



Mississippi University for Women

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Graduate Nursing Department

Master Evaluation Plan

“W”orking Toward Excellence

2019

Mississippi University for Women
College of Nursing and Health Sciences
Graduate Nursing Program
MASTER PLAN OF EVALUATION
“*W*”orking Toward Excellence
2019-2020

Mississippi University for Women (MUW), a public institution since 1884, provides high quality undergraduate and graduate education for women and men in a variety of liberal arts and professional programs, while maintaining its historic commitment to academic and leadership development for women. MUW emphasizes a personalized learning environment in all of its educational programs, which are offered through the college of Arts, Sciences, and Education, College of Business and Professional Studies, and College of Nursing and Health Sciences. MUW delivers selected programs and courses through distance education formats to provide educational opportunities throughout Mississippi and the United States, while addressing the unique educational and public service needs of northeast Mississippi and adjoining counties in northwest Alabama. MUW supports research, scholarship, and creativity to enhance faculty development and student learning and to advance knowledge in the disciplines offered by the university.

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Table of Contents

CONTENT	Page	CONTENT	Page
<i>Section 1—Introduction</i>	1	STANDARD IV-PROGRAM EFFECTIVENESS: STUDENT PERFORMANCE AND FACULTY ACCOMPLISHMENTS	103
<i>Section 2-Program Missions/Philosophies</i>	3	<i>COLLEGE OF NURSING AND HEALTH SCIENCES GRADUATE NURSING PROGRAM END OF COURSE REPORT</i>	116
<i>Section 3-Univeristy/College of Nursing Strategic Planning Goals</i>	5		
<i>Section 4-MPE Standards</i>			
STANDARD I PROGRAM QUALITY: MISSION AND GOVERNANCE	9		
STANDARD II PROGRAM QUALITY: INSTITUTIONAL COMMITMENT AND RESOURCES	21		
STANDARD III PROGRAM QUALITY: CURRICULUM AND TEACHING LEARNING PRACTICES	29		
STANDARD IV PROGRAM EFFECTIVENESS: ASSESSMENT AND ACHIEVEMENT OF PROGRAM OUTCOMES	43		
<i>Section 4-MPE Standard Worksheets and Score Cards</i>			
STANDARD I-MISSION AND GOVERNANCE	64		
STANDARD II - INSTITUTIONAL COMMITMENT AND RESOURCES	74		
STANDARD III-PROGRAM QUALITY: CURRICULUM AND TEACHING-LEARNING	81		

Introduction to the Graduate Nursing Master Evaluation Plan

The College's strategic plan utilizes a multi-faceted approach when evaluating data to evidence program effectiveness. This multi-faceted approach incorporates qualitative and quantitative data, from Department of Nursing (DON) which includes all three nursing departments: Associate of Science, Bachelor of Science, and Graduate Nursing. Information is obtained from a wide variety of sources, including students, alumni, faculty and other communities of interest.

In previous years the DON created a strategic plan in which initiatives drove policy for three to five years. Recognizing that the present health care environment is forcing change more rapidly than ever before, the DON elected to look at strategic planning initiatives yearly rather than every three to five years.

With this thought in mind, the Graduate Nursing program "Master Evaluation Plan" was adapted and revised to include the DNP and Post-Graduate APRN Certificate programs. The "Master Evaluation Plan" was revised in 2013 to create a more comprehensive plan that ascribes to two theoretical bases: Total Quality Management and The Balanced Score Card.

The Graduate Nursing Programs provide input into the College's Strategic Plan utilizing ongoing, systematic evaluation guided by the Master Evaluation Plan. R. S. Kaplan and D. P. Norton (1992) introduced the concept of "The Balanced Scorecard- Measures that Drive Performance". Drawing from this theory and AACN, ANA Guidelines and IHL Guidelines the faculty divided the Master Evaluation Plan into four categories: Mission and Governance, Institutional Commitment and Resources, Program Quality, and Program Effectiveness. The faculty believes that each of the four categories is of equal importance, thus each category is given a 25% ranking. In each category CCNE key elements (standards) were utilized. For each key element (standard) the faculty developed outcome benchmarks utilizing CCNE and IHL standards. The outcome benchmarks are qualitative, quantitative, internal, external, and process in nature thus providing an overall program performance evaluation.

Evaluation data are collected on a planned, periodic basis according to the Master Calendar for Evaluation. For the purposes of evaluation, the faculty is subdivided into four Ad-Hoc committees: Mission and Governance, Institutional Commitment and Resources, Program Quality, and Program Effectives. These committees correlate with the categories within the Master Evaluation Plan. Each committee gathers aggregate data from a wide variety of sources. The aggregate data are compiled utilizing committee worksheets, which organize the data to better facilitate data analysis. After a faculty committee collects data, the entire Graduate Nursing faculty analyzes the data utilizing TQM tools and techniques. Once the data are analyzed the faculty scores each of the four areas thus obtaining scorecard results. The scorecard results assist the faculty in prioritizing strategic planning initiatives for the following year.

A Total Quality Management approach is utilized when opportunities for program improvement are identified within one of the four categories based on scorecard results. These opportunities for improvement allow the faculty to work toward a 100% scorecard result in each category. To this end the faculty envisions this process as “Working Toward Excellence” in meeting the ascribed AACN’s *The Essentials of Master’s Education in Nursing* and *The Essentials of Doctoral Education for Advanced Nursing Practice* and ANA *Standards* as guiding standards.

Revised:7/07, Revised: 8/08, Revised: 7/15, Reviewed: 8/19

Department of Graduate Nursing: DNP, MSN, Post-Graduate APRN Certificate

Program Mission

The mission of the Doctor of Nursing Practice (DNP) program is congruent with the American Association of Colleges of Nursing (AACN) Essentials of Doctoral Education for Advanced Nursing Practice (2006). The DNP program is a practice-focused doctoral program designed to prepare nurses at the highest level of nursing practice to lead in applying and translating research into practice in local, state, national, and global health systems. The focus of the DNP program is on evidence-based practice reflecting synthesis, application, and translation of credible research findings. The DNP program includes integrative practice experiences and an intense practice immersion experience that prepares advanced practice nurses caring for populations in primary and specialty care settings with emphasis on chronic illness management.

The mission of the Master of Science in Nursing program is to prepare advanced practice nurses by expanding and refining a broad base of knowledge and skills of baccalaureate education incorporating the experiential background of the professional nurse. This mission relates to the Mission of the University by providing professional education at the master's level that emphasizes advanced academic preparation of specialized knowledge and competencies through the process of role mastery.

Program Philosophies

The philosophy of the **Doctor of Nursing Practice (DNP)** program is congruent with University mission that emphasizes high-quality education, personalized learning environment, and attention to research, scholarship, and creativity to advance knowledge. Consistent with the Baccalaureate program philosophy, the DNP program seeks to further prepare leaders who are dedicated to the improvement of health care outcomes at the local, state, national, and global levels. Like the Master of Science in Nursing program, the philosophy of the DNP program includes advanced nursing practice and evidence-based practice foci. An additional area of emphasis is chronic illness.

Mastery of these foci may occur in through Post-BSN to DNP preparation or through MSN to DNP preparation. Through either route, the DNP program philosophy holds that the basis for the highest level of nursing practice is the integration of nursing knowledge from the biophysical, psychosocial, analytical, and organizational sciences. Further, education at the DNP level provides a basis for translating evidence-based research findings into safe, high-quality clinical practice for a wide variety of patient populations. Finally, DNP-educated advance practice nurses are uniquely prepared to emerge as leaders utilizing a blend of clinical knowledge, organizational skills, economic understanding, political awareness, and technological proficiency to impact patient outcomes in complex health systems.

The **Master of Science in Nursing (MSN)** program extends and refines the knowledge and skills of the baccalaureate-prepared nurse while integrating findings from the sciences and the humanities, biopsychosocial fields, genetics, public health, quality improvement, health economics, translational science and organizational sciences in order to provide care to diverse populations of patients in clinical and community-based systems. Attainment of advanced knowledge and competencies occurs through the process of role mastery, moving from novice to expert, in order to provide nursing interventions that influence healthcare outcomes for individuals/families across the lifespan, populations, or systems. The educational process is guided by three foci: primary care, advanced nursing practice, and evidence-based practice. Primary care emphasizes health promotion and health maintenance for individuals, families, and populations in addition to managing and monitoring acute and chronic illnesses. This diversity of care is patient centered and culturally appropriate with evidence-based goals and modalities of care. Advanced nursing practice is autonomous and focuses on knowledge and competencies for the specialized role of the family nurse practitioner. In this role, the advanced practice nurse functions independently, is accountable as a direct provider of care, and is an advocate for patients, families, caregivers, populations and members of the healthcare team. Inherent in advanced nursing practice is leadership in order to provide for high-quality nursing care, healthcare team coordination, patient safety and quality improvement, and for understanding health care delivery systems assisting with identifying the economic, ethical, legal, and political factors that influence health care. Advanced practice nursing involves self-evaluation for continuing scholarship, professional growth, and excellence in practice. Therefore, the advanced practice nurse is prepared to pursue doctoral education. Evidence based practice provides opportunity for integration of nursing research, primary care, and leadership with the science of nursing.

Post-Graduate APRN Certificate Program (RN-FNP and APRN-FNP tracks): The faculty believes that nursing professionals who already hold a Master's degree in nursing within a defined area of advanced nursing practice should be afforded the opportunity to enhance that preparation by incorporating the specialized role of the nurse practitioner into their existing skill sets. The Post Graduate APRN certificate program is designed to prepare those nurses, already grounded in research and theory and proficient in their specialties, to become clinically competent nurse practitioners. This is accomplished by educating these students clinically alongside traditional Master's students so they may gain equitable knowledge and skills as primary care nurse practitioners rooted in the latest evidence base for advanced practice.

Revised: 3/15

Reviewed: 8/19

MUW University Strategic Planning Goals:	College of Nursing & Health Sciences Goals	Program Goals/Outcomes	Curriculum Outcomes
<p>The W Priority I: Advancement Excellence</p> <p>1. A strength of any institution is the level of engagement with those it serves. At The W, that includes a diversity of constituents: students, faculty, staff, alumni, friends, the community, and elected officials. By cultivating these relationships, we build support critical to the future of the W. One important outcome of valued relationships is the continued generosity of our larger W family, providing resources that allow us to improve quality across all aspects of the institution.</p> <p>A: Create a Culture of Giving</p> <p>B: Establish and Maintain Affinity Groups</p> <p>C: Foster Pride in University Events and Private Giving.</p> <p>D: Increase Awareness of University Programs and Strength</p> <p>The W priority II: Regional Stewardship</p> <p>The W has a unique niche in the region and the state. Through programs, service, and other partnerships with other organizations, the university must continue to communicate its value to the region and explore ways to create greater</p>	<p>A. Create a culture of giving within the college that encourages participation through gifts of time, resources, and talents to strengthen and improve The W, the college, and each program.</p> <p>B. Develop and implement a plan to connect students and graduates (alumni) to their program, the college, and the university.</p> <p>C. Increase participation of other campus departments and offices with college events.</p> <p>D. Utilize Alumni of the college and other constituent groups to recruit new students and retain current students (mentors/clinical preceptors).</p>	<p>DNP Program Goals/Outcomes</p> <p>1. Produce nurse practitioner leaders who will utilize the theoretical and scientific underpinnings for nurse practitioner practice to provide acute and chronic health care that is ethical, safe, evidence-based, culturally sensitive, interdisciplinary, technically sagacious and appropriate for a diverse range of individuals and aggregates. (ESO #1, 3, 6)</p> <p>2. Produce graduates who utilize research and nursing knowledge to influence healthcare policy and advocate for improvement in the health of individuals and aggregates, especially the chronically ill. (ESO# 2, 4, 6)</p> <p>3. Produce clinical scholars who are committed to lifelong learning, ongoing leadership, and the improvement of health care delivery in the local community, in Mississippi, in the United States, and across the globe. (ESO# 2, 4, 5, 6)</p>	<p>DNP Expected Student Outcomes</p> <p>1. Synthesize theoretical, philosophical, ethical, and empirical knowledge to develop therapeutic interventions in complex health systems. (<i>DNP Essentials</i> I.1, 2, 3; II.1, 3; III.1, 4, 6; V.7; VI.1; VII.2, 3; VIII.2).</p> <p>2. Develop leadership skills within complex health systems to improve safe, cost-effective, and quality health care for diverse populations. (<i>DNP Essentials</i> II.2a, b, c, d, e; III.3, 6; IV.4, 6; VI.3; VII.2, 3; VIII.1, 5, 6).</p> <p>3. Demonstrate clinical scholarship and the use of analytical methods to design, implement, evaluate, and disseminate evidence-based practice. (<i>DNP Essentials</i> I.3; III.1, 2, 7; VIII.4).</p> <p>4. Utilize information systems and patient care technology for the improvement and transformation of health care (<i>DNP Essentials</i> III.1, 3, 5; IV.1, 2, 3, 5; VII.2).</p> <p>5. Provide leadership in the analysis, development, and implementation of health care policy on local, regional, national, and global levels. (<i>DNP Essentials</i> II, V.1, 2, 3, 4, 5, 6; VI.1; VIII.5, 6, 7).</p>

<p>impact through its areas of strength. It also should identify new approaches and new partnerships that can contribute to the health, quality of life, the creative economy and the overall economic potential of the region.</p> <p>A: Cultivate Collaborations That Increase Health and Well Being</p> <p>B: Provide Outreach to Underserved Populations</p> <p>C: Strengthen and Expand K-12 Partnerships</p> <p>D: Contribute to the Creative Economy</p> <p>E: Forge Meaningful and Engaged Partnerships That Provide Real-Life Experiences For Students</p> <p>The W Priority III: 21st Century University</p> <p>1. The 21st Century requires a learning environment that includes both classroom delivery and out-of-class experiences the university provides. It also requires that students have the skills to prove themselves competitive and comfortable in a diverse, global economy. To sustain these efforts, a 21st Century University must develop</p>	<p>A. Develop College (Including Health Center) collaborations with other Campus Units to increase health and well-being for populations on an off campus.</p> <p>B.1 Increase outreach activities for College Students and faculty to meet the health needs of underserved populations.</p> <p>B.2 Increase collaboration between programs within the needs of underserved populations.</p> <p>C. Increase outreach activities for the College students and faculty to strengthen and expand K-12 partnerships.</p> <p>D. None at this time.</p> <p>E. Enhance relevant College and program partnerships with hospitals, clinical agencies, and other entities to provide real-life experiences for students that increase the students and programs value to those agencies.</p>	<p>MSN/Post-Graduate APRN Certificate Goals/Outcomes</p> <ol style="list-style-type: none"> 1. Prepare advance practice nurses who expand and refine a broad base of knowledge and skills from nursing and the biopsychosocial sciences to influence healthcare [new ESO#1, 2, 3] 2. Prepare advanced practice nurses who demonstrate mastery of expected national competencies including the abilities to assess, diagnose, and manage a broad scope of acute and chronic health issues in primary care ESO #2, 4, 7] 3. Prepare advanced practice nurses who continue as lifelong learners and who influence safe and quality healthcare through interprofessional team approaches, emerging technology, health policy, and ongoing role development [ESO #5, 6, 8]. 	<p>6. Employ collaborative approaches with other disciplines for improving health outcomes among diverse populations. (<i>DNP Essentials</i> III, VI.1, 2, 3; VII.3, VIII. 3).</p> <p>MSN/Post-Graduate APRN Certificate Expected Student Outcomes</p> <ol style="list-style-type: none"> 1. Integrate baccalaureate and Master’s level understanding of nursing and relevant sciences in the assessment, diagnoses, and direct pharmacologic and non-pharmacologic management of diverse patient populations in primary care (Essentials 1 & 9 +APRN), 2. Provide leadership in practice to promote high quality, safe, cost-effective, culturally appropriate, and ethical patient care (Essential 2, 3, 9), 3. Articulate and apply evidence-based methods, tools, performance measures, and standards related to quality and safety in primary care and other organizational settings (Essential 3), 4. Conduct, apply, and disseminate research to resolve practice problems and effect positive change based on evidence (Essential 4), 5. Use health information systems and technology to support lifelong learning and enhance delivery of safe,
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<p>business process and planning structures that ensure its success well into the future</p> <p>A: Enhance and Effectively Utilize Advanced Instructional Technologies</p> <p>B: Broaden Educational Opportunities and Programs for the Diverse Student Body</p> <p>C: Maintain, Enhance, and Expand International Partnerships</p> <p>D: Increase Emphasis on Diversity of Faculty and Staff</p> <p>E. Cultivate Communities to Create opportunities for Academic Engagement.</p> <p>F: Foster Leadership and Development and a Commitment to a Safe Ethical Environment</p> <p>G. Enhance Business Processes and the Campus Infrastructure, to Ensure Continuing Financial Sustainability</p>	<p>A. Effectively use technologies/smart classrooms to enhance, provide, and effectively use for optimal learning benefits for College face-to-face and online students.</p> <p>B. Provide opportunities for global engagement for College students in each program by providing education, interactions and/or activities with international students at The W, in the community, or at other universities.</p> <p>C. Develop international partnerships and projects for students in each College program focusing on leadership and ethics.</p> <p>D. Provide inviting atmosphere to encourage diversity to faculty and staff.</p> <p>E. None at this time: student affairs focus.</p> <p>F. Participate in educational opportunities to provide a safe ethical environment.</p> <p>G. Evaluate the adequacy of resources to support initiatives of the college and its departments/programs.</p>		<p>quality care (Essential 5 + APRN),</p> <p>6. Participate in the process of policy development, and employ advocacy strategies to influence health and health care (Essential 6),</p> <p>7. Participate as a member and leader of interprofessional teams to manage and coordinate safe and quality patient care (Essential 7),</p> <p>8. Integrate client-centered and culturally appropriate concepts to deliver evidence-based prevention and intervention services to individuals, families and aggregates (Essential 8).</p>
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<p>The W Priority IV: Degree Completion</p> <p>1. The W can be proud of maintaining the highest degree completion ratio in the state's public university system. The university should continue to develop comprehensive approaches enhance retention, the potential for completion, and student success. Completion ensures that both the state's and the student's investment in higher education is productive, with greater likelihood of reducing student debt and improving career potential.</p> <p>A: Enhance Student Advising, Mentorship, and Support Services</p> <p>B: Recruit a Diverse Student Body to Ensure a Vital University Community</p> <p>C: Provide Resources to assist With Achieving and Maintaining Financial Stability</p> <p>D: Provide Academic Programs to Meet With the Needs of Today's Students and Workforce</p>	<p>A. Develop and implement successful comprehensive approaches to increase retention and degree completion.</p> <p>B. None at this time.</p> <p>C. Establish ongoing relationships with external resources into the university and College to aid in maintaining financial stability for the university.</p> <p>D. Provide strong academic programs that connect students in each program with real-world outcomes and viable workforce skills that meet the needs of employers.</p>		
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STANDARD I

PROGRAM QUALITY: MISSION AND GOVERNANCE

The mission, goals, and expected program outcomes are congruent with those of the parent institution, reflect professional nursing standards and guidelines, and consider the needs and expectations of the community of interest. Policies of the parent institution and nursing program clearly support the program's mission, goals, and expected outcomes. The faculty and students of the program are involved in the governance of the program and in the ongoing efforts to improve program quality.

Key Elements	Benchmarks	Tools	Timeline	F/U
I-A. The mission, goals, and expected program outcomes are:				
<ul style="list-style-type: none"> Congruent with those of the parent institution; and 	Program Mission, Goals, and Outcomes are: <ul style="list-style-type: none"> Written Consistent with the university goals/assessment Consistent with College of Nursing and Health Sciences Program goals are specific for each program in the Graduate Nursing Department (MSN, Post-Masters APRN, DNP) 	MUW Bulletin, Graduate Nursing Policies, University assessment requirements, MUW Website, Student handbook, Memo's/Emails. Department Chair maintains the coordination of publication to various sites.	Yearly Completed Standard I (M&G) Worksheet reported to Graduate Nursing Faculty in September of each academic year.	May Yearly College Strategic Planning retreat Aug/Sept Dean returns completed College strategic plan to graduate dept. chair and shares plan with graduate faculty
<ul style="list-style-type: none"> Reviewed periodically and revised as appropriate. 	<ul style="list-style-type: none"> Reviewed yearly Revised as necessary to: <ul style="list-style-type: none"> Meet the expectations of the required standards 	Reviewed by standard I committee yearly. Regular curriculum meetings to ensure appropriate revisions are	September	Annual

	<ul style="list-style-type: none"> ○ Meet the expectations of the community of interest. ○ Meet the expectations of the University assessment requirements. 	made in order to meet required expectations.		
<p>Elaboration: The program's mission, goals, and expected program outcomes are written and accessible to current and prospective students, faculty, and other constituents. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. The mission may relate to all nursing programs offered by the nursing unit, or specific programs may have separate missions. Program goals are clearly differentiated by level when multiple degree/certificate programs exist. Expected program outcomes may be expressed as competencies, objectives, benchmarks, or other terminology congruent with institutional and program norms.</p> <p>There is a defined process for periodic review and revision of program mission, goals, and expected program outcomes that has been implemented, as appropriate.</p>				
Key Elements	Benchmarks	Tools	Timeline	F/U
I-B. The mission, goals, and expected program outcomes are consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.				
<ul style="list-style-type: none"> • The Essentials of Master's Education in Nursing (<i>AACN, 2011</i>); 	<ul style="list-style-type: none"> • Program mission, goals, and outcomes are reviewed for consistency. • Professional nursing standards and guidelines routinely reviewed for changes. 	<p>Reviewed yearly for consistency.</p> <p>Reviewed yearly for updates.</p> <p>Graduate Handbook</p> <p>MUW Bulletin</p> <p>Graduate Nursing Master Plan of Evaluation</p> <p>Course Overviews</p>	September	Annual
<ul style="list-style-type: none"> • The Essentials of Doctoral Education for Advanced Nursing Practice (<i>AACN, 2006</i>); <i>and</i> 	<ul style="list-style-type: none"> • Program mission, goals, and outcomes are reviewed for consistency. • Professional nursing standards and guidelines routinely reviewed for changes. 	<p>Reviewed yearly for consistency.</p> <p>Reviewed yearly for updates.</p>	September	Annual

<ul style="list-style-type: none"> Criteria for Evaluation of Nurse Practitioner Programs [National Task Force on Quality Nurse Practitioner Education (NTF), 2016]. 	<ul style="list-style-type: none"> Program mission, goals, and outcomes are reviewed for consistency. Professional nursing standards and guidelines routinely reviewed for changes. 	<p>Reviewed yearly for consistency.</p> <p>Reviewed yearly for updates.</p> <p>Graduate Nursing NTF Checklist</p>	September	Annual
<ul style="list-style-type: none"> Accreditation 	<p>Graduate nursing programs maintain accreditation by:</p> <ul style="list-style-type: none"> IHL CCNE SACSCOC 	<p>Department Chair maintains:</p> <ul style="list-style-type: none"> IHL Reports/Surveys Accreditation criteria Accreditation reports 	September	Annual
<ul style="list-style-type: none"> Additional standards and guidelines 	<p>In addition to the standards/guidelines bulleted above, the graduate nursing programs are based on nursing graduate and doctoral standards including: Standards for Accreditation of Baccalaureate and Graduate Degree Nursing programs (AACN amended 2013), National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Core Competencies with Curriculum Content (2017), NONPF Population Focused Nurse Practitioner Competencies - Family/Across the Lifespan (2013), Mississippi Nursing Degree Program Accreditation Standards (2017), and Consensus Model for APRN Regulation: Licensure, Accreditation, Certification, and Education (July 2008).</p>	<p>Reviewed yearly for consistency.</p> <p>Reviewed yearly for updates.</p>	September	Annual
<p>A program may select additional standards and guidelines that are current and relevant to</p>				

program offerings				
A program preparing students for certification incorporates professional standards and guidelines appropriate to the role/area of education.				
An APRN education program (degree or certificate) prepares students for one of the four APRN roles and in at least one population focus, in accordance with the Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (July 2008).				
Key Elements	Benchmarks	Tools	Timeline	F/U
I-C. The mission, goals, and expected program outcomes reflect the needs and expectations of the community of interest.				
Mission, goals, and expected outcomes are reviewed and revised, as appropriate, to reflect the needs and expectations of the community of interest.	<p>The community of interest is defined as:</p> <ul style="list-style-type: none"> • Internal Customers <ul style="list-style-type: none"> ○ Graduate Nursing students ○ Graduate Nursing faculty ○ Other University divisions, services, staff ○ University administration • External Customers <ul style="list-style-type: none"> ○ Potential students <ul style="list-style-type: none"> ▪ RNs (MSN/FNP Program) ▪ Post-Masters RNs (Post-Master APRN Program) ▪ Nurse Practitioners (DNP Program) ○ Clinical Sites (clinics/healthcare agencies) ○ Employers of Graduates ○ Alumni ○ Community at large 	<ol style="list-style-type: none"> 1. Input sought from the communities of interest via formal and informal feedback. 2. Student Evaluations reviewed. 3. Preceptor Evaluations reviewed. 4. Advisory Board. 5. All survey data reviewed. 	<ol style="list-style-type: none"> 1. Routinely throughout the year 2. In faculty meetings following each semester. 3. At the end of each semester. 4. Yearly 5. Yearly 	Annual
Elaboration: The community of interest is defined by the nursing unit. The needs and expectations of the community of interest are considered in the periodic review of the mission, goals, and expected program outcomes.				
Key Elements	Benchmarks	Tools	Timeline	F/U
I-D. The nursing unit's expectations for faculty are written and communicated to the faculty and are congruent with institutional expectations.				

Elaboration: Expectations for faculty are congruent with those of the parent institution. The nursing unit's expectations for faculty, whether in teaching, scholarship, service, practice, or other areas, may vary for different groups of faculty (full-time, part-time, adjunct, tenured, non-tenured, or other).				
<ul style="list-style-type: none"> The nursing unit's expectations for faculty are written and communicated to the faculty and are congruent with institutional expectations. 	<p>100% faculty have access to faculty job description, faculty handbooks, promotion and tenure policies, faculty annual professional development plan, and graduate nursing practice and scholarship policy.</p> <p>100% of graduate faculty members have the opportunity to participate in strategic planning.</p>	<p>Faculty job descriptions.</p> <p>University Promotion and Tenure Policy.</p> <p>Faculty CEUs Annually</p> <p>Strategic Planning minutes.</p> <p>Faculty Handbooks.</p> <p>Faculty Practice and Scholarship Policy.</p> <p>Annual Faculty Performance Review.</p>	Each reviewed Annually	Annual
Key Elements	Benchmarks	Tools	Timeline	F/U
I-E. Faculty and students participate in program governance.				
Elaboration: Roles of the faculty and students in the governance of the program, including those involved in distance education, are clearly defined and promote participation. Nursing faculty are involved in the development, review, and revision of academic program policies.				
<ul style="list-style-type: none"> Faculty and students participate in program governance. 	<p>100% of the full time and part time graduate department faculty serve on the following:</p> <ul style="list-style-type: none"> Graduate Nursing Curriculum Committee Graduate Nursing Admission, Progression, and Graduation Committee <p>100% of the Graduate Nursing Faculty will attend 75% of the Curriculum Meetings as verified by minutes.</p> <p>75% of Grad Nursing Faculty will serve on DON committees.</p>	<p>Committee Minutes</p> <p>Program Committee Appointments by Department Chair</p>	Reviewed Annually – reported on worksheet in September	Annual

	<p>Grad Nursing Faculty will serve on a minimum of 20% of the eligible University Committees (will share positions with ASN, BSN, SLP, and H&K).</p> <p>Student representation will occur 100% of the time on the following committees as evidenced in minutes:</p> <ul style="list-style-type: none"> • DON Recruitment and Retention Committee • DON Alumni Committee • Dean’s Council • Graduate Nursing Admission, Progression, and Graduation Committee • Graduate Nursing Curriculum Committee • All students are given opportunities to provide formal and informal input into the curriculum. 	<p>DON Committee Appointment List by Dean</p> <p>University Committee Appointment List by VPAA.</p> <p>MUW Organizational Chart</p>		
Key Elements	Benchmarks	Tools	Timeline	F/U
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; 	<p>100% of the Graduate Nursing Department Policies are:</p> <ul style="list-style-type: none"> • Congruent with university policies. • Fair and Equitable 	<p>Department Chair for Graduate Nursing Policies (Handbook)</p> <p>Dean for DON Policies</p>	<p>All reviewed annually – reported on worksheet in September</p>	<p>Annual</p>
<ul style="list-style-type: none"> • published and accessible; and 	<ul style="list-style-type: none"> • Published for students • Accessible to all students 	<p>Graduate Bulletin - main source for publication of program outcomes, accreditation status, admission process</p>		

		and policies, and course of study requirements.		
<ul style="list-style-type: none"> reviewed and revised as necessary to foster program improvement. 	<ul style="list-style-type: none"> Reviewed regularly Revised as necessary 	Bulletin, Websites, Faculty Handbook, Master Plan of Evaluation, Committee minutes, Graduate Handbook		
<p>Elaboration: Academic policies include, but are not limited to, those related to student recruitment, admission, retention, and progression. Policies are written and communicated to relevant constituencies. Policies are implemented consistently. Differences between the nursing program policies and those of the parent institution are identified and support achievement of the program's mission, goals, and expected outcomes. A defined process exists by which policies are regularly reviewed. Policy review occurs, and revisions are made as needed.</p>				
Key Elements	Benchmarks	Tools	Timeline	F/U
<p>I-G. The program defines and reviews formal complaints according to established policies.</p>				
<p>Elaboration: The program defines what constitutes a formal complaint and maintains a record of formal complaints received. The program's definition of formal complaints includes, at a minimum, student complaints. The program's definition of formal complaints and the procedures for filing a complaint are communicated to relevant constituencies.</p>				
<ul style="list-style-type: none"> Defines and reviews formal complaints according to established policies. 	The graduate nursing department adheres to the academic grievances policy as detailed in the graduate bulletin for any formal grievances.	MUW Graduate Bulletin Academic grievance policy reviewed yearly.	September	Annual
Key Elements	Benchmarks	Tools	Timeline	F/U
<p>I-H. Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.</p>				
<ul style="list-style-type: none"> Documents and publications are accurate. 	The MUW Bulletin, MSN Program website, Post-Graduate APRN Certificate Program website, and DNP website are: <ul style="list-style-type: none"> Accurate Congruent with the University 	Department Chair maintains all graduate nursing websites. Recruitment brochures are approved and maintained by the dean with input from the departments.	September (reviewed and reported on worksheet)	Annual

	<ul style="list-style-type: none"> • Congruent with the DON Policies • Include the following: <ul style="list-style-type: none"> ○ Program description ○ Program purpose ○ Admission ○ Program philosophy ○ Outcomes ○ Accreditation status ○ Degree Completion ○ Tuition/Fees 	Yearly review of published policies in the bulletin, brochures, Graduate Handbook, and Websites.		
<ul style="list-style-type: none"> • A process is used to notify constituents about changes in documents and publications 	<p>Websites are reviewed to reflect any needed changes in order to ensure that constituents have access to the most current information.</p> <p>Course Syllabi are reviewed and updated to reflect any updated policy pertinent to the syllabus.</p> <p>The Graduate Bulletin is now online and continually updated as needed.</p>	<p>Yearly Review of websites</p> <p>Regularly (each semester) updated syllabi Email notification if needed</p> <p>Students are advised that the graduate nursing department adheres to policies reflected by the current graduate bulletin.</p>	Reviewed each September for Worksheet.	Annual
<p>Elaboration: References to the program’s offerings, outcomes, accreditation/approval status, academic calendar, recruitment and admission policies, grading policies, degree/certificate completion requirements, tuition, and fees are accurate. Information regarding licensure and/or certification examinations for which graduates will be eligible is accurate. For APRN education programs, transcripts or other official documentation specify the APRN role and population focus of the graduate. ^{1,2}</p>				
<p>If a program chooses to publicly disclose its CCNE accreditation status, the program uses either of the following statements:</p>				
<p>“The (baccalaureate degree program in nursing/master’s degree program in nursing/Doctor of Nursing Practice program and/or post-graduate APRN certificate program) at (institution) is accredited by the Commission on Collegiate Nursing Education (http://www.ccneaccreditation.org).”</p>				
<p>“The (baccalaureate degree program in nursing/master’s degree program in nursing/Doctor of Nursing Practice program and/or post-graduate APRN certificate program) at (institution) is accredited by the Commission on Collegiate Nursing Education, 655 K Street NW, Suite 750, Washington, DC 20001, 202-887-6791.”</p>				

SUPPORTING DOCUMENTATION FOR STANDARD I

Key Elements	Benchmarks	Tools	Timeline	F/U
The supporting documentation listed below is included in the self-study document or provided for review on site. CCNE recognizes that reasonable alternatives exist when providing documentation to address the key elements.				
1. Mission, goals, and expected program outcomes.				
2. Copies of all professional nursing standards and guidelines used by the program. CCNE requires the following professional nursing standards and guidelines:				
<ul style="list-style-type: none"> • Master's degree programs: <i>The Essentials of Master's Education in Nursing</i> (AACN, 2011). 				
<ul style="list-style-type: none"> • Doctor of Nursing Practice programs: <i>The Essentials of Doctoral Education for Advanced Nursing Practice</i> (AACN, 2006). 				
<ul style="list-style-type: none"> • Graduate degree (master's or DNP) or certificate programs preparing nurse practitioners: <i>Criteria for Evaluation of Nurse Practitioner Programs</i> 				

(NTF, 2016).				
<ul style="list-style-type: none"> • Graduate-entry programs: <i>The Essentials of Baccalaureate Education for Professional Nursing Practice</i> (AACN, 2008) and other relevant standards based on the degree outcome(e.g., <i>The Essentials of Master’s Education in Nursing</i> for master’s degree programs, <i>The Essentials of Doctoral Education for Advanced Nursing Practice</i> for DNP programs, and <i>Criteria for Evaluation of Nurse Practitioner Programs</i> for nurse practitioner programs). 				
<ul style="list-style-type: none"> • All programs: Any additional relevant professional nursing standards and guidelines used by the program. 				
¹ <i>Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education</i> (July 2008).				
² <i>Criteria for Evaluation of Nurse Practitioner Programs</i> (National Task Force on Quality Nurse Practitioner Education, 2016).				
3. For APRN education programs (degrees/certificates), evidence that transcripts or other official documentation specify the APRN role				

and population focus of the graduate.				
4. Identification of the program's community of interest.				
5. Appointment, promotion, and, when applicable, tenure policies or other documents defining faculty expectations related to teaching, scholarship, service, practice, or other areas.				
6. Major institutional and nursing unit reports and records for the past three years, such as strategic planning documents and annual reports.				
7. Reports submitted to and official correspondence received from applicable accrediting and regulatory agencies since the last accreditation review of the nursing program.				
8. Catalogs, student handbooks, faculty handbooks, personnel manuals, or equivalent information, including (among other things) academic calendar, recruitment and admission policies,				

grading policies, and degree/post-graduate APRN certificate program completion requirements.				
9. Program advertising and promotional materials directed at prospective students.				
10. Documents that reflect decision-making (e.g., minutes, memoranda, reports) related to program mission and governance.				
11. Organizational charts for the parent institution and the nursing unit.				
12. Program policies related to formal complaints.				

STANDARD II

PROGRAM QUALITY: INSTITUTIONAL COMMITMENT AND RESOURCES

The parent institution demonstrates ongoing commitment to and support for the nursing program. The institution makes resources available to enable the program to achieve its mission, goals, and expected outcomes. The faculty and staff, as resources of the program, enable the achievement of the mission, goals, and expected program outcomes.

Key Elements			
<p>II-A. Fiscal resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of fiscal resources is reviewed periodically, and resources are modified as needed.</p>			
<p>Elaboration: The budget enables achievement of the program's (baccalaureate, master's, DNP, and/or post-graduate APRN certificate) mission, goals, and expected outcomes. The budget supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of faculty and staff. A defined process is used for regular review of the adequacy of the program's fiscal resources. Review of fiscal resources occurs, and modifications are made as appropriate.</p>			
Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> The MSN, PG APRN, and DNP Graduate Programs are able to maintain a full complement of faculty 100% of the MSN, PG APRN, and DNP Graduate Faculty salaries are equal to the AACN, SREB, and IHL State means (evaluated as data is available) 100% of faculty has the opportunity to provide input into the university and college resources 100% of graduate faculty members have opportunity 	<ul style="list-style-type: none"> Dean/Department Chair maintains information <ul style="list-style-type: none"> Deans and Directors Statistics on salary means Faculty provides input utilizing the institutional commitment and resources worksheet 	<ul style="list-style-type: none"> <u>October:</u> Completed worksheet results reported to Graduate faculty 	<ul style="list-style-type: none"> <u>May:</u> College Strategic Planning Retreat <u>August:</u> Dean returns approved Strategic Plan to Department Chair/Faculty

to provide input into yearly strategic planning.	<ul style="list-style-type: none"> Faculty provide input toward strategic planning and attend planning retreat yearly. 		
Key Elements			
<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 reviewed periodically, and resources are modified as needed.</p>			
<p>Elaboration: Physical space and facilities (e.g., faculty and staff work space, classrooms, meeting areas) are sufficient and configured in ways that enable the program (baccalaureate, master's, DNP, and/or post-graduate APRN certificate) to achieve its mission, goals, and expected outcomes. Equipment and supplies (e.g., computing, laboratory, and teaching-learning materials) are sufficient to achieve the program's mission, goals, and expected outcomes. The program is responsible for ensuring adequate physical resources and clinical sites. Clinical sites are sufficient, appropriate, and available to achieve the program's mission, goals, and expected outcomes. A defined process is used to determine currency, availability, accessibility, and adequacy of resources (e.g., clinical simulation, laboratory, computing, supplies, and clinical sites), and modifications are made as appropriate.</p>			
Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> 100% of student clinical sites are approved by faculty Physical resources (including lab availability and supplies) are evaluated and updated as needed 	<p><u>MSN/PG-APRN</u></p> <ul style="list-style-type: none"> Faculty led site visits Student site evaluations Yearly Facilities evaluation Feedback at strategic planning meeting Opportunity to discuss concerns at plenary 	<ul style="list-style-type: none"> 1-2 site visits per semester End of each semester 	<ul style="list-style-type: none"> Graduate Faculty weekly/monthly meetings
Key Elements			
<p>II-C. Academic support services are sufficient to meet program and student needs and are evaluated on a regular basis.</p>			

Elaboration: Academic support services, which may include library, technology, distance education support, research support, and admission and advising services, foster achievement of program (baccalaureate, master's, DNP, and/or post-graduate APRN certificate) outcomes. A defined process is used for regular review of academic support services and improvements are made as appropriate.

Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> • 90% of faculty and 90% of students indicate that the following university services and resources are adequate to assist them in meeting the outcomes of the program: <ul style="list-style-type: none"> ○ Admissions Office ○ Financial Aid ○ Health Center ○ Library ○ Registrar's Office ○ Student Success Center/MUW writing center ○ Career Services ○ Counseling Services ○ Residence Life ○ MUW Bookstore ○ Security ○ Information Technology Services ○ Public Relations ○ <u>College of Nursing</u> ○ Classrooms ○ Clinical Facilities ○ Learning Resource Center (LRC) ○ Equipment ○ Staff Assistance (LRC, Secretarial) ○ Skills Lab and Simulation ○ Dean's Office 	<ul style="list-style-type: none"> • Students and Faculty complete University and Departmental "Facilities and services" evaluation • Results reviewed by the graduate faculty 	<ul style="list-style-type: none"> • May 	<ul style="list-style-type: none"> • Annually

<ul style="list-style-type: none"> ○ Department Chair's Office 			
Key Elements			
<p>II-D. The Chief Nurse Administrator is academically and experientially qualified (is a registered nurse (RN), holds a graduate degree in nursing, and holds a doctoral degree if the nursing unit offers a graduate program in nursing) and is vested with the authority required to accomplish the mission, goals, and expected outcomes of the Department and University. The Chief Nurse Administrator provides effective leadership to the nursing unit in achieving its mission, goals, and expected outcomes.</p>			
<p>Elaboration: The administrative authority of the chief nurse administrator is comparable to that of chief administrators of similar units in the institution. He or she consults, as appropriate, with faculty and other communities of interest to make decisions to accomplish the mission, goals, and expected outcomes. The chief nurse administrator is an effective leader of the nursing unit.</p>			
Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> • The Dean has a written job description requiring that the Dean is an RN, holds a doctoral degree (since the nursing unit offers a graduate program). • The Dean's curriculum vitae is on file. • 100% of Graduate Nursing Faculty have the opportunity to complete a Dean evaluation yearly. • Plenary and advisory board meeting minutes provided after each meeting 	<ul style="list-style-type: none"> • Dean job description and evaluation by VPAA • Dean job description and CV filed in college office. • VPAA Office forwards these to individual faculty- each faculty evaluates the dean and forwards the evaluation to the VPAA. 		<ul style="list-style-type: none"> • Annually • Annually

	<ul style="list-style-type: none"> Meeting minutes housed within college office. 		
Key Elements			
<p>II-E. Faculty members are academically and experientially qualified and sufficient in number to accomplish the mission, goals, and expected outcomes of the program (baccalaureate, Master's, DNP, and/or post-graduate APRN certificate).</p>			
<p>Elaboration: The Faculty (full-time, part-time, adjunct, tenured, non-tenured, or other) for each degree and post-graduate APRN certificate program are sufficient in number and qualifications to achieve the mission, goals, and expected program outcomes. The program (baccalaureate, Master's, DNP, and/or post-graduate APRN certificate) defines faculty workloads. Faculty to student ratios provide adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines. Faculty are academically prepared for the areas in which they teach. Academic preparation of faculty includes degree specialization, specialty coursework, or other preparation sufficient to address the major concepts included in courses they teach. Faculty teaching in the nursing program have a graduate degree.</p>			
<p>The program (baccalaureate, Master's, DNP, and/or post-graduate APRN certificate) provides justification for the use of any faculty who do not have a graduate degree. Faculty who are nurses hold current RN licensure. Faculty teaching in clinical/practicum courses are experienced in the clinical area of the course, and maintain clinical expertise. Clinical expertise may be maintained through clinical practice or other avenues. Faculty teaching in advanced practice clinical courses meet certification and practice requirements as specified by the relevant regulatory and specialty bodies. Advanced practice nursing tracks are directly overseen by faculty who are nationally certified in that same population-focused area of practice in roles for which national certification is available.</p>			
Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> The graduate nursing department maintains a full complement of FTEs 100% of Graduate Nursing Faculty hold national certifications as advanced practice registered nurses 	<ul style="list-style-type: none"> Dean has official record of FTE information with program director input. CV, RN licensure, and APRN certification on file in department chair and dean's office. 		

<ul style="list-style-type: none"> • 100% of graduate nursing faculty hold doctoral degrees. • 100% of Graduate Nursing Faculty has a written job description • The MSN, DNP and post-graduate APRN programs maintain a 1:6 faculty student ratio • 100% of graduate nursing faculty updated CVs show evidence that faculty are academically and experientially prepared to teach their specified content. • 100% of graduate nursing faculty maintain currency in clinical practice. 	<ul style="list-style-type: none"> • Information maintained by Department Chair • Comparison of incoming student admission numbers to current faculty • Report maintained by Department Chair • Faculty Practice and development policy • Faculty practice information updated on CV and filed in department office. 		<ul style="list-style-type: none"> • Annually
Key Elements			
<p>II-F. Preceptors (e.g., mentors, guides, coaches), if used by the program (baccalaureate, Master’s, DNP, and/or post-graduate certificate) as an extension of faculty, are academically and experientially qualified for their role.</p>			
<p>Elaboration: The roles and performance expectations for preceptors with respect to teaching, supervision, and student evaluation are:</p> <ul style="list-style-type: none"> • Clearly defined and communicated to preceptors • Congruent with the mission, goals, and expected student outcomes • Congruent with relevant professional nursing standards and guidelines • Reviewed periodically and revised as appropriate 			

Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> • 100% of MSN and Post-Graduate APRN preceptors are given “preceptor packets” that includes a course syllabus for clinical component, student evaluation form, and preceptor evaluation forms • 90% of preceptors are evaluated by students • 80% of preceptors are visited and observed by Graduate Nursing Faculty during precepted experiences (students on average have 5 preceptors each year and 4 site visits by Faculty members • 100% of preceptors are approved by Graduate Nursing Faculty and have appropriate nursing degree with years of experience (minimum 2 years of experience as APRN or as physician). • 100% of mentors/experts (2nd year DNP) are approved by graduate nursing faculty 	<ul style="list-style-type: none"> • Delivered by student at initial meeting with potential preceptor • valuations submitted to Faculty (student advisor) • All Faculty assigned to travel to preceptor clinical sites on a student’s scheduled clinical day. • Preceptor evaluations and clinic evaluations are maintained in graduate nursing office. • Preceptor Data forms on all preceptors: Faculty review of preceptor license, years of experience, specialty, and certification 	<ul style="list-style-type: none"> • Early in each semester and/or prior to clinical rotation • At completion of rotation each semester • Each semester prior to student beginning a clinical rotation with the preceptor 	

Key Elements

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.

Elaboration: Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role (full-time, part-time, adjunct, tenured, non-tenured, or other) and in support of the mission, goals, and expected faculty outcomes. Faculty have opportunities for ongoing development in teaching. If scholarship is an expected faculty outcome, the institution provides resources to support faculty scholarship. If service is an expected faculty outcome, expected service is clearly defined and supported. If practice is an expected faculty outcome, opportunities are provided for faculty to maintain practice competence. Institutional support ensures that currency in clinical practice is maintained for faculty in roles that require it

Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> • 100% of Graduate Nursing Faculty are allowed professional scholarship time weekly • 100% of Graduate Nursing Faculty are allowed clinical practice hours weekly • 100% of graduate nursing faculty follow university policy for scholarship, service, and practice activities. • 100% of Graduate Nursing Faculty are provided with annual continuing education reimbursement 	<ul style="list-style-type: none"> • Department Chair maintains information on Graduate Nursing Faculty Campus office hours, clinical practice days, approves scholarship days, and approves continuing education reimbursement. • Faculty Practice and Development policy • Faculty Evaluations (with Department Chair) • Dean maintains budget information. • College Policy statements 		<ul style="list-style-type: none"> • Annually

STANDARD III

PROGRAM QUALITY:

CURRICULUM AND TEACHING LEARNING PRACTICES

The curriculum is developed in accordance with the program's mission, goals, and expected student outcomes. The curriculum reflects professional nursing standards and guidelines and the needs and expectations of the community of interest. Teaching-learning practices are congruent with expected student outcomes. The environment for teaching-learning fosters achievement of expected student outcomes.

Key Elements	Benchmarks	Tools	Timeline	F/U
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 <u>program's mission and goals</u> 	The curriculum framework flow is consistent between the: <ul style="list-style-type: none"> CON&HS Purpose/Goals DNP/MSN/Post-Graduate APRN Purpose/Philosophy/Goals Program Outcomes Course Content Outcomes 	<ul style="list-style-type: none"> MUW Bulletin Syllabi End of Course Report (EOCR) 	Reviewed yearly in November for consistency and revised as necessary	Review results yearly at college retreat
<ul style="list-style-type: none"> Are congruent with the <u>roles</u> for which the program is preparing its graduates; 	Role standards are based on the Essentials and reflected in student outcomes found in: <ul style="list-style-type: none"> Course syllabi EOCR 	<ul style="list-style-type: none"> Course syllabi EOCR 	Reviewed each semester for consistency and revised as necessary	

<ul style="list-style-type: none"> Consider the needs of the program identified <u>community of interest</u> 	<p>Input from the “Community of Interest” is utilized in making curriculum changes. Input is received throughout the year during preceptor visits, conferences when we talk with medical systems that hire our graduates and at the annual Department of Nursing Advisory Board meeting.</p>	<p>Verbal and anecdotal notes from preceptor communication and visits, conferences and other informal contact with employers of our graduates.</p> <p>Minutes from the Graduate Faculty & Advisory Board Meetings</p>	<p>Reviewed each semester for recommendations with changes made as necessary.</p>		
<p>Elaboration: Curricular objectives (e.g., course, unit, and/or level objectives or competencies as identified by the program) provide clear statements of expected learning that relate to student outcomes. Expected outcomes relate to the roles for which students are being prepared.</p>					
<p>III-B. Not Applicable for Graduate Curriculum: Baccalaureate curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Baccalaureate program curricula incorporate <i>The Essentials of Baccalaureate Education for Professional Nursing Practice</i> (AACN, 2008).</p>					
<p>This key element is not applicable if the baccalaureate degree program is not under review for accreditation.</p>					
<p>Elaboration: The baccalaureate degree program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.</p>					
<p>III-C. Master’s curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).</p>					
<p>Master’s program curricula incorporate professional standards and guidelines as appropriate.</p>					
Key Element	Benchmarks	Tools	Timeline	F/U	
<p>a. All master’s degree programs incorporate The Essentials of Master’s Education in Nursing (AACN, 2011) and additional relevant professional standards</p>	<p>100% of courses reflect the Essentials.</p>	<p>Course syllabi See III-A 4 Table 1</p>	<p>Every semester</p>	<p>NU521 objectives reflect the essentials but was missing the numerical labels.</p>	

and guidelines as identified by the program.				
b. All master's degree programs that prepare nurse practitioners incorporate <i>Criteria for Evaluation of Nurse Practitioner Programs</i> (NTF, 2016).	100% of the NTF standards are incorporated into the MSN and Post graduate APRN courses	Course syllabi	Every semester	
c. 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.	100% of students entering the MSN/Post-graduate program must have a Baccalaureate of Science in Nursing (BSN) from an academic institution with national and regional accreditation.	MUW Program Specific Admission requirements	April	
<p>This key element is not applicable if the master's degree program is not under review for accreditation.</p> <p>Elaboration: The master's degree program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curricula. Master's degree APRN education programs (i.e., clinical nurse specialist, nurse anesthesia, nurse midwife, and nurse practitioner) incorporate separate comprehensive graduate-level courses to address the APRN core, defined as follows:</p>				
d. Advanced physiology/pathophysiology, including general principles that apply across the lifespan;	Admission prerequisite	Admission packet	March	
e. Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and	100% of students will pass NU 503 in the first semester.	NU 503 grades	December	

f. Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.	100% of students will pass NU 501 is required in the second semester.	NU 501 grades	May	
Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.				
Master's degree programs that have a direct care focus but are not APRN education programs (e.g., nurse educator and clinical nurse leader) incorporate graduate-level content addressing the APRN core. These programs are not required to offer this content as three separate courses.				
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).				
DNP program curricula incorporate professional standards and guidelines as appropriate.				
a. All DNP programs incorporate The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006) and additional relevant professional standards and guidelines if identified by the program.	<p><i>The Essentials of Doctoral Education for Professional Nursing Practice</i> (AANC,2006) terminology is reflected in:</p> <ul style="list-style-type: none"> • DNP Program/Philosophy/Goals • Program Outcomes • Course Content Outcomes 	<p>See III-A 4</p> <p>Admission Criteria</p> <p>Plan of Study</p> <p>Syllabi (goals, obj, teaching methods, course description)</p> <p>Clinical Rotations and Hours</p> <p>Gap Analysis</p>	Yearly and ongoing	

b. All DNP programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016).	The NTF standards are reflected throughout the curriculum.		Yearly and ongoing	
c. Graduate-entry DNP program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and appropriate graduate program standards and guidelines.	All persons admitted to the DNP program hold current national certification as advanced practice nurse or are currently enrolled in an advanced practice nursing program.	Admission criteria	June	
This key element is not applicable if the DNP program is not under review for accreditation.				
<p>Elaboration: The DNP program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curricula.</p> <p>DNP APRN education programs (i.e., clinical nurse specialist, nurse anesthesia, nurse midwife, and nurse practitioner) incorporate separate comprehensive graduate-level courses to address the APRN core, defined as follows:</p>				
d. Advanced physiology/pathophysiology, including general principles that apply across the lifespan;	This course should have been completed prior to becoming an APRN.	Admission criteria	June	
e. Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and	This course should have been completed prior to becoming an APRN.	Admission criteria	June	
f. Advanced pharmacology, which includes pharmacodynamics,	This course should have been completed prior to becoming an APRN.	Admission criteria	June	

pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.				
Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.				
Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for students enrolled in post-master's DNP programs who hold current national certification as advanced practice nurses, unless the program deems this necessary.				
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).				
This key element is not applicable if the post-graduate APRN certificate program is not under review for accreditation.				
Elaboration: The post-graduate APRN certificate program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curricula.				
APRN education programs (i.e., clinical nurse specialist, nurse anesthesia, nurse midwife, and nurse practitioner) incorporate separate comprehensive graduate-level courses to address the APRN core, defined as follows:				
<ul style="list-style-type: none"> Advanced physiology/pathophysiology, including general principles that apply across the lifespan; 	After a gap analysis is performed all post-graduate students are given a plan of study that reflects their needs based on APRN education standards. All needed courses will be taken with the MSN cohort.	Admission check list	Upon admission	
<ul style="list-style-type: none"> Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and 		Courses in III-A 4	December or March	
<ul style="list-style-type: none"> Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and 				

pharmacotherapeutics of all broad categories of agents.				
Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.				
Additional APRN core content specific to the role and population is integrated throughout the other role- and population-focused didactic and clinical courses				
Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for certificate students who have already completed such courses, unless the program deems this necessary.				
III-F. The curriculum is logically structured to achieve expected student outcomes.				
<ul style="list-style-type: none"> Baccalaureate curricula build on a foundation of the arts, sciences, and humanities. 	N/A			
<ul style="list-style-type: none"> Master's curricula build on a foundation comparable to baccalaureate-level nursing knowledge. 	Sequencing of curricula is appropriate.	Plan of Study	Every Semester	
<ul style="list-style-type: none"> DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student. 	Sequencing of curricula is appropriate.	Plan of Study	Every Semester	
<ul style="list-style-type: none"> DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student. 	Sequencing of curricula is appropriate.	Plan of Study	Every Semester	
<ul style="list-style-type: none"> Post-graduate APRN certificate programs build on graduate-level nursing competencies and knowledge base. 	Sequencing of curricula is appropriate.	Plan of Study	Every Semester	
Elaboration: Baccalaureate degree programs demonstrate that knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice. Graduate-entry programs in nursing incorporate the generalist knowledge common to baccalaureate nursing education as delineated in The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) as well as advanced nursing knowledge.				

Graduate programs are clearly based on a foundation comparable to a baccalaureate degree in nursing. Graduate programs delineate how students who do not have a baccalaureate degree in nursing acquire the knowledge and competencies comparable to baccalaureate education in nursing as a foundation for advanced nursing education. Programs that move students from basic nursing preparation (e.g., associate degree or diploma education) to a graduate degree demonstrate how these students acquire the baccalaureate-level knowledge and competencies delineated in *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008), even if they do not award a baccalaureate degree in nursing in addition to the graduate degree.

DNP programs, whether post-baccalaureate or post-master's, demonstrate how students acquire the doctoral-level knowledge and competencies delineated in *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006). If the program awards the master's degree as part of the DNP program, the program demonstrates how students acquire the master's-level knowledge and competencies delineated in *The Essentials of Master's Education in Nursing* (AACN, 2011) and, if applicable, *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2016).

The program provides a rationale for the sequence of the curriculum for each program.

III-G. Teaching-learning practices:

Key Elements	Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> support the achievement of expected student outcomes; 	100% Courses	Course syllabi End of Course reports	Every Semester	
<ul style="list-style-type: none"> consider the needs and expectations of the identified community of interest; and 	100% courses	Course syllabi End of Course reports	Every Semester	
<ul style="list-style-type: none"> expose students to individuals with diverse life experiences, perspectives, and backgrounds. 	100% courses	Course syllabi End of Course reports	Every Semester	

Elaboration: Teaching-learning practices (e.g., simulation, lecture, flipped classroom, case studies) in all environments (e.g., virtual, classroom, clinical experiences, distance education, laboratory) support achievement of expected student outcomes identified in course, unit, and/or level objectives.

Teaching-learning practices are appropriate to the student population (e.g., adult learners, second language students, students in a post-graduate APRN certificate program), consider the needs of the program-identified community of interest, and broaden student perspectives.

III-H. The curriculum includes planned clinical practice experiences that:

Elaboration: To prepare students for a practice profession, each track in each degree program and each track in the post-graduate APRN certificate program affords students the opportunity to develop professional competencies and to integrate new knowledge in practice settings aligned to the educational preparation. Clinical practice experiences include opportunities for interprofessional collaboration. Clinical practice experiences are provided for students in all programs, including those with distance education offerings. Clinical practice experiences align with student and program outcomes. These experiences are planned, implemented, and evaluated to ensure students are competent to function as members of interprofessional teams at the level for which they are being prepared. Programs that have a direct care focus (including, but not limited to, post-licensure baccalaureate and nurse educator tracks) provide direct care experiences designed to advance the knowledge and expertise of students in a clinical area of practice.

Key Elements	Benchmarks	Tools	Timeline	F/U
• enable students to integrate new knowledge and demonstrate attainment of program outcomes	100% of students participate in clinical rotations each semester.	Table III 5 Clinical Rotations and hours	Each semester	
• foster interprofessional collaborative practice; and	100% of students have a clinical rotation with a specialty group.	Clinical Rotation Packet	Each semester	
• are evaluated by faculty	100% of student clinical evaluations are performed during each semester with an onsite visit by faculty.	Clinical Evaluation Tool	Each semester	

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.

Elaboration: Evaluation of student performance is consistent with expected student outcomes. Grading criteria are clearly defined for each course, communicated to students, and applied consistently. Processes exist by which the evaluation of individual student performance is communicated to students. In instances where preceptors facilitate students' clinical learning experiences, faculty may seek input from preceptors regarding student performance, but ultimately faculty are responsible for evaluation of individual student outcomes. The requirement for evaluation of student clinical performance by qualified faculty applies to all students in all programs. Faculty evaluation of student clinical performance may be accomplished through a variety of mechanisms.

Key Elements	Benchmarks	Tools	Timeline	F/U
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Individual student evaluations are performed as directed by course requirements and reflected on course syllabi.	100% of students will be evaluated in each course	Grade book for each course/Banner Web	Each semester	
Clinical student evaluations progress within the curriculum.	100% Clinical preceptors have the opportunity to evaluate each student.	Clinical Preceptor Evaluation Tool	Each semester	
Faculty make the final evaluation on each student in the clinical setting.	100% of students will be graded by clinical faculty.	Faculty clinical evaluation tool. Final grade is a composite of mid-term and final clinical evaluations as indicated.	Each semester	
<p>III-J. The <u>curriculum and teaching-learning practices are evaluated</u> at regularly scheduled intervals, and evaluation data are used to foster ongoing improvement.</p> <p>Elaboration: Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of student outcomes. Such evaluation activities may be formal or informal, formative or summative. The curriculum is regularly evaluated by faculty and revised as appropriate.</p>				
Key Elements	Benchmarks	Tools	Timeline	F/U
Data is available from faculty and students for evaluation of each course.	100% of didactic and clinical courses are evaluated by students and faculty.	Syllabi Student evaluations Preceptor evaluations Meeting minutes EOC reports	Each semester	
The curriculum is regularly evaluated and revised.	Faculty and curriculum meetings occur at least 6 times yearly.	Meeting minutes	Each year	

End of course reports are evaluated and reflect recommended changes in the course after student evaluations are received and faculty review at the curriculum meetings each semester.	100% EOC reports are completed and evaluated yearly during course planning meetings.	EOC reports	Each semester	
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SUPPORTING DOCUMENTATION FOR STANDARD III

The supporting documentation listed below is included in the self-study document or provided for review on site. CCNE recognizes that reasonable alternatives exist when providing documentation to address the key elements.

1. Evidence that faculty participate in the development, implementation, and revision of curricula.	Minutes of Curriculum meetings			
2. Course syllabi for all courses included in the curricula.	Course Syllabi			
3. Examples of course content and/or assignments reflecting incorporation of professional nursing standards and guidelines in the curriculum.	Case Study Community Assessment			
4. Evidence that APRN education programs incorporate separate comprehensive graduate-level courses to address the APRN core.	See Plan of Study			
5. Evidence that graduate-level content related to the APRN core is taught in master's degree programs that have a direct care focus (e.g., nurse educator and clinical nurse leader).	N/A			

6. The program of study/curricular plan for each track/program under review.	Plan of Study			
7. Examples of student work reflecting student learning outcomes (both didactic and clinical).	Benner Self Assessment Tests Case Study Clinical Evaluation tool			
8. Examples of clinical practice experiences that prepare students for interprofessional collaborative practice.	Clinical Evaluation Tool Clinical Rotations			
9. Evidence of direct care clinical experiences for all programs/tracks preparing students for a direct care role (including, but not limited to, post-licensure baccalaureate and nurse educator tracks).	Clinical Sequencing and Rotations			
10. Current affiliation agreements with institutions at which student instruction occurs.	Clinical Folders			
11. Examples of student performance evaluations (didactic and clinical), including evaluation tools (e.g., exams, quizzes, projects, presentations).	Clinical Evaluations Exams Summer Quizzes			

	Summer Presentations Theory presentations			
12. Documentation that faculty are responsible for grading all courses and clinical experiences.	Evaluation methods listed on syllabi Clinical Evaluation Tool			
13. Examples of tools for curriculum assessment (e.g., end-of-course and faculty evaluations, student and faculty evaluations of clinical experiences).	Pull these			
14. Documents (e.g., minutes, memoranda, reports) that demonstrate data analysis of student and/or faculty evaluations to support ongoing improvement of curriculum and teaching-learning practices.	Pull meeting minutes			

STANDARD IV

PROGRAM EFFECTIVENESS: ASSESSMENT AND ACHIEVEMENT OF PROGRAM OUTCOMES

The program is effective in fulfilling its mission and goals as evidenced by achieving expected program outcomes. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. Data on program effectiveness are used to foster ongoing program improvement.

Key Elements				
IV-A. A systematic process is used to determine program effectiveness.				
Elaboration: The program (Baccalaureate, Master's, DNP, and/or Post-Graduate APRN certificate) uses a systematic process to obtain relevant data to determine program effectiveness. The process:				
	Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> is written, is ongoing, and exists to determine achievement of program outcomes is comprehensive (i.e., includes completion, licensure, certification, and employment rates, as required by the U.S. Department of Education; faculty outcomes; and other program outcomes identifies which quantitative and/or qualitative data are collected to assess achievement of the program outcomes 	<p><u>The MSN, PG APRN, and DNP Master Evaluation Plan:</u></p> <ul style="list-style-type: none"> the Master Evaluation Plan is written and reviewed yearly and results are reviewed to ensure program outcomes are met and are used for strategic planning faculty committee assignment for each standard worksheets completed according to MPE calendar 	<ul style="list-style-type: none"> Master Plan of Evaluation MSN Resource Center, MPE in Canvas Compiled worksheets for each standard reviewed and place in the MPE housed in the office of the Graduate Nursing chair 	<ul style="list-style-type: none"> <u>February:</u> Graduate Nursing Program faculty analyze all worksheets, balance the score cards, and provide input to Department Chair <u>March:</u> Department Chair compiles Graduate Nursing input for the College Strategic Planning Retreat 	<ul style="list-style-type: none"> <u>May:</u> College Strategic Planning Retreat <u>June:</u> Yearly Strategic Plan submitted to university administration by Dean <u>August:</u> Dean returns approved Strategic Plan to Department Chair/ Faculty

<ul style="list-style-type: none"> identifies which quantitative and/or qualitative data are collected to assess achievement of the program outcomes includes timelines for data collection, review of expected and actual outcomes, and analysis is periodically reviewed and revised as appropriate 	<p><u>Minutes are:</u></p> <ul style="list-style-type: none"> evidence of follow-up activities needed written for each MSN, PG APRN, and DNP curriculum meeting written for each MSN, PG APRN, and DNP plenary meetings written for each MSN, PG APRN, and DNP committee meeting housed in the office of the Department Chair 	<ul style="list-style-type: none"> MSN, PG APRN, and DNP Curriculum meetings 	<ul style="list-style-type: none"> Graduate Nursing curriculum meetings are <u>monthly</u> <u>September:</u> Section I- Missions and Governance <u>October:</u> Section II- Institutional Commitment and Resources <u>November:</u> Section III-Program Quality <u>January and March</u> 	
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		<ul style="list-style-type: none"> Plenary meetings 	<p>Section IV-Program Effectiveness (Pass rates are reported to Graduate Nursing department chair)</p> <ul style="list-style-type: none"> January, May, August, December 	
Key Elements				
IV-B. Program completion rates demonstrate program effectiveness.				
This key element is not applicable to a degree or certificate program that does not yet have individuals who have completed the program.				
Elaboration: The program (baccalaureate, master’s, DNP, and/or post-graduate APRN certificate) demonstrates achievement of required program outcomes regarding completion in any one of the following ways:				
	Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> the completion rate for the most recent calendar year (January 1 through December 31) is 70% or higher 	<p><u>Student Completion Rates:</u></p> <ul style="list-style-type: none"> MSN program completion rates are 80% or above for the expected time frame in the most recent calendar year Post-Graduate APRN Certificate Program completions rates are 80% or above for the expected time frame in the most recent calendar year 	<ul style="list-style-type: none"> Formula for Completion Rates for MSN/PG APRN Certificate/DNP: <u>Completion rate</u>= (#students completed/#students admitted) x 100 for those that completed the program within 150% of the usual time period from admission to completion per IHL requirements Program completion rate calculations are compiled by program Chair 	<p><u>MSN/PG APRN Certificate Programs</u></p> <ul style="list-style-type: none"> August of each year 	

<ul style="list-style-type: none"> the completion rate is 70% or higher over the three most recent calendar years; the completion rate is 70% or higher for the most recent calendar year when excluding students who have identified factors such as family obligations, relocation, financial 	<ul style="list-style-type: none"> DNP program completion rates are 80% for the expected time frame for the most recent calendar year MSN program completion rates are 80% or above for the expected time frame over the three most recent calendar years Post-Graduate APRN program completion rates are 80% or above for the expected time frame over the three most recent calendar years DNP program completion rates are 80% or above for the expected time frame over the three most recent calendar years MSN program completion rates are 80% or above for the expected time frame in the most recent calendar year when excluding students who have identified 		<p style="text-align: center;"><u>DNP</u></p> <ul style="list-style-type: none"> May of each year 	
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<p>barriers, and decisions to change major or to transfer to another institution of higher education; or the completion rate is 70% or higher over the three most recent calendar years when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education.</p>	<p>factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education</p> <ul style="list-style-type: none"> • Post-Graduate APRN Certificate program completion rates are 80% or above for the expected time frame in the most recent calendar year when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education • DNP program completion rates are 80% or above for the expected time frame in the most recent calendar year when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education 			
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<ul style="list-style-type: none"> the program identifies the cohort(s), specifies the entry point, and defines the time period to completion, each of which may vary by track; however, the program provides the completion rate for the overall degree/certificate program. The program describes the formula it uses to calculate the completion rate. The program identifies the factors used and the number of students excluded if some students are excluded from the calculation 			<p style="text-align: center;"><u>MSN</u></p> <ul style="list-style-type: none"> Usual time period is 3 semesters where the entry point would be Fall term (August). The exit point is 3 semesters, so all student would be expected to complete the 3-semester program within 5 semesters at a maximum to meet the 150% of usual time period from admission to graduation <p style="text-align: center;"><u>PG APRN Certificate</u></p> <ul style="list-style-type: none"> Usual time period is 3 semesters where the entry point would be Fall term (August). The exit point is 3 semesters, so all student would be expected to complete the 3-semester program within 5 semesters at a maximum to meet the 150% of usual time period from admission to graduation <p style="text-align: center;"><u>DNP</u></p> <ul style="list-style-type: none"> <u>For the BSN to DNP</u> the entry point for admission is Fall term. The exit point is 7 semesters for 	
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			<p>full-time and 9 semesters for part time so that all students would be expected to complete the 7-semester program within 11 semesters for full-time and 14 semesters for part time at a maximum to meet the 150% benchmark of usual time period from admission to graduation/completion</p> <ul style="list-style-type: none"> • <u>For the Post-Masters to DNP</u> the entry point for admission is Fall term. The exit point is 4 semesters full-time, excluding Summer semester, and 6 semesters part-time so all students would be expected to complete the 4-semester program within 6 semesters full-time, and 9 semesters part-time to meet the 150% of usual time period from admission to graduation 	
<p><u>Data Analysis</u></p> <ul style="list-style-type: none"> • If MUW MSN completion rate falls below 70% <p>If MUW MSN completion rate falls below 70% for the most recent calendar year, written explanation/analysis to CCNE</p>				

Key Elements

IV-D. Certification pass rates demonstrate program effectiveness.

This key element is not applicable to a degree or certificate program that does not prepare individuals for certification examinations or does not yet have individuals who have taken certification examinations.

Elaboration: The master’s, DNP, and post-graduate APRN certificate programs demonstrate achievement of required program outcomes regarding certification. For programs that prepare students for certification, certification pass rates are obtained and reported for those completers taking each examination, even when national certification is not required to practice in a particular state. For programs that prepare students for certification, data are provided regarding the number of completers taking each certification examination and the number that passed. A program is required to provide these data regardless of the number of test takers. A program that prepares students for certification demonstrates that it meets the certification pass rate of 80%, for each examination, in any one of the following ways:

	Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> the pass rate for each certification examination is 80% or higher for <u>first-time takers</u> for the most recent calendar year (January 1 through December 31) the pass rate for each certification examination is 80% or higher for <u>all takers</u> (first-time and repeaters who pass) for the most recent calendar year 	<ul style="list-style-type: none"> MSN/PG APRN program students demonstrate 80% certification pass rate for <u>first time</u> takers each certification exam (ANCC and AANP) for the most recent calendar year MSN/PG APRN program students demonstrate 80%% certification pass rate for <u>all takers</u> for each certification exam (ANCC and AANP) for the most recent calendar year 	<ul style="list-style-type: none"> ANCC (American Nurses Credentialing Center) certification exam pass rates analysis report. AANP (American Academy of Nurse Practitioners) certification exam pass rates analysis report. All DNP students have completed one of the two certification processes prior to NU 799 course work. Students are offered the opportunity to attend a certification exam review course offered by APEA 	<ul style="list-style-type: none"> ANCC/AANP certification exam pass rates, reported each Spring, following exams in the previous Fall. Pass rates are compiled and housed in the office of the Program Chair. ANCC/AANP certification exam pass rates, reported each Spring, following exams in the previous Fall. Pass rates are compiled and housed in the office of the Program Chair 	<ul style="list-style-type: none"> January and March of each year

<ul style="list-style-type: none"> the pass rate for each certification examination is 80% or higher for all <u>first-time takers</u> over the three most recent calendar years; or the pass rate for each certification examination is 80% or higher for all takers (first-time and repeaters who pass) over the three most recent calendar years. 	<ul style="list-style-type: none"> MSN/PG APRN program students demonstrate 80% certification pass rate for <u>first time</u> takers for each certification exam (ANCC and AANP) over the three most recent years MSN/PG APRN program students demonstrate 80% certification pass rate for <u>all takers</u> for each certification exam AN(AANC (ANCC and AANP) over the three most recent years MSN/PG APRN programs certification pass rate is above or equal to the national average for the most recent calendar year MSN/PG APRN programs certification pass rate is above or equal to the national average over the three most recent years 	<p>between the 3rd and 4th semesters</p>		
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<ul style="list-style-type: none"> The program identifies which of the above options was used to calculate the pass rate. The program provides certification pass rate data for each examination but, when calculating the pass rate described above, may combine certification pass rate data for multiple examinations relating to the same role and population. 		<ul style="list-style-type: none"> Pass rates are discussed/analyzed in MSN/PG APRN curriculum meetings once results are obtained by the Chair 	<ul style="list-style-type: none"> Spring 	<ul style="list-style-type: none"> January and March of each year when certification pass rates are released
<p><u>Data Analysis:</u></p> <ul style="list-style-type: none"> If the MUW certification pass rate for AANP and ANCC is less than 80% for first-time takers for the most recent calendar year, a written documentation for the variance and a plan to meet the 80% pass rate for the first-time takers provided to CCNE If the MUW certification pass rate for AANP and ANCC is less than 80% for all takers for the most recent calendar year, a written documentation for the variance and a plan to meet the 80% pass rate for the first-time takers provided to CCNE 				
<p>Key Elements</p>				
<p>IV-E. Employment rates demonstrate program effectiveness.</p>				
<p>This key element is not applicable to a degree or certificate program that does not yet have individuals who have completed the program.</p>				
<p>Elaboration: The program demonstrates achievement of required outcomes regarding employment rates.</p>				

	Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> The employment rate is 70% or higher. However, if the employment rate is less than 70%, the employment rate is 70% or higher when excluding graduates who have elected <u>not to be employed</u>. The employment rate is provided separately for each degree program (baccalaureate, master's, and DNP) and the post-graduate APRN certificate program. Data are collected within <u>12 months</u> of program completion. Specifically, employment data are collected at the time of program completion or at any time within 12 months of program completion. 	<ul style="list-style-type: none"> 90% of MSN graduates <u>who are seeking employment</u> will obtain a job within the first <u>12 months</u> after graduation 90% of PG ARP/N graduates who are seeking employment will obtain a job within the first <u>12 months</u> after graduation 90% of DNP graduates who are seeking employment will obtain a job within the first <u>12 months</u> after graduation 	<ul style="list-style-type: none"> Annual Graduate Nursing Alumni Survey results are compiled by Chair MSN/PG APRN/DNP End of Program Satisfaction Surveys attached to NU 506L for MSN/PG APRN programs and Nu 799 for DNP program in Canvas 	<p><u>MSN/PG APRN Certificate Programs</u></p> <ul style="list-style-type: none"> August of each year surveys are sent out to the class from the previous year <p><u>DNP</u></p> <ul style="list-style-type: none"> May of each year 	<p><u>MSN/PG APRN Certificate Programs</u></p> <ul style="list-style-type: none"> August of current year <p><u>DNP</u></p> <ul style="list-style-type: none"> May of current year
<p><u>Data Analysis:</u></p> <ul style="list-style-type: none"> Any program with an employment rate less than 70% 				
Key Elements				
<p>IV-F. Data regarding completion, licensure, certification, and employment rates are used, as appropriate, to foster ongoing program improvement.</p>				
<p>This key element is applicable if one or more of the following key elements is applicable: Key Element IV-B (completion), Key Element IV-C (licensure), Key Element IV-D (certification), and Key Element IV-E (employment).</p>				

Elaboration: The program uses outcome data (completion, licensure, certification, and employment) for improvement.				
	Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> Discrepancies between actual and CCNE expected outcomes (program completion rates 70%, licensure pass rates 80%, certification pass rates 80%, employment rates 70%) inform areas for improvement. Changes to the program to foster improvement and achievement of program outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness. Faculty are engaged in the program improvement process. 	<u>Completed worksheets:</u> <ul style="list-style-type: none"> Each scorecard results/analysis reviewed and appropriate actions taken as indicated Cumulative scorecard results for last three years reviewed 	<ul style="list-style-type: none"> MPE completed worksheets 	<ul style="list-style-type: none"> <u>September:</u> Section I- Missions and Governance <u>October:</u> Section II- Institutional Commitment and Resources <u>November:</u> Section III-Program Quality <u>January and March</u> Section IV-Program Effectiveness (Pass rates are reported to Graduate Nursing Department hair) 	
<u>Data Analysis:</u> <ul style="list-style-type: none"> Actual outcomes compared to expected outcomes Areas of improvement identified 				
Key Elements				
IV-G. Aggregate faculty outcomes demonstrate program effectiveness.				

Elaboration: The program demonstrates achievement of expected faculty outcomes. In order to demonstrate program effectiveness, outcomes are consistent with and contribute to achievement of the program's mission and goals and are congruent with institution and program expectations. Expected faculty outcomes:

	Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> are identified for the faculty as a group; specify expected levels of achievement for the faculty as a group; and reflect expectations of faculty in their roles. 	<p><u>Aggregate Faculty Outcomes for Practice:</u></p> <ul style="list-style-type: none"> 100% of faculty hold licensure and national certification <p><u>Aggregate Graduate Nursing Faculty Scholarship accomplishments:</u></p> <ul style="list-style-type: none"> 100% of faculty involved in scholarship 	<ul style="list-style-type: none"> Validation of licensure certification from Board of Nursing and certifying bodies; housed in office of program Chair Faculty Practice and Scholarship policy Faculty Survey Scholarship benchmark can be met by accomplishing at least one of the following activities: <ul style="list-style-type: none"> Presentations/ Publications (50%) Research activities (100%) Continuing education (100%) 	<ul style="list-style-type: none"> Licensure from the Board of Nursing is renewed every 2 years on the even years Certification renewal is every 5 years following the initial year of certification 	<ul style="list-style-type: none"> May of each year at the time of CV updates and Faculty surveys are sent

	<p><u>Aggregate Graduate Nursing Faculty Leadership and Academically related Community Service Participation:</u></p> <ul style="list-style-type: none"> • 80% of faculty will be involved in leadership and academically related community and university service • 100% of faculty serve on college or university committees • 100% of faculty serve on admissions and graduate curriculum committee • 100% of faculty satisfactorily complete a performance 	<ul style="list-style-type: none"> • Involvement in professional organizations (local, state, or national) (50%) • Faculty CV housed in office of Department Chair • Faculty Survey results. See Section IV worksheet. • List of University/College committees • Housed in Canvas course: College of Nursing and Health Sciences • College By-Laws. Can be found in Canvas course: College of Nursing and Health Sciences 	<ul style="list-style-type: none"> • Updated CV is due to Chair of Department in May of each year, and updated per faculty as benchmarks are met • Updated during Plenary yearly: • Spring of each year 	<ul style="list-style-type: none"> • August, November
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		<ul style="list-style-type: none"> Office of Institutional Research Alumni Surveys (Elizabeth Carter) 		
*MUW is a teaching institution and supports scholarship in publications, presentations, and research activities with students but teaching is the primary function.				
<u>Data Analysis:</u> <ul style="list-style-type: none"> Actual outcomes compared to expected outcomes and Areas of improvement identified Expected actual faculty outcomes are considered the same for both full-time and part-time faculty. 				
Actual faculty outcomes are compared to expected levels of achievement. Actual faculty outcomes are presented in the aggregate. If expected faculty outcomes vary for different groups of faculty (full time, part-time, adjunct, tenured, non-tenured, or other), actual faculty outcomes may be presented separately for each different group of faculty.				
Key Elements				
IV-H. Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.				
Elaboration: The program uses faculty outcome data for improvement.				
	Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> Faculty outcome data are used to promote ongoing program improvement. Discrepancies between actual and expected outcomes inform areas for improvement. 	<u>Aggregate Graduate Nursing Faculty Scholarship accomplishments:</u> <ul style="list-style-type: none"> 100% of faculty are involved in scholarship activities 	<ul style="list-style-type: none"> Faculty Practice and Scholarship policy Scholarship benchmark can be met by accomplishing at least one of the following activities: 	<ul style="list-style-type: none"> CV updates May of each year 	

<ul style="list-style-type: none"> • Changes to foster achievement of faculty outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness. • Faculty are engaged in the program improvement process. 		<ul style="list-style-type: none"> • Presentations/Publications (50%) • Research activities (100%) • Continuing education (100%) • Involvement in professional organizations (local, state, or national) (50%) • Yearly performance evaluations 	<ul style="list-style-type: none"> • Spring of each year 	
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Key Elements

IV- I. Program outcomes demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of outcomes other than those related to completion rates (Key Element IV-B), licensure pass rates (Key Element IV-C), certification pass rates (Key Element IV-D), employment rates (Key Element IV-E), and faculty (Key Element IV-G). Program outcomes are defined by the program and incorporate expected levels of achievement. The program describes how outcomes are measured. Actual levels of achievement, when compared to expected levels of achievement, demonstrate that the program, overall, is achieving its outcomes. Program outcomes are appropriate and relevant to the degree and certificate programs offered.

	Benchmarks	Tools	Timeline	F/U
	<u>Student Core Knowledge:</u> <ul style="list-style-type: none"> • MSN essentials 	<ul style="list-style-type: none"> • Comprehensive exams passing score of 70% • APEA Pre-Predictor test prior to comprehensive exams 	<ul style="list-style-type: none"> • June • June 	

	<ul style="list-style-type: none"> • DNP essentials <p><u>Alumni:</u></p> <ul style="list-style-type: none"> • Alumni are surveyed and express: <ul style="list-style-type: none"> • Satisfaction in the program • Job placement after graduation • Professional advancement • Program satisfaction is evident by a benchmark average score of 2.0 or greater on the Alumni Survey <p><u>Employers:</u></p>	<ul style="list-style-type: none"> • APEA Post-Predictor test- APEA passing score of 65% is considered the national average to show a satisfactory indicator of student certification preparation • 100% MSN/PG APRN have satisfactory completion of the MSN/PG APRN portfolio • 100% of DNP students have satisfactory completion of the DNP Portfolios • Graduate Nursing Alumni Survey online each year to those students who completed the program the following year • Annual on-site CEU event for local APRNs • Attached to Standard IV Worksheet • Representative sample of employers are surveyed 	<ul style="list-style-type: none"> • August • August • May • August • August 	
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	<ul style="list-style-type: none"> Sampled employers express satisfaction with the program as evident by a benchmark average score of 2.0 or greater annually <p><u>Student Satisfaction Rates:</u></p> <ul style="list-style-type: none"> Student satisfaction is evident by a benchmark average score of 2.0 or greater on the End of Program Satisfaction Survey indicating that the program outcomes were achieved <p><u>Aggregate program and student data are compiled and analyzed by faculty according to the Master Evaluation Plan Calendar:</u></p> <ul style="list-style-type: none"> Mission and Governance Institutional Commitment and Resources Program Quality: Curriculum/Teaching-Learning Practices 	<p>yearly and express satisfaction in the program</p> <ul style="list-style-type: none"> Advisory board meetings attended by the Chair and committee members MSN/PG APRN/DNP End of Program evaluation survey results are compiled by Program Chair End of Program Satisfaction Survey (NU 506, NU 799) Attached to Standard IV Worksheets <p>MPE completed worksheets</p>	<p><u>MSN/PG APRN Certification Program</u></p> <ul style="list-style-type: none"> August at end of program yearly <p><u>DNP</u></p> <ul style="list-style-type: none"> May at end of program (2-year program) <p><u>September:</u> Section I- Missions and Governance</p> <p><u>October:</u> Section II- Institutional Commitment and Resources</p> <p><u>November:</u> Section III-Program Quality</p>	
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	<ul style="list-style-type: none"> • Program Effectiveness: Student Performance and Faculty Accomplishment <p><u>All program improvement plans are documents on worksheets and followed until the issue is resolved:</u></p> <ul style="list-style-type: none"> • Mission and Governance • Institutional Commitment and Resources • Program Quality: Curriculum/Teaching-Learning Practices • Program Effectiveness: Student Performance and Faculty Accomplishment 		<ul style="list-style-type: none"> • <u>January and March</u> Section IV-Program Effectiveness (Pass rates are reported to Graduate Nursing Department hair) 	
<p><u>Data Analysis:</u></p> <ul style="list-style-type: none"> • Any program with outcomes lower than the expected provides a written explanation for the variance to CCNE 				
Key Elements				
IV- J. Program outcome data are used, as appropriate, to foster ongoing program improvement.				
Elaboration: For program outcomes defined by the program:				
	Benchmarks	Tools	Timeline	F/U
<ul style="list-style-type: none"> • Actual program outcomes are used to 	<u>Completed worksheets</u>	<ul style="list-style-type: none"> • MPE complete worksheets 	<ul style="list-style-type: none"> • <u>September:</u> Section I- Missions and Governance 	

<p>promote program improvement</p> <ul style="list-style-type: none"> • Discrepancies between actual and expected outcomes inform areas for improvement. • Changes to the program to foster improvement and achievement of program outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness. • Faculty are engaged in the program improvement process. 	<ul style="list-style-type: none"> • Each scorecard results/analysis reviewed and appropriate actions taken as indicated • Cumulative Scorecard results for last three years reviewed 		<ul style="list-style-type: none"> • <u>October:</u> Section II- Institutional Commitment and Resources • <u>November:</u> Section III-Program Quality • <u>January and March</u> Section IV-Program Effectiveness (Pass rates are reported to Graduate Nursing Department hair) 	
<p><u>Data Analysis:</u></p> <ul style="list-style-type: none"> • actual outcomes compared to expected outcomes • areas of improvement identified changes to the program to foster improvement 				

MUW GRADUATE NURSING: Standard I-MISSION AND GOVERNANCE WORKSHEET

Closing the Loop - COVER PAGE

Complete the following table utilizing the previous year’s Score Card data, analysis, and follow-up.

SCORE CARD RESULTS

SCORE CARD RESULTS: Number of benchmarks met __ out of __ total benchmarks = __%

Action Plan To Correct Unmet Benchmark Indicators from previous year

UNIVERSITY, DIVISIONAL AND PROGRAM GOALS	KEY ELEMENT	INT/EXT& PROCESS EVALUATION BENCHMARKS INDICATORS	ANALYSIS OF BENCHMARKS FROM WORK- SHEET INFORMATION	COMMENTS & ACTIONS TO BE TAKEN	Resp. Party Group/ Ind.	FOLLOW-UP ACTIONS REQUIRED	TARGET DATE FOR COMPLETION/ EVALUATION

Graduate Nursing: I-Mission/Governance Committee Worksheet

Date Form Completed:

Semesters Being Evaluated:

***MUW Graduate Bulletin Date Utilized for Review:**

Benchmark			Review Date	Benchmark Evaluation	Comments
<u>Key Element 1-A</u>	Yes No			Met Not Met	
1. Has there been a change in the Mission/Purpose of the University for the above evaluation period?		If yes, explain actions taken:			
2. Has there been a change in the Mission and Goals for the above evaluation period?		If yes, explain actions taken:		Met Not Met	
A. DON	Yes No				
B. MSN Program	Yes No				
C. Post-Graduate APRN Certificate Program	Yes No				
D. DNP Program	Yes No				
3. Has the program purpose and philosophy been reviewed for the evaluation period?		If no, explain.		Met Not Met	
A. MSN Program	Yes No	If yes, discuss any changes made a (or attach revisions to this form)			
B. Post-Graduate APRN Certificate Program	Yes No				
C. DNP Program	Yes No				
4. Has the program mission, goals and student outcomes (Program Outcomes) been assessed for congruency with the university mission and goals?		Was congruency found?		Met Not met	
A. MSN Program		University: Yes No			
B. Post-Graduate APRN Certificate Program		DON: Yes No			
C. DNP Program	Yes No	ANA Standards: Yes No			
	Yes No	CCNE: Yes No			
	Yes No	SREB: Yes No			
	Yes No	University Assessment Plan			

		Yes No			
			If no, explain actions taken:		
5. Have the mission and goals of the program been reviewed this year?				Met Not met	
A. MSN Program	Yes No				
B. Post-Graduate APRN Certificate Program	Yes No				
C. DNP Program	Yes No				
<u>Key Element 1-B</u>				Met Not met	
6. Is the mission, goals, and expected outcomes consistent with:					
A. Essentials of Master's Education in Nursing (AACN, 2011)?	Yes No				
B. The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006)?	Yes No				
C. Criteria for Evaluation of Nurse Practitioner Programs [National Task Force on Quality Nurse Practitioner Education (NTF), 2016]?	Yes No				
	Yes No				
7. Are other standards/guidelines reviewed yearly for updates/changes [Standards for Accreditation of Baccalaureate and Graduate Degree Nursing programs (AACN amended 2013), National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Core Competencies with Curriculum Content (2017), NONPF Population Focused Nurse Practitioner Competencies - Family/Across the Lifespan (2013), Mississippi Nursing Degree Program	Yes No			Met Not met	

<p><u>Key Element 1-E</u></p> <p>12. 100% of the graduate department full-time and part time faculty attends 75% of the graduate department Curriculum Committee meetings as verified by the minutes (except FMLA)?</p>	<p>Yes No</p>	<p>If no, do not list name. Department Chair will evaluate on annual performance appraisal.</p>		<p>Met Not met</p>	
<p>13. Graduate Department full time and part time faculty will be represented on graduate nursing, DON, and University committees:</p> <p>A. 100% on Graduate Nursing Program</p> <p>B. 100% on Graduate Nursing Curriculum</p> <p>C. Serve on 75% of eligible DON Committees</p> <p>D. Serve on 20% of eligible University Committees</p>	<p>Yes No</p>	<p>A. 100% on Graduate Nursing Committee Yes No</p> <p>B. 100% on Graduate Nursing Curriculum Yes No</p> <p>C. 75% of DON Committee Yes No</p> <p>D. 20% of University Committees Yes No</p>		<p>Met Not Met</p>	
<p>14. Student representation will occur 100% of the time on the following committees:</p> <p>A. DON Recruitment and Retention committee</p> <p>B. DON alumni committee</p> <p>C. Dean's Council</p> <p>*D. Graduate Nursing admission, progression, and graduation committee – see notes</p> <p>E. Students are given opportunity to provide formal and informal input into the curriculum.</p>	<p>Yes No</p>	<p>A. DON Recruitment and Retention committee Yes No</p> <p>B. DON alumni committee Yes No</p> <p>C. Dean's Council Yes No</p> <p>D. Graduate Nursing admission, progression, and graduation committee Yes *No</p> <p>E. Students are given opportunity to provide</p>		<p>Met Not Met</p>	<p>Student Names:</p>

		formal and informal input into the curriculum. Yes No				
<p><u>Key Element 1-F</u></p> <p>15. 100% of the Graduate Nursing Policies and Procedures are published, congruent with university policies, fair and equitable, reviewed and revised as necessary.</p>	Yes No	<p><u>MUW Graduate Bulletin</u></p> <p>Policies and Procedures for students are available to students online in the MUW graduate bulletin</p>	<p><u>Graduate Handbook</u></p> <p>Additional Policies and Procedures for students are available in the graduate nursing handbook.</p>		Met Not Met	
<p><u>Key Element 1-G</u></p> <p>16. 100% of the graduate nursing faculty adhere to the academic grievances policy as detailed in the graduate bulletin for any formal grievances?</p>	Yes No	<p>Academic grievances policy listed in the graduate bulletin?</p> <p>Yes No</p>	<p>Academic grievances policy listed in the graduate bulletin referred to in graduate handbook?</p> <p>Yes No</p>		Met Not Met	
<p><u>Key Element 1-H</u></p> <p>17. List the accreditation bodies presently maintained by the MSN program, post-graduate APRN certificate program, and DNP program.</p>		<p>CCNE</p> <p>IHL</p> <p>SACSCOC</p>			Met Not met	

18. Are the accrediting agencies listed in #16 published correctly?	Yes No	MUW Bulletin? Yes No	Website? Yes No			
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19. 100% of publications are accurate?	MUW Bulletin	MSN Website	Post-graduate APRN Certificate Website	DNP Website	Met Not Met	Comments
	Mission Yes No	Mission Yes No	Mission Yes No	Mission Yes No		If any one of the above marked is a “no” that indicates a not met.
	Accreditation Status Yes No	A link to Accreditation Status Yes No	A link to Accreditation Status Yes No	A link to Accreditation Status Yes No		
	Academic Calendar Yes No	A link to Academic Calendar Yes No	A link to Academic Calendar Yes No	A link to Academic Calendar Yes No		
	Admission Policy Yes No	Admission Policy Yes No	Admission Policy Yes No	Admission Policy Yes No		
	Degree Completion Requirements Yes No	Degree Completion Requirements Yes No	Degree Completion Requirements Yes No	Degree Completion Requirements Yes No		

	Tuition/Fees Yes No	A link to tuition/Fees Yes No	A link to tuition/fees Yes No	A link to tuition/fees Yes No		
Appropriate personnel notified of all changes	Yes No N/A	Yes No N/A	Yes No N/A	Yes No N/A		N/A this year – no changes were needed
Other sites or materials reviewed (recruitment brochures/materials)	Yes No					

Standard I-MISSION AND GOVERNANCE WORKSHEET
SCORE CARD RESULTS

SCORE CARD RESULTS: Number of benchmarks met 19 out of 19 total benchmarks = 100 %

Action Plan To Correct Unmet Benchmark Indicators

UNIVERSITY, DIVISIONAL AND PROGRAM GOALS	KEY ELEMENT	INT/EXT& PROCESS EVALUATION BENCHMARKS Indicators	ANALYSIS OF BENCHMARKS FROM WORK- SHEET INFORMATION	COMMENTS & ACTIONS TO BE TAKEN	Resp. Party Group/ Ind.	FOLLOW-UP ACTIONS REQUIRED	TARGET DATE FOR COMPLETI ON/ Evaluation

Note: This data will be transferred to next year’s Worksheet Cover Page to provide follow-up documentation (closing the loop).

Date: _____

Signatures of Faculty assisting with completion of worksheet: (Typed in names will serve as signatures):

Date: _____

Signature of Department Chair (Typed in name will serve as signature): _____

Revised: September 04, October 06, August 17, 2009, August 12, August 19

Reviewed: August 14, June 15

MUW GRADUATE NURSING: Standard II - INSTITUTIONAL COMMITMENT AND RESOURCES

Worksheet and Score Card Results

Closing the Loop - COVER PAGE

Complete the following table utilizing the previous year's Score Card data, analysis, and follow-up.

SCORE CARD RESULTS: Number of benchmarks met __ out of __ total benchmarks = __%

Action Plan To Correct Unmet Benchmark Indicators from previous year

UNIVERSITY, DIVISIONAL AND PROGRAM GOALS	KEY ELEMENT	INT/EXT& PROCESS EVALUATION BENCHMARKS INDICATORS	ANALYSIS OF BENCHMARKS FROM WORK- SHEET INFORMATION	COMMENTS & ACTIONS TO BE TAKEN	Resp. Party Group/ Ind.	FOLLOW-UP ACTIONS REQUIRED	TARGET DATE FOR COMPLETION/ EVALUATION

MUW Graduate Nursing: II-Institutional Commitment and Resources Worksheet

Date Form Completed: _____

Semesters Being Evaluated: Summer 20 , Fall 20 , Spring 20

*MUW Graduate Bulletin Date Utilized for Review: 20 -20

Benchmark			Review Date	Benchmark Evaluation	Comments
<u>Key Element II-A</u>					
1.The Graduate Nursing Program is able to Maintain a full complement of faculty	Yes No	Strategic Planning Retreat/ Program Chair maintains information	SP 20__	Met Not Met	
2.The Graduate Nursing faculty salaries are Equal to the AACN, SREB, and IHL State means	Yes No	Strategic Planning Retreat/ Program Chair maintains information	SP 20__	Met Not Met	
<u>Key Element II-B</u>					
1.100% of graduate nursing clinical sites are approved by faculty	Yes No	End of semester student evaluations Site visits by faculty each semester	SP 20__	Met Not Met	
2.Physical resources are reviewed annually and modified as needed	Yes No	Annual faculty meeting at Plymouth Bluff/Retreat	SP 20__	Met Not met	
<u>Key Element II-C</u>					
1.90% of faculty and 90% of students indicate that the following university services and resources are adequate to assist them in meeting the outcomes of the program: -Admissions Office -Financial Aid	Yes No	Students and faculty complete the University and Departmental Facilities and Resource Form annually in May and the results are reviewed by the graduate faculty	SP 20__	Met Not met	

<ul style="list-style-type: none"> -Health Center -Library -Registrar's Office -Student Success Center/MUW Writing Center -Career Services -Counseling Services -Residence Life -MUW Bookstore -Security -Information Technology Services -Public Relations <u>College of Nursing:</u> -Classrooms -Clinical Facilities -Learning Resource Center (LRC) -Equipment -Staff Assistance <li style="padding-left: 20px;">LRC <li style="padding-left: 20px;">Secretarial -Skills Lab and Simulation -Dean's Office -Department Chair's Office 					
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<u>Key Element II-D</u>					
1.The Dean has a written job description requiring that the Dean is a registered nurse and holds a doctoral degree since the nursing unit offers a graduate program	Yes No	Dean job description/evaluation by VPAA VPAA Office forwards these to individual faculty	SP 20__	Met Not met	
2.100% of the graduate faculty have the opportunity to complete a Dean evaluation annually	Yes No	Annual evaluation to VPAA	SP 20__	Met Not met	
<u>Key Element II-E</u>					
1.100% of Graduate Nursing Faculty hold doctoral degrees and hold national certifications as advanced practice registered nurses (APRN)	Yes No	Faculty self-evaluations annually; Program Chair led faculty evaluations annually	SP 20__	Met Not met	At present 7/8 Graduate Nursing Faculty (88%) hold doctoral degrees and 1/8 is enrolled pursuing the doctoral degree. 100% hold national certifications as advanced practice registered nurses (APRN)
2.100% of Graduate Nursing Faculty has a written job description	Yes No	Information maintained by Dean and Department Chair	SP 20__	Met Not met	
3.The DNP/MSN/Post Graduate APRN Programs maintain 1:6 faculty/student ratios	Yes No	Comparison of student admission numbers to present faculty (1:6). Admission report maintained by Department Chair	SP 20__	Met Not met	
<u>Key Element II-F</u>					
1.100% of MSN and Post Graduate APRN preceptors are given “preceptor packets” each semester that include a course syllabus for the clinical component, student evaluation forms, and preceptor evaluation forms	Yes No	Faculty communication with preceptor (phone/email)	SP 20__	Met Not met	

2.90% of preceptors are evaluated by students	Yes No	Evaluations submitted to faculty at the end of each semester	SP 20__	Met Not met	
3.80% of preceptors are visited and observed by graduate nursing faculty during precepted experiences (students on average have 5 preceptors each year and 4 site visits by faculty members)	Yes No	Faculty do site visits each semester	SP 20__	Met Not Met	
4.100% of preceptors are approved by graduate nursing faculty (specialty, years of experience, license information)	Yes No	Faculty review of preceptor license, experience, specialty, and clinical site prior to student starting clinical rotations	SP 20__	Met Not Met	
<u>Key Element II-G</u>					
1.100% of Graduate Nursing Faculty are provided with annual continuing education reimbursements	Yes No	Program Chair maintains information	SP 20__	Met Not Met	
2.100% of Graduate Nursing Faculty verbalize satisfaction with time allowed for scholarship, service, and practice activities	Yes No	Annual faculty evaluations	SP 20__	Met Not Met	

MUW GRADUATE NURSING: Standard II- INSTITUTIONAL COMMITMENT AND RESOURCE

WORKSHEET and SCORE CARD RESULTS

20__-20__

SCORE CARD RESULTS: Number of benchmarks met __ out of __ total benchmarks = __%

Action Plan To Correct Unmet Benchmark Indicators

UNIVERSITY, DIVISIONAL AND PROGRAM GOALS	KEY ELEMENT	INT/EXT& PROCESS EVALUATION BENCHMARKS Indicators	ANALYSIS OF BENCHMARKS FROM WORK- SHEET INFORMATION	COMMENTS & ACTIONS TO BE TAKEN	Resp. Party Group/ Ind.	FOLLOW-UP ACTIONS REQUIRED	TARGET DATE FOR COMPLETI ON/ Evaluation

Note: This data will be transferred to next year's Worksheet Cover Page to provide follow-up documentation (closing the loop).

Date: _____

Signatures of Faculty assisting with completion of worksheet: (Typed in names will serve as signatures):

Date: _____

Signature of Department Chair (Typed in name will serve as signature):

Revised 5/2019

**MUW GRADUATE NURSING: Standard III-Program Quality: Curriculum and Teaching-Learning
WORKSHEET and SCORE CARD RESULTS**

Closing the Loop - COVER PAGE

Complete the following table utilizing the previous year's Score Card data, analysis, and follow-up.

SCORE CARD RESULTS

20__-20__

SCORE CARD RESULTS: Number of benchmarks met __ out of __ total benchmarks = ___%

Action Plan To Correct Unmet Benchmark Indicators

UNIVERSITY, DIVISIONAL AND PROGRAM GOALS	KEY ELEMENT	INT/EXT & PROCESS EVALUATION BENCHMARKS Indicators	ANALYSIS OF BENCHMARKS FROM WORK- SHEET INFORMATION	COMMENTS & ACTIONS TO BE TAKEN	Resp. Party Group/ Ind.	FOLLOW-UP ACTIONS REQUIRED	TARGET DATE FOR COMPLETI ON/ Evaluation

MUW Graduate Nursing: Standard III-Program Quality: Curriculum and Teaching-LearninWorksheet

Date Form Completed: _____

Semesters Being Evaluated: Summer 20 , Fall 20 , Spring 20

*MUW Graduate Bulletin Date Utilized for Review: 20 -20

Benchmark		Evaluation	
<p>III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that: Are congruent with the <u>program's mission and goals</u>; Are congruent with the <u>roles</u> for which the program is preparing its graduates; Considers the needs of the program identified <u>community of interest</u>.</p>			
<p>1. Has there been a change in the DNP/MSN/Post-Graduate APRN mission and goals or Program Outcomes that would require a change in Course Outcomes or Content Outcomes?</p> <p>YES NO</p>	<p>If yes, explain what action was taken.</p>	MET	NOT MET
<p>2. 100% courses achieve a 90% or above Course Completion Rate</p> <p>Course Completion Rate Defined:</p> <p>Course Completion Rate = # of students starting* the course compared to the # students making a B in Clinical courses and a C or above in didactic courses. Students not completing the course will consist of all W's, WP's, WF's, C's (in clinical courses), D's and F's, and "I's" as indicated on the End of Course Report and Banner Grade sheet.</p> <p>*Starting the course =Use first official roll to determine number of students that start the course. Any student whose name does not appear on the permanent roll will not be counted.</p>	<p>Yes No</p> <p>Highlight courses that do not meet 90% completion rate in Table II A 1</p>	MET	NOT MET
<p>3. Did any course(s) fall below 90% for 2 consecutive offerings?</p>	<p>Yes No</p>	MET	NOT MET

	<p>*If yes to #2, the Course Coordinator must initiate a Course Completion Rate Analysis Form, assisted by all faculty teaching in the course. The form will then be presented with this worksheet or earlier if deemed actionable. Copy and paste from below to create the report.</p> <p>*Attach Course Completion Rate Analysis Form to the worksheet</p>	
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**Table III A 1: Course Completion % Rates
Fall, Spring, Summer**

<p>MSN Fall</p> <table border="1"> <thead> <tr> <th></th> <th>20__</th> <th>20__</th> <th>20__</th> <th>20__</th> </tr> </thead> <tbody> <tr> <td>Nu 502</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Nu 503</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Nu 503L</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Nu 508</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Nu 521</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>NU 560</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>MSN Spring</p>		20__	20__	20__	20__	Nu 502					Nu 503					Nu 503L					Nu 508					Nu 521					NU 560					<p>Post-Graduate APRN Summer</p> <table border="1"> <thead> <tr> <th></th> <th>20__</th> <th>20__</th> <th>20__</th> <th></th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>DNP Fall</p> <table border="1"> <thead> <tr> <th></th> <th>20__</th> <th>20__</th> <th>20__</th> <th>20__</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		20__	20__	20__																		20__	20__	20__	20__										
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NU 505				
NU 505L				
NU 550				
NU 597				

MSN Summer

	20__	20__	20__	
NU 506				
NU506L				
NU 512				
NU 516				
NU 570				
NU 597				

Post-Graduate APRN Fall

	20__	20__	20__	20__
NU 503				
NU 503L				
NU 521				

DNP Spring

	20__	20__	20__	
NU 712				
NU 713				
NU 714				
NU 750				
NU 799				
NU 800-1				
NU 800-2				

DNP Summer

	20__	20__	20__	
NU 799				
NU 800				

<p>Post-Graduate APRN Spring</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 10px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%; text-align: center;">20__</td> <td style="width: 15%; text-align: center;">20__</td> <td style="width: 15%; text-align: center;">20__</td> <td style="width: 15%;"></td> </tr> <tr> <td>NU 505</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>NU505L</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>NU 550</td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <p>*Based on grade sheet in Banner Web **Based on previous courses</p>		20__	20__	20__		NU 505					NU505L					NU 550					<p>DNP</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%; text-align: center;">20__</td> <td style="width: 15%; text-align: center;">20__</td> <td style="width: 15%; text-align: center;">20__</td> <td style="width: 15%;"></td> </tr> <tr> <td>HED517**</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="5">HED 517 Statistics, elective if not already taken</td> </tr> </table> <p>MSN Prerequisite Offering</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%; text-align: center;">20__</td> <td style="width: 15%; text-align: center;">20__</td> <td style="width: 15%; text-align: center;">20__</td> <td style="width: 15%; text-align: center;">20__</td> </tr> <tr> <td></td> <td></td> <td></td> <td style="text-align: center;">Spring</td> <td style="text-align: center;">Summer</td> </tr> <tr> <td>NU 513</td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		20__	20__	20__		HED517**					HED 517 Statistics, elective if not already taken						20__	20__	20__	20__				Spring	Summer	NU 513				
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			Spring	Summer																																															
NU 513																																																			

<p>4. 100% of DNP/MSN/Post-Graduate APRN Courses show evidence that the program is utilizing <i>The Essentials of Doctoral Education for Professional Nursing Practice (AACN, 2006)</i> and <i>The Essentials of Master’s Education for Professional Nursing Practice (AACN, 2011)</i> and <i>ANA Standards as the prescribed <u>ROLE</u> standards.</i></p>		<p>MET NOT MET</p>						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; padding: 5px;"> <ul style="list-style-type: none"> • Graduate Nursing Department mission is audited to make sure that prescribed standard terminology is still present. </td> <td style="width: 20%; text-align: center; padding: 5px;"> Yes No </td> </tr> <tr> <td style="padding: 5px;"> <ul style="list-style-type: none"> • Graduate Nursing Department goals are audited to make sure that prescribed standard terminology is still present. </td> <td style="text-align: center; padding: 5px;"> Yes No </td> </tr> <tr> <td style="padding: 5px;"> <ul style="list-style-type: none"> • Graduate Nursing Program Outcomes audited to make sure prescribed standard terminology is still present. </td> <td style="text-align: center; padding: 5px;"> Yes No </td> </tr> </table>	<ul style="list-style-type: none"> • Graduate Nursing Department mission is audited to make sure that prescribed standard terminology is still present. 	Yes No	<ul style="list-style-type: none"> • Graduate Nursing Department goals are audited to make sure that prescribed standard terminology is still present. 	Yes No	<ul style="list-style-type: none"> • Graduate Nursing Program Outcomes audited to make sure prescribed standard terminology is still present. 	Yes No		
<ul style="list-style-type: none"> • Graduate Nursing Department mission is audited to make sure that prescribed standard terminology is still present. 	Yes No							
<ul style="list-style-type: none"> • Graduate Nursing Department goals are audited to make sure that prescribed standard terminology is still present. 	Yes No							
<ul style="list-style-type: none"> • Graduate Nursing Program Outcomes audited to make sure prescribed standard terminology is still present. 	Yes No							

<ul style="list-style-type: none"> Have there been any changes to the professional nursing standards or guidelines? 	Yes No		
<ul style="list-style-type: none"> If yes, were revisions required and completed? 	Yes No N/A		

2016-2017									
Two (2) Course Syllabi in each year in a course of study are audited to make sure that the <u>standard terminology</u> and <u>content</u> are being used.	DNP 1 st Year		DNP 2 nd Year		MSN		Post-Graduate APRN		
<i>Write in course number audited:</i>	NU 700	NU 713	NU721	NU800	NU 505	NU 570	NU	NU	XXXXXX
Course Overview Template is followed	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	N/A	N/A	XXXXXX
Course Goals/Description	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	N/A	N/A	XXXXXX
Course Objectives with Essentials	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	N/A	N/A	XXXXXX
Teaching Strategies	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	N/A	N/A	XXXXXX
Evaluation Methods	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	N/A	N/A	XXXXXX
Grading Parameters	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	N/A	N/A	XXXXXX

Grading Parameters	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	XXXXXX
2018-2019										
Two (2) Course Syllabi in each year in a course of study are audited to make sure that the <u>standard terminology</u> and <u>content</u> are being used.	DNP 1 st Year		DNP 2 nd Year		MSN		Post-Graduate APRN			
<i>Write in course number audited:</i>	NU 704	NU 713	NU 770	NU 712	NU 503	NU 521	NU	NU	XXXXXX	
Course Overview Template is followed	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	N/A	N/A	XXXXXX	
Course Goals/Description	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	N/A	N/A	XXXXXX	
Course Objectives with Essentials	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	N/A	N/A	XXXXXX	
Teaching Strategies	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	N/A	N/A	XXXXXX	
Evaluation Methods	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	N/A	N/A	XXXXXX	
Grading Parameters	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	N/A	N/A	XXXXXX	
5. 100% of the time each program considers the needs and expectations of the <u>communities of interest</u>.				The Nursing Advisory council minutes, written, verbal and anecdotal notes from preceptor				MET NOT MET		

	<p>communication and visits, conferences and other informal contact with employers of our graduates are reflected in the following documents as provided:</p> <ul style="list-style-type: none"> • Preceptor evaluations Yes No • Clinical End of course reports Yes No • Curriculum Meeting minutes reflect the action taken from COI remarks Yes No • Nursing Advisory Council Minutes Yes No 	
III-B. N/A Baccalaureate Standards		
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).		
a. 100% of courses reflect the <i>Essentials</i> .	See III-A #4	MET NOT MET
b. 100% of courses reflect the <i>NTF standards</i> .	<p>Reflected in:</p> <p>Admission Criteria</p> <p>Plan of Study</p> <p>Syllabi (goals, objectives, teaching methods, course description)</p> <p>Clinical Rotations and Hours</p> <p>Gap Analysis</p>	MET NOT MET
c. 100% of students have a BSN degree upon admission as reflected in the admission packet.	Audit the admission folder for each student admitted. Appendix ____ Admission Data Sheet	MET NOT MET

	Table III C 1		
d. 100% of students will complete an Advanced Pathophysiology course with a “B” or higher prior to admission.	Audit the admission folder for each student admitted. Appendix ____ Admission Data Sheet Table III C 1	MET	NOT MET
e. 100% of students admitted meet IHL and MUW admission requirements	Admission Data Sheet on all admitted students Appendix ____ Admission Data Sheet Table III C 1	MET	NOT MET
f. 100% of students will have completed and passed the Advanced Health Assessment course with a “B” or higher in the first semester.	NU 503 grades 2016-2017 Yes No 2017-2018 Yes No 2018-2019 Yes No	MET	NOT MET
g. 100% of students will have completed and passed the Advanced Pharmacology course with a “C” or better in the second semester.	NU 501 grades 2016-2017 Yes No 2017-2018 Yes No 2018-2019 Yes No (See III-A 3 Table)	MET	NOT MET
Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.			

TABLE III-C 1

Admission Requirements		
MSN	Post-Graduate APRN Certification	DNP

<ul style="list-style-type: none"> • Baccalaureate of Science in Nursing (BSN) from an academic institution with national and regional accreditation • Unencumbered RN license or have unencumbered authority to practice as a RN via the Multi-state Licensure Compact • Practice experience of at least two years as a registered nurse • Cumulative GPA of 3.0 on a 4.0 scale in the most recent 60 hours of nursing course work • Advanced Pathophysiology is a prerequisite course. Must pass this course with a minimum grade of "B" • Credit in undergraduate statistics course with a minimum grade of "C" • Minimum score of 3.0 in analytical writing on current GRE (within the last 5 years) • Pass a nationwide background check and drug screen (9 panel) • A personal interview with graduate nursing faculty • Three letters of reference • Evidence of professional leadership and foundational research skills • Health Admission Requirements • Meet Graduate Studies Department criteria for admission 	<ul style="list-style-type: none"> • Master of Science in Nursing from an academic institution with national and/or regional accreditation • Unencumbered RN license or have unencumbered authority to practice as a RN via the Multi-state Licensure Compact • Hold current national board certification as an advanced nurse practitioner (APRN) in a specialty other than intended plan of study. (For RN to FNP candidate) • Practice experience of at least two years as a registered nurse • Minimum cumulative grade point average (GPA) of 3.0 on 4.0 scale • Advanced Pathophysiology is a prerequisite course. Must pass this course with a minimum grade of "B" • Minimum score of 3.0 in analytical writing on current GRE (within 5 years) • Pass a nationwide background check and drug screen (9 panel) • A personal interview with graduate nursing faculty • 1-2 page current resume describing all chronological work experience and education • Three letters of reference • Evidence of professional leadership and foundational research skills • Health Admission Requirements • Meet Graduate Studies Department criteria for admission 	<ul style="list-style-type: none"> • Meet criteria for admission to Graduate Studies. • Master of Science in Nursing (MSN) from an academic institution with national and regional accreditation. • Hold current national board certification as an advanced nurse practitioner (APRN). • Complete Graduate Research (3 semester credit hours) course with a minimum grade of a "B". • Both full and part time options have the same requirements. • Complete a three (3) semester credit hour graduate-level (500-level or higher) advanced pathophysiology course with a "B" or higher. • Unencumbered MS RN/APRN license or have unencumbered authority to practice as an APRN (not required if entering Post BSN to DNP program) • Evidence of professional leadership and foundational research skills • A current (within last five years) score on the Graduate Record Exam (GRE) with minimum analytical writing score of 3.0 • Three (3) written letters of reference • Pass a criminal background check performed at MUW • Drug screen (9 panel or higher) • A minimum cumulative grade point average (GPA) of 3.0 on 4.0 scale • A personal interview with graduate nursing faculty • Evidence of current national board certification as an APRN (not required if entering Post BSN to DNP program) • Have practiced a minimum of two (2) years as a registered nurse
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		<ul style="list-style-type: none"> • One (1) to two (2) page current resume describing all chronological work experience and education • 1000-word essay regarding the applicant's accomplishments and professional aspirations. Include a description of career goals and explain how a DNP from MUW will help accomplish these goals. • Health Admission Requirements
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).		
a. 100% of the courses reflect <i>The Essentials of Doctoral Education for Advanced Nursing Practice</i> (AACN, 2006).	Course Syllabi See III-A 4	MET NOT MET
b. 100% of courses reflect the <i>NTF standards (2016)</i> .	Reflected in: Admission Criteria Plan of Study Syllabi (goals, objectives, teaching methods, course description) Residency and Project Hours Gap Analysis	MET NOT MET
c. Graduate-entry DNP program curricula incorporate <i>The Essentials of Baccalaureate Education for Professional Nursing Practice</i> (AACN, 2008) and appropriate graduate program standards and guidelines.	Admission to the program requires all students to hold current national certification as advanced practice nurses or be currently enrolled in an advanced practice nursing program. See Appendix ____ Admission Data Sheet Table III C 1	MET NOT MET
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)			
A gap analysis is performed on 100% of students going into the Post-graduate APRN certificate program to determine courses needed.	On admission interview/application. Appendix _____ Admission Data Sheet	MET	NOT MET
All needed courses are taken with the MSN cohort.	Courses have been evaluated in III-A 4	MET	NOT MET
III-F. The curriculum is logically structured to achieve expected student outcomes. (A rationale for the sequencing of the curriculum for each program is defined in the narrative.)			
a. Master's curricula build on a foundation comparable to baccalaureate-level nursing knowledge.	Table for sequencing of curricula III F 1	MET	NOT MET
b. DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student.	Table for sequencing of curricula III F 2	MET	NOT MET
c. Post-graduate APRN certificate programs build on graduate-level nursing competencies and knowledge base.	Table for sequencing of curricula III F 1	MET	NOT MET
d. The curriculum Plan of Study is still current? MSN YES NO Post Graduate APRN YES NO DNP YES NO	Sequencing changed due to staffing, statistics, etc. See narrative.	MET	NOT MET

PLAN OF STUDY TABLES

Table III F 1 Plan of Study Full Time MSN Students and Post Graduate APRN

Family Nurse Practitioner Track	Course
Prerequisite	NU 513 Advanced Pathophysiology (May transfer in an approved Graduate Advance Pathophysiology course from another institution)
Fall	NU 502 - Advanced Theoretical Issues in Nursing and Ethics

	NU 503 - Advanced Health Assessment *
	NU 503L - Advanced Health Assessment Clinical *
	NU 508 - Advanced Nursing Research and Evidence Based Practice Strategies
	NU 521 - Science of Diagnostic Reasoning *
Spring	NU 501 - Advanced Pharmacology *
	NU 505 - Primary Care Management I *
	NU 505L - Primary Care Management I Clinical *
	NU 550 - Advanced Primary Care Procedures *
	NU 597 - Clinical Research Project
Summer	NU 506 - Primary Care Management II *
	NU 506L - Primary Care Management II Clinical *
	NU 512 - Advanced Practice Role Development *
	NU 516 - Population Health in Advanced Nursing Practice
	NU 570 - Advanced Healthcare Policy and Politics
	NU 597-Clinical Research Project
	*Denotes Post-Graduate APRN Certificate requirements contingent on Gap Analysis; at times other courses may be required.

The Post Graduate APRN Certificate program utilizes courses provided in the MSN Family Nurse Practitioner program. These are congruent with the course objectives for the core courses of the FNP curriculum including the Advanced Health Assessment, Advanced Pharmacology, and Advanced Pathophysiology (required as a pre-requisite for all programs). A Gap Analysis is done on the transcripts of Post Graduate applicants to determine exact courses needed. Usually Twenty-three credit hours are required for the post graduate students who are already nurse practitioners but are not Family Nurse Practitioners, and thirty credit hours for nurses who hold a Master's degree in Nursing but are not nurse practitioners. These courses are delivered in a logical sequence that builds on content from the BSN and from pre-requisite course work. Advanced Pharmacology may be transferred in but it is highly recommended for the students to audit or sit in on this course.

Post Graduate APRN Certificate Track	Course
Prerequisite	NU 513 Advanced Pathophysiology (May transfer in an approved Graduate Advance Pathophysiology course from another institution)
Fall	NU 503 - Advanced Health Assessment *
	NU 503L - Advanced Health Assessment Clinical *
	NU 521 - Science of Diagnostic Reasoning *
Spring	NU 501 - Advanced Pharmacology *
	NU 505 - Primary Care Management I *
	NU 505L - Primary Care Management I Clinical *
	NU 550 - Advanced Primary Care Procedures *
Summer	NU 506 - Primary Care Management II *
	NU 506L - Primary Care Management II Clinical *
	NU 512 - Advanced Practice Role Development *
	*Denotes Post-Graduate APRN Certificate requirements contingent on Gap Analysis; at times other courses may be required.

Table III F 2 Plan of Study for Full Time DNP Students 2017-2019

Full Time Plan of Study Doctoral Program	Courses
Semester 1	NU 700 – Philosophy and Theory of Nursing Practice
	NU 701 – Quality and Safety in Complex Health Systems
	NU 704 - Informatics and Transformation of Health Care
	NU 708 - Standards of Care and Evidenced Based Practice
Semester 2	NU 713 - Chronic Disease in the Human
	NU 714 - Population Health
	NU 750 - Inter-professional Collaboration
	*HED 517 – Introduction to Biostatistics
	*May be taken as a prerequisite prior to entering DNP or as part of the program.
Semester 3	NU 770 – Health Care Policy & Economics
	NU 721 - Science of Advanced Diagnostic Reasoning
	NU 799 – DNP Residency I
	NU 800 – DNP Project I
Semester 4	NU 712 - Leadership in Complex Health Care Systems
	NU 799 - DNP Residency II
	NU 800 - DNP Project II

Table III F 3 Plan of Study for Full Time DNP Students 2016-2017

Full Time Plan of Study Doctoral Program	Courses
Semester 1	NU 700 – Philosophy and Theory of Nursing Practice
	NU 703 – Biostatistics
	NU 704 - Informatics and Transformation of Health Care
	NU 708 - Standards of Care and Evidenced Based Practice
Semester 2	NU 713 - Chronic Disease in the Human
	NU 714 - Population Health
	NU 750 - Inter-professional Collaboration
	NU 800 – DNP Project
	NU 701 – Quality and Safety in Complex Health Systems
Semester 3	NU 770 – Health Care Policy & Economics
	NU 721 - Science of Advanced Diagnostic Reasoning
	NU 799 – DNP Residency I
Semester 4	NU 712 - Leadership in Complex Health Care Systems
	NU 799 - DNP Residency II
	NU 800 - DNP Project II

III-G. Teaching-learning practices are congruent with expected student outcomes. The environment for teaching-learning fosters achievement of expected student outcomes. Management and pharmacology content are congruent in lectures and testing when possible to facilitate learning.			
a. 100% of courses have appropriate teaching-learning practices, listed on the syllabi, End of Course report and reflected in a variety of current teaching-learning methods.	Course Syllabi End of Course Report	MET	NOT MET
b. 100% of courses evaluate teaching-learning strategies after each offering.	Curriculum meeting minutes	MET	NOT MET
c. 90% of teaching-learning practices and environments are evaluated as supporting the achievement of course outcomes. <ul style="list-style-type: none"> o Effective as evaluated by students Yes No o Effective as evaluated by faculty Yes No o Evaluated on End of Course Reports Yes No 	Appendix _____ example of student and faculty evaluations attached to End of Course report	MET	NOT MET
III-H. The curriculum includes planned clinical practice that enables students to integrate new knowledge and demonstrate attainment of program outcomes; foster Interprofessional collaborative practice; and is evaluated by faculty. MSN/Post-graduate APRN (See III-I for DNP clinical residency)			
a. 100% of students participate in clinical rotations each semester.	Chart of rotations and hours required Table III H 1 Note that students interact with other professions in rotations such as RD, PT, OT, ST, Pharmacists, MD	MET	NOT MET
b. 100% of students have a clinical rotation with a specialty group including OB/GYN or Women's Health, Pediatrics, Internal Medicine and Family Practice.	See Syllabi for NU 503L, 505L, 506L OB/GYN or Women's Health, Peds and Internal Medicine/Family Practice are required during the spring semester. More interaction with MD's this semester with these experiences. In summer may do other specialty hours such as geriatrics, cardiology, dermatology, oncology, etc.	MET	NOT MET

<p>c. 100% of student clinical evaluations are performed during each semester with an onsite visit by faculty.</p>	<p>Clinical Evaluation Tool</p> <p>2 times 1st and 2nd semester</p> <p>1 time 3rd semester</p> <p>Attach clinical evaluation tool</p> <p>Faculty performs the final clinical evaluation on the students each semester.</p>	<p>MET</p>	<p>NOT MET</p>
<p>d. 100% of primary clinical preceptors are asked to evaluate the student at least once a semester with a formal evaluation tool and through communication with the student’s faculty advisor. The final clinical grade is determined by the faculty not the preceptor.</p>	<p>See preceptor clinical evaluation tool (NP Preceptor Evaluation)</p> <p>Preceptors are provided with email/phone number of clinical advisors.</p> <p>Faculty talk to preceptors at clinical evaluation visits.</p>	<p>MET</p>	<p>NOT MET</p>

Table III H 1 MSN and Post-Graduate APRN Clinical Rotations

<p>MSN & Post-Graduate APRN 2016-2019</p>		
<p>Semester</p>	<p>Site</p>	<p>Clinical Hours</p>
<p>Fall</p>	<p>Family Practice</p>	<p>120 hours</p>
<p>Spring</p>	<p>Family Practice/ Internal Medicine and Peds &/or Women’s Health</p>	<p>270 hours Total – 138 hours Internal Medicine/Family Practice; 66 hours Pediatrics; 66 hours Women’s Health</p>
<p>Summer</p>	<p>Family Practice</p>	<p>270 hours (Up to 80 hours may be done in specialty to increase Interprofessional collaboration and broaden the student’s knowledge.)</p>
		<p>Clinical Guidelines are posted each semester in the Syllabus in Canvas and a Hard copy given to the students.</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.			
a. 100% evaluation of Didactic Coursework	Note syllabi have grading criteria, objectives and evaluation methods. See Table III A 4 Banner web has final course grades	MET	NOT MET
b. 100% evaluation of Clinical Coursework	Note syllabi have grading criteria, objectives and evaluation mechanism. Faculty talk to preceptors at clinical evaluation visits. Faculty performs the final clinical evaluation on the students each semester. Banner web has final course grades	MET	NOT MET
c. 100% of DNP students enrolled courses are Board Certified Nurse Practitioners and most have a clinical practice site. DNP clinical/residency hours are based on the DNP essentials and the needs of the students with a focus on the DNP project, interprofessional collaboration, and leadership.	Refer to APPENDIX ___ Admission Data Sheet Gap analysis Clinical residency objectives. Logs of residency experiences with DNP essentials addressed.	MET	NOT MET
III-J. The curriculum and teaching-learning practices are evaluated at regularly scheduled intervals, and evaluation data are used to foster ongoing improvement. Elaboration: Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of student outcomes. Such evaluation activities may be formal or informal, formative or summative. The curriculum is regularly evaluated by faculty and revised as appropriate.			
a. 100% of students have the opportunity to evaluate each course and faculty member at the end of each semester.	Check that university evaluations are available each semester.	MET	NOT MET

<p>b. 100% of students have the opportunity to evaluate the clinical facilities and preceptors utilized.</p>	<p>See NP Administrative Clinical Site Evaluation form</p>	<p>MET</p>	<p>NOT MET</p>
<p>c. Faculty and curriculum meetings occur at least 6 times yearly.</p>	<p>Meet at the beginning and end of each semester and as needed to review current and future changes in curriculum. Formal evaluation of courses take place after student evaluations have been received at the end of each semester.</p>	<p>MET</p>	<p>NOT MET</p>
<p>d. End of Course evaluations are compiled and analyzed to provide evaluation of all teaching/learning practices: 100% of EOC reports are completed and evaluated yearly during course planning meetings.</p>	<p>EOC reports reflect recommended changes in the course after student evaluations are received and faculty review at the curriculum meetings each semester.</p>	<p>MET</p>	<p>NOT MET</p>

9/12/19

**Mississippi University for Women College of Nursing and Health Sciences Graduate Nursing
III-Program Quality: Curriculum and Teaching-Learning Practices WORKSHEET**

SCORE CARD RESULTS

20__-20__

SCORE CARD RESULTS: Number of benchmarks met __ out of __ total benchmarks = ____%

Action Plan To Correct Unmet Benchmark Indicators

UNIVERSITY, DIVISIONAL AND PROGRAM GOALS	KEY ELEMENT	INT/EXT & PROCESS EVALUATION BENCHMARKS Indicators	ANALYSIS OF BENCHMARKS FROM WORK- SHEET INFORMATION	COMMENTS & ACTIONS TO BE TAKEN	Resp. Party Group/ Ind.	FOLLOW-UP ACTIONS REQUIRED	TARGET DATE FOR COMPLETI ON/ Evaluation

Note: This data will be transferred to next year's Worksheet Cover Page to provide follow-up documentation (closing the loop).

Date:

Signatures of Faculty assisting with completion of worksheet (Typed names will serve as signatures):

Signature of Department Chair (Typed in name will serve as signature):

MUW GRADUATE NURSING: Standard IV-PROGRAM EFFECTIVENESS: STUDENT PERFORMANCE AND FACULTY ACCOMPLISHMENTS WORKSHEET and Score Card Results
Closing the Loop - COVER PAGE

Complete the following table utilizing the previous year's Score Card data, analysis, and follow-up.

SCORE CARD RESULTS

20__-20__

UNIVERSITY, DIVISIONAL AND PROGRAM GOALS	KEY ELEMENT	INT/EXT& PROCESS EVALUATION BENCHMARK S	ANALYSIS OF BENCHMARKS FROM WORK-SHEET INFORMATION	ACTIONS THAT HAVE BEEN TAKEN OVER THE PAST YEAR TO IMPROVE BENCHMARK SCORE/S THUS IMPROVING PROGRAM QUALITY/ EFFECTIVENESS	Resp. Party Group/ Ind.	FOLLOW- UP ACTIONS REQUIRE D	TARGET DATE FOR COMPLETION/ Evaluation

MUW Graduate Nursing: Standard IV- PROGRAM EFFECTIVENESS: STUDENT PERFORMANCE AND FACULTY ACCOMPLISHMENTS Worksheet

Date Form Completed: _____

Semesters Being Evaluated: Summer 20 , Fall 20 , Spring 20

*MUW Graduate Bulletin Date Utilized for Review: 20 -20

IV-A					
A systematic process is used to determine program effectiveness.					
Master Evaluation Plan	Yes No				Met Not Met
1. The MSN/PG APRN Certification Program/DNP Master Evaluation Plan is reviewed and revised according to the MPE Calendar and as needed.	All worksheets meet revised CCNE Accreditation Standards.				
o Committee Assignments	I. M & G • Beth Turner • Carey McCarter	II. Facilities • Terri Hamill • Brandi Lambert	III. Program Quality • Sally Pearson • Shonda Phelon	IV. Program Effectiveness • Alena Lester • Sueanne Davidson	
2. Evaluation Schema/Evaluation Forms are reviewed yearly and revised when needed:	Note: Revision dates noted on survey form.				
• Master Calendar for Evaluation	Yes No	• Evaluation of Services and Resources	Yes No		
• Alumni Survey	Yes No	• Faculty Performance Review	Yes No		
• Course Evaluations	Yes No	• Information Checklist (Student)	Yes No		
• Faculty Evaluations	Yes No	• Preceptor Final Evaluation	Yes No		
• Employer Surveys	Yes No	• Student Textbook Evaluation	Yes No		
• End of Course Report	Yes No	• Policy Packet	Yes No		
• End of Program Evaluation	Yes No				
3. Committee Worksheets were completed and submitted according to Master Calendar:	Mission and Governance: Yes No Institutional Commitment and Resources: Yes No Program Quality: Teaching/Learning: Yes No Program Effectiveness: Student Performance and Faculty Accomplishments: Yes No				Met Not Met
4. The Divisional Strategic Plan was reviewed and completed in May.	Yes No				Met Not Met
5. Minutes are:					Met Not Met

<ul style="list-style-type: none"> ○ Written according to policy/By-Laws ○ Evidence Follow-Up Activities Needed ○ Written for each Curriculum Meeting ○ Written for each MSN Meeting ○ Written for each Committee Meeting ○ Written for each DNP Committee Meeting ○ Housed in the office of the Department Chair 	Yes No Yes No Yes No Yes No Yes No Yes No Yes No	
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IV-B.									
Program completion rates demonstrate program effectiveness.									
BENCHMARK	MSN			PG APRN			DNP		
Student Completion Rates: 6 .80% of students complete the program within 150% of the time from admission. (Graduation Rates) If benchmark 6 not met, then 7; trend over the three most recent years	Summer 20			Summer 20			Summer 20		
	Admission Date: Fall_20 Admitted			Admission Date: Admitted Fall_2017 Admitted # 3			Admission Date: Fall_2017 Admitted# 3 Full Time 1 dual enrolled part time on track to complete in December 2019		
	Spring 2019			Spring 20			Spring 20		
	Completed Date: Fall_20 Completed#			Completed Date: Fall_20 Completed#			Completed Date: Spring/May 20 Completed#		
	Rate=%			Rate=%			Rate=%		
	Met		Not Met	Met		Not Met	Met		Not Met
Previous 3 years Rates:	2015-2016	2016-2017	2017-2018	2015-2016	2016-2017	2017-2018	2014-2015	2015-2017	2016-2018
7. 80% of students complete the program within the 150% time frame over the three most recent years									
	Met		Not Met	Met		Not Met	Met		Not Met
BENCHMARK	MSN			PG APRN			DNP		
Student Satisfaction: 8. 90% of students indicate that the program outcomes were achieved, as evident by a rating of 2.5 or higher	Met		Not Met	Met		Not Met	Met		Not Met

of the First Write takers on <u>each exam</u> over the 3 most recent years												
	Met	Not Met		Met	Not Met		Met	Not Met		Met	Not Met	
If benchmark 10 not met then 12; must trend over the 3 most recent years												
12. MSN/PG APRN program students demonstrate 90% certification pass rates for ALL takers <u>on each exam</u> over the 3 most recent years	2015	2016	2017	2015	2016	2017	2015	2016	2017	2015	2016	2017
	Met	Not Met		Met	Not Met		Met	Not Met		Met	Not Met	
13. Certification pass rate for First-write takers each exam (ANCC and AANP) is above or equal to other nursing schools in the nation (2018)	AANP						ANCC					
	MUW pass rate for First Write takers% MUW avg. score=			National Average score=			MUW Raw Score for each domain			Overall ANCC avg. raw score		
	Met			Not Met			Met			Not Met		
	Assessment MSN= PG=			Assessment MSN= PG=			Found. Advanced Practice=			Found. Advanced Practice=		
Diagnosis MSN= PG=			Diagnosis MSN= PG=			Prof. Practice=			Prof. Practice=			
Planning MSN= PG=			Planning MSN= PG=			Ind. Practice=						
Evaluation MSN= PG=			Evaluation MSN= PG=						Ind. Practice=			
<p>CCNE Documentation: If the MUW certification pass rate is less than 80% for first-time takers for the most recent calendar year, a written explanation/analysis with documentation for the variance and a plan to meet the 80% certification pass rate for First-time takers is provided to CCNE.</p> <p>Analysis:</p> <ul style="list-style-type: none"> • Were any changes made in certification blue prints this past year? • What areas of weakness were identified on ANCC or AANP report? • Were any curriculum changes made? 												

IV-E Employment rates demonstrate program effectiveness.		
BENCHMARK		
Student Employment Rates: 14. 90 % of graduates <u>who are seeking employment</u> obtain a job within <u>12 months</u> after graduation or enroll in a program of higher education.	<u>MSN: %</u> <u>PG APRN: %</u> <u>DNP: Currently employed and may not be seeking other employment</u> Data obtained from anecdotal student accounts following program completion. The faculty stay in close contact with students to determine employment following program completion. Other data obtained from alumni and employer surveys. However, these responses are historically low. Opportunity to discuss graduates' employment is also utilized at the annual Advisory Board meeting that includes large community employers.	Met Not Met
CCNE Documentation: Any program with an employment rate less than 70% provides a written explanation/analysis with documentation for the variance to CCNE.	Analysis:	
IV-F Data analysis regarding completion, licensure, certification, and employment rates are used, as appropriate, to foster ongoing program improvement.		
15. Identify any discrepancies between actual and CCNE expected outcomes (program completion rates 70%, licensure pass rates 80%, employment rates 70%	For 2018, 1 PG APRN student failed the first write for AANP certification. The same PG APRN student passed the second write for AANP. There were 2 total attempts. There were only 3 PG students in the class of 2018. One took AANP and two students took ANCC. The 1 PG APRN taker for AANP failed first write resulting in a <u>Not Met</u> pass rate for 1 st time takers for PG students in 2018. An analysis of the students who failed first write was performed. PG numbers have been historically low. Therefore, when one PG APRN student does not pass on first write the first write percentage for PG APRN is significantly low and at times not recorded by certifying bodies due to the low number of PG takers.	Met Not Met
16. 100% of changes to the program to foster improvement and achievement of program outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.		Met Not Met
17. 100% Faculty are engaged in the program improvement process.		
Community/Mission Service		

Officer for State/National Nursing Organization	
Podium Presentation	
Local	
State	
National	
Poster Presentation	
Local	
State	
National	
Publications	
Local	
State	
National	
Professional Awards	
Grants Awarded	
Reviewed Professional Books or Publications	
Updated CV to Chair	
Maintain current practice proficiency/certifications	
Maintained 10 contact hours	
Participated in teaching/advising activities	
Participated in community service	
Participated in systematic MPE	
Participated in community service	
Participated in scholarship activities	
Maintained membership in professional organizations	
Served as a member of a college or university committee	
Served as course coordinator	
Participated in research activities	

IV-G Aggregate faculty outcomes demonstrate program effectiveness. The program demonstrates achievement of expected faculty outcomes.			
IV-H Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.			
BENCHMARK	MSN/PG APRN/DNP Faculty	Results %	
Faculty Outcomes: 18. 100% Faculty show evidence academic assignments, scholarship/research, and university and community involvement. • Faculty Performance Evaluations Evidence:			
○ 100% Curriculum Vitae Updated with self-evaluation	Yes No		Met Not Met
○ 100% maintain current practice proficiency in their selected field	Yes No		Met Not Met
○ 100% maintain 10 contact hours each academic year	Yes No		Met Not Met
○ 100% participation in teaching/advising activities	Yes No		Met Not Met
○ 100% participation in community service activities	Yes No		Met Not Met
○ 100% participation in scholarship activities as evident by:	Yes No		Met Not Met
a. Podium Presentations/Poster Presentations/Publications (50%)	Yes No		Met Not Met
b. Involvement in local, state, or national nursing organizations (50%)	Yes No		Met Not Met
c. Other scholarly activities approved by the graduate nursing department			
○ 100% participate in systematic MPE for MSN/PG-APRN/DNP programs	Yes No		Met Not Met
○ 50% maintain membership in professional organization	Yes No		Met Not Met
○ 100% serve as a member of a college or university committee	Yes No		Met Not Met
○ 75% serve as course coordinator	Yes No		Met Not Met
○ 100% serve as an adviser to student group	Yes No		Met Not Met

The program defines and reviews formal complaints according to established policies. The program defines what constitutes a formal complaint and maintains a record of formal complaints received.			
21. Information from formal complaints is used as appropriate to foster ongoing program improvement.	<ul style="list-style-type: none"> ○ 100% of grievances are handled according to Grievance Policy ○ 100% grievances are reviewed to identify any need for program changes. ○ # of grievances filed against the MSN/PG APRN/DNP Program: MSN= PG-APRN= DNP= 	Met	Not Met
Analysis:			
IV-I Program outcomes demonstrate program effectiveness. The program demonstrates achievement of outcomes other than those related to completion rates, licensure, and employment. Program outcomes are defined by the program and incorporate expected levels of achievement.			
BENCHMARKS			
Student Core Knowledge:			
22. 100% of the students satisfactorily complete the MSN/PG-APRN/DNP Portfolio.	MSN=% PG APRN=% DNP=%	Met	Not Met
Alumni:			
23. 90% of sampled Alumni express satisfaction with MUW program outcomes, as evident by a rating of 2.5 or higher for the the graduate's/graduates' abilities	Overall Satisfaction Score = % # Survey's Obtained= ❖ 20__ Survey results can be found in MSN Resources Canvas Course	Met	Not Met
Employers:			
24. 90% of sampled employers express satisfaction with the program of learning, as evident by a rating of 2.5 or higher	Overall Satisfaction Score =100% # Survey's Obtained =4 ❖ 20__ Survey results can be found in MSN Resources Canvas	Met	Not Met

<p>Student Program Satisfaction:</p> <p>25. 90% of all students are overall satisfied with the program of learning, as evident by a rating of 2.5 or higher</p> <p>❖ 2018 Survey results can be found in MSN Resources Canvas</p>	<p align="center"><u>MSN</u></p> <p align="center"># of responses:</p> <p align="center">Average Score: Extremely Satisfied %</p>			<p align="center"><u>PG-APRN</u></p> <p align="center"># of responses:</p> <p align="center">Average Score: Extremely Satisfied %</p>			<p align="center"><u>DNP</u></p> <p align="center"># of responses:</p> <p align="center">Average Score: Extremely Satisfied %</p>		
<p>If objective 25 is not met, then 26; trend for most</p>	<p align="center">Met Not Met</p>			<p align="center">Met Not Met</p>			<p align="center">Met Not Met</p>		
<p>26. Average score of all students is satisfied with the program of learning as evidenced by a benchmark score of 2.0 or above on the End of Program Satisfaction Survey for past 3 years</p>	<p align="center">2015</p>	<p align="center">2016</p>	<p align="center">2017</p>	<p align="center">2015</p>	<p align="center">2016</p>	<p align="center">2017</p>	<p align="center">2015</p>	<p align="center">2016</p>	<p align="center">2017</p>
<p>CCNE Documentation: Any program with outcomes lower than expected provides a written explanation/analysis for the variance to CCNE.</p>	<p>Analysis/Documentation:</p>								
<p>IV-J Program outcome data are used, as appropriate, to foster ongoing program improvement.</p>									
<p>27. Each scorecard results/analysis from each Standard has been reviewed and appropriate actions were initiated as indicated on each scorecard.</p>	<p>Standard I -</p> <p>Standard II -</p> <p>Standard III -</p> <p>Standard IV -</p>	<p>Yes</p> <p>Yes</p> <p>Yes</p> <p>Yes</p>	<p>No</p> <p>No</p> <p>No</p> <p>No</p>				<p align="center">Met</p>	<p align="center">Not Met</p>	
<p>28. The Cumulative Scorecard for the last three years has been reviewed.</p>	<p>Cumulative Scorecard Results</p> <p>Standard I</p>	<p align="center">Current Year 2018-19</p>	<p align="center">Previous Year 2017-18</p>	<p align="center">Previous Year 2016-17</p>	<p align="center">Met Not Met</p>				

	Standard II				
	Standard III				
	Standard IV				
<p>Synopsis of data: -actual outcomes compared to expected outcomes -areas of improvement identified -changes to the program to foster improvement</p>	<p>Synopsis: See Scorecard Results for Standard I, II, III, and IV Worksheets.</p>				

**College of Nursing and Health Sciences Graduate Nursing
Standard IV: PROGRAM EFFECTIVENESS: STUDENT PERFORMANCE AND FACULTY ACCOMPLISHMENTS
WORKSHEET
SCORE CARD RESULTS (20__-20__)**

SCORE CARD RESULTS: Number of benchmarks: /26 =%

Action Plan to Correct Unmet Benchmarks

UNIVERSITY, DIVISIONAL AND PROGRAM GOALS	KEY ELEMENT	INT/EXT& PROCESS EVALUATION BENCHMARKS	ANALYSIS OF BENCHMARKS FROM WORK-SHEET INFORMATION	COMMENTS & ACTIONS TO BE TAKEN	Resp. Party Group/ Ind.	FOLLOW-UP ACTIONS REQUIRED	TARGET DATE FOR COMPLETIO N/ Evaluation

Note: This data will be transferred to next year’s Worksheet Cover Page to provide follow-up documentation (closing the loop).

Date:

Signatures of Faculty assisting with completion of worksheet (Typed names will serve as signatures):

Signature of Department Chair (Typed in name will serve as signature):

Revised December 04, Reviewed 9/05, Reviewed 8/06, Revised 1/05/07, Revised: November 13, 2008, Revised 4/09; Revised 8/12; Revised 6/14 (new CCNE Standards 2013); revised 12-5-16, 4-2017; Revised 5/2017; Reviewed 5/2018; Revised 8/19

MISSISSIPPI UNIVERSITY FOR WOMEN
COLLEGE OF NURSING AND HEALTH SCIENCES
GRADUATE NURSING PROGRAM
END OF COURSE REPORT

Semester _____ Year _____

1. Course:

Number Course Title

2. Course Coordinator and Faculty:

❖ *Signatures indicate review of and agreement with the contents of this report.*

Course Coordinator:	Faculty	Faculty
Course Coordinator:	Faculty	Faculty
Faculty	Faculty	Faculty

3. Grade Ranges:

❖ *Attach a copy of the Banner Grade Sheet to this report.*

❖ *Attach a copy of the numerical grades to this report.*

NUMERATOR				DENOMINATOR							Official Roll
A	B	C	P Clinical	D	F	F Clinical	“W”	“WP”	“WF”	“I”	Total
<ul style="list-style-type: none"> Explain any of the following: W, WP, WF <p>**Use first official roll to determine number of students. Any student whose name does not appear on the permanent roll will not be counted.</p>						Explain reasons:					
<ul style="list-style-type: none"> Explain how any “I’s” converted 											
<ul style="list-style-type: none"> Is grading scale listed on the Course Overview: Yes No Does the grading scale follow the Graduate Grading Policy Yes No 											

4. Course Completion Rates: (Use the table in #3 to complete):

Number of Students Admitted in the Course :	Course Completion Rate =
Number of Students Completing the Course :	**Course Completion Rate with a grade of C or better =
Comments:	

COURSE OVERVIEW DATA AND ANALYSIS:

- ❖ *Attach course overview to this form*
- ❖ *Attach compiled student Course Evaluations to this form.*
- ❖ *Number of students completing the course evaluation*

5. Are the ANA Guidelines and CCNE Essentials of the Graduate Education found in the Program Purpose, Philosophy and Program Outcomes evident in the following course components:

Course Description	Yes	No	Topical Outline	Yes	No
Course Outcomes	Yes	No			
<ul style="list-style-type: none"> • If no, discuss: 					
<ul style="list-style-type: none"> • Discuss any changes made to the above: 					

6. Check which teaching/learning strategies are listed in the “Teaching Strategies” section of the course overview.

<input type="checkbox"/> Lecture	<input type="checkbox"/>	<input type="checkbox"/> On-Line Chats	<input type="checkbox"/> Others
<input type="checkbox"/> Role Play	<input type="checkbox"/> Videos	<input type="checkbox"/> Student Presentation	<input type="checkbox"/>
<input type="checkbox"/> Case Studies	<input type="checkbox"/> Guest Speakers	<input type="checkbox"/> Group Work	<input type="checkbox"/> Discussion Board
<input type="checkbox"/> Class Discussion	<input type="checkbox"/> Seminars (STEM Conference)	<input type="checkbox"/> Care Plans	<input type="checkbox"/>
<input type="checkbox"/> Case Studies	<input type="checkbox"/> Games	<input type="checkbox"/> On-Line Modules	<input type="checkbox"/>
<input type="checkbox"/> Reflective Journaling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Summary of student input regarding teaching/learning strategies (from attached compiled course evaluation results):			
Faculty input into teaching/learning strategies			Other:
<ul style="list-style-type: none"> • Are strategies appropriate for content? Yes No • Are strategies appropriate for learner level? Yes No 			

<ul style="list-style-type: none"> Do strategies encourage critical thinking and communication? Yes No Are the textbooks appropriate for the course? Yes No 	
Describe changes indicated in teaching/learning strategies:	

7. Check (or highlight) which evaluation strategies are listed in the “Evaluation” section of the course overview.

<input type="radio"/> Written Tests	<input type="radio"/> T/L Projects	<input type="radio"/> Family Visits	<input type="radio"/> Others
<input type="radio"/> Computer Tests	<input type="radio"/> Formal Papers	<input type="radio"/> Community Projects	<input type="radio"/> Online Discussions
<input type="radio"/> Case Studies	<input type="radio"/> Reflective Journaling	<input type="radio"/> Presentations	<input type="radio"/> Assignment/Papers
<input type="radio"/> Research Projects	<input type="radio"/> Care Plans	<input type="radio"/>	<input type="radio"/> Presentations
Summary of student input into evaluation strategies (from attached compiled course evaluation results):			
Faculty input into evaluation strategies: <ul style="list-style-type: none"> Evaluation tools have written directions? Yes No Evaluation tools have written grading criteria for successful completion? Yes No Does grading scale follow Graduate Policy? Yes No Do written tests follow the prescribed blueprint? Yes No 			Other
Describe changes indicated in evaluation strategies			

❖ **For Clinical Courses Only:**

STUDENT INPUT:	Comments	
FACULTY INPUT: Discuss faculty evaluation of clinical facilities:		
List all actions necessary prior to next course offering:	Follow-Up Responsibility	Target Date: