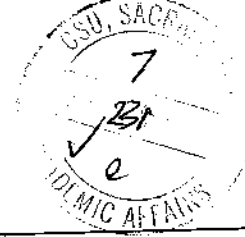




SACRAMENTO
STATE

Course Change Proposal Form A



Academic Group (College): Health & Human Services	Academic Organization (Department): Nursing	Date: March 14, 2007
Type of Course Proposal: New ___ Change ___ Deletion <u>X</u>	Department Chair: Ann Stoltz PhD, RN	Submitted by: Ann Stoltz PhD, RN
Does this course fulfill a requirement for single-subject or multiple subject credential students? Yes ___ No <u>X</u>	For Catalog Copy: Yes ___ No <u>X</u> CCE: Yes ___ No <u>X</u>	Semester Effective: Fall <u>X</u> Spring __, 2007 <u>X</u>

This course replaces experimental course Subject Area (prefix) and Catalog Number (course number):	
This Catalog Number (course number) is being replaced:	

Change from:		
Subject Area (prefix) & Catalog No. (course no.): NURS 111B	Title: Bridging Constructs for Returning Nurses	Units: 3
Change to:		
Subject Area (prefix) & Catalog No. (course no.):	Title:	Units:

JUSTIFICATION:

The current RN to BSN program is integrated into the generic BS program. The courses are offered during the day when many of the returning RNs are working. In addition, the courses are such that a nurse must take off at least two days during the regular work week, thus limiting the number of RNs that can obtain the bachelor's degree while working. More importantly, the current coursework are not tailored to address the learning needs of the experienced RNs (with the exceptions of N111A & N111B).

The Division of Nursing was awarded a contract with the Sacramento Employment Training Agency (SETA) to provide financial assistance to 50 RNs in two cohorts. Funding was also awarded to create a program that addresses the specific learning needs of the returning RNS. The goals of the new RN to BSN program are to revise the current program to be completed in one year and to increase accessibility by offering the courses in the evening and via videostreaming for the working RNs

The existing courses for the undergraduate generic nursing program will not change. The intent is for the RN to BSN program to be a separate program within the Division of Nursing. Therefore, a numbering change is requested for N111A/N111B to N171 with no unit changes. In this case, N111A and N111B will no longer exist as they are not included in the undergraduate generic nursing program.

NEW COURSE DESCRIPTION: (Not to exceed 80 words, and language should conform to catalog copy. See <http://www.csus.edu/acaf/univmanual/crsp1.htm> - Guidelines for Catalog Course Description)

Note:	
Prerequisite:	
Corequisite:	
CAN (California Articulation Number):	
Graded: Letter ___ Credit/No Credit ___	Instructor Approval Required? Yes ___ No ___

Course Classification (e.g., lecture, lab, seminar, discussion):	Title for SIS+/CMS (not more than 30 characters)
Cross Listed? Yes ___ No ___	If yes, do they meet together and fulfill the same requirement, and what is the other course.
How Many Times Can This Course be Taken for Credit? _____	
Can the course be taken for Credit more than once during the same term? Yes ___ No ___	

FOR NEW COURSE PROPOSALS OR SUBSTANTIVE CHANGES ONLY:

Description of the Expected Learning Outcomes: Describe outcomes using the following format: "Students will be able to: 1), 2), etc." See the example at <http://www.csus.edu/acad/example.htm>

****Attach a list of the required/recommended course readings and activities [Note: it is understood that these are updated and modified as needed by the instructor(s).] This attachment should be forwarded only to your Dean's office, not Academic Affairs.**

Assessment Strategies: A description of the assessment strategies (e.g., portfolios, examinations, performances, pre-and post-tests, conferences with students, student papers) which will be used by the instructor to determine the extent to which students have achieved the learning outcomes noted above:

For whom is this course being developed?

Majors in the Dept ___ Majors of other Depts ___ Minors in the Dept ___ General Education ___ Other ___

Is this course required in a degree program (major, minor, graduate degree, certificate)? Yes ___ No ___

If yes, identify program(s):

Does the proposed change or addition cause a significant increase in the use of College or University resources (lab room, computer facilities, faculty, etc.)? Yes ___ No ___

If yes, attach a description of resources needed and verify that resources are available.

Indicate which department or programs will be affected by the proposed course (if any). _____

The Department Chair's signature below indicates that affected programs have been sent a copy of this proposal form.

Approvals: If proposed change, new course or deletion is approved, sign and date below. If not approved, forward without signing to the next reviewing authority, and attach an explanatory memorandum to the original copy.

Signatures:

	Date
Department Chair: <i>Ann Holt</i>	3-23-07
College Dean or Associate Dean: <i>Pamela Hopkins</i>	4-20-07
CPSP (for school personnel courses ONLY)	
Associate Vice President and Dean for Academic Programs	CONDITIONAL APPROVAL 4/23/07

Distribution: Academic Affairs (original), Department Chair and College Dean. Dean's office to send original after approval to Academic Affairs, at mail zip 6016. An electronic copy must also be sent.