

Yesterday, Today, and Tomorrow

School of Nursing
Program Review
Spring 2022



Yesterday's gifts

- Partnership between MPC and CHOMP [Montage Health] since 1982
- Unique collaboration
- Equal contributions
- Grants
- Bequests
- “Fringe benefits”
- Governed by MCCSN Steering Committee
- Supports local recruitment of both students and faculty



MPC



Approved, Accredited and NSNA-Stellar



California Board of
Registered Nursing

Visit completed April 2022!!

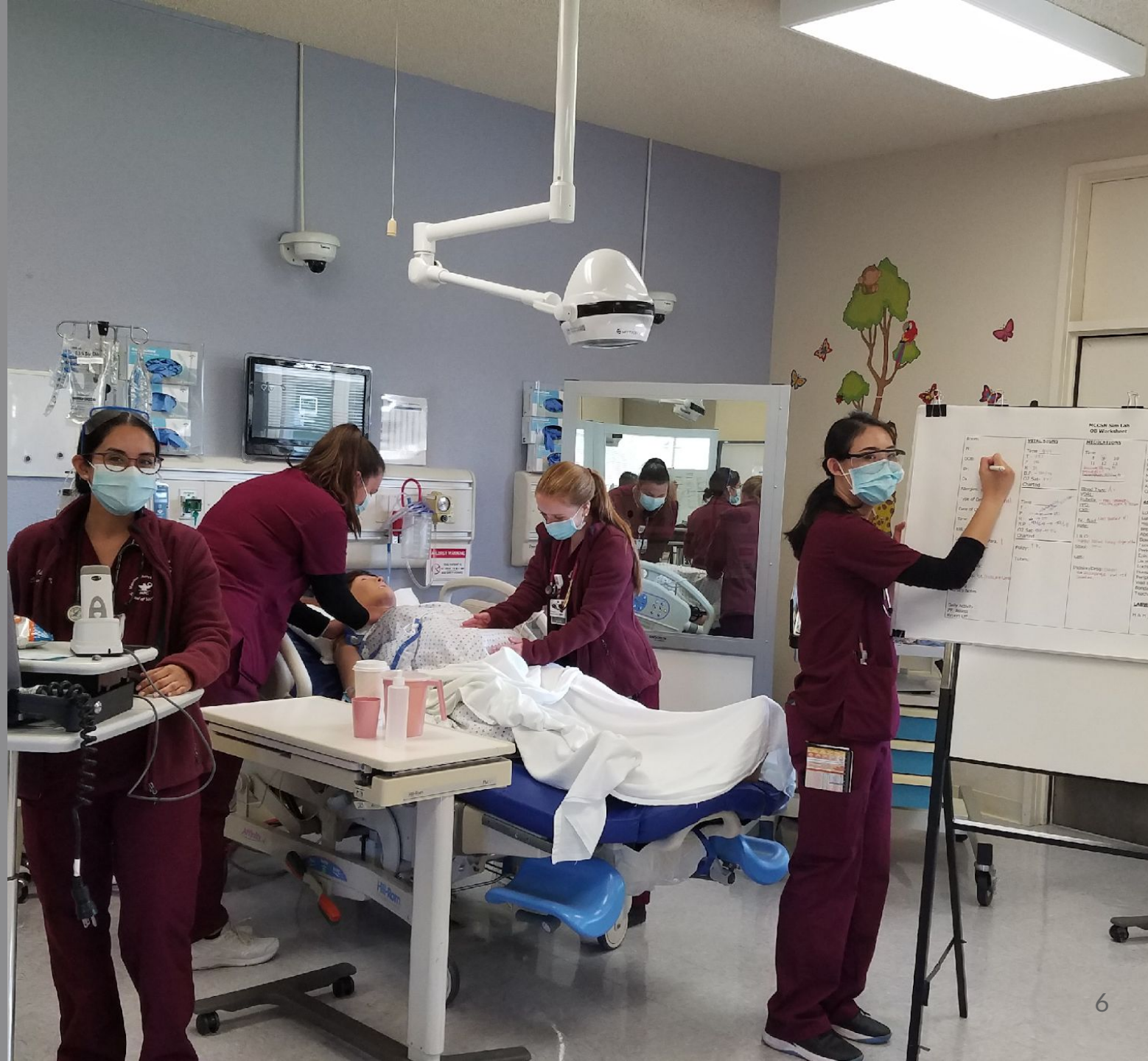


The Old West Side

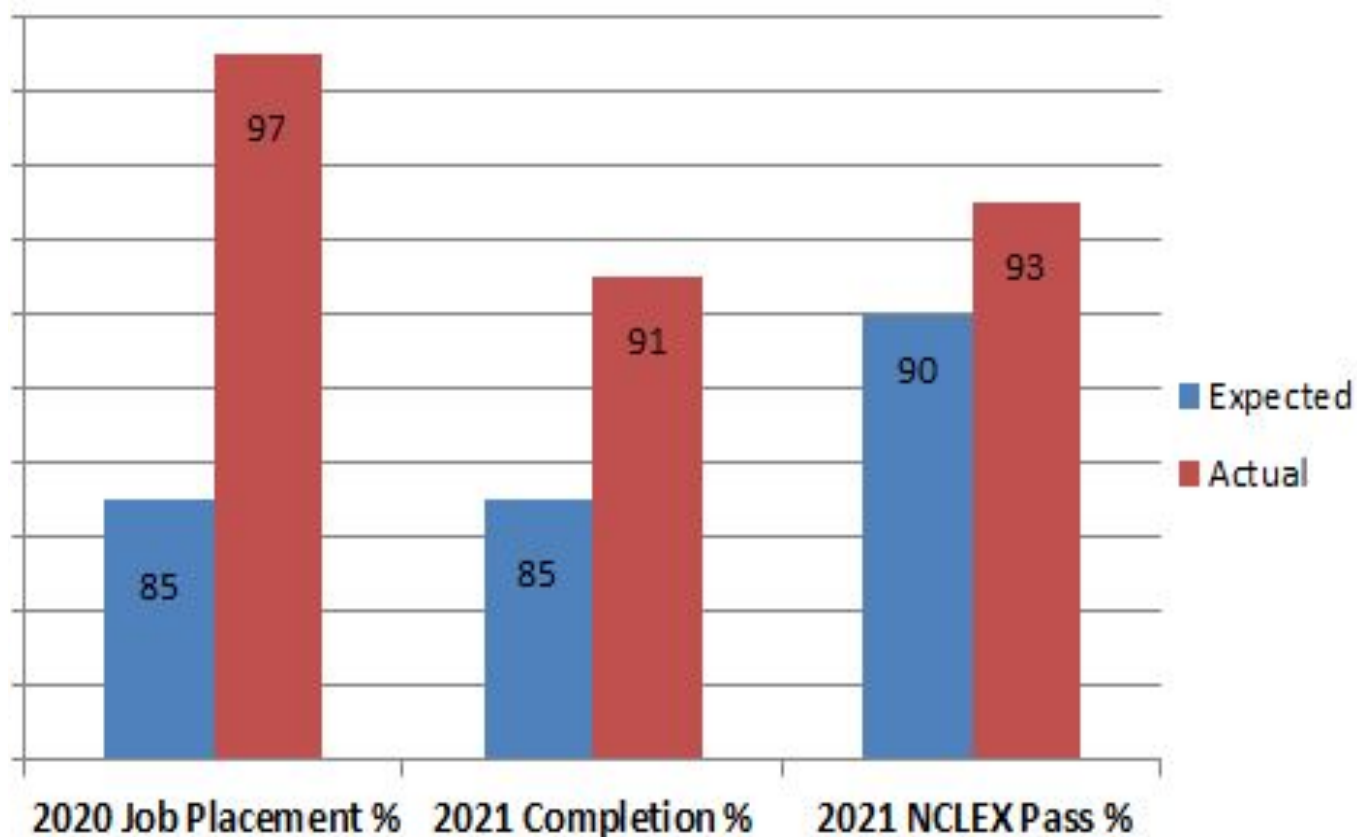


Facilities

- 3 smart classrooms
- Learning Resource Center (Skills Lab) and M*A*S*H Unit
- Clinical Simulation Center
- Office space for faculty
- Physical capacity for 80-100 students (total) depending on whether instruction is entirely face-to-face or hybrid



Outcomes we take very seriously!



ELA's are compared to state and national means using *Mountain Measurement National NCLEX Reports* and annual *Newly Licensed Survey* results by HealthImpact.org

“[End of Program Learning Outcomes](#)” are measured through standardized tests and clinical performance evaluation.

www.mpc.edu/nurs



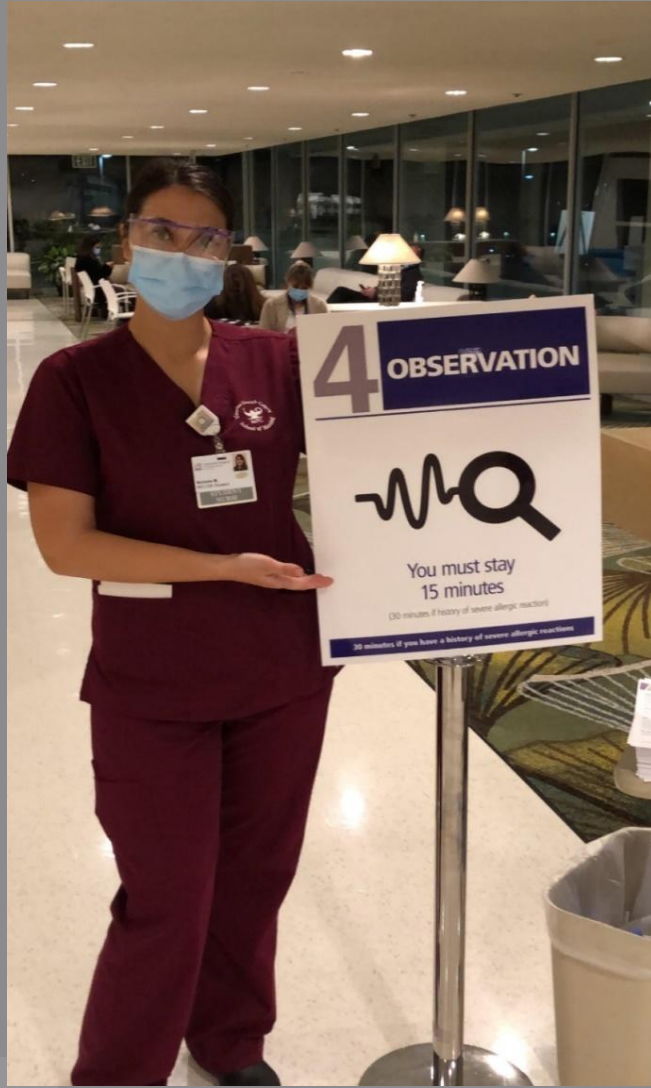


Today's News

COVID Adjustments



More COVID Adjustments



Enrollment Expansion

- Final BRN approval in November to enroll up to 8 additional students each year, for a capacity of 80 total.
- Cohort of LVN-to-RN applicants was pre-selected from previous pool and has joined the Class of 2023 this Spring



CSUMB Progressive Enrollment

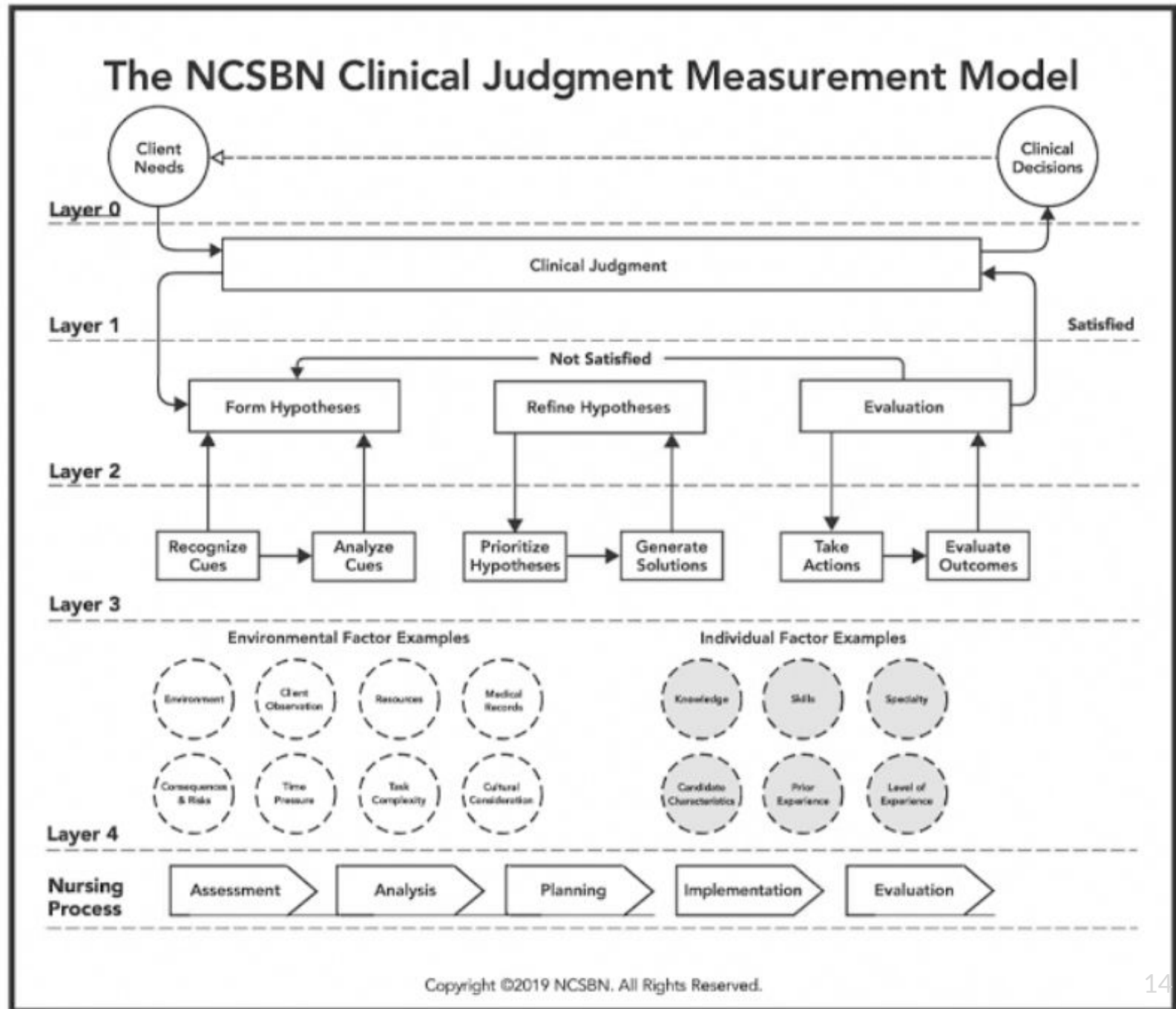


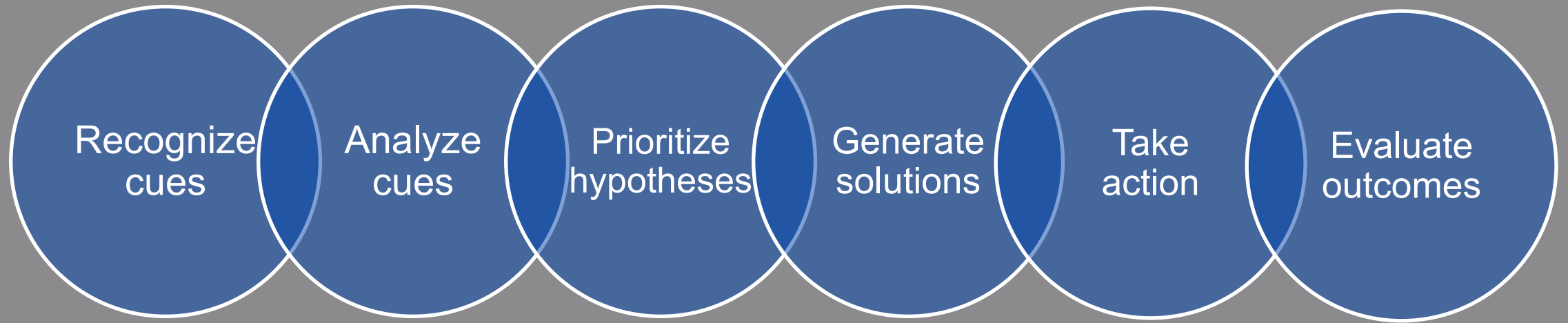
California State University
MONTEREY BAY



- Approval expected for fall 2022 launch
- BSN completion after one summer and one fall semester following the ADN program (for students who are “CSU-ready”)
- Counselors alerted to the need to add info about this option/readiness when meeting with prospective applicants
- DRAFT PATHWAY

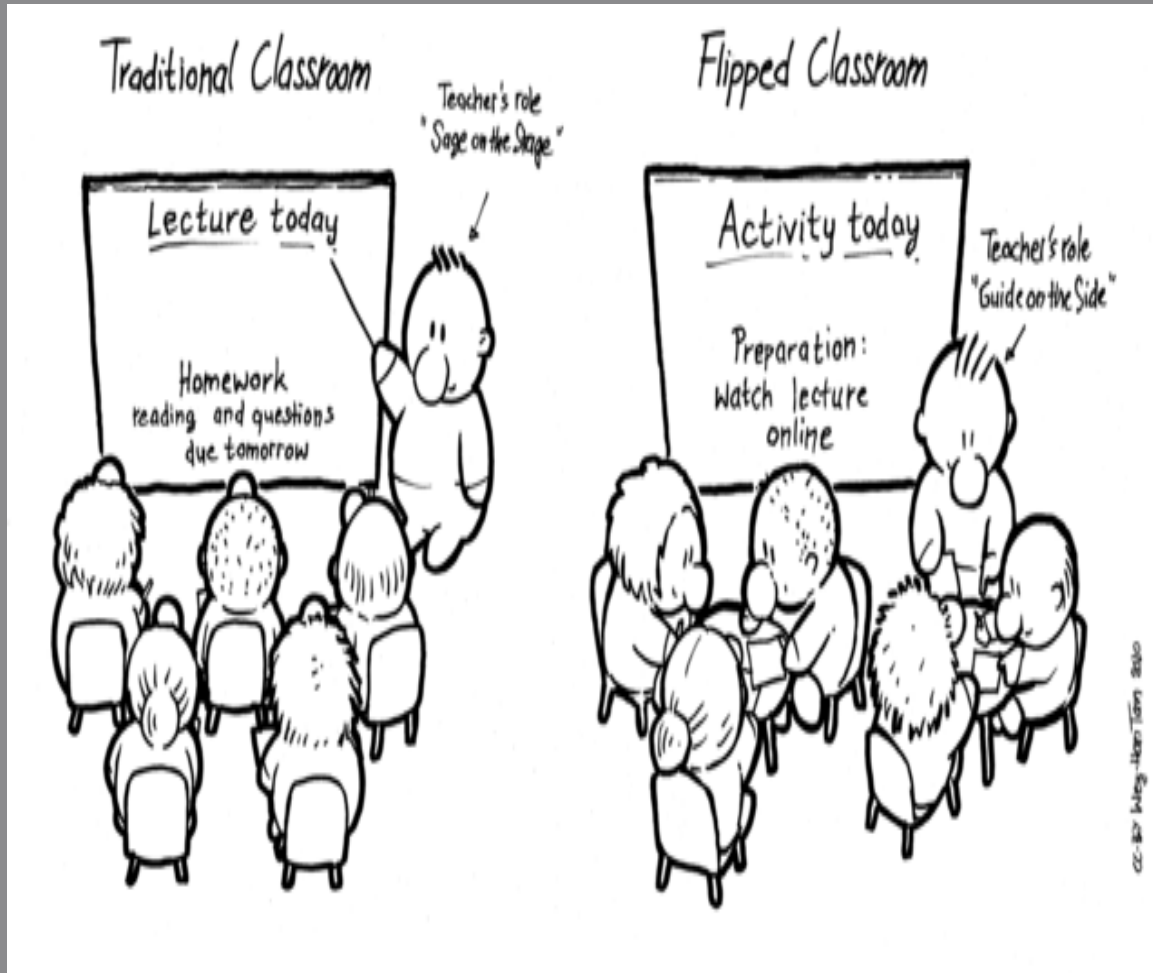
Preparing Nurses for Tomorrow: NextGen NCLEX





Transitioning from the “nursing process’ to the 6 cognitive skills required to make clinical judgments

Challenge #1: How to “teach clinical judgment?”



ACTIVE LEARNING STRATEGIES:

- Flipped/scrambled techniques
- “Ticket to enter” confirms “pre-work”
- Clinical imagination: simulation, case study
- Socratic Questioning,
- Compare & Contest, (Venn Diagram, Concept maps)
- Guided reading in small groups to solve a problem
- Student pairs write questions or case studies to each other and pass to another pair
- Video clip to call out patient cues

Challenge #2: Mastering Alternative Item Types

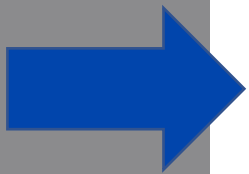
New NCLEX Question Types


- Extended Multiple Response
- Extended Drag and Drop
- Cloze
- Enhanced Hot Spot
- Matrix/Grid

The nurse is caring for a 78-year-old female in the Emergency Department (ED).

Nurses' Notes

- 1000:** Client was brought to the ED by her daughter due to increased shortness of breath this morning. The daughter reports that the client has been running a fever for the past few days and has started to cough up greenish colored mucous and to complain of "soreness" throughout her body. The client was recently hospitalized for issues with atrial fibrillation 6 days ago. The client has a history of hypertension. Vital signs: T 101.1° F (38.4° C), P 92, RR 22, BP 152/86, pulse oximetry reading 94% on oxygen at 2 L/min via nasal cannula. Upon assessment, the client's breathing appears slightly labored, and coarse crackles are noted in bilateral lung bases. Skin slightly cool to touch and pale pink in tone; pulse +3 and irregular. Capillary refill is 3 seconds. Client is alert and oriented to person, place, and time. The client's daughter states, "Sometimes it seems like my mother is confused."
- 1200:** Called to bedside by the daughter who states that her mother "isn't acting right." Upon assessment, client difficult to arouse, pale, and diaphoretic in appearance. Vital signs: T 101.5° F (38.6° C), P 112, RR 32, BP 90/62, pulse oximetry reading 91% on oxygen at 2 L/min via nasal cannula.





The nurse has reviewed the Nurses' Note entries from 1000 and 1200 and is planning care for the client.

- For each potential nursing intervention, click to specify whether the intervention is indicated, nonessential, or contraindicated for the care of the client.

Potential Intervention	Indicated	Nonessential	Contraindicated
Prepare the client for defibrillation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Place client in a semi-Fowler's position.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Request an order to increase the oxygen flow rate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Request an order to administer an intravenous fluid bolus.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Request an order to insert an additional peripheral venous access device (VAD).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The nurse has reviewed the Orders from 1215.

➤ Click to highlight below the 3 orders that the nurse should perform right away.

1215:

- insert an indwelling urinary catheter
- vancomycin 1 g, IV, every 12 hours
- computed tomography (CT) scan of the chest
- 0.9% sodium chloride (normal saline) 500 mL, IV, once
- laboratory tests: blood culture and sensitivity (C & S), complete blood count (CBC), arterial blood gas (ABG)

Giving Back

From vaccine clinics to gala events to Big Sur Marathon aid stations, MCCSN students are grateful to residents of the Monterey Peninsula and surrounding communities!

[MPCNAPS](#)



Tomorrow's Work

Tomorrow's List of Challenges

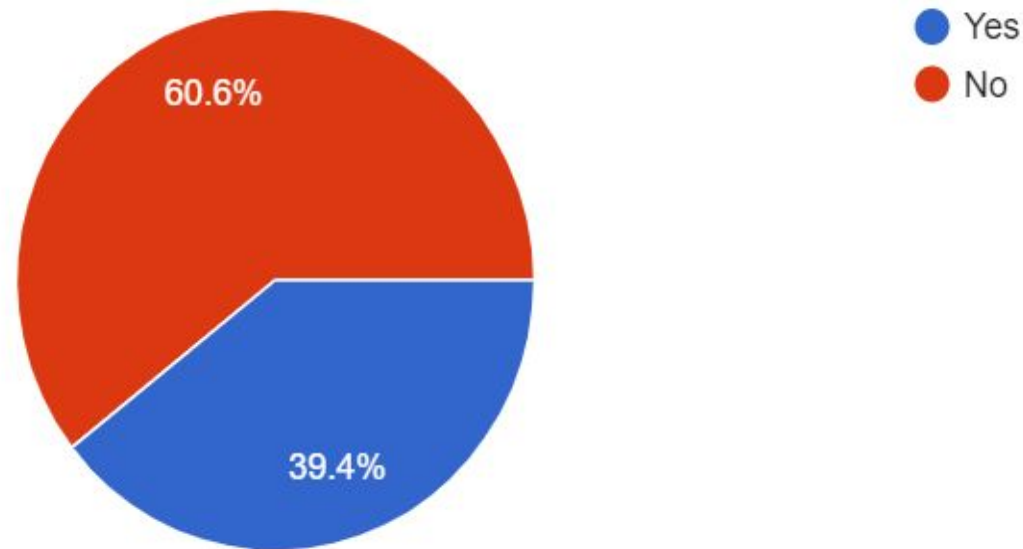
- Faculty Succession
- Director Succession
- Progressive Enrollment for BSN completion
- Enrollment Expansion
- Technology to accommodate what pandemics bring
- Equity in the selection process



Percentage of Students Co-Enrolled for BSN

Are you currently co-enrolled in a BSN program?

33 responses



Local availability of “Progressive” collaborative model will pave a faster pathway for BSN completion!



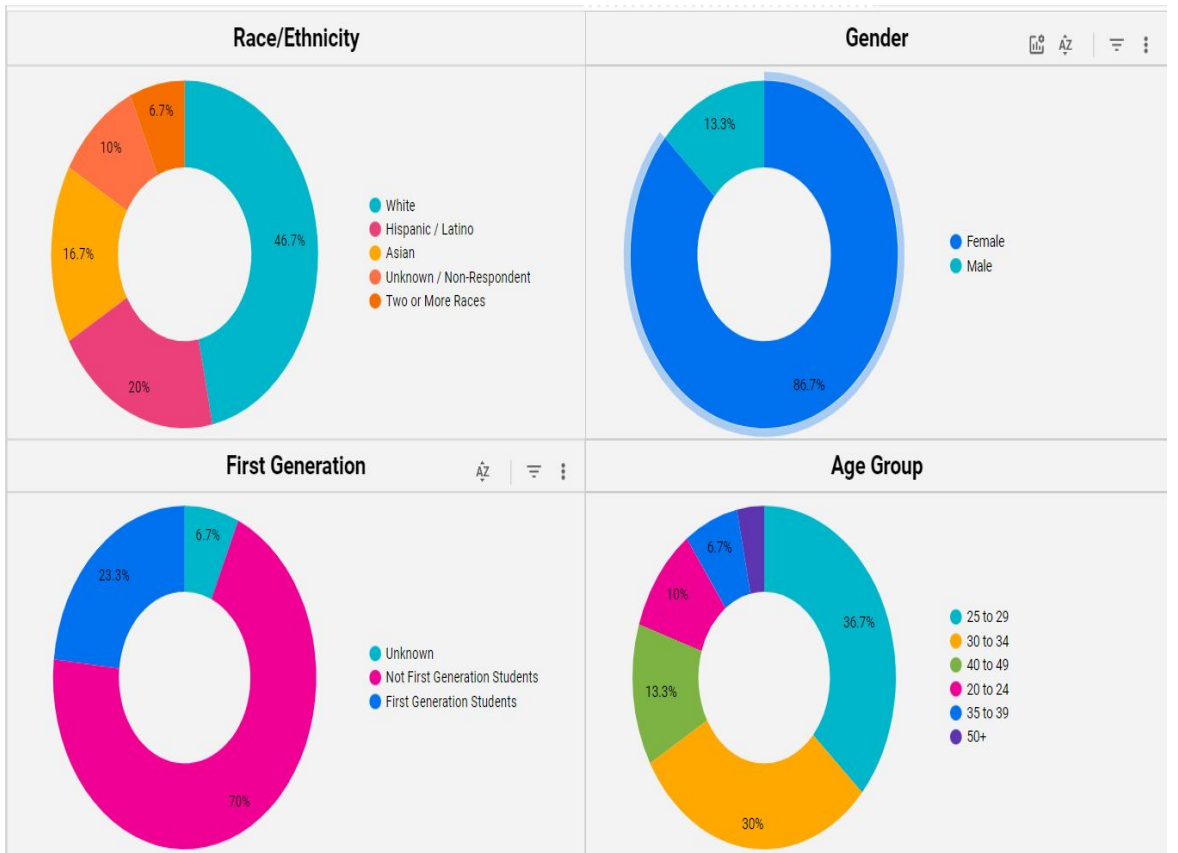
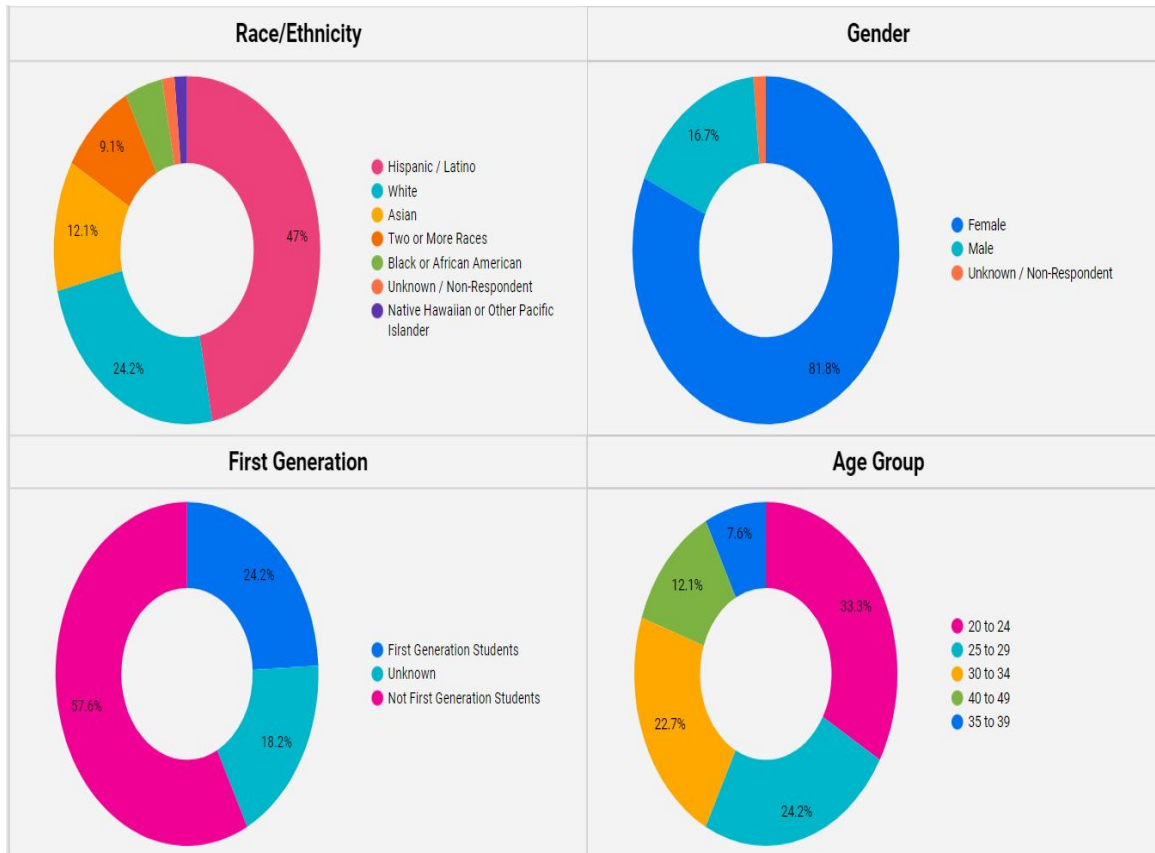
Enrollment Management

- Nursing workforce needs prominent in Central Valley and on the Central Coast
- Future RN demand for 180,053 FTE RNs in hospitals and 365,289 FTE RNs statewide by 2035
- Local hospitals experiencing higher than usual vacancy rates
- Tenuous balance with the need for faculty and clinical sites and preceptorships

Technology Updates

- Smart(er) classrooms
- Continued maintenance of physical hi-fi manikins PLUS virtual simulation
- Meaningful utilization of electronic health records
- Simultaneous face-to-face and remote classroom





NURS 100

NURS 52C

In search of equitable representation of the MPC student population in the nursing program



With gratitude for 40 years

Maurine Church Coburn School of Nursing



Questions??

www.mpc.edu/nurs