

Nashua Community College
 Department of Nursing
 Advisory Board Meeting Minutes
 April 10, 2017
 8-9am

Present: Carole Boutin, Karen Tollick, Lisa Gray, Terry Szugda, Terry Williams, Rachel Davis, Peggy Moriarty-Litz, Deb Costa-Nino, Jeanne Hayes, Linda Abbott

	Discussion	Action	ACEN
Introductions Updates Members	Welcome from Dept. Chair Carole Boutin; Introduction to Terry Szugda new nursing department executive secretary; Linda Abbott SNHMC wound care; Rachel Davis SNHMC outpatient - potential site for students(contact person Doreen Mealey at Foundation Medical Center); Jeanne Hayes Rivier (just started new community health course, also teaches research advisory) Deb Costa- Nino - trying to update program for nursing program; Sue Kinney St. Anselm (Director of RN to BSN program - updates to buildings; general under grad program went to Costa Rica for community nursing program over winter break for clinical experience)		
Minutes of meeting	Peggy Moriarty Litz moved to accept minutes; second by Jeanne Hayes; Approved with one spelling correction (Moriarty)		
Announcements	3 FT faculty have resigned (one in December, one in March, one will continue as adjunct next year); one adjunct started at the start of this semester but due to medical issues is no longer with the program; We have two full time and one adjunct position available.		

ation Report	<p>Lab is used for scheduled lab most days in the fall; spring semester students are mostly in the clinical setting. Both semesters students are notified of times for open lab which is an opportunity for them to come and work on self identified learning needs. Students requiring remedial work receive a lab prescription from their clinical faculty and come to lab for one on one work to attempt to bring them to the level the should be functioning at. Challenges include maintaining functioning equipment and supplies within budgetary allotment; faculty turnover and training; technology upgrades and glitches.</p>		
rts	<p>FRESHMAN: 23 Freshman; 6 at academic risk; Students are encouraged to independently seek out faculty SENIOR: 16 Senior students - down from 19; one student at academic risk; Mid Term ATI predictors - 5 were below; SNHU conference - discussion re: how to prep for NCLEX, we will have HURST review here and our students will receive a \$75 discount; currently students are working on Senior capstone project; advertising on FACEBOOK; Topic is Management of Mental Health (5 different speakers with various backgrounds); 4 schools coming in to speak with our graduating students re: continuing on to BS in nursing; Pinning - Thursday May 18th from 5pm - 8pm; Pharmacology there are 17 students enrolled, all are passing</p>		
ingale	<p>Terry Williams is very new in the club advisor role. Reported club activities this year have included joining the Rotaract Club in volunteering with the "Give Kids the World" trip to FL; vendor bingo, various fund raisers such as a food drive to benefit the Nashua Soup Kitchen and they are looking to donate funds to a local charity.</p>		
ng	<p>May 18th from 5pm - 8pm</p>		
ission	<p>Question re: Drug testing SNHMC - just once in the fall (annually);</p>		

	<p>TB once (as a freshman) should be sufficient (two step required), in areas that TB is more prevalent testing may be more frequent, could be agency dependent; all agreements are done annually;</p> <p>Background check (one time) - checking into this and will update as information is obtained; CPR and immunizations or proof of titre; "Fit for Duty" - policy for impaired nursing staff (drug, alcohol, state of mind etc.); NCC would like to have something in place to follow that is similar to the clinical facilities; discussion re: how this cost will be paid for - currently is a gray area</p> <p>May 5th at SNHMC: Conference \$5 fee; food provided; - Pauline Laudebauche (one of the speakers on Social Media) ; Moral Distress; Social Media and Compassion Fatigue</p> <p>St. A's - drug screening annually; students could also be randomly tested; Social Media policy - situations where students are not clear on what is appropriate or what is not appropriate to post;</p> <p>SNHMC: There are a few grad programs that require the same as above; also trying to implement a Code of Conduct Policy i.e. discipline on licensure and how to handle this; RN to BSN is on line;</p> <p>Grad program - there is a face to face; boots on the ground and a third program on line portion;</p> <p>Discussion re: criminal background check - background check is only as good as history; do we re-check if information is learned about students; case by case basis depending on level of severity</p>		
Program Evaluation	<p>Pass Rate of 80% last year: Dept Chair has sent letter as requested to NH BON; we have made changes:</p> <p>In Fall, instead of having freshman students bring in ticket from ATI to lab, we are now testing at the start of lab; NURS140N ATI tests</p>		

were assigned to a unit (not optional), it is not counted toward grade; Discussion re: consider using this as a portion of the grade; MCC using it as a portion of the grade; not allowed to re-take the exam; past ATI exams can be open and re-taken from previous years for current students; recommendation is that the most valid testing is what the school produces based on their curriculum; to tie comprehensive predictor to graduation should be a motivating factor for students;

New NH BON Chair, does not have a background in education

NCC has re-instituted interviewing our nursing class; we are maintaining minimum standards for admission to the program; discussion with students - students stated they "wished they had interviews"; Discussion: Interviews were dropped on recommendation of ACEN; Interviews are only done with students who have completed application materials on time and meet criteria; we are not seeing the large number of qualified students as we have in the past applying to the program; diverse population - is there a language barrier?; are there processing issues?; this is upsetting as this same gap can happen in the clinical area;

DC asked for Suggestions for programs:

SNHU student conference (NHNA sponsored) - excellent conference for students, wide variety of speakers, keep on radar for next year. We would need to budget for this for next year.

Third Annual Alzheimer conference April 21st 9:30 - 3:30. Cost is free but we need names for attendance purposes; contact hours will be awarded; Suggestion to connect with St. Joes SON for this conference if there is space availability;

<p>Does anyone know what became of the LPN programs in NH? There were two proprietaries and nursing homes in NH are desperate for LPN's. DC is currently doing doctorate work on geriatrics - care model needs to change for this population. This is on the federal level for reimbursement; boils down to numbers - one nurse cannot provide care for 25 patients adequately; we don't translate nursing levels across the spectrum to the public; for various reasons some people are not able to complete a Bachelor's program; Discussion that we need a higher entry level education for nurses; in the next 4 years, the average age of the patient will be 80. LPN's AD's and BSN's - AD's are generally older students and at a higher level of cognitive development, the very young students do not have the brain maturity and life experience and are less able to deal with multiple concepts and abstract reasoning</p> <p>Wound Care Clinic at SNHMC- now have two nurses, we may have the opportunity to send students to this clinic; people are showing up with chronic wound and diseases;</p>		
<p>Meeting adjourned at 9:15pm. DC asked for suggestions re: timing of next meeting - various opinions regarding morning or afternoon meetings.</p>		

Nashua Community College
 Department of Nursing
 Advisory Board Meeting Agenda

Meeting Minutes

Wellness Center Conference Room

November 17th, 2017

7:30 a.m. - 8:30 a.m.

Attendance: C. Boutin, Terri Szugda, Tyler Waite, Jennifer O’neill, Mary Heinzl, Deborah Castonino (NCC: Life Sciences & Chemistry), Sue Kinney (St.A), Ann Marie Trowbridge (3E Southern NH Medical Center), Rachel Davis (Southern), Linda Abbott (Wound Care – Southern), Lucy Sear (Home Health and Hospice); Gina (SNH Area Education Center); Peggy Moriarty (SNHU)

Topic	Discussion and Relevant Data	Actions/Person Responsible	Evaluation
Introductions & Updates	<ul style="list-style-type: none"> -Appreciation for all those who could attend the meeting -request for any new contact information 	<ul style="list-style-type: none"> -updated contact information sheet passed around 	
Program & Facility Updates	<ul style="list-style-type: none"> -Southern NH Update: Focus on Retention Improvement (I.e. Transition Bring Back (Simulation, Didactic, Classroom)- New 6 month orientation -Southern Immediate/Urgent Care: Increase in size, opened Pepperell, MA site; seeing a transition from Primary Care to; Avoidance of ER inappropriately showing up to Urgent Care Centers 2/2 insurance concerns; 6 bed annex for transition patient cases; trend with newer triage staff recommending immediate care > emergency center when indicated to avoid overburden on emergency center medicine -Southern Wound Care; 16-20/day clinic; high patient 	<ul style="list-style-type: none"> -recommendation made to post and communicate the hours expected outside of clinical/classroom for each course in the syllabus -recommendation made to create individualized plan for students in required A&P courses with recommended hours set aside to familiarize themselves with any weak science comprehension (I.e. 	

	<p>census; constant training to avoid pressure ulcer staging complications; Positive feedback from the staff working with NCC Students and NCC Students have given positive opinions of the experience with Wound Care staff</p> <p>-Home Health and Hospice: Improve triaging process; Absorbed St.Joe's Homecare; changes to patient rights (i.e. more provision of translation, increase in resources); need for OT and PT 2/2 MA Salary; struggles with retention 2/2 workload; trend to more complicated cases being managed at home; low availability of beds in hospice houses, especially for many clients who live alone</p> <p>-SNHU: 11 full time faculty, 500 Graduate Students; 3500 RN-BSN students; Focus on Diversity; 95% students are working, majority full-time; 30-40% say working helps them digest the curriculum significantly; blackboard -> brightspace D2L; families often reporting that "healthcare letting us down" for older adults living at home with minimal but needs nonetheless</p> <p>-SNH Area Education Center: Nursing Quest Summer Camps (15+ spots available) has been running for many years to attract middle school/high school students into the nursing field – program always has lots of participation/interest; NCC has hosted this program with Bobbie Bagley as the most recent instructor; pilot for behavioral health focused program in Manchester, NH; new Year-Long Nursing Training Program for 9-12 Graders in Manchester, NH with focus on low-income, underserved youth (Organizations based in VT, ME, &</p>	<p>biology, chemistry)</p>	
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	<p>NH involved);</p> <p>-Life Sciences: Different scheduling changes to improve retention, Acknowledgment of suggestion of no more than 20 hours/week workload in the program due to difficulty of courses; competency based material r/t unprepared for the workload demand of higher education</p> <ul style="list-style-type: none">• (How has this trend impacted the real world?) observed trend that employees don't feel prepared for the workload. They are able to put things together, but not able to handle all of the responsibilities put on them; anxiety and stress in the work that is; 6mo. In, students are realizing just how much they are struggling to be able to maintain full time job and full-time school; A&P expected by students, yet many are weak in the fundamentals of science and many retaking the course <p>Update on NCC nursing program and the needs of the students we are now admitting into the program.</p> <ul style="list-style-type: none">• Spoke about qualified students and needs of the facilities. Members feel that students are not prepared for practice. Members expressed appreciation and agreement for tightening admission guidelines and increasing difficulty of A&P I and II for nursing students. Students are applying to different schools and different programs to make sure they are accepted to at least one program. Looking at success on the		
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	NCLEX.		
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Respectfully Submitted,