

**DE ANZA COLLEGE**  
**Student Learning Outcomes (SLOs) Assessment Report**  
**Mapping Program Level Outcomes to Institutional Core Competencies**

**Program/Certificate/Degree Name:**

Licensed Voacational Nurse Transition to Registered Nurse

**Date:**

April 26,2011

**Division (if applicable):**

BHES\_WE

**Program Contact Person:**

Judith clavijo

**Phone:**

8397

See instructions for ICCs reference numbers "Expanded ICCs" tab below. Every program will need an individual sheet. Attach additional pages as necessary.

Name as DEPT\_PLO\_ProgramName.xls

Submit as e-mail attachment to [outcomes@deanza.edu](mailto:outcomes@deanza.edu)

ICC Number #'s	Program Level Outcomes	Means of Assessment and Criteria for Success	Summary of Data Collected	Use of Results	Timeline for Program Modification
5a, c, e, j, 1	Graduates will be ble to pass the professional licensure exam for Registered Nurse (NCLEX)	We will use the reports from the Board of RN			
1a, 3d, 4c	Graduates will be able to provide competent nursing care as a novice RN in multiple jhealthcare settings	We will use a survey based on BRN standards of competency			

ICC 1: Communication and expression  
 ICC 2: Information literacy

ICC 3: Physical/mental wellness and personal responsibility  
 ICC 4: Global, cultural, social and environmental awareness

ICC 4 Critical thinking

**DE ANZA COLLEGE**  
**Student Learning Outcomes (SLOs) Assessment Report**  
**Mapping Program Level Outcomes to Institutional Core Competencies**

**Program/Certificate/Degree Name:**

Associate Degree Nursing Program

**Date:**

4/26/11

**Division (if applicable):**

BHES\_WE

**Program Contact Person:**

Judith Clavijo

**Phone:**

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