

## **Program Assessment BSN 2021-2022**

Pre-licensure students enrolled in the Eleanor Mann School of Nursing (EMSON) are prepared for the role of provider of direct and indirect care, designer of care, coordinator of care and manager of care. The baccalaureate generalist nurse is a member of the profession who advocates for the patient and the profession. The Bachelor of Science in Nursing (BSN) curriculum reflects expected student learning outcomes that are consistent with the overall program outcomes.

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

- 1. Contribute leadership to promote quality care and patient safety.*
- 2. Integrate evolving knowledge into clinical nursing practice.*
- 3. Demonstrate skill in utilizing healthcare technology and information systems.*
- 4. Apply knowledge of health care policy, finance, and regulatory environments to advocate for quality health care.*
- 5. Collaborate with inter-professional teams to improve healthcare outcomes.*
- 6. Provide health protection and promotion, risk reduction, and disease prevention to individuals, families, and populations.*
- 7. Demonstrate behaviors that reflect altruism, autonomy, human dignity, integrity, and social justice.*
- 8. Adapt nursing care to meet the needs of patients across the lifespan and health care continuum, respecting variations in populations, environments, and access to care.*

In addition, course objectives are included in each course syllabus and are designed to foster the development of knowledge, skills and attitudes necessary for baccalaureate generalist nursing practice.

It is expected that all students will demonstrate attainment of program outcomes through a systematic program evaluation process outlined in the program evaluation plan attached to this document. The program evaluation plan was reviewed and revised by the Program Evaluation Committee in May, 2022 and recommendations for changes will be made to full faculty in August 2022.

1. The EMSON's RN licensure pass rates is an outcome that demonstrates program effectiveness. See Table 1. There is evidence that the decrease in availability of clinical placements due to COVID-19 impacted the NCLEX pass rates the past 2 years. The EMSON is incorporating several strategies to improve student test taking.
2. In 2022, EMSON continued to evaluate program outcomes using Blackboard Outcomes Assessment program. In this process, specific course assignments are aligned with program outcomes. Artifacts are randomly pulled from the learning management system. Faculty have developed rubrics for each of the outcomes evaluated and reviewed 10 artifacts for each outcome using teams of 3 reviewers. Any rubric criteria not meeting the benchmark of 100% of artifacts scoring a 3 or 4 requires suggestions for improvement and/or discussion with the course instructor as needed. Areas for improvement are identified and implemented. EMSON plans to

continue and extend this outcome evaluation each year.

Table 1. Program Summary of All First Time Candidates Licensed in all Jurisdictions

Year of exam	Students Taking Exam	Students Passing the Exam	Percent Passing
2012	95	89	94%
2013	127	118	93%
2014	172	142	83%
2015	187	158	85%
2016	192	178	92.71%
2017	186	177	95.16%
2018	197	193	97.9%
2019	180	169	93.8%
2020	207	197	95.1%
2021	210	185	88.1%
2022 – 1 <sup>st</sup> quarter	97	84	86.6%

3. Another source of data used to assess program effectiveness is the EBI Skyfactor© survey. Upon graduation, students are provided with the online survey, which allows them to reflect on their own learning and report their satisfaction with various aspects of the program. Survey responses to (American Association Colleges of Nursing (AACN) Essential questions are examined to evaluate program effectiveness. Results from the past 6 years are reported in Table 2. Results that did not meet our benchmark of 5.5 are highlighted in red. Results indicate improvement in most areas over the past 6 years, although benchmark was not met in some areas. We attribute improvement to the regular sharing of data with faculty, addressing student concerns introduced by student representative at faculty meetings, and follow-up meetings with students to further understand and address their concerns. An exit survey is being deployed to the May 2022 graduates in June and data will be available at the end of June.

Table 2 EBI Skyfactor© Results							
	2014-2015	2015-2016	2016-2017	2017-2018	2018-19	2019-2020	2020-2021
1. Liberal Education for Baccalaureate Generalist Nursing Practice - To what degree did your non-nursing courses enhance your ability to: Value the	5.02 (52)	5.11 (123)	4.94 (62)	5.19 (54)	4.76 (29)	5.42 (26)	5.04 (46)

ideal of lifelong learning to support excellence in nursing practice.							
2. Basic Organizational and Systems Leadership for Quality Care and Patient Safety - To what degree did the Nursing Program teach you to: Apply research based knowledge as a basis for practice	5.85 (53)	5.88 (127)	5.75 (60)	6.07 (58)	6.11 (35)	6.11 (27)	5.69 (48)
3. To what degree did the Nursing Program teach you to: Integrate theory to develop a foundation for practice	5.38 (52)	5.21 (130)	5.25 (64)	5.64 (58)	5.89 (35)	6.07 (27)	5.52 (48)
4. To what degree did the Nursing Program teach you to: Use appropriate technologies to assess patients	5.65 (52)	5.67 (128)	5.61 (64)	5.80 (56)	6.12 (33)	6.14 (28)	5.59 (46)
5. To what degree did the Nursing Program teach you to: Understand the effects of health policies on diverse populations	5.46 (52)	5.69 (131)	5.55 (64)	5.86 (58)	6.15 (34)	6.04 (27)	5.67 (46)
6. To what degree did the Nursing Program teach you to: Incorporate knowledge of cost factors when delivering care	4.52 (53)	4.91 (130)	4.90 (63)	5.31 (58)	5.49 (35)	5.54 (28)	5.08 (48)

7. To what degree did the Nursing Program teach you to: Communicate with healthcare professionals to deliver high quality patient care	5.46 (52)	5.61 (130)	5.61 (64)	5.63 (59)	6.03 (35)	5.96 (28)	6.04 (48)
8. To what degree did the Nursing Program teach you to: Work with inter-professional teams	5.31 (52)	5.60 (128)	5.59 (63)	5.65 (57)	6.17 (35)	6.27 (26)	6.02 (48)
9. To what degree did the Nursing Program teach you to: Assess predictive factors that influence the health of patients	5.45 (53)	5.59 (130)	5.53 (64)	5.88 (59)	6.03 (35)	6.07 (28)	5.96 (47)
10. To what degree did the Nursing Program teach you to: Provide culturally competent care	5.64 (53)	5.68 (129)	5.79 (62)	5.88 (58)	6.09 (35)	6.11 (28)	6.02 (48)
11. To what degree did the Nursing Program teach you to: Act as an advocate for vulnerable patients	5.91 (53)	5.93 (129)	5.84 (62)	6.19 (59)	6.50 (34)	6.36 (28)	6.23 (47)
12. To what degree did the Nursing Program teach you to: Demonstrate accountability for your own actions	6.11 (53)	6.07 (128)	5.84 (62)	6.17 (59)	6.32 (34)	6.30 (27)	6.28 (47)
13. To what degree did the Nursing Program teach you to: Incorporate nursing standards into practice	6.04 (52)	5.90 (126)	5.72 (64)	6.05 (59)	6.35 (34)	6.36 (28)	6.2 (47)

14. To what degree did the Nursing Program teach you to: Evaluate individual's ability to assume responsibility for self-care	5.75 (53)	5.60 (128)	5.46 (63)	5.55 (78.6)	6.16 (32)	5.93 (27)	5.96 (46)
15. To what degree did the Nursing Program teach you to: Delegate nursing care while retaining accountability	5.58 (52)	5.60 (127)	5.49 (63)	5.84 (58)	6.16 (32)	6.11 (28)	6.15 (47)
16. Institution Specific Questions - Do you feel that the standardized tests you took during the program helped to identify areas in which you needed additional preparation before taking NCLEX?	4.87 (54)	4.37 (111)	4.07 (54) 27.8% were neutral	4.82 (51) 19.6% were neutral	4.64 (25)		ATI review sessions were helpful 44.4% agreed 26.7% were neutral 28.95% disagreed
17. Institution Specific Questions - How satisfied were you with the access to library resources, both online and face-to-face resources?	5.52 (54)						
18. Overall Evaluation - Regarding your experience at this Nursing school, to what degree: How inclined are you to recommend your nursing school to a close friend?	5.02 (53)	5.63 (129)	6.00 (64)	6.10 (60)	6.46 (35)	6.43 (28)	6.10 (49)



online environment.							
24. I felt motivated to learn when the curriculum changed to an online environment.						4.35 (17)	
25. I felt supported by and connected to the faculty in the online environment.						5.80 (20)	5.83 (47)

In 2021, an alumni survey of BSN graduates was completed. Fourteen out of 50 surveys were completed for a response rate of 28%. The three major indicators of satisfaction were:

1. Overall satisfaction – 6.32/7
2. Overall learning – 6.33/7
3. Overall program effectiveness – 6.23/7

5.5 is the benchmark established by faculty. Items scoring below 5.5 were:

1. Integrating theories and concepts from liberal education into nursing practice – 4.75
2. Understanding how health care delivery systems are organized - 5.00
3. Making effective presentations – 5.00
4. Knowledge of cost factors when delivering care – 4.89
5. Applying an ethical decision making framework – 5.22
6. Assisting patients to achieve a peaceful end of life – 5.0

These results are consistent with results from exit surveys completed by BSN students annually. Students are scheduled to complete the 2022 exit survey in June.

**4. Employment rates demonstrate program effectiveness.**

Baccalaureate	2021	238 graduates	Number of survey respondents: <u>215</u> % Employed: <u>95.3% based on survey respondents</u>  Other Information (optional): _____
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University of Arkansas (U of A) measures the career/post-graduation outcomes for its each graduating class through first-destination surveys (FDS). U of A Class of 2021 includes those students who graduated in August 2020, December 2020 and May 2021. The post-graduation outcomes data collection is managed by the University Career Development Center (CDC) following the procedures outlined in the [NACE Standards and Protocols for Undergraduate First Destination Surveys](#) and the [NACE Standards and Protocols for the Collection and Dissemination of Graduating Student Initial Career Outcome Information for Advanced Degree Candidates](#).

**5. The Program Evaluation Committee has identified the following program evaluation benchmark:**

- Aggregate student course evaluations (end of course survey) reflect at least a 4.25 on a 5-point scale on the following statements:

	Fall 2019	Spring 2020	Fall 2020	Spring 2021	Fall 2021	Spring 2022
<ul style="list-style-type: none"> <li>• <i>Q5: Teaching and learning practices and environments were appropriate for achieving course objectives</i></li> </ul>	4.05	4.42	4.53	4.53	4.45	4.40
<ul style="list-style-type: none"> <li>• <i>Q8: This course encourages me to think critically</i></li> </ul>	4.23	4.48	4.58	4.62	4.56	4.50
<ul style="list-style-type: none"> <li>• <i>Q15: Overall I would rate this course as</i></li> </ul>			4.54	4.51	4.44	4.32
<ul style="list-style-type: none"> <li>• <i>Q17: Overall I would rate this instructor as</i></li> </ul>			4.70	4.57	4.55	4.48

*Faculty have identified a downward trend since Spring 2021 and attribute to increased enrollment, turnover of faculty, and new and part-time faculty. Remediation focused on faculty development, specifically engaging students, will be implemented in 2022.*

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"> <li>• U of A Mission</li> <li>• COEHP Mission</li> <li>• EMSON Mission &amp; Philosophy</li> <li>• EMSON and Global Campus Websites</li> <li>• Full faculty minutes</li> </ul>	<ul style="list-style-type: none"> <li>• Standing committees</li> <li>• Director</li> <li>• Assistant director</li> <li>• UG/GR program coordinators</li> <li>• PEC</li> </ul>	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"> <li>• Minutes (AAC, Full Faculty)</li> <li>• AACN Essentials of Baccalaureate Education (2008)</li> <li>• AACN Essentials of Master's</li> </ul>	<ul style="list-style-type: none"> <li>• Academic Affairs Committee</li> <li>• PEC</li> <li>• UG/GR program coordinators</li> </ul>	Annually Last review 8/2021	Systematic reviews are conducted. They include input from community of interest to foster program improvement.	met

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

congruent with institutional expectations.	<ul style="list-style-type: none"> <li>• UA Promotion &amp; Tenure policies 1405.11</li> </ul>				
I-E. Faculty and students participate in program governance.	<ul style="list-style-type: none"> <li>• Committee Minutes</li> <li>• Faculty Handbook</li> <li>• Student representatives attend program level meetings</li> </ul>	<ul style="list-style-type: none"> <li>• EMSON standing Committees</li> </ul>	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"> <li>▪ fair and equitable;</li> <li>▪ published and accessible; and</li> <li>▪ reviewed and revised as necessary to</li> </ul>	<ul style="list-style-type: none"> <li>• COEHP Personnel Document</li> <li>• EMSON Personnel Document</li> <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>• Course syllabi</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.	met

foster program improvement.					
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 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 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"> <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 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"> <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>	<p>Coordinator s</p> <ul style="list-style-type: none"> <li>• Faculty</li> <li>• *Director</li> </ul>		<p>faculty/student outcomes. The budget also support the development, implementation, and evaluation of program. Nursing compensation supports recruitment &amp; 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"> <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>• FAC</li> <li>• EMSON Standing Committee Chairs</li> <li>• *Director</li> <li>• College</li> </ul>	<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"> <li>• Faculty surveys of resources</li> <li>• Student survey of resources (EBI)</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.	met
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</li> </ul>	<ul style="list-style-type: none"> <li>• Vitae</li> <li>• Director's job description</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.	met

<p>program in nursing;</p> <ul style="list-style-type: none"> <li>▪ is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and</li> <li>▪ provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.</li> </ul>					
<p>II-E. Faculty are:</p> <ul style="list-style-type: none"> <li>▪ sufficient in number to accomplish the mission, goals, and expected</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> </ul>	<ul style="list-style-type: none"> <li>• Director</li> <li>• UG/GR Program Coordinators</li> <li>• EMSON Faculty Standing Committee</li> </ul>	<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"> <li>▪ academically prepared for the areas in which they teach; and</li> <li>▪ experientially prepared for the areas in which they teach.</li> </ul> </p>	<ul style="list-style-type: none"> <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>• *Program Evaluation Committee</li> </ul>		<p>which they teach. <b>Rationale is provided and approval is obtained for the use of faculty who do not have a graduate degree.</b> 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"> <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>	<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 &amp;/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"> <li>• COEHP Annual Report</li> <li>• Development offerings (FAC &amp; TFSC sponsored)</li> </ul>	<ul style="list-style-type: none"> <li>• Director</li> <li>• EMSON Standing Faculty Committees</li> </ul>	<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"> <li>• Faculty Vitae</li> <li>• Annual faculty evaluations</li> <li>• Faculty workloads</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR program coordinators</li> <li>• *Program Evaluation Committee</li> </ul>		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"> <li>▪ are congruent with the</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> </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> </ul>	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"> <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>• NEC Committee Minutes</li> </ul>		<ul style="list-style-type: none"> <li>• MSN courses 2/2020</li> <li>• DNP courses 2/2020</li> <li>• RN/BSN 4/2019</li> <li>• LPN/BSN 10/2018;10/2022</li> </ul>		
<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"> <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 12/2019</li> <li>• BSN Sr. level Courses 12/2019</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>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"> <li>• AACN standards: <ul style="list-style-type: none"> <li>• <b>The 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 2/2020</li> </ul>		<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"> <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 2/2020</li> </ul>		<p>met</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> </ul>	<ul style="list-style-type: none"> <li>• Student surveys</li> <li>• Curriculum map</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>met</p>

<ul style="list-style-type: none"> <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>					
<p>III-G. Teaching-learning practices:</p>	<ul style="list-style-type: none"> <li>• EMSON course syllabi</li> <li>• End of Course/Faculty Evaluations</li> </ul>	<ul style="list-style-type: none"> <li>• Assistant director</li> <li>• *UG/GR Program</li> </ul>	<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"> <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>• End of Course reports</li> <li>• UG/GR Dept. minutes</li> <li>• Alumni/Exit surveys</li> <li>• Clinical evaluations</li> <li>• NEC Committee Minutes</li> </ul>	<ul style="list-style-type: none"> <li>Coordinator s</li> <li>• Academic Affairs Committee Chair</li> </ul>		<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"> <li>▪ enable students to integrate new knowledge and</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> </ul>	<ul style="list-style-type: none"> <li>• Assistant director</li> <li>• *UG/GR Program Coordinator s</li> <li>• Academic Affairs Committee Chair</li> </ul>	Ongoing	<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>	met

<p>demonstrate attainment of program outcomes;</p> <ul style="list-style-type: none"> <li>▪ foster interprofessional collaborative practice; and</li> <li>▪ are evaluated by faculty.</li> </ul>	<ul style="list-style-type: none"> <li>• Clinical Affiliation Agreements</li> <li>• Clinical evaluation tool</li> <li>• Simulation scenarios</li> </ul>			<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"> <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>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"> <li>• Alumni/Exit surveys</li> <li>• Student evaluations of courses</li> <li>• UG/GR Dept. minutes <ul style="list-style-type: none"> <li>• Faculty evaluations</li> </ul> </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>	<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"> <li>• Program Evaluation Plan</li> </ul> <p>The records are maintained on the EMSON server.</p>	<ul style="list-style-type: none"> <li>• *Program Evaluation Committee</li> <li>• Director</li> <li>• Assistant director</li> <li>• UG/GR program</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, review, and analysis of data, and is periodically reviewed &amp; revised.</p>	<p>met</p>

		coordinators			
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.	Met Needs QI for online programs Define process
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	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"> <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.	met
IV-E. Employment rates demonstrate program effectiveness.	<ul style="list-style-type: none"> <li>• Graduate surveys</li> <li>• From COEHP</li> </ul>	<ul style="list-style-type: none"> <li>• UG/GR Program Coordinators</li> <li>• Assistant director</li> </ul>	After graduation	The employment rate is 70% or higher for each program (BSN, MSN, and DNP).	met

		<ul style="list-style-type: none"> <li>• *Director</li> </ul>			
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.	met
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>• 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>• <i>Q5: Teaching and learning practices and environments were appropriate for achieving course objectives</i></li> <li>• <i>Q8: This course encourages me to think critically</i></li> </ul> </li> <li>• At least 90% of nursing faculty will engage in a professional development activity related to their teaching assignments.</li> <li>• 90% of faculty with research assignment will publish one peer reviewed work as first author or 2 peer reviewed published works as 2<sup>nd</sup> or 3<sup>rd</sup> author.</li> </ul>	met

				<ul style="list-style-type: none"> <li>• Ninety percent of research faculty will present at a national or international conference.</li> <li>• 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.</li> </ul>	
IV-H. Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.	<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>	Ongoing		met
IV-I. Program outcomes demonstrate program effectiveness.	<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>	Ongoing	<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>• Each item on the Skyfactor End of Program survey will score at least 5.5 on a 7-point scale.</li> <li>• Online BSN Outcomes Assessment: 100% of artifacts reviewed will achieve at least 3 on a 4 points scale on each criterion</li> </ul>	Met  Met  6 items did not meet  Not met See assessment

				<ul style="list-style-type: none"> <li>• 80% of respondents will select either “strongly agree” or “agree on the DNP end-of-program survey on each item</li> <li>• At least 80% of respondents will affirm achievement of all five program outcomes on the DNP end-of-program survey</li> </ul>	
IV-J. Program outcome data are used, as appropriate, to foster ongoing program improvement.	<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>	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.	

