# Doctor of Nursing Practice
## Assessment Report 2019-2020

The Doctor of Nursing Practice (DNP) degree prepares advanced practice nurses at the highest level. The DNP curriculum reflects expected student learning outcomes that are consistent with the overall program outcomes and the American Association of Colleges of *Nursing Essentials of Doctoral Education for Advanced Nursing Practice.*

**Student Learning Outcomes - Graduates of the DNP Program are expected to be able to:**

1. Evaluate and utilize advanced knowledge and theories from nursing and related disciplines to solve complex health issues for individuals, aggregates, populations, and systems.
2. Design, implement, and evaluate strategies that promote and sustain quality improvement at organization and policy levels.
3. Provide leadership in the transformation of health care through interprofessional collaboration, application of technology, and policy development.
4. Incorporate evidence-based clinical prevention and health services for individuals, aggregates and populations.
5. Demonstrate clinical expertise, systems thinking, and accountability in designing, delivering and evaluating evidence-based care to improve patient outcomes.

In addition, course objectives are included in each course syllabus and are designed to develop knowledge, skills and attitudes in the graduate core (research translation), advanced practice core (leadership), and selected clinical specialty area (clinicalnowledge).

The **indicators of the attainment** of the DNP Program Outcomes are as follows: (1) attainment of required course outcomes; (2) pass rates on national certification exams, and (3) successful completion and defense of a DNP Project

Seventeen students successfully defended the DNP project in May, 2020. Two students plan to defend the DNP project in August, 2020.

**DNP Certification Examination First-time Pass Rates**

| Certification Exam Specialty Area | Certification Organization | Calendar Year | # Taking By Year | # Passing by Year | % Cert. Pass Rate By Year |
|---|---|---|---|---|---|
| AGACNP | ANCC | 2016 | 8 | 8 | 100% |
| | | 2017 | 5 | 5 | 100% |
| | | 2018 | 5 | 5 | 100% |
| FNP | ANCC | 2016 | N/A | N/A | --- |
| | | 2017 | 1 | 1 | 100% |

| | | 2018 | 9 | 8 | 89% |
|---|---|---|---|---|---|

The EMSON program evaluation committee has identified the program outcomes and program satisfaction as indicators of program effectiveness. Since 2017, the program has surveyed students prior to graduation regarding their assessment of the program in assisting them to achieve the program outcomes. Students identify ways in which they believe they have met outcomes, and themes from these qualitative data are analyzed. It is expected that themes will reflect a positive experience, specifically that at least 80% of students responding will affirm achievement of all five program outcomes. The end-of-program survey also includes quantitative items pertaining to program satisfaction, and these items are scored on a five-point Likert scale from "strongly agree" to "strongly disagree." The expected outcome is that at least 80% of graduates will respond, "strongly agree" or "agree" to each item.

## DNP Program Outcomes

Results of the 2019 DNP end-of-program survey indicated that 85% (12 of 14) of graduates responding indicated achievement of outcomes. Examples of the qualitative responses are as follows:

- **Program outcome #1: Please describe how the program prepared you to evaluate and utilize advanced knowledge and theories from nursing and related disciplines to solve complex health issues for individuals, aggregates, populations, and systems.**
    - o Through the completion of the scholarly project, I have learned so much about how to gather data, evaluate knowledge, and disseminate evidence.
    - o Through the course work I was able to better understand how to implement practice change while applying learned change theories into clinic practice.
- **Program Outcome #2:  Please describe how the program prepared you to design, implement, and evaluate strategies that promote and sustain quality improvement at organization and policy levels.**
    - o Through the implementation of my scholarly project, I was able to understand how to evaluate an organization's needs, develop a plan to meet those needs, and implement it within that organization.
- **Program Outcome #3:  Please describe how the program prepared you to provide leadership in the transformation of health care through interprofessional collaboration, application of technology, and policy development.**
    - o The program provided an opportunity to develop a personal plan for referral and consultation, to assess and provide suggestions for community improvement regarding the opioid epidemic, and develop use of technology in patient care.  My clinical project gave me the opportunity to fully engage and act as a leader.
    - o By encouraging us to use all necessary resources including collaborating with other disciplines to implement our projects.
- **Program Outcome #4:  Please describe how the program prepared you to incorporate evidencebased clinical prevention and health services for individuals, aggregates and populations.**
    - o I became an avid user of Up-to-Date throughout this program. I also learned how to search databases and organizations for relevant and current evidence to apply to clinical practice.
    - o The program promoted the use of current clinical guidelines in patient assessment and treatment.

- o    The program revolves around the use of evidence based practice and translating evidence into practice
- **Program Outcome #5:  Please describe how the program prepared you to demonstrate clinical expertise, systems thinking, and accountability in designing, delivering and evaluating evidencebased care to improve patient outcomes** o        The program provided me with systematic clinical experience in which I learned to assess patients, listen to their concerns and needs, and apply my learning through diagnostic reasoning, ordering appropriate diagnostics, and discussing plans of care with my preceptors.
  - o    The program helped me to develop my skills in writing thorough history and physicals, as well as, progress notes to accurately demonstrate my clinical judgement and thinking for my care plans.

The quantitative results of the DNP end-of-program survey for 2017-2019 are summarized in **Table IV.I.1.**

**Percentage of Graduates Achieving "Strongly Agree" or "Agree" on the EMSON DNP End-of program Survey, 2017-2019**

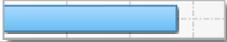| Survey item | 2017 | 2018 | 2019 |
|---|---|---|---|
| The program provided adequate preparation for the DNP role. | 100% | 83% | 71.4% |
| My instructors engaged students in the learning process throughout the program | 100% | 100% | 71.4% |
| The curriculum provided relevant and applicable coursework. | 100% | 73% | 71.4% |
| Learning resources (textbooks and supplemental course materials) were adequate, relevant, and helpful in influencing my understanding of course content. | 80% | 83% | 57.1% |
| Library resources were accessible, relevant, and contributed to my learning. | 80% | 83% | 78.6% |
| The clinical experiences provided adequate opportunity to meet my individual learning outcomes. | 80% | 83% | 78.6% |
| The Blackboard environment provided adequate information, guidance, interaction to support my learning and achievement of course outcomes. | 80% | 100% | 78.6% |
| Faculty were accessible and responsive to my communications. | 100% | 100% | 57.6% |
| My advisor provided adequate information about my plan of study, and was responsive to my communications | 100% | 83% | 85.7% |
| I was challenged to do my best academic work. | 100% | 40% | 85.7% |

These survey data show that for 2017 and 2018, satisfaction with the surveyed items was strong, as indicated by the results of eight of the 10 items; however, the expected outcome of 80% was achieved in only two of the items in 2019: "My advisor provided adequate information about my plan of study, and was responsive to my communications" and "I was challenged to do my best academic work." Further analysis of the "suggestions for improvement" for the 2019 survey provided substantial insights and suggestions for program improvement. As
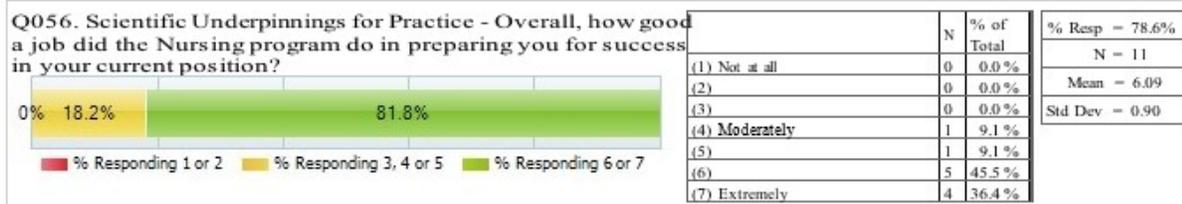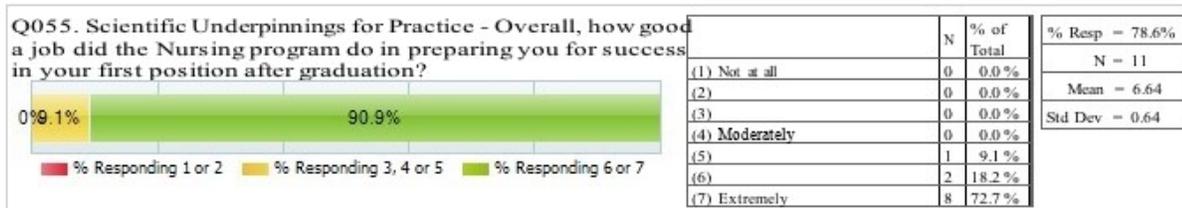
part of the EMSON quality improvement process, numerous revisions have been made to the DNP program, as discussed in standard IV-J.

In addition to the end-of-program survey, the EMSON has deployed the Skyfactor AACN/Benchworks® DNP Exit Assessment to assess program outcomes. While the return rate has not been sufficient to generate a report for the entire survey, there were responses on enough items on the 2019 survey to generate a report on four of the 27 factors and 18 of the 180 scaled questions. As a result, limited results regarding *program satisfaction* were obtained and are displayed in **the following tables**The expected outcome is to achieve at least a 5.5 (on a 7 point scale) on the Skyfactor survey items.

**Skyfactor AACN/Benchworks DNP Exit Assessment – Factors Indicating Program Satisfaction Expected Outcome: At least 5.5 on each item**

| Factor | N | Std Dev | Mean |
|--------|---|---------|------|
| Factor 1. Satisfaction: Quality of Faculty and Instruction | 7 | 0.68 | 5.59 |
| Factor 2. Satisfaction: Quality and Availability of Curriculum | 7 | 1.06 | 5.46 |
| Factor 3. Satisfaction: Administration and Academic Advising | 7 | 0.98 | 5.48 |
| Factor 4. Satisfaction: Quality of Support Services | 7 | 0.76 | 6.12 |

| Scaled Questions | N; Std Dev | Mean |
|---|---|---|
| **Q032. Instruction and Curriculum - How satisfied are you with: Preceptor/clinical mentor availability** <br><br> Scale: (1) Very Dissatisfied,(2),(3),(4) Neutral,(5),(6),(7) Very Satisfied,Not applicable | N = 6 <br> Std Dev = 1.89 | Mean = 4.50 |
| **Q038. Faculty - How satisfied are you with the faculty's ability to: Draw on experience of students** <br><br> Scale: (1) Very Dissatisfied,(2),(3),(4) Neutral,(5),(6),(7) Very Satisfied,Not applicable | N = 6 <br> Std Dev = 1.11 | Mean = 5.67 |
| **Q049. Administration and Support Services - How satisfied are you with: Training to use information technology** <br><br> Scale: (1) Very Dissatisfied,(2),(3),(4) Neutral,(5),(6),(7) Very Satisfied,Not applicable | N = 6 <br> Std Dev = 0.58 | Mean = 6.00 |
| **Q029. Instruction and Curriculum - How satisfied are you with: Faculty oversight of classroom or online experiences** <br><br> Scale: (1) Very Dissatisfied,(2),(3),(4) Neutral,(5),(6),(7) Very Satisfied,Not applicable | N = 7 <br> Std Dev = 0.88 | Mean = 5.29 |
| **Q030. Instruction and Curriculum - How satisfied are you with: Faculty oversight of clinical experiences** <br><br> Scale: (1) Very Dissatisfied,(2),(3),(4) Neutral,(5),(6),(7) Very Satisfied,Not applicable | N = 7 <br> Std Dev = 1.18 | Mean = 5.43 |
| **Q031. Instruction and Curriculum - How satisfied are you with: Accessibility of faculty outside of class** <br><br> Scale: (1) Very Dissatisfied,(2),(3),(4) Neutral,(5),(6),(7) Very Satisfied,Not applicable | N = 7 <br> Std Dev = 0.83 | Mean = 6.14 |
| **Q033. Instruction and Curriculum - How satisfied are you with: Final clinical practicum course** <br><br> Scale: (1) Very Dissatisfied,(2),(3),(4) Neutral,(5),(6),(7) Very Satisfied,Not applicable | N = 7 <br> Std Dev = 2.05 | Mean = 5.29 |
| **Q034. Instruction and Curriculum - How satisfied are you with: Effectiveness of preceptors/clinical mentors** | N = 7 <br> Std Dev = 1.20 | Mean = 6.00 |
| **Q035. Instruction and Curriculum - How satisfied are you with: Responsiveness of faculty to your concerns** <br><br> Scale: (1) Very Dissatisfied,(2),(3),(4) Neutral,(5),(6),(7) Very Satisfied,Not applicable | N = 7 <br> Std Dev = 0.73 | Mean = 5.57 |
| **Q036. Instruction and Curriculum - How satisfied are you with: Value you derived from your collaborative experiences** <br><br> Scale: (1) Very Dissatisfied,(2),(3),(4) Neutral,(5),(6),(7) Very Satisfied,Not applicable | N = 7 <br> Std Dev = 1.29 | Mean = 5.57 |
| **Q037. Faculty - How satisfied are you with the faculty's ability to: Relate concepts to clinical situations** | N = 7 <br> Std Dev = 0.83 | Mean = 6.14 |

**Q055. Scientific Underpinnings for Practice - Overall, how good a job did the Nursing program do in preparing you for success in your first position after graduation?**

0%9.1% ... 90.9%

■ % Responding 1 or 2   ■ % Responding 3, 4 or 5   ■ % Responding 6 or 7

| | N | % of Total |
|---|---|---|
| (1) Not at all | 0 | 0.0% |
| (2) | 0 | 0.0% |
| (3) | 0 | 0.0% |
| (4) Moderately | 0 | 0.0% |
| (5) | 1 | 9.1% |
| (6) | 2 | 18.2% |
| (7) Extremely | 8 | 72.7% |

% Resp = 78.6%
N = 11
Mean = 6.64
Std Dev = 0.64

**Q056. Scientific Underpinnings for Practice - Overall, how good a job did the Nursing program do in preparing you for success in your current position?**

0%  18.2% ... 81.8%

■ % Responding 1 or 2   ■ % Responding 3, 4 or 5   ■ % Responding 6 or 7

| | N | % of Total |
|---|---|---|
| (1) Not at all | 0 | 0.0% |
| (2) | 0 | 0.0% |
| (3) | 0 | 0.0% |
| (4) Moderately | 1 | 9.1% |
| (5) | 1 | 9.1% |
| (6) | 5 | 45.5% |
| (7) Extremely | 4 | 36.4% |

% Resp = 78.6%
N = 11
Mean = 6.09
Std Dev = 0.90

**LA057. Please provide any feedback regarding the DNP program and Scientific Underpinnings for Practice. (N=2)**

| Answer |
|---|
| None |
| There are many medical resources for evidenced based practice. I am able to utilize my skills at researching EBP when I have access to these resources through my institution. |

| **Q048. Administration and Support Services - How satisfied are you with: Access to information technology**<br><br>Scale: (1) Very Dissatisfied,(2),(3),(4) Neutral,(5),(6),(7) Very Satisfied,Not applicable | N = 7<br>Std = 0.73 Dev | Mean = 6.57 |
|---|---|---|

These data indicate that student opinions were mixed regarding program satisfaction, as the expected outcome of 5.5 was achieved on half of these indicators of program satisfaction. The EMSON has incorporated this feedback into quality improvement efforts.
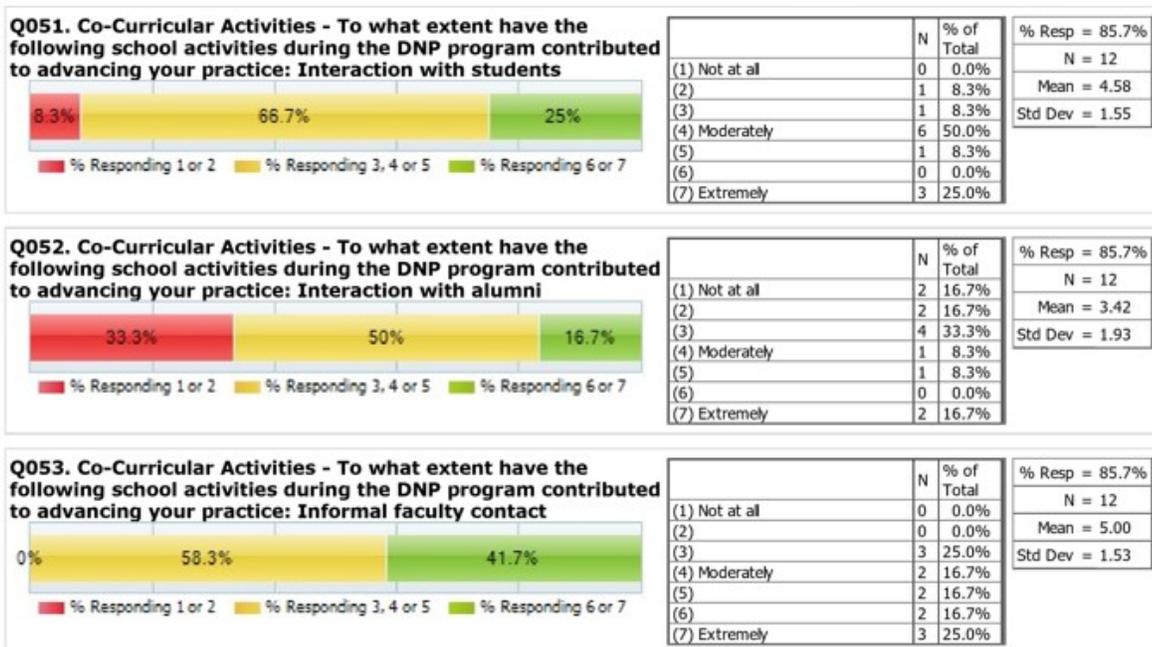
In addition to the survey results discussed above, the student-generated suggestions for program improvement obtained in the EMSON end-of-program survey have informed key program changes. Examples of responses to the statement *"Please provide any suggestions you have for program improvement. Your assessment of your experience will assist us in strengthening the program"* are as follows:
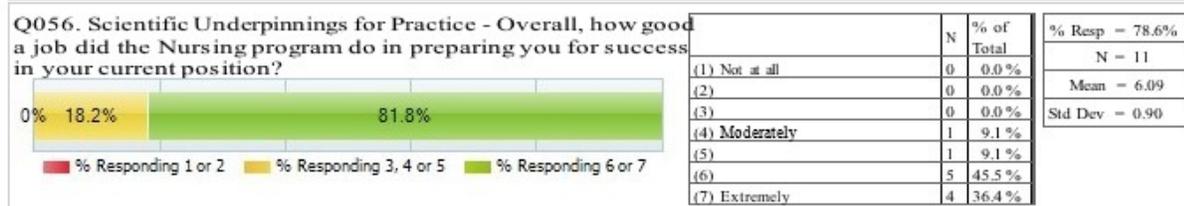- Begin DNP project sooner; first semester.
- Have a "DNP project" course added to every semester, even if it is only 1 or 2 credit hours, for some guidance to start the project, to allow students to accomplish more, and to avoid scrambling near the end of the program.
- Allow the student's chair to guide them through the project from the very beginning.

- More input into the proposal process during the summer classes so students are not so late getting started on their projects and better and more timely feedback on proposal as well as the process.
- IRB should be initiated earlier. The IRB coordinator is willing to give in service to Graduate Students and this should be taken advantage of during this process.
- Improve communication throughout the process to eliminate confusion about who is grading the paper and who is providing guidance for the various aspects of the projects.
- More collaboration and planning, and better communication among faculty about their roles
- The research class began the focus of gathering supporting data and developing a project. Having research class closer to the project might benefit students so they do not forget the information from research, and would prevent having to change projects from research to proposal time
- Fewer "busywork" assignments
- Need more online lecture; video lectures were very helpful
- Live sessions were very helpful.
- Loved the group collaborate sessions with the instructor to hear other students discuss their project and be able to get feedback from other students and the instructor. I also love that the final semester had the instructor having open office hours to discuss the DNP project. Even though I did not need to talk to the instructor every week, I think it felt good knowing that I was able to have a video conference with my instructor twice a week if needed.
- Some of the grading was subjective. Many discussion board questions were broadly written, and grading was subjective in ways that were not included in the question or the rubric.

In October 2019, the EMSON deployed the Skyfactor AACN Benchmarks® DNP Alumni Survey. Thirty surveys were attempted and 14 responded.

## Skyfactor AACN Benchmarks® DNP Alumni Survey

**Q051. Co-Curricular Activities - To what extent have the following school activities during the DNP program contributed to advancing your practice: Interaction with students**

| | N | % of Total |
|---|---|---|
| (1) Not at all | 0 | 0.0% |
| (2) | 1 | 8.3% |
| (3) | 1 | 8.3% |
| (4) Moderately | 6 | 50.0% |
| (5) | 1 | 8.3% |
| (6) | 0 | 0.0% |
| (7) Extremely | 3 | 25.0% |

% Resp = 85.7%
N = 12
Mean = 4.58
Std Dev = 1.55

8.3% | 66.7% | 25%
% Responding 1 or 2 | % Responding 3, 4 or 5 | % Responding 6 or 7

**Q052. Co-Curricular Activities - To what extent have the following school activities during the DNP program contributed to advancing your practice: Interaction with alumni**

| | N | % of Total |
|---|---|---|
| (1) Not at all | 2 | 16.7% |
| (2) | 2 | 16.7% |
| (3) | 4 | 33.3% |
| (4) Moderately | 1 | 8.3% |
| (5) | 1 | 8.3% |
| (6) | 0 | 0.0% |
| (7) Extremely | 2 | 16.7% |

% Resp = 85.7%
N = 12
Mean = 3.42
Std Dev = 1.93

33.3% | 50% | 16.7%
% Responding 1 or 2 | % Responding 3, 4 or 5 | % Responding 6 or 7

**Q053. Co-Curricular Activities - To what extent have the following school activities during the DNP program contributed to advancing your practice: Informal faculty contact**

| | N | % of Total |
|---|---|---|
| (1) Not at all | 0 | 0.0% |
| (2) | 0 | 0.0% |
| (3) | 3 | 25.0% |
| (4) Moderately | 2 | 16.7% |
| (5) | 2 | 16.7% |
| (6) | 2 | 16.7% |
| (7) Extremely | 3 | 25.0% |

% Resp = 85.7%
N = 12
Mean = 5.00
Std Dev = 1.53

0% | 58.3% | 41.7%
% Responding 1 or 2 | % Responding 3, 4 or 5 | % Responding 6 or 7

**Q055. Scientific Underpinnings for Practice - Overall, how good a job did the Nursing program do in preparing you for success in your first position after graduation?**

0% 9.1%    90.9%

■ % Responding 1 or 2    ■ % Responding 3, 4 or 5    ■ % Responding 6 or 7

| | N | % of Total |
|---|---|---|
| (1) Not at all | 0 | 0.0% |
| (2) | 0 | 0.0% |
| (3) | 0 | 0.0% |
| (4) Moderately | 0 | 0.0% |
| (5) | 1 | 9.1% |
| (6) | 2 | 18.2% |
| (7) Extremely | 8 | 72.7% |

% Resp = 78.6%
N = 11
Mean = 6.64
Std Dev = 0.64

**Q056. Scientific Underpinnings for Practice - Overall, how good a job did the Nursing program do in preparing you for success in your current position?**

0%  18.2%    81.8%

■ % Responding 1 or 2    ■ % Responding 3, 4 or 5    ■ % Responding 6 or 7

| | N | % of Total |
|---|---|---|
| (1) Not at all | 0 | 0.0% |
| (2) | 0 | 0.0% |
| (3) | 0 | 0.0% |
| (4) Moderately | 1 | 9.1% |
| (5) | 1 | 9.1% |
| (6) | 5 | 45.5% |
| (7) Extremely | 4 | 36.4% |

% Resp = 78.6%
N = 11
Mean = 6.09
Std Dev = 0.90

**LA057. Please provide any feedback regarding the DNP program and Scientific Underpinnings for Practice. (N=2)**

| Answer |
|---|
| None |
| There are many medical resources for evidenced based practice. I am able to utilize my skills at researching EBP when I have access to these resources through my institution. |

The DNP program completed the CCNE accreditation visit in January of 2020. All standards were met and there were no deficiencies. Accreditation will be effective through 2030.

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

**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: <br> ▪ congruent with those of the parent institution; and <br> ▪ reviewed periodically and revised as appropriate. | • U of A Mission <br> • COEHP Mission <br> • EMSON Mission & Philosophy <br> • Student Outcomes <br> • Committee/Dept. Minutes <br> • EMSON and Global Campus Websites | • Standing committees <br> • Director <br> • Assistant director <br> • UG/GR program coordinators <br> • PEC | Every 4 years Last review 8/2019 | 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. | • UG/GR Catalogs <br> • EMSON Strategic Plan <br> • Student handbooks <br> • EMSON and Global Campus websites <br> • Minutes (AAC, Faculty) <br> • AACN Essentials of Baccalaureate Education (2008) <br> • AACN Essentials of Master's Education in Nursing (2011) <br> • AACN Essentials of Doctoral Education for Advanced Nursing Practice (2006), <br> • Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016) | • Academic Affairs Committee <br> • PEC <br> • UG/GR program coordinators | Every 4 years Last review 8/2019 | 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 | • Committee/program minutes | • Director <br> • Assistant director | | |

| | | | | |
|---|---|---|---|---|
| and expectations of the community of interest. | • Students: course evaluations, end-of-program evaluations; advising sessions<br>• Alumni surveys | • UG/GR program coordinators | | |
| I-D. The nursing unit's expectations for faculty are written and communicated to the faculty and are congruent with institutional expectations. | • EMSON Personnel Document<br>• COEHP Personnel Document<br>• Annual Peer/Director faculty evaluations<br>• UA Promotion & Tenure policies<br>• ASBN and CCNE Annual Reports | • Director<br>• UG/GR Program Coordinators<br>• *Peer evaluation committee | May, 2020 EMSON and COEHP Personnel Documents approved | Expected faculty outcomes are clearly identified, written (documented in 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. | • Committee Minutes<br>• Faculty Handbooks<br>• Student representatives attend program level meetings | • EMSON standing Committees | 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:<br>▪ fair and equitable;<br>▪ published and accessible; and<br>▪ reviewed and revised as necessary to foster program improvement. | • COEHP Personnel Document<br>• EMSON Personnel Document<br>• UG/GR Catalogs<br>• University, college and school's Web pages<br>• Faculty/Student/Staff Handbooks<br>• Committee Minutes<br>• (Faculty, AAC, FAC, SAC)<br>• University Provost's Office<br>• Course syllabi | • EMSON standing committee chairs<br>• UG/GR Program Coordinators<br>• Director<br>• 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. |
|---|---|---|---|---|
| I-G. The program defines and reviews formal complaints according to established policies. | • Student Handbooks<br>• Record of formal complaints (FAC and/or SAC minutes) | • UG/GR program coordinators<br>• Director<br>• Assistant director | Ongoing per U of A policy | 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. | • UG/GR Catalogs<br>• EMSON Web-Site<br>• EMSON Admission materials<br>• Student Handbooks<br>• Recruitment materials | • EMSON Standing Committee Chairs<br>• GR/UG Program Coordinators<br>• Director<br>• Assistant director | 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<br>* 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 | • EMSON Budget<br>• Budget Priorities for fiscal year (Minutes)<br>• Simulation Lab Inventory<br>• Foundation Budgets<br>• Tele-fee priorities | • UG/GR Program Coordinators<br>• Faculty<br>• *Director | Ongoing | The budget enables achievement of program's mission, goals and expected faculty/student outcomes. The budget also support the development, implementation, and |

| | | | | |
|---|---|---|---|---|
| periodically, and resources are modified as needed. | • AACN Salaries of Instructional and Administrative Nursing Faculty in Baccalaureate and Graduate Programs in Nursing | | | 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. | • EBI/Skyfactor exit surveys; alumni surveys<br>• Student end-of-course surveys<br>• End-of-program surveys<br>• Readiness to practice survey<br>• Faculty satisfaction survey<br>• NEC Committee Minutes | • EMSON Standing Committee Chairs<br>• *Director | Ongoing | |
| II-C. Academic support services are sufficient to meet program and student needs and are evaluated on a regular basis. | • Faculty surveys of resources<br>• Student survey of resources (EBI)<br>• Academic advisors | • *Director<br>• EMSON standing committee chairs<br>• 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. |

| | | | | |
|---|---|---|---|---|
| II-D. The chief nurse administrator of the nursing unit: <br> ▪ is a registered nurse (RN); <br> ▪ holds a graduate degree in nursing; <br> ▪ holds a doctoral degree if the nursing unit offers a graduate program in nursing; <br> ▪ is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and <br> ▪ provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes. | • Vitae <br> • Director's annual evaluations | • COEHP Dean <br> • *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. |
| II-E. Faculty are: <br> ▪ sufficient in number to accomplish the mission, goals, and expected program outcomes; <br> ▪ academically prepared for the areas in which they teach; and <br> ▪ experientially prepared for the areas in which they teach. | • Faculty Vitae <br> • Faculty list consisting of academic rank, educational degrees, licensure, certifications, and experiences. <br> • Faculty Workload guidelines <br> • List of course/clinical sections <br> • Status of faculty searches <br> • EMSON faculty/course evaluations <br> • Hiring requests | • Director <br> • UG/GR Program Coordinators <br> • EMSON Faculty Standing Committee <br> • *Program Evaluation Committee | 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. |
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| 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. | • Preceptor list with credentials<br>• Preceptor contracts & orientation<br>• Preceptor vitae<br>• Student evaluations of preceptor(s)<br>• Clinical coordinator evaluation of preceptor | • *UG/GR Program Coordinators<br>• Course faculty | 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. | • COEHP Annual Report<br>• Development offerings (FAC & TFSC sponsored)<br>• Faculty Vitae<br>• Annual faculty evaluations<br>• Faculty workloads | • Director<br>• EMSON Standing Faculty Committees<br><br>• UG/GR program poordinators<br>• *Program Evaluation Committee | 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. |

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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:<br>▪ are congruent with the program's mission and goals;<br>▪ are congruent with the roles for which the program is preparing its graduates; and<br>▪ consider the needs of the program–identified community of interest. | • AAC minutes<br>• UG/GR program minutes<br>• Curriculum plan<br>• Program outcomes<br>• EMSON course & clinical evaluations<br>• EMSON faculty evaluations of clinical sites<br>• CNO meetings | • Academic Affairs Committee Chair<br>• Assistant director<br>• *UG/GR program coordinators | Every 4 years<br><br>• BSN Jr. level courses<br>• 12/2019<br>• BSN Sr. level Courses12/2019<br>• MSN courses 2020<br>• DNP courses 2020<br>• RN/BSN 4/2019<br>• LPN/BSN 10/2018;10/2022 | 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. |
| 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 | • AR State Board of Nursing regulations<br>• AACN standards:<br>  • The **Essentials** of Baccalaureate Education for Professional Nursing Practice (2008) | • Academic Affairs Committee Chair<br>• Assistant director<br>• *UG/GR Coordinators | Every 4 years<br><br>• BSN Jr. level courses<br>• 12/2019<br>• BSN Sr. level Courses12/2019<br>• RN/BSN 4/2019<br>• LPN/BSN 10/2018;10/2022 | 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. |

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| incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008). | | | | |
| III-C. Master's 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).<br>▪ Master's program curricula incorporate professional standards and guidelines as appropriate.<br>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.<br>b. All master's degree programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016). | • AACN standards:<br> • The **Essentials** of Master's Education in Nursing (2011) | | Every 4 years<br><br>• MSN courses 4/2020 | |

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| ▪ 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. | | | | |
| 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). <br> ▪ DNP program curricula incorporate professional standards and guidelines as appropriate. <br> 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. <br> b. All DNP programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse | • AACN standards: <br> • The **Essentials** of Doctoral Education for Advanced Nursing Practice (2006) <br> • Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016) | | Every 4 years <br><br> • DNP courses 2020 | |

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| Practitioner Programs (NTF, 2016).<br>▪ Graduate-entry DNP program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and appropriate graduate program standards and guidelines. | | | | |
| 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). | N/A | | | |
| III-F. The curriculum is logically structured to achieve expected student outcomes.<br>▪ Baccalaureate curricula build on a foundation of | • Self-study | • Assistant Director<br>• *UG/GR Program Coordinators<br>• Academic Affairs Committee Chair | In conjunction with review of courses | BSN faculty and students can articulate how knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice. RN to BSN |

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| the arts, sciences, and humanities.<br>▪ Master's curricula build on a foundation comparable to baccalaureate-level nursing knowledge.<br>▪ DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student.<br>▪ Post-graduate APRN certificate programs build on graduate-level nursing competencies and knowledge base. | | | | 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. |
| III-G. Teaching-learning practices:<br>▪ support the achievement of expected student outcomes;<br>▪ consider the needs and expectations of the identified community of interest; and<br>▪ expose students to individuals with diverse life experiences, perspectives, and backgrounds. | • EMSON course syllabi<br>• End of Course/Faculty Evaluations<br>• End of Course reports<br>• UG/GR Dept. minutes<br>• Alumni/Exit surveys<br>• CNO Council minutes<br>• Clinical evaluations | • Assistant director<br>• *UG/GR Program Coordinators<br>• Academic Affairs Committee Chair | Ongoing | 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.<br><br>The curriculum and teaching-learning practices are appropriate to the student population and consider the needs of the program-identified community of interest. |

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| III-H. The curriculum includes planned clinical practice experiences that:<br>▪ enable students to integrate new knowledge and demonstrate attainment of program outcomes;<br>▪ foster interprofessional collaborative practice; and<br>▪ are evaluated by faculty. | • Clinical Course Syllabi<br>• Faculty meeting minutes<br>• AAC minutes<br>• PT Clinical faculty evaluations<br>• UG/GR Dept. Minutes<br>• Clinical Affiliation Agreements<br>• Clinical evaluation tool<br>• Simulation scenarios | • Assistant director<br>• *UG/GR Program Coordinators<br>• Academic Affairs Committee Chair | Ongoing | 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. |
| 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. | • Student Handbooks<br>• EMSON Clinical Evaluation tools<br>• Course syllabi | • *UG/GR Program Coordinators<br>• Academic Affairs Committee Chair<br>• Course faculty | Ongoing | 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. |
| III-J. The curriculum and teaching-learning practices are evaluated at regularly scheduled intervals, and evaluation | • Alumni/Exit surveys<br>• Student evaluations of courses<br>• UG/GR Dept. minutes<br>• End-of-course reports | • Academic Affairs Committee Chair<br>• *UG/GR Program Coordinators | Every semester | Faculty use data from student evaluations to inform decisions that facilitate achievement of student outcomes. |

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| data are used to foster ongoing improvement. | | | | |

**Standard IV**
**Program Effectiveness: Assessment and Achievement of Program Outcomes**

| Key Element | Data | Responsible Party * writes the report | Frequency | Expected Outcome |
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| IV-A A systematic process is used to determine program effectiveness. | • Program Evaluation Plan | • *Program Evaluation Committee<br>• Director<br>• Assistant director<br>• UG/GR program coordinators | Ongoing | 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.<br><br>The records are maintained on the EMSON server. |
| IV-B. Program completion rates demonstrate program effectiveness. | • BSN, MSN, and DNP graduation rates<br>• Attrition data | • UG/GR Program Coordinators<br>• Assistant director<br>• *Director | Yearly May | Each program demonstrates achievement of required program outcomes; completion rates are 70% or higher. |
| IV-C. Licensure pass rates demonstrate program effectiveness. | • NCLEX results | • UG/GR Program Coordinators<br>• Assistant director<br>• *Director | Ongoing | The NCLEX pass rate is 80% or higher for first-time takers.<br><br>Licensure rates for APRNs are 80% or higher for first-time takers. |

| IV-D. Certification pass rates demonstrate program effectiveness. | • Certification Rates | • UG/GR Program Coordinators <br> • Assistant director <br> • *Director | Ongoing | Certification pass rates are 80% or higher for first-time takers. |
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| IV-E. Employment rates demonstrate program effectiveness. | • Graduate surveys | • UG/GR Program Coordinators <br> • Assistant director <br> • *Director | 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. | • Standing committee minutes | • UG/GR Program Coordinators <br> • Assistant director <br> • *Director | Ongoing | The program uses outcome data for program improvement. Provide examples. |
| IV-G. Aggregate faculty outcomes demonstrate program effectiveness. | • Annual Faculty Evaluation <br> • EMSON Personnel Document <br> • Student evaluations of course | • Personnel committee <br> • *Director <br> • PEC | Annually - spring | • Faculty achieve aggregate rating of 2.5 on 3-point scale per faculty evaluation document <br> • Aggregate student course evaluations (end of course survey) reflect at least a 4.25 on a 5-point scale on the following statements: <br> • *Q5: Teaching and learning practices and environments were appropriate for achieving course objectives* <br> • *Q8: This course encourages me to think critically* |
| IV-H. Aggregate faculty outcome data are analyzed and used, as appropriate, | • Annual faculty evaluation <br> • Student evaluations of course | • Personnel committee <br> • *Director <br> • Assistant director | Ongoing | Aggregate data are reviewed and recommendations for improvement are addressed by the appropriate committee |

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| to foster ongoing program improvement. | | | | or course faculty. Examples provided in formal reports. |
| IV-I. Program outcomes demonstrate program effectiveness. | • Student Satisfaction Surveys<br>  o End of program surveys<br>• Outcome assessment data<br>• Clinical evaluations | • UG/GR Program Coordinators<br>• Assistant director<br>• *Director | Ongoing | • 100% of students in cohort achieve 75% or higher on NURS 4722 clinical evaluation<br>• 100% of students in cohort achieve 75% or higher in capstone course evaluation (RN-BSN)<br>• 100% of students in cohort achieve 75% or higher on NURS 6244 clinical evaluation<br>• Each item on the Skyfactor End of Program survey will score at least 5.5 on a 7-point scale. |
| IV-J. Program outcome data are used, as appropriate, to foster ongoing program improvement. | • UG/GR dept. minutes<br>• SAC/AAC minutes<br>• Kaplan results<br>• NCLEX/Certification data<br>• Program completion data<br>• Student outcome assessment data<br>• Student satisfaction survey<br>• Employer surveys | • UG/GR Program Coordinators<br>• Assistant director<br>• Director<br>• Faculty Committees<br>• 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. |