Most programs supplement their programs with grants. The more common grant awarding agencies include:

- The California Community College Chancellor's Office usually using state and EDD funds.
- Health and Human Resources Agency (HRSA): This is a federal grant and requires the school carry national accreditation (NLNAC)
- Department of Labor (DOL): This is a federal grant and requires the school carry national accreditation.
- CINHC: These grants usually go to partnerships. CINHC writes the grant and then sub-grants.
- Song Brown: This organization provides grants to nursing programs for implementing growth and new programs. It prefers programs with national accreditation.

Suggestions for writing grants:

- Determine the resources available at the school. These include grant writers, researchers or research department, and people in the financial office that understand tracking grant funds.
- Every grant requires a Return on Investment (ROI) and /or a statement of sustainability. Is the school prepared to continue the program when the grant funding ends? This includes faculty. Are grant funded faculty tenured or short term. These discussions should be done before writing the grant.
- The director should discuss with the faculty what their concerns and needs are. Can they be met in some way through funding by the grant?
- The director should develop a wish list with associated costs and then prioritize it. The next step would be to determine what items are absolutely necessary for the success of the grant.
- The director should work with the school's financial office so that indirect costs and any other hidden costs are included and not overlooked.
- The director should read the *Request for Proposal* carefully and then respond to *all* the requirements. When writing the response, the director should make the school sound outstanding, include supporting data, and complete the necessary research.

- The director will need to write very clear, measureable objectives. The objectives must have completion dates. Many agencies require the name and/or title of the person(s) responsible for the objective. It is vital to have the support of the faculty during the planning stages. It is very difficult to implement a grant without faculty support.
- The director should plan for data collection and state what data will be obtained.
- The director will need to have letters of support from your contracting facilities.
- The director will need to have letters of support from industry partners. The director might consider sending out letters or emails to industry partners early in the grant season explaining the objectives of the grant funding for the year. One can give them the option for their own letter or send them an electronic letter that allows them to fill in the blanks. The director will need a hard copy on letterhead though, for the grant proposal. It is important to make copies and keep the original for the year.
- The director should be prepared to share the results of your project. The director will need to determine ahead of time how those results will be shared.
- Reporting requirements for grants vary according to the funding organization. The director can refer back to the data collected. Whatever is reporting is required, is absolutely necessary. For instance, Song Brown will deny a grant if there is no data on job placement of the program's graduates. As a part of the ongoing grant activities, you may want to ask for personnel to track the data.

## MODULE 10

### KEY LEGISLATION

- **SB 1393:** Students with Existing Baccalaureate or Higher Degrees Seeking a Nursing Degree from California Community Colleges. This bill excuses these students from those courses which are not specifically part of the registered nursing program. This means that students with a bachelor's or higher degree from an accredited, California college do not have to take courses that are not part of the core program as noted to the BRN. So if a college requires Political Science and they do not have the course as part of their previously earned degree they do not have to take that course. However, if a college requires a specific course for Speech as part of the communication requirement for the BRN and the student did not take that class they must take it in order to complete the nursing program.
- **AB 1559:** This bill allows community college nursing programs to implement a multi-criteria screening process for admission to nursing programs.
  - This allows for diagnostic testing, i.e., ATI TEAS, HESI and NLN testing.

A school may use screening criteria if the following criteria are also used;

- Academic degrees or diplomas or relevant certificates held by an applicant
- Grade-point average in relevant course work
- Any relevant work or volunteer experience
- Life experiences or special circumstances, including but not necessarily limited to the following:
  - Disabilities
  - Low family income
  - First generation of family to attend college
  - Need to work
  - Disadvantaged social or educational environment
  - Difficult personal and family situations or circumstances
  - Refugee or veteran status

- Proficiency or advanced coursework in languages other than English that are identified by the chancellor as high-frequency languages.
- Additional criteria, such as personal interview, a personal statement, a letter of recommendation, or the number of repetitions of prerequisite classes or other criteria, as approved by the chancellor, may be used but are not required.
- A community college RN program that uses a multi-criteria screening process shall report its nursing program admissions policies to the chancellor annually, in writing. This report shall also include the weighting given to any criteria used by the program. It shall also include demographic information relating to both persons admitted to the program and the persons of that group who successfully completed the program.

**SB 139:** This bill is a cleanup bill that addresses the fact that a program does not have to have a grant to do assessment testing. It also states that part time faculty can work more than 60% for 4 out of 6 semesters.

**AB 1295:** This bill was developed to streamline the articulation of ADN students through BSN programs. It states the CSU's cannot require students to repeat courses that they have already taken in the ADN program.

**AB 661:** This bill is currently on hold. This would allow community colleges to offer one Bachelor's Degree in a technical education program from their school. This would allow for a BSN from a community college.

**SB 1440:** This is another bill designed to ease the articulation of students from community colleges to the universities. "The Student Transfer Achievement Reform Act" (SB 1440 – Padilla), signed into legislation on September 29, 2010, enables the California Community Colleges and California State University to collaborate on the creation of Associate in Arts Degree (AA) and Associate in Science (AS) Degree transfer programs. This new law requires community colleges to grant an associate degree for transfer to a student once a student has met specified general education and major requirements for the degree. Upon completion of the associate degree, the student is eligible for transfer with junior standing into the California State University (CSU) system.

Students are given guaranteed admission into the California State University (CSU) system, and further, are given priority consideration when applying to a particular program that is similar to the student's community college major. The law prohibits the CSU from requiring a transferring student to repeat courses similar to those taken at the community college that counted toward their associate degree for transfer. It is expected that community college students will be able to declare an interest in pursuing specific transfer AA/AS degrees beginning fall 2011-12 academic year." (*California Community Colleges Chancellor's Office and California State University website, first page, SB 1440 Associate Degrees for Transfer*).

## MODULE 11

### ORGANIZATIONAL SKILLS

The new ADN director who has reached the position of director/dean of a nursing program is most likely bringing many organizational skills to the new position. However, these suggestions may still be of help:

- Priority lists are helpful. Lists may be based on due date and on importance. Lists may be developed using due dates for task breakdown. Many tasks involve multiple steps. These steps should be broken down by the date to be accomplished. Being able to cross tasks off the list is very reinforcing!
- Phone calls can demolish any organization plan. Answering the phone should be avoided when in the middle of a project. Caller ID helps with screening.
- Phone messages should be recorded in a notebook that is kept close at hand. This prevents a loss of messages and provides a way to track calls, those that have been responded to, and the results of that response.
- Blocks of free time for completing projects should be scheduled in with other appointments. Nothing else should be scheduled during those times. This provides the director uninterrupted time to accomplish those tasks that require concentration.
- Emails are also time sinks. It helps to turn off the emails when working on a project. A major loss of focus occurs when one has to leave a project in order to answer email.
- Everyone has a favorite method of organizing information. The organized director finds a method that works and then sticks to it. The ADN director will need to keep files of all of grant materials. The director should also keep copies of all accreditation self-studies for future reference as well as copies of all letters of support from the various agencies. A good rule to follow is, “When in doubt, save it”. Ideas for filing and organizing information include:
  - Electronic organization allows for easy access. Documents may be scanned and saved as electronic files.
  - For hard copy, files or notebooks or notebooks work well. If using notebooks, dividers are very helpful.
  - Student files may be on microfiche. The Office of Civil Rights in Chancellors office like student files held for 7 years.

## **MODULE 12**

### **ANACRONYMS**

**AACC** – American Association of Community Colleges

**AACN** – American Association of Colleges of Nursing

**ACNL** – Association of California Nurse Leaders

**ADN** – Associate Degree Nursing

**ANA** – American Nursing Association

**ANA/C** – American Nursing Association/California

**AONE** – American Organization of Nurse Educators

**BRN** – Board of Registered Nursing

**BSN** – Bachelor of Science in Nursing

**CACN** – California Association of Colleges of Nursing

**CCCAOE** – California Community College Association for Occupational Education

**CCCCO** – California Community College Chancellor's Office

**CINHC** – California Institute for Nursing & Health Care

**COADN** – California Organization of Associate Degree Nursing Directors

**DOL** – Department of Labor

**EDD** – Employment Development Department

**ELC** – Education Licensure Commission

**ELM** – Entry Level Masters

**HWI** – Health Workforce Initiative (Formerly RHORC – Regional Health Occupations Resource Center)

**LAO** – Legislative Analyst's Office

**MSN** – Masters in Science of Nursing

**NEC** – Nursing Education Consultant

**NLN** – National League for Nursing

**NLNAC** – National League for Nursing Accrediting Commission

**3C-NAC** – California Community Colleges Nursing Advisory Committee

**MODULE 13**  
**CONTACT INFORMATION**

ACNL	<a href="http://www.acnl.org">www.acnl.org</a>
BRN	<a href="http://www.rn.ca.go">www.rn.ca.go</a>
CCCCO	<a href="http://www.cccco.edu">www.cccco.edu</a>
CINHC	<a href="http://www.cinhc.org">www.cinhc.org</a>
COADN	<a href="http://www.coadn.org">www.coadn.org</a>
HWI	<a href="http://ca-hwi.org">http://ca-hwi.org</a>
3C-NAC	<a href="http://ca-hwi.org/3cnac.cfm">http://ca-hwi.org/3cnac.cfm</a>