SOUTH SEATTLE COMMUNITY COLLEGE

RN OPTION
PROGRAM FEASIBILITY STUDY

Report submitted to:
Nursing Quality Care Assurance Commission
Washington Department of Health
April 17, 2006

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STATEMENT OF NEED

Health Care Personnel Shortages in the State of Washington

Washington’s health care shortage continues to be severe. The state population over the age of 65 will reach 1.2 million by 2020 and will demand more health care services. 1 “Experts predict that the supply of registered nurses (RNs) will increase slowly through 2007, plateau, and then begin decline as more and more RNs retire. The demand will accelerate through 2020, creating an even larger gap between supply and demand”….. to “808,000 in 2020” 2

- According to the Health Care Personnel Shortage Task Force (Task Force): 16% of all state vacancies in 2005 are in healthcare; the position with the most vacancies (2,928) is the Registered Nurse, 3

Healthcare jobs vacancies numbered over 9,000 last year 4 and staff shortages are a major factor in skyrocketing health care costs. Contract nurses are used by 92% of the Seattle/King County hospitals. This is a major expense for the hospitals. 5

- According to (Task Force) the results of the 2003/2004 Workforce Survey, Washington State Hospital Association show that, between 2002 and 2007 Washington will need: 1,980 more RNs. 6 The majority of the health care workforce is quickly approaching retirement. For example, the average age of registered nurses in Washington is 47, two years higher than the national average. In addition, as the general population ages, the demand for health services will rise. These two events will combine to create high demand in the future. 7

Health Care Personnel Shortages in King County- Seattle and surroundings.

- While the growth rate for RN’s is only 1.5%, the employment vacancy rate is 6.22%. 8
- The Task Force convened to study health care shortages by county in Washington State and submitted its action plan with strategies and objectives in January 2003, to the Legislature. Objective 1.4 of the Task Force addresses increasing efficiency and quality of health care education, shorter program completion time and reduced program costs. 9
- Strategy 1.4.2 also addresses articulation and transferability. SSCC has required prerequisite courses that will be transferable to the two and four year institutions, statewide. A transfer agreement was addressed by the Task Force (Senate House bill 2382), to ensure articulation so that students will not have to repeat any courses and can use previous knowledge gained. 10
• Low staffing in Seattle/King County is linked to job dissatisfaction, burnout and high turnover. The most recent turnover rate for Registered Nurses is 16.6% in hospitals and 69% in nursing homes. LPN graduates from South Seattle Community College (SSCC) have related disturbing stories about their experiences in Long Term Care Facilities, upon being hired after graduation. In some Long Term Care facilities they were in charge of 60-90 patients and in another facility a graduate was promoted to Director of Nursing within 2 weeks of hire, due to lack of personnel. The shortage of registered nurses to supervise them creates a dangerous situation for the LPN’s and the facilities because they are working outside the scope of their practice as LPN’s.

• Fifty five percent of emergency rooms are turning away patients due to insufficient staffing, resulting in death, and injury or permanent loss of function for patients.

• Fifty percent of the hospitals in Seattle/King County have reported that it is “very difficult” to recruit RNs.

Lack of Diversity in the Health Care Workforce in King County

• Exclusionary approaches to admissions in many nursing programs in Seattle/King County have kept nursing from truly reflecting the ethnic and economic make up of the county and not until such practices are abandoned will nursing’s image be improved.

• Representation in the healthcare workforce among racial and ethnic minorities is not keeping pace. Recruiting from this under utilized labor pool will build a workforce that reflects our increasing diversity, with the added benefit of improving health outcomes for minority populations. Many of our students come from the surrounding area which represents a very diverse population. Many of the patients in the Seattle Hospitals are also ethnically diverse and come from ethnically diverse and low income areas. Practitioners of color are more likely to provide health care to poor and underserved patients, practicing in areas that share a common language and ethnicity with their patients.

• Statistically, the SSCC students are 89% people of color, the underserved, non native English speakers, and therefore, an appropriate population to care for the diverse patients in the local hospitals. The SSCC Practical Nursing Program will have educated and graduated one class of 78% diversity and 2 classes with 89% diversity, by June, 2006. Eighty percent of the applications received each year, are people of color, low income, and NNES. Those who are accepted represent over 14 countries. 5.4% of the population in the workforce is male. Forty four percent of the current class at SSCC is males; The Registered Nurse program will select its students from the same pool.
• Limited English proficiency impacts our schools and workplaces. Fifteen percent of county residents are foreign born; eighteen percent speak a language other than English at home.

• King County is a leading choice for refugee resettlement, 42% of whom come from Southeast Asia, 31% from Eastern Europe, and 22% from Africa. The SSCC nursing program which is in one of the lowest income areas of Seattle, and the most ethnically diverse, mirrors that population. (See Tables 1, 2, 3.)

• Strategy 1.4.3 states that one of the ways to achieve program completion rates is by blending basic skills with VESL, adjusting instructional methods, incorporating cultural awareness, and improving support services. The present LPN program at South Seattle Community College (SSCC) has incorporated these strategies into our nursing courses, by utilizing VESL before and during lectures, and labs, maintaining communication between the VESL instructor and the Nursing instructors, as well using a flexible pedagogy. The nursing program meets with the Academic Dean of General Studies, monthly to identify needs of all students and especially the Non Native English Speakers (NNES); our retention rate has improved this quarter to 84%.

Table 1. Statistics for the class of 2003-2004; 78% (NNES)

<table>
<thead>
<tr>
<th>Country of Birth</th>
<th>Number of students</th>
<th>Gender</th>
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<tbody>
<tr>
<td>USA</td>
<td>8</td>
<td>Females 29</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>8</td>
<td>Males 7</td>
</tr>
<tr>
<td>Vietnam</td>
<td>3</td>
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<td>Philippines</td>
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<tr>
<td>China</td>
<td>3</td>
<td></td>
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<tr>
<td>Eritrea</td>
<td>2</td>
<td></td>
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<tr>
<td>Chinese Americans</td>
<td>2</td>
<td></td>
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<tr>
<td>Kenya</td>
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<td>Mexico</td>
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<td>Somali</td>
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<td>Peru</td>
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<tr>
<td>Canada</td>
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<td></td>
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<tr>
<td>Armenia</td>
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<td>Germany</td>
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Table 2  Statistics for the Class of 2004-2005 SSCC students 89% NNES;

<table>
<thead>
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<th>Gender</th>
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<tbody>
<tr>
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<td>Females 28</td>
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<tr>
<td>Eritrea</td>
<td>2</td>
<td>Males 8</td>
</tr>
<tr>
<td>USA</td>
<td>6 (4 Caucasians; 1 Asian American, 1 African American)</td>
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</tr>
<tr>
<td>Vietnam</td>
<td>5</td>
<td></td>
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<tr>
<td>Philippines</td>
<td>4</td>
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<tr>
<td>Kenya</td>
<td>2</td>
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<tr>
<td>Cambodia</td>
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<td></td>
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<tr>
<td>Iran</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Italy</td>
<td>1 (Race-African)</td>
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</tr>
<tr>
<td>Mexico</td>
<td>1</td>
<td></td>
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<tr>
<td>Russia</td>
<td>1</td>
<td></td>
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<tr>
<td>South Korea</td>
<td>1</td>
<td></td>
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<tr>
<td>Somalia</td>
<td>1</td>
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<tr>
<td>Zambia</td>
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Table 3. Statistics for the class of 2005-2006; 89% NNES; 21 Females; 15 Males

<table>
<thead>
<tr>
<th>Country of Birth</th>
<th>Number of Students</th>
<th>Gender</th>
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</thead>
<tbody>
<tr>
<td>Ethiopia</td>
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<td>Females 21</td>
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<tr>
<td>USA</td>
<td>4</td>
<td>Males 15</td>
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<tr>
<td>Vietnam</td>
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<tr>
<td>Philippines</td>
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<td>Uganda</td>
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<td>Kenya</td>
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<td>China</td>
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<tr>
<td>Canada</td>
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<tr>
<td>South Korea</td>
<td>1</td>
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<tr>
<td>Cambodia</td>
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Projected Growth in Seattle/King County

- Seattle-King County workforce accounts for one third of the state’s total labor force. In 2004, the workforce Development Council of Seattle-King County listed health care as one of the two top occupational groups with the highest job growth. Health care growth is expected to continue, creating over 10,000 new jobs in Seattle/King County by 2012. Of these, nearly 60% are expected to be in professional/technical classifications, including nursing. Registered Nurses annual growth rate in King County is 1.5%; the employment vacancy rate is 6.22%. We are still not producing enough graduates to meet the demand.

B. PURPOSES AND CLASSIFICATION OF THE PROGRAM

The purpose of the intended RN program is:

- To educate students of color, non native English speakers, (NNES) and low income backgrounds, using flexible pedagogy, to become Registered Nurses and to pass the State Board of Registered Nursing Exam in the state of Washington (NCLEX)

- To incorporate an integrated Vocational English as a Second language (VESL) program. The availability of the VESL instructor will enhance the success of the NNES students and the native speakers as well. SSCC is dedicated to maintaining a high retention rate and a high NCLEX pass rate.

- To offer students an articulation approach utilizing their previous knowledge and prerequisites. They will be able to build on their previous learning and experience by not having to repeat any courses, as SSCC nursing programs require the same prerequisites that the other schools of nursing statewide require for the RN and BSN programs.

- The retention rate of the first two classes, 20004 and 2005 are 78% and 72% respectively. The present class which will graduate in June, 2006 has an 84% retention entering the last quarter.

- To our knowledge, the first two graduating classes have passed the State Exam with only one failure in each class. The student in the first class has failed the exam twice. (Four students failed out of the first class in the fourth and last quarter.) Three were readmitted to SSCC and one to another program to make up the course that they failed. Upon completion of the make up, all 4 of the students failed the NCLEX exam, the first time, possibly because there was a lag time of 1 year from the basic program. Three of the students passed the second time, and the fourth has not reported yet. The program is reassessing our readmission policy to avoid this problem in the future.
• Assessment of the weak students who subsequently either failed out of the program or failed the NCLEX has shown that more attention needs to be paid to the students who are in the lower one third of the class, and to the Assessment Technologies Institute (ATI) assessment scores. There is a correlation to scores on the ATI, the program success, and success on the NCLEX.

The Classification of the Program.
• We propose that the program be an RN option program, with the first year taught as an LPN program, adding the RN portion of the program the second year.

• By keeping the first year as an LPN program the graduates can apply for the RN option and if not successful work in the field as LPN’s and reapply the next year. Further, the LPN graduates who do not wish to become RN’s do not jeopardize a year of their education should they not be successful in a program that begins as an RN program.

• By maintaining the LPN program more graduates can enter the market place upon completing their LPN certificates.

• In addition, the instructors for the first year need only be BSN prepared, thereby; decreasing the demand on the MSN instructors who will only be utilized for the second year, making it less difficult for SSCC to obtain Masters prepared instructors.

• Entry into the RN portion of the program will be competitive; giving the SSCC graduates priority, thereby facilitating articulation, which is a major goal of the SCCD District Health Care Educational Institute (HCEI), the Task Force, and the Department of Labor (DOL) grant.

• Students and graduates from SSCC nursing program have written letters of support for the opening of an RN program at SSCC. An LPN graduate from SSCC told us that he cannot afford the $25,000 that a university would cost and that he can work as an LPN while completing the RN degree by coming to SSCC. The students have also said that SSCC is comfortable for them because of the diversity, including NNES and age. They like the convenience of the proximity to their homes, ease of parking, and hours of the program. Over 90% of the graduates and the current class want SSCC to begin the RN program. Please see attached letters from graduates and students.

C. AVAILABILITY OF QUALIFIED FACULTY

• The RN option program will reduce the number of required MSN faculty, by utilizing BSN faculty for the first year. The need for MSNs will be 2 each year instead of 4.
• Both BSN and MSN faculty applicants for the jobs have communicated with the Director, expressing an interest to teach in this unique program. The job positions are being advertised and a BSN faculty applicant, who is completing her MSN has contacted us to teach in the LPN program until she completes her MSN, at which time she wishes to teach in the RN program in 2007. The other MSN position has also been tentatively filled by a recent MSN graduate with an education major. As full time tenure track faculty, these two MSN’s will also teach the clinical portion of the RN program. Utilizing these two faculty in the clinical area will mean only one more MSN faculty for the clinical portion of the program will be necessary, because there will be 30 RN students; a one to ten ratio, which requires three clinical faculty. At present we have the third clinical faculty member, who has taught for us this year in the LPN clinical, who will graduate in June 2006 with her PhD. She has expressed a desire to teach in either program. Two other instructors who have done clinicals for us are now working on their MSN’s and want to return to teach in the RN program. The current LPN instructor is planning to return to get her MSN while continuing to teach in the LPN program.

• One of the definite advantages of the program is the evening and weekend schedule for the instructors because they can work at their hospital jobs during the week on their days off, while maintaining their faculty positions at SSCC. This has also been important in keeping the instructors current with their practice. Evening and weekends are also good for women with children. They have added help in the evenings and weekends for childcare. We have a Nursing pool that the instructors can call on the weekends should a complication arise with their schedules. This has been very successful in lowering the stress of the instructors. The same instructor has been our relief pool nurse for 3 years.

• All of the instructors who have worked with the LPN program and who have expressed an interest in working with the RN option program have a commitment to the diverse and underserved student. They find that working with this population is rewarding and that it is the main reason they choose to work with SSCC nursing programs.

D. BUDGETED FACULTY POSITIONS.
• SSCC has received a $924,000 Department of Labor (DOL) Grant which has budgeted for 2 FTE MSN positions to develop the RN curriculum and to teach the RN program.

• There are 2 State of Washington high demand grants which are available yearly in the amount of $90,000, to continue forever. These monies can be applied to additional faculty should the need arise.

• Two MSNs are budgeted in the DOL grant for the entire 3 years.
• The District has approved the nine month Step nine positions for the entire district MSN faculty, with additional salary for the six week summer bridge program. However, SSCC will be competitive in keeping with the local schools when considering salaries.

• A 1.0 FTE teaching assistant is also budgeted for in the grant. The TA will oversee the lab for the LPN and RN programs, also helping out in the classroom.

• Also in the DOL budget is a Program Assistant, who will be the first contact with the public, maintain the phones, complete any new hire paperwork, take minutes and other clerical duties, thereby freeing up the Program Coordinator to spend more time with the admissions and students already in the program.

• VESL teachers are budgeted for in the DOL and Title 3 Grants. The State of Washington IBEST program will also pay for the VESL teachers in the future. The Director position is a full time position beginning spring quarter 2006, and is funded by the college.

• A consultant for 40 hours is budgeted for in the DOL Grant.

• The college will fund the Program Coordinator position that has the responsibility of recruiting, advising and admitting and has previously been paid in part by the College and the Title three grant.

E. AVAILABILITY OF ADEQUATE CLINICAL FACILITIES FOR THE PROGRAM

• The director has met with the major partners and tentatively scheduled dates and times for the RN students for their clinical rotations in winter 2008. To date all of the current partners have expressed a positive interest in the RN program, based on their satisfaction with the SSCC LPN students in their clinical sites in the past 3 years, and their desire to reduce the nursing shortage.

• Because the program is a weekend program the partners have said that they satisfied at this time, that there are no major conflicts with the other schools and the clinical sites. If a conflict should arise, however, SSCC is willing to utilize any of the weekend shifts on either day.

• The partners, so far, who have agreed to allow the SSCC RN students to utilize their facilities, are Swedish, Overlake, Group Health, and Sea Mar. A facility which has approached the program is the Pioneer Human Services; a newly formed facility is a potential clinical site for the psychiatric rotation. More meetings are needed with this last facility to create an affiliation agreement.
• Plans are being made for meetings with Harbor view Hospital, the King County Jail, in order to discuss clinical sites for RN program.

F. AVAILABILITY OF ADEQUATE ACADEMIC FACILITIES FOR THE PROGRAM.
• A new 9 bed lab has been built by the college in RAH 107, for use by the LPN and RN programs. Alternate days for the programs and a full time teaching assistant will make utilizing the lab efficient.

• Laerdal’s Simulated Manikins (Sim Man and Sim Baby) have been ordered and will be housed in the new lab, adjacent to the AV equipment.

• Substantial funds from the Title Three Grant become available in July 2006 and plans for more computerized manikins are being discussed.

• State of the art AV equipment has been designed and ordered, which can video the instructors demonstrating on the Simulated manikins or other manikins while the students watch on a plasma screen over the beds. Demonstrations will be videotaped and put on CD ROMs which will be made available to the students for viewing in the RAH 101 and the library.

• Simulated manikins will be a partial solution to a potential clinical site shortage in the future for schools of nursing. There are 90 scenarios and a program which can be “programmed on the fly”. This means that the instructors can observe the students giving care to the manikins and based on their responses or lack of appropriate responses to the manikin’s needs can introduce new scenarios and new situations both on the computer and audibly, behind a screen, so that the student must use critical thinking to adjust the “care” for the patient (manikin). The actual patient driven experiences are not always as predictable or as available for student learning in the hospitals. Therefore, the manikin can be substituted in many instances to give students experiences that they would normally not be exposed to. At present we have ordered a Man and Baby. Plans are to order a geriatric patient, a birthing Noelle, and an IV training model as well.

• A large space, RAH 101, adjacent to the new lab is being divided into offices for 6 instructors. The offices are being outfitted with internet ready computers, phones, book cases, locked file cabinets and a printer. Other necessary equipment such as a shredder and a copy machine are being ordered. A microwave, refrigerator and storage for the office supplies will also be provided.

• A table and chairs to seat 18-20 students is set up in the adjoining space, RAH 101, for students while in the lab, for quick reference time or discussions with the instructor. Text books are available for reference. A white board is also available. More discussion is planned for a projector in this area to view the video tapes.
G. POTENTIAL EFFECT ON OTHER NURSING PROGRAMS IN THE AREA.

- SSCC has a weekend clinical program. The partners have been very positive that we will not be infringing on anyone’s territory. If, however, that should be a problem in the future, our flexibility for switching shifts and days will serve as a solution to conflicts for sites. As stated above, the partners have already given their consent and tentatively scheduled the RN program to utilize their facilities.

- Because of the critical shortage of nurses and RN programs to educate them it is vital for this type of program to continue the education of the underserved and NNES student. These graduates are needed in the community to give care to the population that they represent.

H. EVIDENCE OF FINANCIAL RESOURCES ADEQUATE FOR PLANNING, IMPLEMENTATION, AND CONTINUATION OF THE PROGRAM

- Resources for the program have been provided through enhanced dollars from the State for high-wage, high-demand programs, the Title Three Grant, and a recently acquired Department of Labor (DOL) Grant.

- The DOL grant is adequate for the planning, implementation of the LPN and RN program for 3 years, both by its funding of the faculty and the more than adequate supplies and equipment financial support.

- Funds are available in the grant for consultant fees for the development of the RN curriculum and for the instructor training of equipment.

- The college administration is committed to the success of our RN program. The college will ensure adequate financial support is available to meet the instructional and operational needs of the program, as well as comply with all the standards set by the Washington State Nursing Commission.

I. ANTICIPATED STUDENT POPULATION

- Graduates of the SSCC LPN programs have been in frequent communication regarding the start of the RN program. To date there are 56 graduates and 31 who will graduate in June, 2006. At least 90% of these students/graduates want to attend SSCC for the RN program.

- In addition, graduates from other LPN programs’ have requested information about the RN program start because of the long wait lists in other RN programs;
some as long as 5 years, as because of our reputation for support of the NNES with the VESL programs.

- Other schools require 6 months to 1 year’s work experience as an LPN, before they can apply to their RN programs. SSCC will allow our own graduates to apply without that stipulation.

- SSCC also has a reputation for working with NNES students and students of color in order to help them succeed. Our SSCC LPN graduates have not been accepted into other RN programs in the area; barriers, such as 1 year work experience before applying, lack of spaces, and unfriendly reception by the schools, puts the SSCC students at a disadvantage because they either feel unwelcome or must go to the end of the wait list which is usually 300 applicants or 3-5 years for most schools. The shelf life of the nursing courses is usually 2 years and the prerequisites, 5 years. Therefore, the students are ineligible by the time they are even considered for admission.

- The SSCC graduates report that they want to return to SSCC for the RN program because they are familiar with our program, can get here from their neighborhoods by bus if necessary; parking is available if they drive, and they need the VESL classes which are integrated throughout the program. They also state that the by integrating the principles of ESL into the lectures, the instructors make the material understandable for them. The instructors are devoted to insuring that the students understand the information; the success and retention of the students is the mission of the program. The applicants, as well as student transfers from other schools feel accepted from the first point of contact by the nursing program staff. We have received numerous calls from disgruntled applicants and students from surrounding schools requesting admission to our program. Most are surprised to be treated with such kindness and with a helping attitude. Our retention rate in the past three years has been 80%, 72% and 84% compared to 50-60% in other schools. We want our students to succeed and will go to great lengths to ensure that that happens.

- In order to complete their RN degrees, SSCC students have had to go outside of King County. Some have completed their courses online and some in other counties or states. One has just reported that she is beginning her RN to BSN education this year! She was in the first class and is a NNES graduate.

- Students from the first 2 graduating classes as well as the present class are adamant about wanting to return to SSCC for their RN education. Many have submitted testimonials to that end.

- **J. TENTATIVE TIME SCHEDULE FOR PLANNING AND INITIATING THE PROGRAM.**
• SCC sent the Letter of Intent to start an RN program in January, 2006 18 months before planning to start or September, 2007.

• The feasibility study will be submitted the end of March.

• The first MSN will be hired in June 2006 and the development of the RN curriculum with the Director and the consultant will begin.

• The second MSN instructor will be hired by winter, 2007, or sooner and the development of the curriculum will continue.

• The MSN instructors will teach some of the LPN clinicals while working on the RN curriculum development.

• The plan is to begin the RN program fall, (September) 2007 with the LPN to RN bridge program being offered in summer 2007.
ENDNOTE REFERENCES

1 Health Care Personnel Shortages: Crisis or Opportunity? Health Care Personnel Shortage Task force, December 2002

2 Charting Nursing’s Future; Robert Wood Johnson Foundation, January 2005


5 Workforce Survey 2003-2004

6 Health Care Personnel Shortages: Crisis or Opportunity. December 2004


8 Charting Nursing’s Future; Robert Wood Johnson Foundation, January 2005


12 Health Care Personnel Shortages: Crisis or Opportunity? Health Care Personnel Shortage Task Force, December 2002

13 WWAMI Center for Health Workforce Studies

14 Western Interstate Commission for Higher Education: Registered Nursing Shortages: Public Policy, and Higher Education in the Western States. June 2003


17 Workforce Development Council of Seattle-King County, Draft Strategic Plan, May 2005