

FNPRMC : Family Nurse Practitioner, Post Master's Certificate Assessment

Program Goals and Objectives

Manage primary care for the whole family across the life span in a variety of clinical settings. Graduates who earn their post-doctoral/post-master's FNP certificate will be qualified to manage all aspects of primary care, including diagnosis and management of common acute and complex chronic conditions.

Student Learning Outcomes

1. Utilize assessment data as a basis for determining an accurate problem list; evaluate the management outcomes of men, women, and older adults, and revise plans appropriately.
2. Diagnose and manage men, women, and older adults health problems based on the knowledge of clinical presentation, natural history of disease and micro/macro environmental factors.
3. Identify client problems that require collaboration and consultation or referral to other members of the multi-disciplinary health care team.
4. Provide age appropriate wellness promotion and disease prevention services weighing the costs, risks, and benefits to individuals.
5. Design a comprehensive, individualized, age-and condition-appropriate plan of care for treatment including promotion of health in clients with common conditions using appropriate theoretical framework.
6. Describe the pathophysiologic, psychosocial, and family structure changes that occur in pregnant women.
7. Independently manage common complex, acute and chronically ill men, women, and older adults, using interventions to prevent or reduce risk factors for diverse and vulnerable adult populations.
8. Provide interventions adapted to meet the complex needs of individuals and families considering cost benefit and patient preference. Use correct diagnostic evaluation and management billing codes for complex problems seen in primary care.
9. Evaluate individual, caregiver, and family support systems to cope with and manage developmental (life stage) transitions.
10. Develop a plan for long-term management of complex chronic health care problems with the individual, family, and health care team.
11. Collaborate with others to diagnose and manage acute complications of chronic and/or multi-system health problems, including palliative and end- of -life care.
12. Safely perform procedures common to adult primary care clinical practice.
13. Educate individuals, families, caregivers, and groups regarding strategies to manage the interaction among normal development, aging, and mental and physical disorders.
14. Integrate physical, psychosocial and cultural assessment into comprehensive management plans for adolescents, children, and their families.
15. Utilize knowledge, theory, and research findings to develop plans for wellness promotion and risk of illness reduction for adolescents, and children.
16. Develop management plans for adolescents, and children with common acute and chronic health problems.
17. Develop management plans for families with common dysfunction and behavioral problems.

18. Develop therapeutic health teaching, anticipatory guidance, and counseling approaches for adolescents, children, and their families.
19. Evaluate clinical data and therapeutic options to differentiate between problem situations requiring nurse practitioner management, collaborative management, or referral to other providers.
20. Synthesize knowledge of community resources to effectively plan comprehensive nursing care for primary care and medically complex clients through collaboration and case management.
21. Analyze the impact of legal, political, economic and sociocultural factors on access and utilization of health care services for families.

Program assessment will consist of:

1. Student completion of required courses and earning certificate.
2. Students passing ANCC or AANP certification exam.
3. Student employment.

Program outcomes will be assessed by the program Evaluation Committee on an annual basis.

Appendix II. Program Evaluation Plan

**Eleanor Mann School of Nursing
Program Evaluation Plan – Updated 5/12/2022**

**Standard I
Program Quality: Mission & Governance**

Key Element	Sources of Data	Responsible Party * writes the report	Frequency of Review	Expected Outcomes	Date of Review 5/12/2022 Met/Not met
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"> • U of A Mission • COEHP Mission • EMSON Mission & Philosophy • EMSON and Global Campus Websites • Full faculty minutes 	<ul style="list-style-type: none"> • Standing committees • Director • Assistant director • UG/GR program coordinators • PEC 	Annually Last review 8/2021	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.	met
I-B. The mission, goals, and expected program outcomes are consistent with relevant	<ul style="list-style-type: none"> • Minutes (AAC, Full Faculty) • AACN Essentials of Baccalaureate Education (2008) • AACN Essentials of Master's 	<ul style="list-style-type: none"> • Academic Affairs Committee • PEC • UG/GR program coordinators 	Annually Last review 8/2021	Systematic reviews are conducted. They include input from community of interest to foster program improvement.	met

professional nursing standards and guidelines for the preparation of nursing professionals.	<p>Education in Nursing (2011)</p> <ul style="list-style-type: none"> • AACN Essentials of Doctoral Education for Advanced Nursing Practice (2006), • Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016) 				
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"> • Committee/full faculty minutes • Students: course evaluations, end-of-program evaluations; advising sessions • Alumni surveys 	<ul style="list-style-type: none"> • Director • Assistant director • UG/GR program coordinators 	Annually Minutes NEC, AAC	Input from community of interest on needs and expectations	met
I-D. The nursing unit's expectations for faculty are written and communicated to the faculty and are	<ul style="list-style-type: none"> • EMSON Personnel Document • COEHP Personnel Document • Annual Peer/Director faculty evaluations 	<ul style="list-style-type: none"> • Director • UG/GR Program Coordinators • Personnel Committee • *Peer evaluation committee 	Annual	Expected faculty outcomes are clearly identified, written (documented in UA policy and EMSON Personnel Document) & shared with faculty by the director. Director send annual memo in May. They are congruent with those of parent institution.	met

congruent with institutional expectations.	<ul style="list-style-type: none"> • UA Promotion & Tenure policies 1405.11 				
I-E. Faculty and students participate in program governance.	<ul style="list-style-type: none"> • Committee Minutes • Faculty Handbook • Student representatives attend program level meetings 	<ul style="list-style-type: none"> • EMSON standing Committees 	ongoing	Roles of faculty and students in governance of program are clearly defined and promote participation.	met
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"> ▪ fair and equitable; ▪ published and accessible; and ▪ reviewed and revised as necessary to 	<ul style="list-style-type: none"> • COEHP Personnel Document • EMSON Personnel Document • UG/GR Catalogs • University, college and school's Web pages • Faculty/Student/Staff Handbooks • Committee Minutes • (Faculty, AAC, FAC, SAC) • Course syllabi 	<ul style="list-style-type: none"> • EMSON standing committee chairs • UG/GR Program Coordinators • Director • Assistant director 	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.	met

foster program improvement.					
I-G. The program defines and reviews formal complaints according to established policies.	<ul style="list-style-type: none"> • Student Handbooks • Record of formal complaints SAC minutes) 	<ul style="list-style-type: none"> • UG/GR program coordinators • Director • Assistant director 	Ongoing	A formal complaint is defined in UA policy and a record compiled of those complaints.	met
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"> • UG/GR Catalogs • EMSON Web-Site • EMSON Admission materials • Student Handbooks • Recruitment materials 	<ul style="list-style-type: none"> • EMSON Standing Committee Chairs • GR/UG Program Coordinators • Director • Assistant director 	Ongoing review and revision of the website	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.	met

Standard II

Program Quality: Institutional Commitment and Resources

Key Element	Data	Responsible Party * writes the report	Frequency	Expected Outcomes	Date of review 5/12/22 Met/Not Met
II-A. Fiscal resources are	• EMSON Budget	• UG/GR Program	ongoing	The budget enables achievement of program's mission, goals and expected	Met but needs QI

<p>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.</p>	<ul style="list-style-type: none"> • Budget Priorities for fiscal year (Minutes) • Simulation Lab Inventory • Foundation Budgets • Tele-fee priorities • AACN Salaries of Instructional and Administrative Nursing Faculty in Baccalaureate and Graduate Programs in Nursing 	<p>Coordinator s</p> <ul style="list-style-type: none"> • Faculty • *Director 		<p>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.</p>	<p>Review of faculty lines, salaries needed</p>
<p>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,</p>	<ul style="list-style-type: none"> • EBI/Skyfactor exit surveys; alumni surveys • Student end-of-course surveys • End-of-program surveys • Readiness to practice survey • Faculty satisfaction survey 	<ul style="list-style-type: none"> • FAC • EMSON Standing Committee Chairs • *Director • College 	<p>Reviewed at least annually</p>	<p>FAC surveys faculty regarding resources and reports results to Director and faculty.</p>	<p>met</p>

and resources are modified as needed.					
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"> • Faculty surveys of resources • Student survey of resources (EBI) • Academic advisors 	<ul style="list-style-type: none"> • *Director • EMSON standing committee chairs • UG/GR program coordinators 	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.	met
II-D. The chief nurse administrator of the nursing unit: <ul style="list-style-type: none"> ▪ is a registered nurse (RN); ▪ holds a graduate degree in nursing; ▪ holds a doctoral degree if the nursing unit offers a graduate 	<ul style="list-style-type: none"> • Vitae • Director's job description 	<ul style="list-style-type: none"> • COEHP Dean • *Program Evaluation Committee 	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.	met

<p>program in nursing;</p> <ul style="list-style-type: none"> ▪ is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and ▪ provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes. 					
<p>II-E. Faculty are:</p> <ul style="list-style-type: none"> ▪ sufficient in number to accomplish the mission, goals, and expected 	<ul style="list-style-type: none"> • Faculty Vitae • Faculty list consisting of academic rank, educational degrees, licensure, certifications, and experiences. 	<ul style="list-style-type: none"> • Director • UG/GR Program Coordinators • EMSON Faculty Standing Committee 	<p>ongoing</p>	<p>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</p>	<p>Met But needs QI More full time clinical faculty</p>

<p>program outcomes; <ul style="list-style-type: none"> ▪ academically prepared for the areas in which they teach; and ▪ experientially prepared for the areas in which they teach. </p>	<ul style="list-style-type: none"> • Faculty Workload guidelines • List of course/clinical sections • Status of faculty searches • EMSON faculty/course evaluations • Hiring requests 	<ul style="list-style-type: none"> • *Program Evaluation Committee 		<p>which they teach. Rationale is provided and approval is obtained 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.</p>	
<p>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.</p>	<ul style="list-style-type: none"> • Preceptor list with credentials • Preceptor contracts & orientation • Preceptor vitae • Student evaluations of preceptor(s) • Clinical coordinator evaluation of preceptor 	<ul style="list-style-type: none"> • *UG/GR Program Coordinators • Course faculty 	<p>ongoing</p>	<p>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.</p>	<p>Met But needs QI What is the process for verifying and documenting? Can it be standardized?</p>
<p>II-G. The parent institution and program provide and</p>	<ul style="list-style-type: none"> • COEHP Annual Report • Development offerings (FAC & TFSC sponsored) 	<ul style="list-style-type: none"> • Director • EMSON Standing Faculty Committees 	<p>ongoing</p>	<p>Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role (teaching, research, practice, service) and in support of</p>	<p>Met</p>

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"> • Faculty Vitae • Annual faculty evaluations • Faculty workloads 	<ul style="list-style-type: none"> • UG/GR program coordinators • *Program Evaluation Committee 		the mission, goals, and expected student outcomes.	
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Standard III

Program Quality: Curriculum and Teaching-Learning Practices

III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that: <ul style="list-style-type: none"> ▪ are congruent with the 	<ul style="list-style-type: none"> • AAC minutes • UG/GR program minutes • Curriculum plan • Program outcomes • EMSON course & clinical evaluations • EMSON faculty evaluations of clinical sites 	<ul style="list-style-type: none"> • Academic Affairs Committee Chair • Assistant director • *UG/GR program coordinators 	<p>Every 4 years</p> <ul style="list-style-type: none"> • BSN Jr. level courses • 12/2019 • BSN Sr. level Courses12/2019 	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.	met
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<p>program's mission and goals;</p> <ul style="list-style-type: none"> ▪ are congruent with the roles for which the program is preparing its graduates; and ▪ consider the needs of the program-identified community of interest. 	<ul style="list-style-type: none"> • NEC Committee Minutes 		<ul style="list-style-type: none"> • MSN courses 2/2020 • DNP courses 2/2020 • RN/BSN 4/2019 • LPN/BSN 10/2018;10/2022 		
<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</p>	<ul style="list-style-type: none"> • AR State Board of Nursing regulations • AACN standards: <ul style="list-style-type: none"> • The Essentials of Baccalaureate Education for Professional Nursing Practice (2008) 	<ul style="list-style-type: none"> • Academic Affairs Committee Chair • Assistant director • *UG/GR Coordinators 	<p>Every 4 years</p> <ul style="list-style-type: none"> • BSN Jr. level courses 12/2019 • BSN Sr. level Courses 12/2019 • RN/BSN 4/2019 • LPN/BSN 10/2018;10/2022 	<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>met</p>

<p>student outcomes (individual and aggregate). Baccalaureate program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008).</p>					
<p>III-C. Master's curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, expected student outcomes (individual and aggregate).</p>	<ul style="list-style-type: none"> • AACN standards: <ul style="list-style-type: none"> • The Essentials of Master's Education in Nursing (2011) 		<p>Every 4 years</p> <ul style="list-style-type: none"> • MSN courses 2/2020 		<p>met</p>

<p>III-D. DNP curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, Practitioner Programs (NTF, 2016).</p>	<ul style="list-style-type: none"> • AACN standards: <ul style="list-style-type: none"> • The Essentials of Doctoral Education for Advanced Nursing Practice (2006) • Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016) 		<p>Every 4 years</p> <ul style="list-style-type: none"> • DNP courses 2/2020 		<p>met</p>
<p>III-F. The curriculum is logically structured to achieve expected student outcomes.</p> <ul style="list-style-type: none"> ▪ Baccalaureate curricula build on a foundation of the arts, sciences, and humanities. 	<ul style="list-style-type: none"> • Student surveys • Curriculum map 	<ul style="list-style-type: none"> • Assistant Director • *UG/GR Program Coordinators • Academic Affairs Committee Chair 	<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>met</p>

<ul style="list-style-type: none"> ▪ Master's curricula build on a foundation comparable to baccalaureate-level nursing knowledge. ▪ DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student. ▪ Post-graduate APRN certificate programs build on graduate-level nursing competencies and knowledge base. 					
<p>III-G. Teaching-learning practices:</p>	<ul style="list-style-type: none"> • EMSON course syllabi • End of Course/Faculty Evaluations 	<ul style="list-style-type: none"> • Assistant director • *UG/GR Program 	<p>ongoing</p>	<p>Teaching-learning practices and environment (classroom, clinical, lab, simulation, distance education) support the achievement of individual student learning</p>	<p>met</p>

<ul style="list-style-type: none"> ▪ support the achievement of expected student outcomes; ▪ consider the needs and expectations of the identified community of interest; and ▪ expose students to individuals with diverse life experiences, perspectives, and backgrounds. 	<ul style="list-style-type: none"> • End of Course reports • UG/GR Dept. minutes • Alumni/Exit surveys • Clinical evaluations • NEC Committee Minutes 	<p>Coordinator s</p> <ul style="list-style-type: none"> • Academic Affairs Committee Chair 		<p>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"> ▪ enable students to integrate new knowledge and 	<ul style="list-style-type: none"> • Clinical Course Syllabi • Faculty meeting minutes • AAC minutes • PT Clinical faculty evaluations • UG/GR Dept. Minutes 	<ul style="list-style-type: none"> • Assistant director • *UG/GR Program Coordinator s • Academic Affairs Committee Chair 	<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</p>	<p>met</p>

<p>demonstrate attainment of program outcomes;</p> <ul style="list-style-type: none"> ▪ foster interprofessional collaborative practice; and ▪ are evaluated by faculty. 	<ul style="list-style-type: none"> • Clinical Affiliation Agreements • Clinical evaluation tool • Simulation scenarios 			<p>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"> • Student Handbooks • EMSON Clinical Evaluation tools • Course syllabi 	<ul style="list-style-type: none"> • *UG/GR Program Coordinators • Academic Affairs Committee Chair • Course faculty 	<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>met</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"> • Alumni/Exit surveys • Student evaluations of courses • UG/GR Dept. minutes <ul style="list-style-type: none"> • Faculty evaluations 	<ul style="list-style-type: none"> • Academic Affairs Committee Chair • *UG/GR Program Coordinators 	<p>Every semester</p>	<p>Faculty use data from student evaluations to inform decisions that facilitate achievement of student outcomes.</p>	<p>met</p>
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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"> • Program Evaluation Plan <p>The records are maintained on the EMSON server.</p>	<ul style="list-style-type: none"> • *Program Evaluation Committee • Director • Assistant director • UG/GR program 	<p>Ongoing</p>	<p>A process is in place that is written, ongoing, comprehensive, uses quantitative, and qualitative data, has timelines for collection, review, and analysis of data, and is periodically reviewed & revised.</p>	<p>met</p>

		coordinators			
IV-B. Program completion rates demonstrate program effectiveness.	<ul style="list-style-type: none"> • BSN, MSN, and DNP graduation rates • Attrition data 	<ul style="list-style-type: none"> • UG/GR Program Coordinators • Assistant director • *Director 	Yearly May	Each program demonstrates achievement of required program outcomes; completion rates are 70% or higher.	Met Needs QI for online programs Define process
IV-C. Licensure pass rates demonstrate program effectiveness.	<ul style="list-style-type: none"> • NCLEX results 	<ul style="list-style-type: none"> • UG/GR Program Coordinators • Assistant director • *Director 	Ongoing	The NCLEX pass rate is 80% or higher for first-time takers.	met
IV-D. Certification pass rates demonstrate program effectiveness.	<ul style="list-style-type: none"> • Certification Rates 	<ul style="list-style-type: none"> • UG/GR Program Coordinators • Assistant director • *Director 	Ongoing	Certification pass rates are 80% or higher for first-time takers.	met
IV-E. Employment rates demonstrate program effectiveness.	<ul style="list-style-type: none"> • Graduate surveys • From COEHP 	<ul style="list-style-type: none"> • UG/GR Program Coordinators • Assistant director 	After graduation	The employment rate is 70% or higher for each program (BSN, MSN, and DNP).	met

		<ul style="list-style-type: none"> • *Director 			
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"> • Standing committee minutes 	<ul style="list-style-type: none"> • UG/GR Program Coordinators • Assistant director • *Director 	Ongoing	The program uses outcome data for program improvement. Provide examples.	met
IV-G. Aggregate faculty outcomes demonstrate program effectiveness.	<ul style="list-style-type: none"> • Annual Faculty Evaluation • EMSON Personnel Document • Student evaluations of course 	<ul style="list-style-type: none"> • Personnel committee • *Director • PEC 	Annually - spring	<ul style="list-style-type: none"> • 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"> • <i>Q5: Teaching and learning practices and environments were appropriate for achieving course objectives</i> • <i>Q8: This course encourages me to think critically</i> • At least 90% of nursing faculty will engage in a professional development activity related to their teaching assignments. • 90% of faculty with research assignment will publish one peer reviewed work as first author or 2 peer reviewed published works as 2nd or 3rd author. 	met

				<ul style="list-style-type: none"> • Ninety percent of research faculty will present at a national or international conference. • 75% of nursing faculty will serve on a college or university committee, chair or co-chair a department committee, or demonstrate leadership in a professional organization at the national or international level. 	
IV-H. Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.	<ul style="list-style-type: none"> • Annual faculty evaluation • Student evaluations of course 	<ul style="list-style-type: none"> • Personnel committee • *Director • Assistant director 	Ongoing		met
IV-I. Program outcomes demonstrate program effectiveness.	<ul style="list-style-type: none"> • Student Satisfaction Surveys <ul style="list-style-type: none"> ○ End of program surveys • Outcome assessment data • Clinical evaluations 	<ul style="list-style-type: none"> • UG/GR Program Coordinators • Assistant director • *Director 	Ongoing	<ul style="list-style-type: none"> • 100% of students in cohort achieve 75% or higher on NURS 4722 clinical evaluation • 100% of students in cohort achieve 75% or higher in capstone course evaluation (RN-BSN) • Each item on the Skyfactor End of Program survey will score at least 5.5 on a 7-point scale. • Online BSN Outcomes Assessment: 100% of artifacts reviewed will achieve at least 3 on a 4 points scale on each criterion 	Met Met 6 items did not meet Not met See assessment

				<ul style="list-style-type: none"> • 80% of respondents will select either “strongly agree” or “agree on the DNP end-of-program survey on each item • At least 80% of respondents will affirm achievement of all five program outcomes on the DNP end-of-program survey 	
IV-J. Program outcome data are used, as appropriate, to foster ongoing program improvement.	<ul style="list-style-type: none"> • UG/GR dept. minutes • SAC/AAC minutes • Kaplan results • NCLEX/Certification data • Program completion data • Student outcome assessment data • Student satisfaction survey • Employer surveys 	<ul style="list-style-type: none"> • UG/GR Program Coordinators • Assistant director • Director • Faculty Committees • Faculty 	Ongoing	The program uses outcome data for program improvement (Ex: completion, licensure, certification, employment rates, program outcomes, and formal complaints). Examples provided in formal reports.	

