

**NURSING ADVISORY COMMITTEE  
MINUTES  
OCTOBER 24, 2024 / 4:30 PM / HSB 235 OR ZOOM**

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**I. CALL TO ORDER**

Merry called the meeting to order at 4:34 pm.

**II. INTRODUCTIONS**

**Industry:**

Kelly Klein, Employee Health, US Department of Veterans Affairs

Karen Godbole, Director of Clinical and Nurse Education, PeaceHealth Columbia Network

Melissa Selzler, Value Architect Specialist, Health Catalyst

**Education:**

Vicki Denson, Chair of the Department for Foundational Practice, WSU College of Nursing

Merry Bond, Dean of Nursing, Allied Health, and Wellness, Lower Columbia College

Kali Brandt, Assistant Associate Degree Nursing Program Director, Lower Columbia College

Connie Ramos, Nursing Faculty, Lower Columbia College

Jennifer Jenkins, Health Science Careers Instructor, Kelso High School

Katie Gersen, Health Science Careers Instructor, Kelso High School

**Guests:**

Kailie Drumm, Assistant RN to BSN Program Director, Lower Columbia College

Amy Boultinghouse, Nursing Assistant Program Director, Lower Columbia College

Corey Strand, Nursing Faculty, Lower Columbia College

Julianna Crisman, Nursing Faculty, Lower Columbia College

Jennie Bergman, Workforce Education Manager, Lower Columbia College

Jacob Aguiar, Employment Navigator, Lower Columbia College

Cassie Stogianis, Student, Lower Columbia College

Nicole Buffham, Staff, Lower Columbia College (recorder)

**III. BUSINESS/INDUSTRY/LABOR EMERGING TRENDS**

Around the Table-any trends from business/industry/labor attendees:

Kelly shared that he recently encountered a couple of LCC graduates working at the VA. Feedback was that they had nothing but praise for the program and were happy with the results. They are “now moving on to bigger and better positions at the VA.”

He also reported that the VA is in a “strategic hiring phase,” which seems to be more of a hiring freeze. They have significantly reduced the number of new hires this year, which seems to be the trend to expect next year.

Karen reported that the clinical experiences have been great. However, they continue to find that new grads, in general (not specifically LCC), need more opportunities to build critical thinking skills, hands-on experience, problem-solving, and time management skills. They’re missing the connection between the more complex skills and thinking through processes. She says this comes with experience and has been an issue since COVID. It seems graduates since the start of COVID have tunnel vision and struggle with seeing the

bigger picture. They are task-oriented, rather than seeing the importance of their scope of practice and why they are nurses. They need to know that it's not just a job but a profession. Bringing the focus back to professionalism and having those skills is another area that requires ongoing attention.

Karen reports that hiring is stabilizing at St. John.

#### **IV. ADD TOPICS FOR REVIEW AND INPUT FROM BUSINESS/INDUSTRY/LABOR**

##### **A. Curriculum & Environment**

###### **a. Program content & enrollment:**

- i. Nursing Assistant (LCC & K12 partners)

###### **Common Curriculum**

Amy reported that in 2023, the state required the implementation of a common curriculum framework for the Department of Health with nine modules based on Maslow's Hierarchy of Needs. By the fall of 2025, three additional modules must be added. These include mental health (8 hours), dementia (8 hours), and developmental disabilities (16 hours). These additions will bring the course hours from 108 to 140. Currently, Amy is working on content, building modules, and training instructors.

Merry added that the changes will go to the Curriculum Committee for approval at the next meeting. This will ensure the revisions are reflected in the 2025-2026 college catalog, effective July 1st through June 30th each year. The NURS 90 course will go from 7 credits to 10 credits, a significant change.

Katie reported that they began incorporating the new content at the start of the school year. Because they have the benefit of a year-long program, they have been able to seamlessly incorporate the new curriculum into their existing plans. They have aligned what they can with the chapters they plan to study and otherwise offer stand-alone content. This has been a great enhancement to their existing curriculum.

###### **Skills testing**

Amy announced that LCC is participating in the skills exam pilot project with the Washington State Board of Nursing (WABON). Nursing Assistant program faculty have completed training to evaluate the students at the end of the term to determine whether or not they meet the criteria for passing the state skills exam. This includes incorporating a new way of testing and reporting skills testing to the WABON. When evaluating students, evaluators mark yes or no for each step in each skill, then send the results to the state. Currently, WABON personnel determine whether students pass or fail. Soon, the evaluators will be able to determine whether or not the candidate passes. After passing the skills evaluation, students complete their written exam through Credentia. With more recent changes proposed by the WABON, the skills testing will become part of the certificate program. Because much is involved with this transition, Amy is working on the policies and processes that will be incorporated.

### **Enrollment trends**

Merry shared that the Nursing Assistant classes have been full for summer and fall terms. Class sizes have doubled from this time last year.

Jennifer shared that a couple of students have dropped their health occupations class, but enrollment remains solid at 23 students (up from last year).

- ii. BSN (Bachelor's Degree Program)

### **CCNE candidacy update**

The BSN program recently received their acceptance letter for a CCNE site visit. Kailie says that the visit will occur earlier than anticipated, but that is a good thing because it would be ideal to receive accreditation prior to the first cohort graduation in June. The site visit is scheduled for March.

### **Enrollment update**

Kailie reported that the RN to BSN program had 24 total applicants, and there are currently 15 in the cohort. BSN faculty appreciate having a smaller cohort because they are all teaching brand new curriculum. The cohort cap for this year is 24 students.

### **Application cycle for 2025-2026**

To be congruent with LCC's other bachelor programs, Kailie shared that the application cycle for the BSN will open in December or January and close in April. Students attending part-time will begin summer term and full-time students will begin next fall.

- iii. AN-DTA/MRP (Associate Degree Program)

### **LPN2RN eLearning alignment**

Kali shared that she is working to align the LPN2RN eLearning program option with the campus-based program option. Credit adjustments are being made to NURS 246 and 247 for clinical and simulation so that content better aligns with the traditional program option and to ensure time with the students is used most effectively. The total number of clinical credits will not change. Summer clinicals are challenging to complete in the given time and it's very intense for the facility and the students. Kali wants to make certain that students are fully prepared in a way that best suits their credit needs and ability to attend and complete clinicals, taking into consideration the wide range of skills and abilities LPN students bring with them to the program. Some students come from working as school nurses, clinics, ICU's, and ER's. Great effort is made to ensure that when the students go to the hospital they can be productive and utilize the necessary clinical and critical thinking skills.

Merry added that the eLearning cohort attends the program online for fall, winter, and spring terms, then attends in-person for summer. They complete virtual simulations prior to coming to campus. Once here, they

complete work in the skills lab, in-person simulation, and skills lab practice prior to visiting the clinical site. This is to ensure that all students are well prepared.

Merry and Kali both commented on the struggle the prelicensure students have with clinical reasoning skills and professionalism. They explained that they're working on strengthening students' skills in these areas.

Kali also shared that the majority of students in the inaugural BSN cohort came from last year's LPN2RN eLearning cohort. She commented that it's nice to see those students continue at LCC.

### **Simulation rule update**

Merry reported that there has been a simulation rule change. Recent literature indicates that well-designed, high-fidelity simulation that follows evidence-based best practices can be effective in a condensed time frame versus clinical hours. This is because students participating in immersive simulation in the RN role receive a very intense and in-depth experience. The new rules say that one hour of high-fidelity simulation can equal two hours of clinical, under the right conditions. This will be incorporated into the nursing program curriculum starting winter quarter. The process will be labor intensive, but two faculty are currently training to become certified. This will be beneficial for the students and the nursing program is excited to be able to offer high quality simulation experiences. We will seek endorsement of the simulation program by the required date of 2029.

Student feedback regarding the simulation lab indicates that they find their time in the lab to be incredibly valuable. Merry shared that students have expressed that simulation lab time really helps them put the pieces together. She intends to maximize those experiences for the students in that safe learning space. Merry also said that she and the faculty are really excited when students can take their knowledge from the simulation lab and apply it in the clinical setting.

### **Enrollment update**

Merry shared that enrollment is currently at about 200 students in all three of the associate degree program options. The increase of four seats each quarter continues with two quarters to go. At that point, the program will have increased capacity by 24 seats across all six cohorts to a full capacity of 220 seats. Enrollment has, overall, been trending upward. Merry explained that, due to attrition, the program is not quite at capacity. Typically, between all cohorts, 8 to 10 seats go unfilled due to attrition and uncontrolled circumstances.

Cassie shared that from the student perspective, the increase from 20 to 24 students feels good. Having recently had her first full clinical day, she could see that Becky worked hard to ensure she had adequate time with each of her students. Cassie thought it was a fantastic experience.

### Program outcome data

Merry walked the committee through the nursing program outcome data. Annual program completion data shows the percentage of students who completed the program within 100% of the program length. The requirement prior to 2021 was 150% of the program length. That change and COVID came at the same time. That explains the decrease in completion rates for the 2021-2022 year. The goal is 75% of students completing on time. While the number has dipped below 75% at times in a couple of the program options during 2021 and 2022, the aggregate number has remained above 75% for the program during those years. The number seems to be increasing, however, the only complete data for 2024-2025 so far is for summer term. Merry also pointed out that the number of graduates increased for 2023-2024 and she anticipates a continued increase in program completions as the cohort size increases.

Merry explained that Washington State requires 80% of each cohort to pass the NCLEX-RN on the first try. The pass rate for testers per year must also be above 80%. So far for 2024, the pass rate is nearly 95%. LCC's pass rate has been above 90% for the last three years. Merry noticed that since the launch of the Next Generation NCLEX in April 2023, pass rates have increased for Washington and nationally.

According to Merry, the employment data is incomplete for 2023-2024. She will report that information at a later date. Typically, there is a 75% response rate on the 6 to 12 month after graduation survey. The response rate was lower with the last cycle. That was a 50 to 60% response rate. Persuading graduates to complete the survey is a challenge. Merry requested suggestions to increase the response rate.

Merry believes the employment data collected by the nursing program is a bit low when compared to the data collected by the college as a whole. That data shows students who are employed at all, where the nursing program collects whether or not students are employed in what they perceive as a RN role.

#### **b. Review labor market information**

- i. Nursing assistant certification requirement and workforce data ([recent survey results](#) and [email communication from WABON](#))

Merry shared that the survey asked nursing programs if they required or gave preference to students that have their CNA credential, or if they gave preference to students that had completed a class and did not require the credential. The number of people in Washington pursuing certification is not reflective of nursing assistants in the workforce because a large percentage of them are pursuing a nursing degree. This makes it challenging for the state to evaluate what the actual workforce looks like. According to the survey results, nearly 80% of nursing programs across the state either require or give preference to applicants with nursing assistant

experience. Most programs require the certificate of completion. LCC's nursing program requires the credential. The Board of Nursing is considering incorporating skills testing into the nursing assistant program. Merry doesn't think the issue can be addressed by making a change in the nursing program requirements, but she welcomes input from the committee.

Merry went on to point out the questions WABON communicated via email:

- "Would there be additional benefit to program preparation and retention if students had work experience as a nursing assistant?"
- "What are the advantages and disadvantages of standardization of granting college credits for students who successfully complete a CNA program?"
- "Could this encourage career progression in nursing for established nursing assistants as some estimates state that only 20% continue to nursing?"
- "Do programs accept other types of healthcare experience (dental assistant, medical assistant, home care aides, EMT, etc.) and would this increase diversity and opportunity?"

Merry explained that LCC's nursing program currently gives a selective admission point for other types of healthcare experience, but requires the nursing assistant credential. Healthcare experience is optional, but is incentivized. The requirement for the credential was implemented to help reduce attrition in the first quarter. Before it was implemented, the faculty shared anecdotally that there was significant attrition because students didn't know what they were getting into. When LCC moved to the DTA, the curriculum was also condensed. The program went from 7 quarters to 6 quarters. Requiring the NAC credential allowed students to enter the nursing program prepared for basic patient care.

Merry asked the committee to consider whether or not it was better to require healthcare experience versus a credential requirement. She said she would like to send a Google form to the committee to gather input.

Kali said she would like the state to gather that information when a student enters the CNA program. They should report whether they are entering the CNA program to work as a CNA or to enter a nursing program. She also thinks the nursing program requirements in this regard are optimal. It is beneficial for students to have experience working as a CNA.

Karen concurred.

ii. [Health Science & Wellness Job Market Data](#)

Merry presented the job market data for nursing in Cowlitz County. The projected growth has reduced from 9% to 5%. This supports the reports of slow-downs in hiring that have been shared recently by industry partners.

She also reinforced the need for continual discussion, especially since there was a big push to increase the number of seats in the program. She wants to be sure that the need is still there. She also reported that LCC's nursing graduates are still being hired, so there is not an issue currently.

Kali expressed hope that the stabilization in hiring will allow existing nurses to gain more experience, which will help them better train new staff.

Karen pointed out that we have an aging nursing population, so she expects there will be large waves of retirements. She thinks the need for new nurses will continue.

## **B. Facilities, Equipment, Technology & Training**

### **a. Facilities and Technology**

Merry explained that LCC Nursing does not currently have a high need for new equipment due to the large influx of simulation funding from the legislature a couple of years ago. It provided three new simulators for the simulation lab, as well as other simulation equipment. Several classrooms now have simulation equipment, in addition to the designated lab (for instance, the birthing mother and babies have been moved to accommodate multiple simulations being facilitated simultaneously). The state still provides a smaller allocation to maintain the equipment, purchase subscriptions, and training on the simulation equipment. The program's simulation technician has now been training to service the simulators, which will eliminate outside maintenance costs. Also, a new charting system to simulate barcode medication scanning during simulation and provide other simulated charting experiences is forthcoming.

- i. Simulated IV arms (replacement purchase)  
LCC's simulated IV arms are wearing out. Merry explained that everything possible is being done to expand the life of all simulation equipment, but after many students have practiced venipuncture, the skin on the simulated IV arms wears out. She has applied for funding to replace several of the oldest arms.
- ii. ChartFlow EMR pilot  
See a. above.
- iii. Are there any suggestions for equipment we should consider?  
Merry asked for suggestions for additional equipment to consider.

Connie stated that a pediatric simulator is her request. Merry said she would put it on the "wish list".

Kali recommended a code manikin, such as one used for CPR certification that tells whether or not you're pushing hard enough or fast enough. She thought it would be a great experience for the students.

Merry explained there has been talk about validating CPR skills in the clinical settings every three months to keep current and build confidence in the skills. She theorized that students would feel more practice ready if this was current practice.

Karen explained that students who have spent time in simulation are better able to treat simulation as a real experience than seasoned nurses without simulation experience.

**b. Training/Professional Development**

Merry asked for suggestions on training or professional development for faculty to better prepare the students for practice.

Karen recommended keeping up to date on stroke, sepsis, and infection prevention protocols, as well as PPE.

Merry explained that the faculty were trained on the state infection control modules provided by the Department of Health. While the modules haven't been incorporated throughout the curriculum in a coordinated fashion, it has been under discussion.

Kali shared that Amy's nursing assistant students are going through the infection control training.

Karen also recommended trainings on sexual orientation and gender identity (SOGI); social determinants of health; diversity, equity, and inclusion (DEI); suicide interventions and precautions; fall prevention; hospital acquired prevention of injury; and patient harm prevention.

**V. K-12 General updates**

**A. Around the Table - any other updates from K-12 attendees**  
No additional updates.

**B. Around the Table - any other updates from other higher education attendees**  
Vicki shared that WSU-V's nursing program has moved into their new Health Science building and thinks it is wonderful. She also shared that they are looking for a new mental health nurse practitioner faculty to replace retiring faculty. She asked the committee for recommendations and said they could contact her.

Vicki reported that their program is working on competency based education with the new essentials, as well as the two-to-one sim.

**VI. LCC General updates**

**A. Website updates ([lowercolumbia.edu/nursing](http://lowercolumbia.edu/nursing))**

Merry shared that the Nursing Programs webpage has undergone significant changes. It is easier for students to navigate; color coordinated with the Health Sciences and Wellness pathway; works better on mobile devices; and has a more cohesive look.

**B. Application for AN-DTA/MRP - selective admission point update**

In order to mitigate instances of students repeatedly applying and qualifying for the AN-DTA program, but not being selected, a selective admission point will be added for students who have applied for the program in a previous cycle. Merry asked for committee feedback. There was none.

**C. Around the Table - any other updates from LCC faculty/staff**

Kali shared that LCC Nursing has many new faculty. She is excited because she feels like the program is now fully staffed after a long gap.

Merry shared that there are three new tenure track faculty starting their first year of a three year probationary period. There are also three faculty in their last year of the tenure track process. They are expected to be granted tenure at the end of this academic year.

Corey shared that there is currently great focus on building students' critical thinking skills.

Merry explained that the clinical judgment model is introduced at the beginning of the program and is reinforced throughout the program. Students are given laminated cards with the steps of the clinical reasoning model. Whenever they're completing a case study or talking through a patient scenario, they are asked, "What is the first step?" They then proceed through the steps. Practicing the clinical judgment model regularly and consistently helps students to build it into their muscle memory.

#### **VII. OLD BUSINESS**

None.

#### **VIII. NEW BUSINESS**

Chair election

Merry explained the duties of the committee chair and who may qualify to become the chair.

Kelly and Karen agreed to fulfill the chair role as co-chairs, provided the vote is approved.

#### **IX. UPCOMING PROGRAM OR COMMUNITY EVENTS**

- A. Fall RN Pinning Ceremony - 12/12/24, 6:30 pm, Rose Center for the Arts
- B. Winter RN Pinning Ceremony - 3/20/24, 6:30 pm, Rose Center for the Arts
- C. Other events?

No additional events were shared during the meeting.

Nov. 14, 2024: Kelly Klein shared that job opportunities at the VA are returning and sent the following documents to share with the committee.

- [20 Reasons Nurses Love Working for the Veterans Health Administration](#)
- [Total Rewards LPN](#)
- [Total Rewards NA](#)
- [Total Rewards RN](#)

#### **X. NEXT MEETING (DATE/TIME/PLACE)**

April 29, 2025 at 4:30 pm in HSB 235 and Zoom (Hyflex).

Merry summarized that a Google form would be sent to approve the minutes, vote on co-chairs, and request input on the Board of Nursing questions regarding nursing assistant credentials and nursing program admission.

#### **XI. RESOURCES**

**Advisory Committee Handbook -**

## **Non-Discrimination and Anti-Harassment Statement**

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