

## M.S. in Nursing 2018-2019

The Masters of Science in Nursing (MSN) curriculum reflects expected student learning outcomes that are consistent with the overall program outcomes.

### **Student Learning Outcomes - Graduates of the MSN program are expected to be able to:**

1. Promote evidence-based practice through problem identification and the critique of research findings.
2. Collaborate in policy development, resource management, and cost-effective care delivery.
3. Apply legal/ethical principles to promote a values-based professional practice.
4. Affect health care outcomes through advanced roles of clinician, teacher, manager, researcher, and consultant.
5. Utilize theories from nursing and other disciplines for decision making.
6. Advocate for access to quality health care for diverse populations.
7. Collaborate with other disciplines to design, deliver, and evaluate health care services for diverse populations.
8. Provide leadership in education in a variety of clinical and academic settings.

In addition, course objectives are included in each course syllabus and are designed to prepare future nurse educators to develop advanced knowledge and higher level leadership skills for improving health outcomes.

The **indicators of the attainment** of the MSN Program Outcomes are as follows: (1) attainment of required course outcomes; (2) adherence to UA Graduate School Academic Progression Policy Grade Point Average (GPA) Requirement to Receive a Master's Degree *students must obtain a minimum 2.85 cumulative grade point average on all graded graduate course work taken in residence to receive a master's degree from the University of Arkansas*; (3) successful completion and defense of a thesis or scholarly project. One student graduated with a MSN in 2019 and met the expected program outcomes. One student did not meet the required GPA after a 2 semester academic probation and was dismissed from the program.

The Eleanor Mann School of Nursing 2019 Program Evaluation Plan is attached below.

**Eleanor Mann School of Nursing  
Program Evaluation Plan – Updated 4.30.2019**

**Standard I**

**Program Quality: Mission & Governance**

Key Element	Sources of Data	Responsible Party * writes the report	Frequency of Review	Expected Outcomes
I-A. The mission, goals, and expected program outcomes are: ▪ congruent with those of the parent institution; and ▪ reviewed periodically and revised as appropriate.	<ul style="list-style-type: none"> <li>• U of A Mission</li> <li>• COEHP Mission</li> <li>• EMSON Mission &amp; Philosophy</li> <li>• Student Outcomes</li> <li>• Committee/Dept. Minutes</li> <li>• EMSON and Global Campus Websites</li> </ul>	<ul style="list-style-type: none"> <li>• Standing committees</li> <li>• CNO council</li> <li>• Director</li> <li>• Assistant director</li> <li>• UG/GR program coordinators</li> </ul>	Every 4 years Last review 8/2018	EMSON mission, goals and expected student outcomes are accessible to students. They are congruent and consistent with parent institution and professional nursing standards and guidelines.
I-B. The mission, goals, and expected program outcomes are consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.	<ul style="list-style-type: none"> <li>• UG/GR Catalogs</li> <li>• EMSON Strategic Plan</li> <li>• Student handbooks</li> <li>• EMSON and Global Campus websites</li> <li>• Minutes (AAC, Faculty)</li> <li>• AACN Essentials of Baccalaureate Education (2008)</li> <li>• AACN Essentials of Master's Education in Nursing (2011)</li> <li>• AACN Essentials of Doctoral Education for Advanced Nursing Practice (2006),</li> <li>• Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016)</li> </ul>	<ul style="list-style-type: none"> <li>• Academic Affairs Committee</li> <li>• CNO Council</li> <li>• UG/GR program coordinators</li> </ul>	Every 4 years Last review 8/2018	Systematic reviews are conducted. They include input from community of interest to foster program improvement.
I-C. The mission, goals, and expected program outcomes reflect the needs and expectations of the community of interest.	<ul style="list-style-type: none"> <li>• CNO Council</li> <li>• Committee/program minutes</li> <li>• Students: course evaluations, end-of-program evaluations; advising sessions</li> <li>• Alumni surveys</li> </ul>	<ul style="list-style-type: none"> <li>• Director</li> <li>• Assistant director</li> <li>• UG/GR program coordinators</li> </ul>		
I-D. The nursing unit's expectations for faculty are	<ul style="list-style-type: none"> <li>• EMSON Personnel Document</li> <li>• EMSON server</li> </ul>	<ul style="list-style-type: none"> <li>• Director</li> </ul>	Yearly - COEHP August, 2018	Expected faculty outcomes are clearly identified, written (documented in

written and communicated to the faculty and are congruent with institutional expectations.	<ul style="list-style-type: none"> <li>• Annual Peer/Director faculty evaluations</li> <li>• UA Promotion &amp; Tenure policies</li> <li>• ASBN and CCNE Annual Reports</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR Program Coordinators</li> <li>• *Peer evaluation committee</li> </ul>		faculty handbook) & shared with faculty by the director. They are congruent with those of parent institution.
I-E. Faculty and students participate in program governance.	<ul style="list-style-type: none"> <li>• Committee Minutes</li> <li>• Faculty Handbooks</li> <li>• Student representatives attend program level meetings</li> </ul>	<ul style="list-style-type: none"> <li>• EMSON standing Committees</li> <li>• Director</li> </ul>	ongoing	Roles of faculty and students in governance of program are clearly defined and promote participation.
I-F. Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected program outcomes. These policies are: <ul style="list-style-type: none"> <li>▪ fair and equitable;</li> <li>▪ published and accessible; and</li> <li>▪ reviewed and revised as necessary to foster program improvement.</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR Catalogs</li> <li>• University, college and school's Web pages</li> <li>• Faculty/Student/Staff Handbooks</li> <li>• Committee Minutes</li> <li>• (Faculty, AAC, FAC, SAC)</li> <li>• University Provost's Office</li> <li>• Course syllabi</li> <li>• COEHP Committee Minutes</li> </ul>	<ul style="list-style-type: none"> <li>• EMSON standing committee chairs</li> <li>• UG/GR Program Coordinators</li> <li>• Director</li> <li>• Assistant director</li> </ul>	ongoing	Nursing faculty are involved in development, review, and revision of academic program policies. Differences in EMSON and COEHP/UA are identified and are in support of achievement of the program's mission, goals and expected student outcomes. A process is in place by which policy review occurs annually and revisions are made as needed.
I-G. The program defines and reviews formal complaints according to established policies.	<ul style="list-style-type: none"> <li>• Student Handbooks</li> <li>• Record of formal complaints (FAC and/or SAC minutes)</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR program coordinators</li> <li>• Director</li> <li>• Assistant director</li> </ul>	Ongoing	A formal complaint is defined and a record compiled of those complaints.
I-H. Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.	<ul style="list-style-type: none"> <li>• UG/GR Catalogs</li> <li>• EMSON Web-Site</li> <li>• EMSON Admission materials</li> <li>• Student Handbooks</li> <li>• Recruitment materials</li> </ul>	<ul style="list-style-type: none"> <li>• EMSON Standing Committee Chairs</li> <li>• GR/UG Program Coordinators</li> <li>• Director</li> <li>• Assistant director</li> </ul>	Ongoing	References to the program's offerings, outcomes, accreditation/approval status, academic calendar, recruitment and admission policies, transfer of credit policies, grading policies, degree completion requirements, tuition, and fees are accurate. Accreditation status is publicly disclosed.

## Standard II

### Program Quality: Institutional Commitment and Resources

Key Element	Data	Responsible Party * writes the report	Frequency	Expected Outcomes
II-A. Fiscal resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of fiscal resources is reviewed periodically, and resources are modified as needed.	<ul style="list-style-type: none"> <li>• EMSON Budget</li> <li>• Budget Priorities for fiscal year (Minutes)</li> <li>• Simulation Lab Inventory</li> <li>• Foundation Budgets</li> <li>• Tele-fee priorities</li> <li>• AACN Salaries of Instructional and Administrative Nursing Faculty in Baccalaureate and Graduate Programs in Nursing</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR Program Coordinators</li> <li>• Faculty</li> <li>• COEHP Development Office</li> <li>• *Director</li> </ul>	ongoing	The budget enables achievement of program's mission, goals and expected faculty/student outcomes. The budget also support the development, implementation, and evaluation of program. Nursing compensation supports recruitment & retention of qualified faculty. Physical space is sufficient and enables EMSON to meet mission, goals, and expected student/faculty outcomes. A process is in place for regular review of EMSON's fiscal and physical resources and improvements are made as appropriate.
II-B. Physical resources and clinical sites enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of physical resources and clinical sites is reviewed periodically, and resources are modified as needed.	<ul style="list-style-type: none"> <li>• EBI/Skyfactor exit surveys; alumni surveys</li> <li>• Student end-of-course surveys</li> <li>• End-of-program surveys</li> <li>• Readiness to practice survey</li> <li>• Faculty satisfaction survey</li> </ul>	<ul style="list-style-type: none"> <li>• EMSON Standing Committee Chairs</li> <li>• *Director</li> </ul>	ongoing	
II-C. Academic support services are sufficient to meet program and student needs and are evaluated on a regular basis.	<ul style="list-style-type: none"> <li>• Faculty surveys of resources</li> <li>• Student survey of resources</li> <li>• Academic advisors</li> </ul>	<ul style="list-style-type: none"> <li>• *Director</li> <li>• EMSON standing committee chairs</li> <li>• UG/GR program coordinators</li> </ul>	ongoing	Academic support services (library, IT, Global Campus, admission & advising services) are regularly reviewed and found to be adequate for students and faculty to meet program requirements and achieve mission, goals, and expected student/faculty outcomes. Improvements are made as appropriate.
II-D. The chief nurse administrator of the nursing unit: <ul style="list-style-type: none"> <li>▪ is a registered nurse (RN);</li> <li>▪ holds a graduate degree in nursing;</li> <li>▪ holds a doctoral degree if the nursing unit offers a graduate program in nursing;</li> <li>▪ is vested with the administrative authority to accomplish the mission, goals,</li> </ul>	<ul style="list-style-type: none"> <li>• Vitae</li> <li>• Director's annual evaluations</li> </ul>	<ul style="list-style-type: none"> <li>• COEHP Dean</li> <li>• *Program Evaluation Committee</li> </ul>	ongoing	The Director has budgetary, decision-making, and evaluation authority comparable to that of chief administrators of similar units at UA. She consults, as appropriate with faculty and other communities of interest, to make decision to accomplish the mission, goals, and expected student/faculty outcomes. The Director is perceived by the communities of interest to be an effective leader of the nursing unit.

and expected program outcomes; and <ul style="list-style-type: none"> <li>▪ provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.</li> </ul>				
II-E. Faculty are: <ul style="list-style-type: none"> <li>▪ sufficient in number to accomplish the mission, goals, and expected program outcomes;</li> <li>▪ academically prepared for the areas in which they teach; and</li> <li>▪ experientially prepared for the areas in which they teach.</li> </ul>	<ul style="list-style-type: none"> <li>• Faculty Vitae</li> <li>• Faculty list consisting of academic rank, educational degrees, licensure, certifications, and experiences.</li> <li>• Faculty Workload guidelines</li> <li>• List of course/clinical sections</li> <li>• Status of faculty searches</li> <li>• EMSON faculty/course evaluations</li> <li>• Hiring requests</li> </ul>	<ul style="list-style-type: none"> <li>• Director</li> <li>• UG/GR Program Coordinators</li> <li>• EMSON Faculty Standing Committee</li> <li>• *Program Evaluation Committee</li> </ul>	ongoing	The FTE of faculty formula for calculating FTE is clearly delineated; the mix of FT and PT faculty is appropriate to achieve mission, goals, and expected student/faculty outcomes. Faculty-student clinical ratios (1:8 BSN, 1:6 DNP) meet Board of Nursing's and accrediting body's professional practice standards. Faculty are academically prepared for the areas in which they teach. Rationale is provided for the use of faculty who do not have a graduate degree. Faculty hold RN licensure. Clinical faculty are experienced in the clinical area of the course and maintain clinical expertise. Faculty supervising the DNP program hold appropriate licensure and certification.
II-F. Preceptors (e.g., mentors, guides, coaches), if used by the program as an extension of faculty, are academically and experientially qualified for their role.	<ul style="list-style-type: none"> <li>• Preceptor list with credentials</li> <li>• Preceptor contracts &amp; orientation</li> <li>• Preceptor vitae</li> <li>• Student evaluations of preceptor(s)</li> <li>• Clinical coordinator evaluation of preceptor</li> </ul>	<ul style="list-style-type: none"> <li>• *UG/GR Program Coordinators</li> <li>• Course faculty</li> </ul>	ongoing	The roles of preceptors or mentors with respect to teaching, supervision, and student evaluation are clearly defined; congruent with mission, goals, expected student outcomes; and congruent with relevant professional nursing standards &/or guidelines. Preceptors and/or mentors have the expertise to support student achievement of expected learning outcomes. Preceptor/mentor performance expectations are clearly communicated to preceptors.
II-G. The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.	<ul style="list-style-type: none"> <li>• COEHP Annual Report</li> <li>• Development offerings (FAC &amp; TFSC sponsored)</li> <li>• Faculty Vitae</li> <li>• Annual faculty evaluations</li> <li>• Faculty workloads</li> </ul>	<ul style="list-style-type: none"> <li>• Director</li> <li>• EMSON Standing Faculty Committees</li> <li>• UG/GR program coordinators</li> </ul>	ongoing	Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role (teaching, research, practice, service) and in support of the mission, goals, and expected student outcomes.

		<ul style="list-style-type: none"> <li>*Program Evaluation Committee</li> </ul>		
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**Standard III**

**Program Quality: Curriculum and Teaching-Learning Practices**

<p>III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that:</p> <ul style="list-style-type: none"> <li>are congruent with the program’s mission and goals;</li> <li>are congruent with the roles for which the program is preparing its graduates; and</li> <li>consider the needs of the program–identified community of interest.</li> </ul>	<ul style="list-style-type: none"> <li>AAC minutes</li> <li>UG/GR program minutes</li> <li>Curriculum plan</li> <li>Program outcomes</li> <li>EMSON course &amp; clinical evaluations</li> <li>EMSON faculty evaluations of clinical sites</li> <li>CNO meetings</li> </ul>	<ul style="list-style-type: none"> <li>Academic Affairs Committee Chair</li> <li>Assistant director</li> <li>*UG/GR program coordinators</li> </ul>	<p>Every 4 years</p> <ul style="list-style-type: none"> <li>BSN Jr. level courses</li> <li>12/2019</li> <li>BSN Sr. level Courses12/2019</li> <li>MSN courses 4/2020</li> <li>DNP courses 4/2021</li> <li>RN/BSN 4/2019</li> <li>LPN/BSN 10/2018;10/2022</li> </ul>	<p>Curricular objectives (course, unit, Level, competencies) provide clear statement of expected individual student learning outcomes which contribute to the achievement of the mission, goals, and expected aggregate student outcomes.</p>
<p>III-B. Baccalaureate curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Baccalaureate program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008).</p>	<ul style="list-style-type: none"> <li>AR State Board of Nursing regulations</li> <li>AACN standards: <ul style="list-style-type: none"> <li>The <b>Essentials</b> of Baccalaureate Education for Professional Nursing Practice (2008)</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Academic Affairs Committee Chair</li> <li>Assistant director</li> <li>*UG/GR Coordinators</li> </ul>	<p>Every 4 years</p> <ul style="list-style-type: none"> <li>BSN Jr. level courses</li> <li>12/2019</li> <li>BSN Sr. level Courses12/2019</li> <li>RN/BSN 4/2019</li> <li>LPN/BSN 10/2018;10/2022</li> </ul>	<p>Each degree program incorporates professional nursing standards and guidelines relevant to that program, area, role, population focus, or specialty. The program clearly demonstrates where and how content, knowledge, and skilled required by identified sets of standards are incorporated into the curriculum.</p>
<p>III-C. Master’s curricula are developed, implemented, and revised to reflect relevant professional nursing standards</p>	<ul style="list-style-type: none"> <li>AACN standards: <ul style="list-style-type: none"> <li>The <b>Essentials</b> of Master’s Education in Nursing (2011)</li> </ul> </li> </ul>		<p>Every 4 years</p> <ul style="list-style-type: none"> <li>MSN courses 4/2020</li> </ul>	

<p>and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).</p> <ul style="list-style-type: none"> <li>▪ Master’s program curricula incorporate professional standards and guidelines as appropriate.</li> </ul> <p>a. All master’s degree programs incorporate The Essentials of Master’s Education in Nursing (AACN, 2011) and additional relevant professional standards and guidelines as identified by the program.</p> <p>b. All master’s degree programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016).</p> <ul style="list-style-type: none"> <li>▪ Graduate-entry master’s program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and appropriate graduate program standards and guidelines.</li> </ul>				
<p>III-D. DNP curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).</p> <ul style="list-style-type: none"> <li>▪ DNP program curricula incorporate professional</li> </ul>	<ul style="list-style-type: none"> <li>• AACN standards: <ul style="list-style-type: none"> <li>• The <b>Essentials</b> of Doctoral Education for Advanced Nursing Practice (2006)</li> </ul> </li> <li>• Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016)</li> </ul>		<p>Every 4 years</p> <ul style="list-style-type: none"> <li>• DNP courses 8/2019</li> </ul>	

<p>standards and guidelines as appropriate.</p> <p>a. All DNP programs incorporate The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006) and additional relevant professional standards and guidelines if identified by the program.</p> <p>b. All DNP programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016).</p> <ul style="list-style-type: none"> <li>▪ Graduate-entry DNP program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and appropriate graduate program standards and guidelines.</li> </ul>				
<p>III-E. Post-graduate APRN certificate program curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Post-graduate APRN certificate programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016).</p>	<p>N/A</p>			

<p>III-F. The curriculum is logically structured to achieve expected student outcomes.</p> <ul style="list-style-type: none"> <li>▪ Baccalaureate curricula build on a foundation of the arts, sciences, and humanities.</li> <li>▪ Master's curricula build on a foundation comparable to baccalaureate-level nursing knowledge.</li> <li>▪ DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student.</li> <li>▪ Post-graduate APRN certificate programs build on graduate-level nursing competencies and knowledge base.</li> </ul>	<ul style="list-style-type: none"> <li>• Self-study</li> </ul>	<ul style="list-style-type: none"> <li>• Assistant Director</li> <li>• *UG/GR Program Coordinators</li> <li>• Academic Affairs Committee Chair</li> </ul>	<p>In conjunction with review of courses</p>	<p>BSN faculty and students can articulate how knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice. RN to BSN program demonstrates how these nurses acquire BSN competencies and essentials. MSN and DNP programs incorporate generalist knowledge from BSN and delineate how students acquire doctoral-level competencies of Essentials.</p>
<p>III-G. Teaching-learning practices:</p> <ul style="list-style-type: none"> <li>▪ support the achievement of expected student outcomes;</li> <li>▪ consider the needs and expectations of the identified community of interest; and</li> <li>▪ expose students to individuals with diverse life experiences, perspectives, and backgrounds.</li> </ul>	<ul style="list-style-type: none"> <li>• EMSON course syllabi</li> <li>• End of Course/Faculty Evaluations</li> <li>• End of Course reports</li> <li>• UG/GR Dept. minutes</li> <li>• Alumni/Exit surveys</li> <li>• CNO Council minutes</li> <li>• Clinical evaluations</li> </ul>	<ul style="list-style-type: none"> <li>• Assistant director</li> <li>• *UG/GR Program Coordinators</li> <li>• Academic Affairs Committee Chair</li> </ul>	<p>ongoing</p>	<p>Teaching-learning practices and environment (classroom, clinical, lab, simulation, distance education) support the achievement of individual student learning outcomes identified in course, unit, and/or level objectives.</p> <p>The curriculum and teaching-learning practices are appropriate to the student population and consider the needs of the program- identified community of interest.</p>

<p>III-H. The curriculum includes planned clinical practice experiences that:</p> <ul style="list-style-type: none"> <li>▪ enable students to integrate new knowledge and demonstrate attainment of program outcomes;</li> <li>▪ foster interprofessional collaborative practice; and</li> <li>▪ are evaluated by faculty.</li> </ul>	<ul style="list-style-type: none"> <li>• Clinical Course Syllabi</li> <li>• Faculty meeting minutes</li> <li>• AAC minutes</li> <li>• PT Clinical faculty evaluations</li> <li>• UG/GR Dept. Minutes</li> <li>• Clinical Affiliation Agreements</li> <li>• Clinical evaluation tool</li> <li>• Simulation scenarios</li> </ul>	<ul style="list-style-type: none"> <li>• Assistant director</li> <li>• *UG/GR Program Coordinators</li> <li>• Academic Affairs Committee Chair</li> </ul>	<p>Ongoing</p>	<p>Students in each degree program have the opportunity to develop professional competencies in practice settings aligned to the educational preparation. Clinical practice experiences are provided for students in all programs, including those with distance education offerings. Clinical practices are designed to ensure students are competent to enter nursing practice at the level indicated by the degree. The design, implementation, and evaluation of clinical practice experiences are aligned to student and program outcomes.</p>
<p>III-I. Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.</p>	<ul style="list-style-type: none"> <li>• Student Handbooks</li> <li>• EMSON Clinical Evaluation tools</li> <li>• Course syllabi</li> </ul>	<ul style="list-style-type: none"> <li>• *UG/GR Program Coordinators</li> <li>• Academic Affairs Committee Chair</li> <li>• Course faculty</li> </ul>	<p>Ongoing</p>	<p>Evaluation of student performance is consistent with expected student outcomes. Grading criteria are clearly defined for each course, communicated to students, and applied consistently. A process is in place for communicating the evaluation of individual student performance to students.</p>
<p>III-J. The curriculum and teaching-learning practices are evaluated at regularly scheduled intervals, and evaluation data are used to foster ongoing improvement.</p>	<ul style="list-style-type: none"> <li>• Alumni/Exit surveys</li> <li>• Student evaluations of courses</li> <li>• UG/GR Dept. minutes</li> <li>• End-of-course reports</li> </ul>	<ul style="list-style-type: none"> <li>• Academic Affairs Committee Chair</li> <li>• *UG/GR Program Coordinators</li> </ul>	<p>Every semester</p>	<p>Faculty use data from student evaluations to inform decisions that facilitate achievement of student outcomes.</p>

### Standard IV

#### Program Effectiveness: Assessment and Achievement of Program Outcomes

Key Element	Data	Responsible Party * writes the report	Frequency	Expected Outcome
<p>IV-A A systematic process is used to determine program effectiveness.</p>	<ul style="list-style-type: none"> <li>• Program Evaluation Plan</li> </ul>	<ul style="list-style-type: none"> <li>• *Program Evaluation Committee</li> <li>• Director</li> <li>• Assistant director</li> </ul>	<p>Ongoing</p>	<p>A process is in place that is written, ongoing, comprehensive, uses quantitative, and qualitative data, has timelines for collection,</p>

		<ul style="list-style-type: none"> <li>• UG/GR program coordinators</li> </ul>		<p>review, and analysis of data, and is periodically reviewed &amp; revised.</p> <p>The records are maintained on the EMSON server.</p>
IV-B. Program completion rates demonstrate program effectiveness.	<ul style="list-style-type: none"> <li>• BSN, MSN, and DNP graduation rates</li> <li>• Attrition data</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR Program Coordinators</li> <li>• Assistant director</li> <li>• *Director</li> </ul>	Yearly May	Each program demonstrates achievement of required program outcomes; completion rates are 70% or higher.
IV-C. Licensure pass rates demonstrate program effectiveness.	<ul style="list-style-type: none"> <li>• NCLEX results</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR Program Coordinators</li> <li>• Assistant director</li> <li>• *Director</li> </ul>	Ongoing	<p>The NCLEX pass rate is 80% or higher for first-time takers.</p> <p>Licensure rates for APRNs are 80% or higher for first-time takers.</p>
IV-D. Certification pass rates demonstrate program effectiveness.	<ul style="list-style-type: none"> <li>• Certification Rates</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR Program Coordinators</li> <li>• Assistant director</li> <li>• *Director</li> </ul>	Ongoing	Certification pass rates are 80% or higher for first-time takers.
IV-E. Employment rates demonstrate program effectiveness.	<ul style="list-style-type: none"> <li>• Graduate surveys</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR Program Coordinators</li> <li>• Assistant director</li> <li>• *Director</li> </ul>	After graduation	The employment rate is 70% or higher for each program (BSN, MSN, and DNP).
IV-F. Data regarding completion, licensure, certification, and employment rates are used, as appropriate, to foster ongoing program improvement.	<ul style="list-style-type: none"> <li>• Standing committee minutes</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR Program Coordinators</li> <li>• Assistant director</li> <li>• *Director</li> </ul>	Ongoing	The program uses outcome data for program improvement. Provide examples.
IV-G. Aggregate faculty outcomes demonstrate program effectiveness.	<ul style="list-style-type: none"> <li>• Annual Faculty Evaluation</li> <li>• EMSON Personnel Document</li> <li>• Student evaluations of course</li> </ul>	<ul style="list-style-type: none"> <li>• Personnel committee</li> <li>• *Director</li> <li>• PEC</li> </ul>	Annually - spring	<ul style="list-style-type: none"> <li>• Faculty achieve aggregate rating of 2.5 on 3-point scale per faculty evaluation document</li> <li>• Aggregate student course evaluations (end of course survey) reflect at least a 4.25 on a 5-point scale on the following statements: <ul style="list-style-type: none"> <li>• Q5: <i>Teaching and learning practices and environments were appropriate for achieving course objectives</i></li> <li>• Q8: <i>This course encourages me to think critically</i></li> </ul> </li> </ul>

<p>IV-H. Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.</p>	<ul style="list-style-type: none"> <li>• Annual faculty evaluation</li> <li>• Student evaluations of course</li> </ul>	<ul style="list-style-type: none"> <li>• Personnel committee</li> <li>• *Director</li> <li>• Assistant director</li> </ul>	<p>Ongoing</p>	<p>Aggregate data are reviewed and recommendations for improvement are addressed by the appropriate committee or course faculty. Examples provided in formal reports.</p>
<p>IV-I. Program outcomes demonstrate program effectiveness.</p>	<ul style="list-style-type: none"> <li>• Student Satisfaction Surveys <ul style="list-style-type: none"> <li>○ End of program surveys</li> </ul> </li> <li>• Outcome assessment data</li> <li>• Clinical evaluations</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR Program Coordinators</li> <li>• Assistant director</li> <li>• *Director</li> </ul>	<p>Ongoing</p>	<ul style="list-style-type: none"> <li>• 100% of students in cohort achieve 75% or higher on NURS 4722 clinical evaluation</li> <li>• 100% of students in cohort achieve 75% or higher in capstone course evaluation (RN-BSN)</li> <li>• 100% of students in cohort achieve 75% or higher on NURS 6244 clinical evaluation</li> <li>• Each item on the Skyfactor End of Program survey will score at least 5.5 on a 7-point scale.</li> <li>• <b>Aggregate score on the DNP project rubric – to be determined</b></li> </ul>
<p>IV-J. Program outcome data are used, as appropriate, to foster ongoing program improvement.</p>	<ul style="list-style-type: none"> <li>• UG/GR dept. minutes</li> <li>• SAC/AAC minutes</li> <li>• Kaplan results</li> <li>• NCLEX/Certification data</li> <li>• Program completion data</li> <li>• Student outcome assessment data</li> <li>• Student satisfaction survey</li> <li>• Employer surveys</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR Program Coordinators</li> <li>• Assistant director</li> <li>• Director</li> <li>• Faculty Committees</li> <li>• Faculty</li> </ul>	<p>Ongoing</p>	<p>The program uses outcome data for program improvement (Ex: completion, licensure, certification, employment rates, program outcomes, and formal complaints). Examples provided in formal reports.</p>