Bachelor of Science Nursing Program

Systematic Plan of Evaluation for Academic Year 2014-2015

Maintained by RN-BS/N Faculty& Dept. Head, Health Sciences

STANDARD 1: MISSION AND ADMINISTRATIVE CAPACITY

The mission of the nursing education unit reflects the governing organization's core values and is congruent with its mission/goals. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified program outcomes.

Plan				Implementation	
Component	**Expected Level of Achievement (ELA)**	**Frequency of Assessment**	**Assessment Methods**	**Results of Data Collection & Analysis**	**Actions for Program Development, Maintenance, or Revision**
• University Mission & Commitment statements • School of Mathematics, Science & Health Sciences Mission Statement • Health Sciences Department Mission Statement	Nursing Program faculty, & when applicable, the University's accrediting bodies agree that the nursing program's mission statement & philosophy are congruent with the University's mission & commitment statements.	Every 5-8 yrs in conjunction with HLC-ACEN preparation & more frequently if RSU, the School or Department's mission and philosophies change or during curriculum revision. 2007-2008 2012-2013 2017-2018	Comparative review of University Mission & Commitment Statements with Nursing Program Mission & Philosophy	10/12/2007 A revision of the RSU Nursing program mission and philosophy was adopted by the full nursing faculty group. This philosophy is a revision & expansion of the former document & is inclusive of both the associate and baccalaureate nursing programs, *	10/12/2007 No changes in the assessment method or frequency of assessment at this time. **ELA met.**

• Nursing Program Mission and Philosophy Statements				May 2013: BS/N faculty complete comparative review. BS/N faculty propose addition of words related to populations. [05/13/2013 BS/N Mtg min.] 08/06/2013: Full nursing faculty group agrees to May 2013 proposal by BS/N faculty. Faculty believes Nursing mission & philosophy are congruent with University mission and commitment statements. [08/06/2013 Fac. Mtg Min.]	May 2013: Proposed change will be presented to full faculty in the fall. Aug. 2013: Will review again once School's mission statement is revised which is anticipated to be completed in fall 2014.ELA met.
Faculty & Nursing Administrator Governance Participation	80% of full-time nursing faculty participate in one or more University committees annually.	Annually	RS/N Committee's review of RSU Committee Membership list: Table showing administrator and	Dr. Marla Smith continues on University Assessment Committee for 2014-2015; Dr. Teri Bycroft serves on Faculty	**ELA met**. Continue with annual review**.**

			faculty participation in University governance.	Development Committee and was elected to complete a term (2014-2015) on the Faculty Senate. [11/11/2014 BSN Mtg Min.] 10/4/2013 Reviewed Faculty Senate Committee Membership list; M. Smith is a member of the Univ. Assessment Committee. T. Bycroft has been appointed by Dr. Beck as chair of the IRB Committee. The latter is not a Faculty Senate Committee but is a University Committee. N. Diede is a member of the Academic Council which is an administrative committee. 100% of fulltime BS/N faculty participate in one or more college	

				committees. [10/03/2013 BSN Fac. Mtg Min.]	
Student Governance participation	Communities of interest (i.e., RSU Nursing alumni, clinical agency representatives, employers and local community representatives) are invited to biannual Stakeholders' Council Meetings.	Annually	Review of NFGC (Faculty mtg) minutes)	10/4/2013: Student reps invited to Faculty meeting this date. R. Sorrels, BS/N student was in attendance. [Fac. Mtg. Min. 10/4/2013]	**ELA met**. Continue with annual review.
Partnerships with professional organizations, statewide nursing organizations, regional organizations, local organizations	Nursing program will maintain relationships with various organizations to promote the nursing program and form a mutually beneficial relationship with the organizations.	Annually	Dept. Head & faculty review of organizational relationships & partnerships.	10/4/2013: Nursing program has memberships & affiliations with: ACEN, NLN, Oklahoma Council of Deans & Chairpersons of Baccalaureate & Higher Degree Programs in Nursing. Oklahoma Council of Associate Degree	**ELA met;** Nursing program would like to establish partnerships with one or more local community agencies or schools. Dept. Head and faculty plan to explore if opportunities exist for potential partnerships

				Deans and Directors, Institute for Oklahoma Nursing Education (IONE), Northeast Oklahoma Workforce Investment Board, Tulsa Deans and Directors' Council. Partnerships also exist with Jane Phillips Hospital, Bartlesville & Hillcrest Medical Center via Ardent Health Services. *	between the nursing program and selected agencies or schools.Continue with annual review.
Nurse Administrator is academically and experientially qualified & has the authority and responsibility to administer the program.	Dept. Head will meet academic & experiential qualifications as established by University, Oklahoma Board of Nursing & ACEN.	Upon hire and annually	Review of academic transcript, curriculum vita, professional development (CE) log by Dean, School of Mathematics, Science & Health Sciences (MSHS)	Dean reviews Dept. Head's qualifications each summer during the annual Dept. Head Evaluation. Dept. Head possesses a doctorate & has 36 yrs experiences as an RN, 28 yrs in higher education, & 16+ yrs as a nursing program	**ELA met**. Continue with annual review.

1. Mission and Administrative Capacity

				administrator. * OBN approved Dept. Head as a qualified nurse administrator when the ADN program was reviewed in spring 2013.	
Nursing faculty & staff policies are consistent with those of the University; differences are justified by the goals & outcomes of the nursing program.	Policies which differ from the University are due to the nature of the nursing program.	Every 5-8 yrs in conjunction with HLC-ACEN-OBN site visit preparation & more frequently as needed. 2007-2008 2012-2013 2017-2018	Comparative review of policies as stated in RSU Academic Policies & Procedure Manual & Employee Benefits Policies Manual by Dept. Head and faculty.	Policies reviewed in preparation for OBN visit spring 2013 for Assoc. Degree program and spring 2014 BS/N program review by ACEN. Policies not consistent with rest of University: Drug Testing Policy for Clinical Faculty, requirement to be certified in AHA CPR, & to have annual TB screening, flu vaccination & Verification of immunity to MMR &	**ELA met.** Continue with periodic review.

				Varicella if supervising clinical. Differing policies are justified based on nature of nursing program & nursing profession. *	
Distance Education is congruent with RSU mission and Nursing program mission.				RSU's Bachelor of Science Nursing program is not considered a distance education program according to ACEN's definition. See ACEN Glossary, p.2. [5/20/15 BSN Fac Mtng Min]	

STANDARD 2: FACULTY AND STAFF					
Qualified and credentialed faculty are sufficient in number to ensure the achievement of the student learning outcomes and program outcomes. Sufficient qualified staff are available to support the nursing education unit.					
Plan				**Implementation**	
Component	**Expected Level of Achievement**	**Frequency of Assessment**	**Assessment Methods**	**Results of Data Collection & Analysis**	**Actions for Program Development, Maintenance, or Revision**
Academic qualifications	A. 100% of Full-time faculty are credentialed with a minimum of a graduate degree with a major in nursing. B. A minimum of 25% of Full-time faculty also hold an earned doctorate or are currently enrolled in a doctoral program.	Upon hire and annually for faculty enrolled in graduate programs.	Department Head's review of academic transcripts and Curriculum Vitae.	A & B Both fulltime RN-BSN faculty are doctorally prepared. Dr. Teri Bycroft has an Ed D in Adult Education and Dr. Marla Smith has a PhD in Nursing. C. BS/N hires adjunct faculty as needed. Number of adjuncts is dependent on number of BS/N courses taught each semester. During	

	C. 100% of Part-time faculty hold a minimum of a graduate degree with a major in nursing. D. 100% of Nursing faculty (full and part-time) possess credentials which meet governing organization and state requirements.			2012-2013, 2013-2014,and 2014-2015 there has been one adjunct, P. Fowler. She has a master's degree in nursing. **[ELA Met. 100% of fulltime faculty are doctorally prepared. The one part-time faculty in the RN-BS/N program does hold a graduate degree in nursing.** [Fall/2014 Dept Head Faculty Evaluations] D. All Full-time and Part-time (adjunct) faculty possess a current Oklahoma nursing license & as noted above possess graduate degrees with a major in nursing. They meet OBN and RSU's licensing	

				requirements for nursing faculty. [Dept. Head's faculty evaluation process, Oct./Nov. 2013; Oct 2014]	
Preceptor Qualifications	A. 100% of preceptors are academically and experientially qualified. B.100% of preceptors are oriented to their expected role & responsibilities. C. 100% of preceptors are mentored & monitored.	Each semester that preceptors are used.	A. Faculty who teach courses that use preceptors will review preceptors' credentials & work experience during initial discussion with preceptor. B. Faculty will orient preceptors to their role & responsibilities & ensure the preceptors have relevant Field Experience objectives & the Preceptor Packet. C. Faculty will avail themselves to the preceptors, answer any questions they	A, B, C: BS/N faculty, "T. Bycroft & M. Smith reported all nursing preceptors had a minimum of a bachelor degree in nursing with several working on a graduate degree. All preceptors had experience in their positions. All received the Preceptor Packets. New preceptors were oriented to the course and field experience expectations. M. Smith reported she visited some of the sites while the students were	ELA achieved for A, B, C. Continue assessment methods. Faculty discussed use of preceptors & need to provide more structure for this component of the program. Discussed developing an on-line orientation for preceptors to ensure that all information was presented in a consistent manner. Plan to have on-line orientation in place for use by summer 2014 Field Experience

			have, provide suggestions to enhance the student's field experience when warranted and provide students with opportunity to evaluate their preceptors.	completing their field experience hours. Students indicated through their journaling that they were satisfied with their preceptor field experiences. [05/13/2013 BS/N Mtg Min.]	Preceptors. [11/20/2013 BS/N Mtg Min.]
Number & Utilization of Full-time Faculty	Faculty : Student ratios are determined by the type of course.	Annual review by Dept. Head and Fulltime BS/N faculty	Review of enrollment numbers each semester.	Faculty : Student Ratio- Didactic Courses- Fall 2011 1:6 Spring 2012 1:12 Fall 2012 2:9 Spring 2013 1:9 Fall 2013 2:9 Spring 2014 2:24 Fall 2014 2:12 Spring 2015 2:22	Size of each cohort is a maximum of 30. If enrollment is 18-20 (or higher), the cohort is divided into two sections. This practice is appropriate as seminar format is used in each course and class sizes of 15 or less are more conducive to a seminar approach.

2. Faculty and Staff

				Fall 2015 2:14 <u>Faculty : Student Ratio – Field Experiences-</u> Fall 2011 2:9 Spring 2012 1:12 Fall 2012 2:9 Spring 2013 1:9 Fall 2013 2:9 Spring 2014 1:12 Fall 2014 1:6 Spring 2015 1:11 Fall 2015 1:7 Review of Faculty: Student Ratios are to be no greater than 15:1 in the classroom & 1:1 in the field.	Field hours are arranged by students, approved & supervised by primary course doctorally prepared faculty. **ELA have continuously been met** for past three years. Faculty: Student ratio is quite satisfactory.

2. Faculty and Staff

				[BS/N Mtg. Min. 11/20/2013]	
Number & utilization of Non-Nursing Faculty & Staff	A sufficient number of qualified non-nursing faculty and staff are available to support the BS/N program.	Annual Review	Dept. Head reviews academic credentials and experience upon hire; Faculty respond to this criterion each May.	Faculty agree that the current number of support faculty and staff are sufficient; 1-Admin. Assist.; 1-Accreditation Records Specialist; 2-3 Student Workers; Nutrition & Pathophysiology faculty plus Gen. Ed Faculty. *	**ELA achieved.** Continue to monitor.
Professional Development & Scholarly Activities	A. 100% of Full-time faculty engage in annual professional development activities as evidenced through at least 12 hours of cont. education or professional activities per academic year. B. 100% of Full-time faculty who	Annual Review	Department Head's review of Faculty Curriculum Vitae/ Professional Development (CE) logs	A & B: Faculty submit a log of continuing education activities to the accreditation records specialist on an annual basis. Prof. Dev. & scholarly activities are discussed on an annual basis.	**ELA achieved for A,B,C following CV review Oct./Nov. 2013 & during Dept. Head Faculty Evaluations Fall 2014.** Continue with annual review.

	are tenured or are on tenure track meet RSU's faculty performance expectations. C. Part-time faculty are encouraged to engage in professional development activities annually.				
Faculty Orientation & Mentoring	A. 100% of Full-time faculty will participate in a formal orientation process upon hire. B. 100% of Part-time (adjunct) faculty will be oriented to their roles and responsibilities. C. 100% of Full-time faculty will be mentored by one or more experienced	Upon hire & each fall and spring semester during the first year of hire and more frequently if needed. Thereafter, annually.	Department Head and respective faculty review of Orientation and Mentoring activities each fall and spring semesters.	A. & C. M. Smith participated in orientation activities presented by RSU's Center for Teaching & Learning and Vice President of Academic Affairs' office the week of August 5, 2013. M. Smith participated in departmental and program orientation activities at periodic intervals during fall 2013 semester. M.	**ELA met**. Departmental and program orientation is offered during both fall and spring semesters. The University's orientation program is offered each fall semester.

	faculty. D. 100% of Part-time faculty will be mentored by one or more experienced faculty.			Smith's mentors were N. Diede and T. Bycroft during 2013-2014. M. Smith has compiled the materials she received during her orientation in a binder. B & D – No new part-time (adjunct) BS/N faculty were hired for 2013-2014.	
Performance Evaluations	100% of faculty will have performance evaluations conducted annually with overall satisfactory or higher performance ratings.	Annual Review	Dept. Head's review of faculty performance	Performance Reviews were conducted in accordance with RSU policy for all fulltime and faculty; Dept. Head Faculty Evaluations Fall 2013, Fall 2014	**ELA met.** No changes in assessment at this time.
Faculty Professional Development Strategies &	A. 100% of faculty will have opportunity to participate in	Annual Review	Dept. Head review of faculty CE log each Oct./Nov. & discussion with	**Fall 2014**: Dr. Marla Smith & Dr. Teri Bycroft became certified in the Quality	**ELA met.** All faculty had access to professional development

Support for Distance Technologies	professional development activities. B. 100% of faculty will have access to support for distance education technologies.		faculty throughout school year.	Matters Program for distance learning education to support the blended classes A&B: RSU's Center for Teaching and Learning (CTL} was revamped beginning with Fall 2013 semester. Instructional sessions for e-campus & Angel, as well as assistance with instructional design of on-line courses was available to all faculty –fulltime and part-time (adjunct) during fall 2013 semester.	offerings presented by the CTL. This office has greatly improved and increased its educational offerings this academic year (2013-2014). No changes in assessment at this time.

2. Faculty and Staff

STANDARD 3: STUDENTS					
Student policies and services support the achievement of the student learning outcomes and program outcomes of the nursing education unit.					
Plan				**Implementation**	
Expected Level of Achievement	**Frequency of Assessment**	**Assessment Methods**	**Results of Data Collection & Analysis**	**Actions for Program Development, Maintenance, or Revision**	
Consistent policies**:** • Non-discrimination • Withdrawal • Financial aid • Complaints & Resolutions & Grievances • Graduation Requirements	All policies governing the nursing unit are applied to each student equally and are in compliance with the University.	Every five-eight years in conjunction with ACEN, OBN & HLC visits and more frequently as needed.	Comparative review of policies as stated in BS/N Student Handbook and RSU Bulletin.	Policies reviewed in preparation for ACEN visit; All policies listed this Component column are administered consistently and are applicable for all students**. ***	**ELA met**. Continue with frequency of assessment.
Nursing Policies that differ from RSU Policies:	Policies which differ from the University are justified due to the nature of the	Every five-eight years in conjunction with ACEN, OBN & HLC	Comparative review of policies as stated in BS/N Student Handbook	Policies reviewed in preparation for ACEN visit; All policies listed this Component	**ELA met**. Continue with frequency of assessment

• Admission & Progression • Academic Progression • Readmission • Grading • Health Screenings • Drug & Alcohol Testing • Criminal Background Screening • CPR Screening	Nursing profession.	visits and more frequently as needed.	and RSU Bulletin.	column are administered consistently and are applicable for all students. *	
Integrity and Consistency of Information	A. 100% of the information related to the nursing program is accurate and accessible. B. 100% of all University documents pertaining to the nursing program contain the name, address and phone	Annual Review	Review of written and online nursing publications including Student Handbook, Nursing Program Website, University Bulletin, flyers, brochures, class schedules.	Review of Student Handbook reflected an error in Management and Leadership course credit hours; hours listed as 5, actual hours are 4. Student Handbook corrected for	Student Handbook corrected Management and Leadership course credit hours from 5 to 4 **ELA is met; email address for ACEN**. is the current address

3. Students

	number for ACEN & when applicable OBN			Written & online nursing publications reviewed. Information is accessible in both written and electronic formats. Web address for ACEN was changed from NLNAC address . All other information reviewed is current and accurate. *	
Changes in program policies, procedures & program information	Documentation confirms that changes in program policies, procedures & program information are clearly communicated to students in a timely manner.	Annual review and more frequently as needed.	BS/N Faculty review of Policy, procedural & program changes; BS/N Faculty review of methods & timeframe for communication of changes.	RSU policies related to Academic Integrity and Misconduct, Intellectual Property, Copyright Policy, Americans with Disabilities, and Non-discrimination are listed in the syllabus which is provided and accessible to each student through the learning management system. As well, Other Policies and the locations of these	**ELA met.** Continue with frequency of assessment.

3. Students

				policies are listed in the syllabus. [11/11/2014 BSN Fac Mtng Min] The policy related to malpractice insurance for field experience hours has been changed in that students will now be required to carry their own personal liability insurance & will need to provide verification. This change was made to the BS/N Student Handbook and notices that the policy was changing effective with the January 2014 cohort was added to the BS/N program website, recruitment and application	

				materials. **[BS/N Fac. Mtg Min. 10/3/2013]**	
Availability of Services for BS/N students	100% of RSU BS/N students have access to all services available to the general RSU student population including but not limited to: health counseling, academic advisement, career and placement services, academic support, student support, student disability services, writing and tutorial assistance, computing services, technological support, financial aid.	Every five-eight years in conjunction with ACEN, OBN & HLC visits and more frequently as needed.	Faculty review of services available to students Faculty review of *Total Program Survey* responses	RSU student services reviewed in preparation for ACEN visit; All services are available to BS/N students. [BS/N Mtg Min. 10/03/2013] Trended *Total Program Survey* results reviewed for Cohorts #6-10 (Fall 2011-Fall 2013). 52 students completed the survey. The following percentages reflect that students strongly agree or agree that they have access to the following services: 85% (n=44) financial Aid services; 54% N =28) Career Placement services;	Faculty know that the services available to the general RSU student population are indeed available to BS/N students so ELA is met. Results from the *Total Program Survey* indicate that not all students are award of all of the services that RSU has available. It is believed that some of the reasons for these results may be because many BS/N students have transferred to RSU for this BS/N degree program and are only on campus one

				81% (n=42) Academic advising; 75% (n=39) Counseling services. [BS/N Mtg Min. 12/20/2013] **Cohort # 11 (Summer/2014) N=16** 1.Academic Advisement: 93.8% 2.Career Placement:68.8% 3.Financial Aid: 93.8% 4.Student Health: 93.8% [BS/N Minutes 8/7/2014]	evening per week; they already have nursing positions and have not sought out many of the available services unless they had need for them. Faculty will add available services to the BS/N new student orientation agenda. **Cohort # 11 : ELA not met in area of Career Placement.** **F/u Cohort # 12**

				Cohort # 12 (Fall/2014) N=10 1.Academic Advisement: 100% 2.Career Placement:80%% 3.Financial Aid: 100% 4.Student health: 90% [BS/N Minutes 1/21/2015]	**Cohort # 12 – ELA met in all 4 areas. Continue to trend**
Student Educational and Financial records	Student Educational and Financial records are in compliance with University, Oklahoma and Federal guidelines	Every five-eight years in conjunction with ACEN, OBN & HLC visits and more frequently as needed	Dept. Head's or Dept. Head's designee's verbal questioning of appropriate department personnel	Dec. 2013: Dept. Head contacted Registrar's office and Financial Aid Dept. Both departments are in compliance with federal and state regulations and RSU policy.	**ELA met.** Continue with frequency of assessment.
Compliance with Higher Education Reauthorization Act Title IV Eligibility	RSU will maintain 100% compliance with the Higher Education	Every five-eight years in conjunction with ACEN, OBN & HLC	Dept. Head's or Dept. Head's designee's verbal questioning of	Dec. 2013: Dept. Head contacted Financial Aid Dept. and was told that	**ELA met.** Continue with frequency of assessment.

requirements	Reauthorization Act, title IV Eligibility and certification requirements.	visits and more frequently as needed	appropriate department personnel	RSU is in compliance with Title IV. Web page also viewed. Information re students' responsibilities is evident.	
Information on student loan repayment responsibilities and procedures; and ethical responsibilities regarding financial assistance.	RSU will maintain 100% compliance with requirement to provide information on student loan repayment responsibilities and ethical responsibilities regarding financial assistance.	Every five-eight years in conjunction with ACEN, OBN & HLC visits and more frequently as needed	Dept. Head's or Dept. Head's designee's review of Financial Aid Dept's web page	Dec. 2013: Department Head reviewed Financial aid Web page information re students' responsibilities is evident.	**ELA met.** Continue with frequency of assessment.
Program Complaints and Grievance Procedure	All formal program complaints and grievances are handled according to program and University policy and procedures.	Annually	Dept. Head review of Complaint Log	Department Head reviewed Complaint Log. No formal complaints or grievance have been filed since BS/N program inception (Fall 2007).	**ELA met.** Continue with frequency of assessment

3. Students

Information related to Technology requirements & policies specific to Distance Education	100% of BS/N students will receive information related to Technology requirements specific to online component of BS/N courses	Annually	BS/N Faculty review of Student Handbook, Orientation content & Center for Teaching & Learning and Academic Computer Services' policies	BS/N faculty reviewed Technology Policies and information related to technology requirements. Information appears to be accurate, consistent and accessible. **[BS/N Mtg Min. 10/03/2013]** **Quality Matters is recommending technical requirements be made available for the students & resource links easily accessible for students.** [BS/N Mtng 8/7/2014] **Technical requirements including resource numbers for**	**ELA met.** Continue with frequency of assessment. Changes to be made to all BS/N Syllabi.

				students now part of all syllabi in the BS/N Program [BS/N Mtng **1/21/2015]**	

STANDARD 4: CURRICULUM					
The curriculum supports the achievement of the identified student learning outcomes and program outcomes of the nursing education unit consistent with safe practice in contemporary healthcare environments.					
Plan				**Implementation**	
Component	**Expected Level of Achievement**	**Frequency of Assessment**	**Assessment Methods**	**Results of Data Collection & Analysis**	**Actions for Program Development, Maintenance, or Revision**
• Professional standards, competencies, research and evidence-based practice, and educational theory included in Curriculum • Student Learning Outcomes reflect	100% of BS/N faculty agree that the BS/N curriculum is comprehensive all encompassing & reflective of current professional nursing practice	Every 2-3 years & as needed.	BS/N Faculty review of ACEN BSN expectations, AACN Essentials of Baccalaureate Nursing, ANA's Scope & Standards of Practice and Social Policy Statement, NLN Outcomes and Competencies for Baccalaureate programs, IOM	BS/N curriculum reviewed and BS/N faculty were in agreement that the curriculum is comprehensive, all-encompassing & student learning outcomes are reflective of current professional nursing practice. Faculty recommended an addition of the term population See Nursing Faculty Meeting Minutes 8/6/13.	**ELA met.** Continue with frequency of assessment & on an as needed basis.

contemporary practice			Future of Nursing recommendations, ANA Code of Ethics, ONA Nurse Practice Act in comparison to BS/N curriculum.	BS/N curriculum reviewed and BS/N faculty were in agreement that the curriculum is comprehensive, all-encompassing & student learning outcomes are reflective of current professional nursing practice. [BS/N Mtg Min. 05/13/2013]	**ELA met.** Continue with frequency of assessment.
Student Learning Outcomes (SLOs)	100% of BS/N faculty agree that the SLOs denote the expectations they have for students' learning and that they are used to organize and guide instruction and to evaluate if student learning	Every 2-3 years & as needed.	BS/N faculty review of Student Learning Outcomes and Course matrix for completeness and determination that course content is relevant to students' expected Learning Outcomes.	May 2015: SLO's reviewed by BS/N faculty. Faculty review demonstrated a need for the SLO's to be updated to reflect the OBN competencies for BS/N graduates.	The goal for this next year – faculty will focus on changes of the SLO's during the next academic year that would come into effect Fall/2016. [May 20. 2015 BSN mtng minutes]

	has occurred.		BS/N faculty review of Student Learning Outcomes and Course matrix for completeness and determination that course content is relevant to students' expected Learning Outcomes.	May 2013: SLOs reviewed by BS/N faculty. Revisions made in wording of two outcomes and one additional outcome added. [BS/N Mtg Min. 05/13/2013]	During review on May 16, 2013, faculty determined that the SLOs were in need of revision. Following revision, faculty believe the **ELA is achieved**. Additional time is needed to see if that remains to be seen.
Curriculum Development	100% of BS/N curriculum has been developed by the RSU nursing faculty & is regularly reviewed for integrity, rigor & currency.	Every 2-3 years & as needed.	BS/N faculty review of curriculum and comparison with current professional practice standards from ACEN, OBN, CCNE,stake-holder, alumni, & employer input.	Program Goals & Program SLO's are correlated to individual course objectives in individual syllabi & are discussed before each academic semester with a focus on integrity, rigor, & currency. Example meeting minutes to	**ELA Met.** Continue with frequency of assessment. Content review of the Management & Leadership course for Fall/2015 for currency, rigor, &

			Program Director's Feedback from attending Tulsa Area Deans & Directors Mtng & BS/N State Council mtng. See Stakeholder's Meeting minutes 4-16-15 Refer to Employer Survey data above Mtng Minutes BS/N faculty review of curriculum and comparison with	express minute dates Stakeholders corroborated the alumni survey recommendation regarding a need for an need to expand the content on fiscal management. Curriculum has been reviewed in preparation for ACEN visit and for discussion re future revision and revamping of courses. [BS/N Mtg Min. 05/16/2013]	integrity. See Stakeholder's Meeting minutes 4-16-15 **ELA met.** Continue with frequency of assessment. Oct. 2013: ADN faculty are in midst of a curriculum revision. It is expected that BS/N faculty will review the

4. Curriculum

			current professional practice standards.		recommended ADN curriculum, & provide applicable input. Revised ADN curriculum may contribute to a review/revision of the BS/N curriculum. ADN Curriculum work expected to be complete by Spring 2015.
General Education concepts and courses included in BS/N curriculum	100% of BS/N faculty agree that the general education support courses contribute to the baccalaureate educational experience.	Every 2-3 years & as needed.	BS/N faculty review of curriculum and comparison with national BSN educational standards. BS/N faculty review of *RSU's Faculty General Education Assessment Sub-committee*	Faculty continue to believe that the general education courses augment the BS/N nursing courses. [BS/N Mtg Min. 4/23/2014] RSU Faculty General Education Assessment Sub-committee reviewed gen-ed offerings & shared the results with the faculty	**ELA met**. Continue with frequency of assessment. **ELA met**. Continue with frequency of assessment.

			recommendations regarding RSU's gen-ed offerings. Nancy to find gen-ed & send to Marla & Teri) BS/N faculty review of curriculum and comparison with national BSN educational standards.		
Cultural, ethnic and socially diverse concepts incorporated in BS/N curriculum	100% of BS/N faculty agree that the curriculum incorporates cultural, ethnic and socially diverse concepts.	Every 2-3 years & as needed.	BS/N faculty review of curriculum for cultural, ethnic, and socially diverse concepts. [5/20/15 BSN Faculty Min] BS/N faculty review of curriculum for cultural, ethnic,	Cultural, ethnic, & socially-diverse assignments were added to the following courses during the 2014-15 AY. 4013, 4113, 4224,4234, & 4223 Qualitative feedback from the Spring/2015 survey results demonstrates that recent graduates feel that	**ELA met.** Continue with frequency of assessment

			and socially diverse concepts.	cultural/educational/awareness aspects of their educational experience are prominent. Curriculum has been reviewed in preparation for ACEN visit. Faculty believe that the identified concepts are present in all of the BS/N courses with some having a greater presence than in others. These courses are NURS 4003, 4013, 4113, 4224 and 4234. [BS/N Mtg Min. 11/20/2013]	
Evaluation methodologies	100% of BS/N faculty agree that assessment and evaluation methodologies are appropriate for measuring student learning.	Each time the syllabus is written by the course instructor and every 2-3 years by faculty as a group.	BS/N faculty review of evaluation methodologies to determine that they are appropriate for the course objectives and SLOs.	Assessment and evaluation methodologies reviewed by BS/N faculty. Faculty believe they measure student learning through UAC & general faculty meetings.	**ELA met.** Continue with frequency of assessment.
Program Length	Length of program is in compliance with	Every five-eight years in conjunction with	Comparison of program length with other BSN	Program length was discussed in preparation for ACEN visit. Total # of credits is 124.	**ELA met.** Continue with frequency of

	ACEN, NLN, AACN (& OBN) guidelines for Baccalaureate education.	ACEN, OBN & HLC visits and more frequently as needed.	programs in the state and nationally and review of OBN and ACEN & AACN guidelines regarding expectations and characteristics of the baccalaureate prepared nurse.	Students receive 29 upper division hours of advanced standing for their previous nursing education and nursing experience. There are eight upper division nursing courses which comprise 27 credits. The remaining 68 credits are general education and support courses. Faculty believe that the length of the program is consistent with other RN-BS/N degree completion programs that are offered in accelerated formats and are in compliance with professional accrediting and regulatory agencies. [BS/N Mtg. Min. 11/20/2013]	assessment.
Practice Learning Environments **LOA Changes to be effective Summer/2015**	1.100% of *Health Care Provider Practice Learning Environments* are appropriate for student learning; and incorporate evidence-based practice and nationally	A. Annual review by faculty. B. Review by students upon program completion or on an as needed basis. [5/20/15 BSN Fac Mtng	BS/N faculty review students' field experiences. Students complete End of Course surveys and graduate surveys which include questions re quality of field	A. Faculty believe the sites used for field experience hours are appropriate and do enhance the student learning experience. B: A review of students' responses on the end of course and graduate surveys demonstrate that students	**ELA met.** Faculty believe the required field hours enhances student learning and professional growth. Number of required field hours as well as

	established patient health and safety goals. 2. 100% of the Community Resource experience sites are appropriate for student learning to achieve course SLO's. 100% of Practice Learning Environments are appropriate for student learning; and incorporate evidence-based practice and nationally established patient health and safety goals.	Min] A. Annual review by faculty B. Review by students at the end of each course requiring a field experience. C. Review by students upon program completion	experience including site appropriateness BS/N faculty review students' field experiences. Students complete End of Course surveys and graduate surveys which include questions re quality of field experience including site appropriateness	have overall valued their field experiences and have observed nursing care that is in line with patient health and safety goals. [See Survey data] A. Faculty believes the sites used for field experience hours are appropriate and do enhance the student learning experience. B & C: A review students' responses on the end of course and graduate surveys demonstrate that students have overall valued their field experiences and have observed nursing care that is in line with patient health and safety goals. Some students have indicated they believe the 32 hours of field experience in each of the three courses with a field experience component is too long. Other survey responses indicated that students did not like	quality of field experiences will continue to be assessed, including student input. Continue with frequency of assessment Dec. 2013: While faculty believe the sites used for field experience hours are conducive to student learning, the students have expressed disappointment with the overall field experience requirement. Concerns appear to center on number of hours & fact that

				having to arrange their sites. Would prefer that this was done by the faculty. (Refer to Course Survey and Total Program Survey Book). [BS/N Mtg Min. 10/3/2013]	experiences are not arranged by faculty. The concern with the number of hours requirement appears to be coming from students who have practiced as RNs for greater than 2 years. Students being uncomfortable with arranging their experiences appear to be RNs who have 5 years or less of experience as an RN. Faculty will continue to review this issue. **No change in ELA recommended** at this time.

Clinical Affiliation Agreements	100% of health care agencies that serve as Field Experience sites have a written affiliation agreement on file in the Health Sciences office.	Annual review by Faculty & AA [5/20/15 BSN Fac Mtng Min]	HS Dept. Administrative Assistant compares the list of sites used for Field Experiences with completed contracts on hand & reports information to Dept. Head.	May 15, 2015: Contracts reviewed and written agreements are on file for all health care agencies that serve as Field Experience sites for RN-BS/N students Nov. 2013: Written agreements are on file for all health care agencies that serve as Field Experience sites for RN-BS/N students.	**ELA met.** Continue with frequency of assessment.

STANDARD 5: RESOURCES					
Fiscal, physical, and learning resources are sustainable and sufficient to ensure the achievement of the student learning outcomes and program outcomes of the nursing education unit.					
Plan				**Implementation**	
Component	**Expected Level of Achievement**	**Frequency of Assessment**	**Assessment Methods**	**Results of Data Collection & Analysis**	**Actions for Program Development, Maintenance, or Revision**
Fiscal resources - • Salaries • Professional Development Activities • Program Budget • Instructional Resources • Equipment • Computer lab equipment	A. *Faculty and staff salaries* are comparable to university-wide faculty and staff salaries with similar education, experience and work responsibilities.	A. Every 5-8 years in conjunction with ACEN, OBN & HLC survey visits & more frequently if needed.	A. Responsibility for salary determination & equitable assessment lies with President, Vice President for Academic Affairs, executive Vice President for Administration & Finance and Dean, School or Mathematics, Science & Health Sciences (M/S/HS).	A. Dept. Head met with Dean, School or M/S/HS who confirmed that nursing salaries are somewhat higher in comparison to some university faculty and lower than others. Differences are due to market need. Staff salaries are comparable to other university staff with similar education, experience and work	A. **ELA met**. Nursing faculty salary is collected from nursing programs across the state and posted on the OBN website on an annual basis. Dept. Head. If salaries paid to RSU nursing faculty are no longer competitive with statewide salaries, Dept. Head informs

				responsibilities. *	the administration.
	B. University financially supports each fulltime faculty with one or more *professional development activities* annually.	B. Annually	B. Dept. Head review of professional development forms and funding requests.	B. Dept. Head reviewed professional development forms of faculty during evaluation process which was conducted Sept-Nov. 2013. All fulltime faculty (who were fulltime during 2012-2013) and all BS/N faculty (who are currently fulltime) had received financial support to attend one or more local, state-wide, regional or national professional development activities. *	B. **ELA met.** Reassess during Fall 2013 evaluation cycle.
	C. *Program budget* is sufficient to meet the administrative and operational	C. Annually	C. Dept. Head and Dean, School of M/S/HS review of	C. Dept. Head and Dean, School of M/S/HS agreed that the budget allocation	C. **ELA met**. Reassess each July after budget for upcoming FY is released.

5. Resources

	needs of the program.		program budget.	for was sufficient. July/2015 July/2014 July/2013	Dept. Head submits a proposed budget to an Administrative committee each spring. If monies are needed for specific program related expenses, i.e., ACEN visits, new positions, etc.) a face-to-face meeting with the committee is scheduled for the purpose of providing justification for the budget adjustment.
	D. *Materials & equipment* (supplemental books, DVDs, training models, etc.) deemed necessary by	D. Annually	D. Dept. Head queries faculty at the end of each AY for wish list for materials and equipment. Items are prioritized &	D. July 2013: Faculty indicate on the *Total Program Survey* that there are sufficient materials & equipment.	**ELA met.** Reassess Summer 2014.

5. Resources

	faculty for instruction, are approved for purchase. E. *Computer labs* have adequate and up-to-date equipment.	 E. Annually	purchased with available funds. Rationale is provided when items are not able to be purchased. E. Equipment is inventoried annually by Academic Computing Services (ACS). ACS replaces equipment on a rotating schedule – every 2-4 years dependent on equipment use.	 E. June 2015: Equipment Inventoried E. June 2014: Equipment Inventoried E. June 2013: ACS informed Dept. Head about the equipment that was replaced and updated in August 2013. [Faculty Mtg. Min. 09/13/2013]	 E. **ELA met**. Reassess Summer 2016. E. **ELA met**. Reassess Summer 2015. E. **ELA met**. Reassess Summer 2014.
Physical Resources • Space Allocation	*Health Sciences building* is designed	Annually	Each cohort of students completes	**Cohort #12**	Cohort # 12 ELA Met N= 10: All 10

• Physical design	and maintained to meet the needs of nursing students, faculty and staff. 85% of the students in each cohort will check strongly agree or agree on *Total Program Survey* questions related to Health Sciences physical resources.		the *Total Program Survey* at the conclusion of their last upper division nursing course. Faculty complete a version of the *Total Program Survey* annually. Faculty & Dept. Head review responses to *Total Program Survey* each spring.	**Fall/2014) N=10** 7 Questions on physical resources from Total Program Survey: 1. 90% 2. 90% 3.100% 4. 100% 5. 90% 6. 90% 7. 100% **Cohort #11:** **N = 16** 7 Questions on physical resources from Total Program Survey: 1. 100% 2. 93.8%	students strongly agreed or agreed in all 7 questions at least 80%. However, the faculty believe overall the questions need to be revamped following input from faculty across campus that provide the physical services. To be addressed before Cohort 13 completion **Cohort #11 ELA Met N=16:** all 16 students strongly agreed or agrees in all 7 questions at least 80%

5. Resources

				3. 93.8% 4. 93.8% 5. 86.7% 6. 81.3% 7. 81.3% **Cohort #10 (Fall 2013) N=9:** 7 questions on physical resources from *Total Program Survey:* 1. 100% 2. 88.8% 3. 100% 4.100% 5. 66.7% 6. 100% 7. 88.9%; question 5 (r/t nursing lab facilities) was 77.8% when neutral responses were added. 11.1% (n=1) checked disagree for question #5. [BS/N Mtg Min. 12/20/2013] **Cohort #9 (Sum.**	Cohort #10: 6 students noted strongly agree or agree, 1 student noted neutral and 2 students noted disagree. Students do not use the ADN program's skills lab during the assessment course (which is the only course a lab would even be used). Rather, BS/N students use HS 234b or the classroom 234a and perhaps they do not believe it is sufficient for practicing their health assessment

5. Resources

				2013) N=14: 7 questions on physical resources from *Total Program Survey:* 1. 71.5% 2. 92.9% 3. 85.8% 4. 92.9% 5. 61.6% 6. 85.7% 7. 85.7%; questions 1 (r/t classrooms adequate for student learning) & 5 (r/t nursing lab facilities) fell below benchmark. In both cases, when the neutral responses were added, the percentages raised to 100%.	skills. This possibility will be shared with the faculty who teach the Health Assessment course. **Suggest faculty ask students during Health Assessment where they would prefer to practice their skills – classroom or skills lab (HS 148).** Continue asking these questions on the *Total Program Survey.* No change to ELA at this time. **ELA met** overall. Dec. 2013: Questions 2,3,4,6,7 saw the ELA being met in both cohorts.: Question #1 r/t classrooms

5. Resources

					adequate for student learning saw 100% either strongly agreeing, agreeing, or neutral. No one disagreed with that question. Question #5 r/t nursing lab facilities results fell below ELA. Cohort #9: 8 students noted strongly agree or agree and 4 students noted neutral.
Learning resources - Library	75% of students answering the 4 questions r/t the *library* will note they strongly agree or agree to the related questions.	Annually	Each cohort of students completes the *Total Program Survey* at the conclusion of their last upper division nursing course. Faculty complete a version of the *Total Program Survey* annually.	**Cohort #9 (Sum. 2013) N=14**: 4 questions on library resources from *Total Program Survey:* 1. 76.6% 2. 78.6% 3. 57.1% 4. 78.6%. Benchmark met for questions 1,2,4. #3 (r/t intra-library loan	**ELA met** with all library questions answered by both cohorts with the exception of Cohort #9's responses to question to the 3rd library question (r/t the intra-library loan system). 8 of 14 students answered strongly agree or

5. Resources

			Faculty & Dept. Head review responses to *Total Program Survey* each spring.	system) was below benchmark but when neutral responses were added, the percentage increased to 100%. **Cohort #10 (Fall 2013) N=9:** 4 questions on library resources from *Total Program Survey:* 1. 100% 2. 77.8% 3. 77.8% 4.100% Benchmark met with all 4 questions r/t library resources with Cohort #10. [BS/N Mtg Min. 12/20/2013]	agree; 6 students answered neutral. Continue asking these questions on the Total Program Survey. No changes to ELA at this time.
Computer technology	Faculty and Students agree that they have access to computer labs, computer support; and that computers, software, monitors	Annually	Questions related to computer resources can be added to the Total Program Survey.	Dec. 2013: No data available as the *Total Program Survey* does not currently assess student or faculty satisfaction with computer technology.	. The University does query graduates on computer technology but there is not a way to identify BS/N

5. Resources

	& printers are regularly updated.			No formal complaints related to computer technology or computer lab access have been received.	graduates' responses. These questions will be added to the *Total Program Survey* before it is administered to Cohort #11, July 2014.

5. Resources

STANDARD 6: OUTCOMES					
Program evaluation demonstrates that students and graduates have achieved the student learning outcomes, program outcomes, and role-specific graduate competencies of the nursing education unit.					
Plan				**Implementation**	
Component	**Expected Level of Achievement**	**Frequency of Assessment**	**Assessment Methods**	**Results of Data Collection and Analysis**	**Actions for Program Development, Maintenance, or Revision**
Systematic Plan of Evaluation (SPE)	100% of the SPE is developed using the ACEN 2013 Standards and is being used by Nursing faculty for assessment and evaluation of ACEN Standards and SLO's.	Annually	Dept. Head and Faculty review of SPE.	The 2013 ACEN Standards were first implemented during the 2013 summer as the self-study for the BS/N continuing accreditation site visit was being written. Faculty have worked with the 2013 ACEN Standards' SPE throughout the self-study preparation.	**ELA is being met**. Continue implementing SPE.
Aggregated	100% of aggregated	Annually & more frequently when	Dept. Head and faculty review of	April 9, 2014: 3yr Survey results,	Stakeholders did not have anything

Evaluation Findings	evaluation findings will be shared with faculty & when applicable shared with communities of interest and findings used to inform decision-making.	applicable.	evaluation findings from SPE's Standards 1-6.	Alumni survey results and current student survey results addressing satisfaction, job placement, program completion along with qualitative feedback reflecting curriculum, program and classroom instruction was shared during Stakeholder meeting (Stakeholders' Meeting Minutes 04/09/2014). **<u>UAC: 1/13/2014</u>** The SLO Report for 2013/2014 was presented to the UAC Peer Committee. Strengths included Students meeting criteria at least 90%. Direct & Indirect	to add to the discussion. Stakeholders were given contact info for Dr. Marla Smith so that they could send her comments if they had anything to add following the meeting. (Stakeholders were each given a copy of the document- '*Journey to Completion BS/N, Spring Summary, April 2015.'* **ELA is achieved.** Continue with frequency of assessment.

				measures were used. However, rubric reconstruction to include firmer expectations of APA format, grammar, spelling, & punctuation was recognized as a weakness by the committee & BS/N faculty. **UAC: 2/6/2015** The SLO Report for 2013/2014 was presented to the UAC Peer Committee. The format used mirrored the ACEN Standards for measurement & course measure-ments. The strength as recognized by the committee & BS/N faculty was applied feedback from surveys sent to	**ELA is achieved.** Continue with frequency of assessment using the new format that mirrors ACEN Standards & course measures.

				students, graduates, employers, & stakeholders. **BSN: 12/20/2013** The SLO report that will be presented to UAC Spring/2014 was presented to BS/N faculty. **BSN: 11/11/2014** The SLO report that will be presented to the UAC Spring/2015 was presented. Strengths included following the ACEN format using all standards & course measurements. Dec. 2013: The RSU Associate Degree Nursing program has been using ACEN	**ELA is achieved.** Continue with frequency of assessment using the new format that mirrors ACEN Standards & course measures. **ELA is achieved.** Continue with frequency of assessment. Begin using the ACEN Standards as a format for measurements. **ELA is achieved.** Continue with frequency of assessment using

6. Outcomes

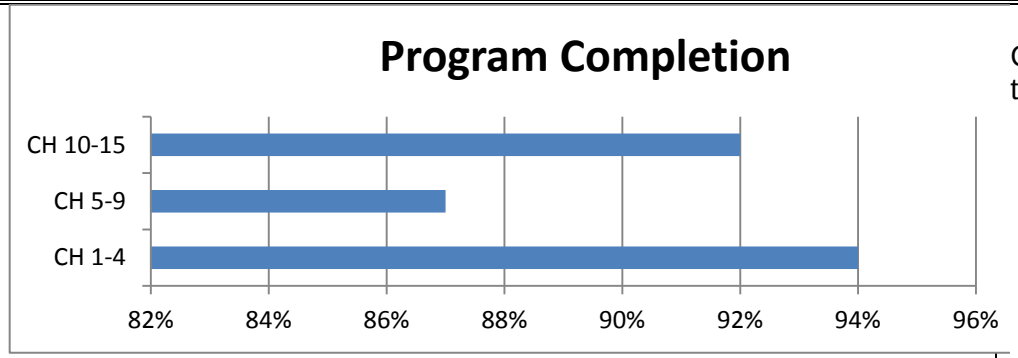
				(formerly NLNAC/NLN standards since 1985 (28+ years) with the BS/N program beginning in 2009. Faculty, Dept. Head and communities of interest including the Administration, Oklahoma Board of Nursing, Alumni and Stakeholders have been witness to the findings and they have routinely been used as a guidepost for decision-making.	the new format that mirrors ACEN Standards & course measures. All agreed the continuing of using this format keeps information current & clearer.

STANDARD 6. OUTCOMES: PERFORMANCE ON LICENSURE EXAMS				
Performance on licensure exam: The program's three-year mean for the licensure exam pass rate will be at or above the national mean for the same three-year period.				
PROGRAM OUTCOMES SUMMARY TABLE				
Component	**Expected Level of Achievement**	**Actual Level of Achievement**	**Resulting Action(s) Taken/ To be Taken with Timeframe for Implementation**	
			Action	**Time Frame**
NCLEX-RN Passrate	RSU's BS/N program is a degree completion program. Students are already licensed registered nurses. This Outcome is Not Applicable.			

STANDARD 6. OUTCOMES: PROGRAM COMPLETION

Program Completion: Expected levels of achievement for program completion are determined by the faculty and reflect student demographics and program outcomes.

PROGRAM OUTCOMES SUMMARY TABLE

Component	Expected Level of Achievement	Actual Level of Achievement	Resulting Action(s) Taken/ To be Taken with Timeframe for Implementation	
			Action	**Time Frame**
Program Completion	1) 85% of the upper division nursing courses will be completed within 150% beginning with enrollment of the first nursing course.	 Cohort # 15: Has not completed Cohort # 14: N= 13=88% Cohort # 13: N=24 = 92%	Continue to monitor	Report at every stakeholders meeting. [Spring/2015; Fall 2015;] Reassess June/2016. Continue to monitor/trend new changes adopted.

		Cohort # 12: N = 10: 92% Cohort #11: N = 16: 100%	Continue to monitor	Continue to report & Trend
	I	**6 Year review of LOA (2009-2014 / Cohorts 1-12)** Demonstrates LOA met with the exception of cohort # 2 - which was 1% below benchmark. **2013:** **Cohort #10:** N =14: 100% **Cohort #9: N=9:** 89% **2012:** **Cohort #8: N=8::** 100% **Cohort #7: N=18:** 95% **2011:** **Cohort #6**: **N=7:** 100% **Cohort #5: N =12:** 92% **2010:** **Cohort #4: N=5:** 100% **Cohort #3: N=9:** 87% **2009:** **Cohort #2: N=6:** 84% **Cohort #1 N=1:** 100%	Continue to monitor Continue to monitor Continue to monitor Continue to monitor	Reassess May 2014 Continue to monitor/trend until Fall 2014 to reassess for possible new benchmark.**ELA has been met 90% of the time (9/10 cohorts).** Reassess May 2013 Continue to monitor/trend until Fall 2014 to reassess for possible new benchmark.

STANDARD 6. OUTCOMES: PROGRAM SATISFACTION

Program Satisfaction:

<u>Graduate Program Satisfaction *</u>: Qualitative and quantitative measures address graduates six to twelve months post-graduation ** (Note: Post-graduation is referred to as alumni satisfaction assessment).

<u>Employer Program Satisfaction:</u> Qualitative and quantitative measures address employer satisfaction with graduate preparation for entry-levels (as a bachelor prepared nurse) six to twelve months post-graduation.

PROGRAM OUTCOMES SUMMARY TABLE

Component	Expected Level of Achievement	Actual Level of Achievement	Resulting Action(s) Taken/ To be Taken with Timeframe for Implementation	
			Action	**Time Frame**
Graduate Satisfaction Upon Completion of the Upper Division Nursing Courses	1. 80% of the graduates will report being "satisfied" or "very satisfied" with their nursing educational experience at RSU. **(Graduate Survey)**	**<u>2015:</u>** Cohort # 13/N=22:100% **<u>2014:</u>** Cohort #12/N=10:100% Cohort #11/N=16: 98% Cohort #10/ N=14:96%	**ELA Met:** Continue to monitor/trend. **ELA Met**; Continue to monitor/trend	Report at [Stakeholders meeting Fall/2015]

		2013: 94% Cohorts #9 N=9 2012: 92% Cohorts #7 N=18 & 8 N = 8 2011: 93% Cohorts #5 N=12 & 6 N = 7 2010: 100% Cohorts #3 N=9 & 4 N=5 2009: 100% Cohorts #1 N=1 & 2 N=6	**ELA met**; Continue to monitor/trend **ELA met;** Continue to monitor/trend **ELA met**; Continue to monitor **ELA met**; continue to monitor **ELA met**; continue to monitor	Continue to monitor/trend until 2014 to reassess for possible new benchmark. **ELA has been met consistently (10/10 cohorts).** [BS/N Minutes: 8/7/14/2014] Assess May 2013 Continue to monitor/trend until 2014 to reassess for possible new benchmark Assess May 2012 Assess May 2011 Assess May 2010
Alumni Satisfaction	2. 80% of the alumni will report being "satisfied" or "very satisfied" with their nursing educational experience at RSU. **(6-month/ Alumni Survey)**	**2015:** **6-months survey** Cohort #12 = N=10 (50% reported back (n=5) 100% **2014:** **6-months survey** Cohort # 11 N=16 (50%reported back (n=8) 100% **3-year survey**	**ELA Met: Continue to monitor/trend. Add/measure core competencies beginning fall/2015 survey for graduates, alumni, & employers.** **ELA Met**	[Fall/2015 Stakeholders Meeting] [Spring/2014 Stakeholders Meeting] Continue to monitor/trend until

6. Outcomes: Program Satisfaction

		Cohort # 6 N=7 (43% reported back (n=3) 100% **<u>Qualitative:</u>** Taught by strong, educated, powerful women a plus for leadership & pathophysiology was biggest disappointment. Cohort # 5 N=12 (50% reported back (n=6) 100% **<u>Qualitative:</u>** Theme for 5: School prepared them for leadership role well **<u>October 2013:</u>** **Cohorts #7,8,9*** Cohort #9 N=15 Cohort #8 *see below* Cohort #7 *see below* *Very Satisfied*: 46.15% *Satisfied*: 50% *Dissatisfied*: 3.85% Total: 100 **<u>July 2013</u>**	**ELA Met** **ELA with data aggregated was met** Continue to monitor In the future, Survey to be administered to only one Cohort at a time. Online surveys sent to	2014 to reassess for possible new benchmark In future, survey results will be analyzed for each cohort. [BS/N Minutes 5/13/2013] First time using online survey tool. Survey was not set up to collect data by individual Cohort. [BS/N Minutes 5/13/2013] Surveys were not sent to Alumni from Spring 2012-Summer 2013 The individual who was charged with the task of sending out the surveys resigned December 2011. A replacement for that position was not hired until mid-April 2012. For various reasons, the surveys were not sent until Fall 2013 with the hiring of a second fulltime BS/N faculty member who was given release time to work on outcomes.

6. Outcomes: Program Satisfaction

		Cohort #8 N= 11 (100% very sat & sat) **Qualitative:** Prepared for seeking Masters except for Pathophys. **Feb. 2013** **Cohort #7** N=18 100% (very sat & sat) **Qualitative:** Integrate technology & research into my practice. **July 2012** **Cohort #6** N=6 100% (very Sat & sat) **Qualitative:** Leadership & understanding community resources are prominent. & Decrease the amount of general education courses required to take. **Feb. 2012** **Cohort #5** N=12 100% (very sat & sat) **Qualitative:** Cultural awareness & leadership are prominent & higher level of assessment needed for	Cohorts #7,8, & 9 Cohorts 1-9 Survey not sent until Fall 2013	Cohorts #1-3 when asked 6+mos. Post program completion indicated they were *very satisfied* or *satisfied* with their educational experience. Continue to monitor this criterion Send survey 6 mos. Post program completion to Cohort #3.

6. Outcomes: Program Satisfaction

		improvement. **<u>July 2011</u>** **Cohort #4** N=5 (see general trended themes below) **<u>February 2011</u>** **Cohort #3** N=10 *Very Satisfied* *50% (n=5)* *Satisfied* 50% (n=5) (see general trended themes below) **<u>July 2010</u>** **Cohort #2** N=6 *Very Satisfied*: 66.67% (n=4) *Satisfied*:33.33% (n=2) Total: 100% (see general trended themes below) **<u>February 2010</u>** **Cohort #1** N=1 *Very Satisfied:* 100% (see general trended themes below) **<u>Qualitative/trended themes:</u>** Disorganized administration, too many	Cohort #2 **ELA Met**; Continue to monitor Cohort #1 **ELA met**; Continue to monitor	Send survey 6 mos. Post program Completion to Cohort #2. **<u>1st graduate May 2009</u>**

6. Outcomes: Program Satisfaction

		clinical hours, RSU not prepared for working adults due to not enough on-line classes for general education, field hours are difficult, & instructors are unprepared.		
Employer Satisfaction	1. 80% of the employers responding to the survey will report being "satisfied" (agree) or "very satisfied" (strongly agree) with the RSU BS/N alumni performance **(Employer Survey sent following receipt of employer information received from completed Alumni Survey @ 6mos+ program completion.)**	**2015:** **6-months survey** Cohort # 12: N=10 To be reported Fall/2015 **2014:** **6-months survey** Cohort # 11: N=16 (7 Employer's names given by post-grad; 7 employers contacted; 7 (100%) responded to survey. **N=7=100% satisfaction (excellent = 6; Good = 1)** **Qualitative Themes:** Strong, leadership qualities. **3-Year Cohort #6** **(no employer's names given)**	**ELA met;** Continue to monitor/trend; **ELA Met** **ELA Met**	Report at Fall/2015 Stakeholders Meeting] Continue to monitor/trend until 2014 to reassess for possible new benchmark. Many factors impact a cohort. By not identifying that employer responses refer to a specific employee, meaningful data can be lost. Will remember to analyze the employers and results for each cohort before looking for trends. [BS/N Minutes 8/7/2014]

	80% of the employers responding to the survey will report being "satisfied" (good) or "very satisfied" (excellent) with the RSU BS/N program. **(Employer Survey)**	**3-Year Cohort # 5** 5 Employer's Names given by post-grad; 5 employers contacted; 5 employers responded to survey. **N=5 =100%** **(excellent = 5)** **Qualitative Themes:** Student alumni are prepared for leadership, technology, & changes in the culture. **Fall 2013:** **Cohorts #7,8,9** October 2013 Cohort #9 N=15 Cohort #8 *see below* Cohort #7 *see below* *Strongly Agree & Agree=100%* (Percentage represents a combination of 3 questions that measure performance; identified questions noted on survey tool) **July 2013** **Cohort #8** N= 11 **Feb. 2013**	**Results to be analyzed according to individual Cohort rather than combining them** Cohort #8 Survey not sent until Fall 2013 Cohort #7 Survey not sent until Fall 2013 Cohort #6 Survey not sent. Cohort #5 Survey not sent	Summer 2013 Employer survey revamped; questions changed. [BS/N Minutes 5/13/2013] **ELA met as trended/Marla t survey individually in the future.**

6. Outcomes: Program Satisfaction

		Cohort #7 N=18 **<u>July 2012</u>** **Cohort #6** N=6 **<u>Feb. 2012</u>** **Cohort #5** N=12 **<u>July 2011</u>** **Cohort #4** N=5 **<u>February 2011</u>** **Cohort #3** N=10 3 of 10 employers responded: *Very Satisfied 100% (n=3)* **<u>July 2010</u>** **Cohort #2** N=6 3 of 6 employers responded: *Very Satisfied*: 33.33% (n=1) *Satisfied*: 66.67% (n=2) Total: 100% **<u>February 2010</u>** **Cohort #1** N=1 1 of 1 employer responded: *Very Satisfied:* 100%	Cohort #4 Survey not sent Cohort #3 **ELA met**; Continue to monitor Cohort #2 **ELA Met;** continue to monitor	The individual who was charged with the task of sending out the surveys resigned December 2011. A replacement for that position was not hired until mid-April 2012. For various reasons, the surveys were not sent until Fall 2013 with the hiring of a second fulltime BS/N

STANDARD 6. OUTCOMES: JOB PLACEMENT				
Job Placement rates: Expected levels of achievement are determined by the faculty and are addressed through quantified measures six to twelve months post-graduation.				
PROGRAM OUTCOMES SUMMARY TABLE				
Component	**Expected Level of Achievement**	**Actual Level of Achievement**	**Resulting Action(s) Taken/ To be Taken with Timeframe for Implementation**	
			Action	**Time Frame**
Job Placement	1. 40% of graduates will be employed in rural health care settings within three years following graduation. **(6 mo+ Alumni Survey & 3-Year Survey)**	**<u>2015:</u>** **<u>6-months survey</u>** Cohort # 12: N=10 (60% responded to survey n=6) 16.67% employed or planning to be employed in a rural setting) **<u>3 year survey</u>** Cohort # 7: N=18 (44% responded/n=8) 50% are or are planning to be employed in a rural setting) **<u>2014:</u>**	**ELA not met;** Continue to monitor. **ELA not met;** Continue to monitor.	**Continue to monitor/trend to determine if reasonable benchmark. Review Fall/2015** [Fall/2015 Stakeholders Meeting] Continue to monitor/trend until 2015 to reassess for possible new benchmark. <u>Review student demographics: Outcome may not reflect student demographics and should therefore be deleted.</u> [BS/N Minutes 8/7/2014]

		<u>6-months survey</u> Cohort # 11: N=16 (50% responded to survey n=8) 12.50% are or are planning to be employed in a rural setting) **<u>3-Year survey</u>** Cohort #6:N=7 (43% responded to survey n=3) 33.33% are or are planning to be employed in a rural setting) **<u>Fall 2013:</u>** **Cohorts #7,8,9** (44 combined alumni from Cohorts #7,8,9) 6 mo+ Alumni Survey - 34.62% **Cohort #3** N=10 3 Years: 15.38%	**ELA not met;** Continue to monitor **ELA not met;** Continue to monitor **ELA not met;** Continue to monitor	Surveys were not sent to Alumni from Spring 2012-Summer 2013 [BSN Minutes 5/13/2013] The individual who was charged with the task of sending out the surveys resigned December 2011. A replacement for that position was not hired until mid-April 2012. For various reasons, the surveys were not sent until Fall 2013 with the hiring of a second fulltime BS/N faculty member who was given release time to work on outcomes.

6. Outcomes: Job Placement

	2. 40% of graduates will advance in their positions within three years following graduation **(6 mo. Survey & 3-Year Survey)**	**2015:** **6-months survey** Cohort # 12: N=10 (60% responded to survey n=6) 16.67% are practicing at a higher level. **3-Year Survey** Cohort # 7 N=18 (44% responded/n=8) 50% are practicing at a higher level. **2014:** **6-months survey** Cohort # 11: N=16 (50% responded/n=8) 25% are practicing at a higher level **3-Year Survey** Cohort # 6: N=7 (43% responded to survey n=3) 66.67% are practicing at a higher level. **Fall 2013:** **Cohorts #7,8,9 (**44	**ELA Not Met** **ELA Met at 3 Years** **ELA Not Met** **ELA Met at 3 Years**	**Continue to monitor/trend to determine if reasonable benchmark. Review Fall/2015** Continue to monitor/trend until 2014 to reassess for possible new benchmark. [BS/N Meeting 8/7/2014] Surveys were not sent to Alumni from Spring 2012-Summer 2013. Surveys & results are now to be individualized. [BS/N Minutes 5/13/2013] The individual who was charged with the task of sending out the surveys

6. Outcomes: Job Placement

		combined alumni from Cohorts #7,8,9) 6 mo+ Alumni Survey - 34.62% Cohort #3 N=10 3 Years: 15.38% **<u>July 2012</u>** **Cohort #6** N=6 *6 mo+ Alumni Survey* **Cohort #1** N=1 *3 Year:* **<u>Feb. 2012</u>** **Cohort #5** N=12 *6 mo+ Alumni Survey* *3 Year:* NA at this time. **<u>July 2011</u>** **Cohort #4** N=5 *6 mo+ Alumni Survey* *3 Year:* NA at this time. **<u>February 2011</u>** **Cohort #3** N=10 *6 mo+ Alumni Survey:*		resigned December 2011. A replacement for that position was not hired until mid-April 2012. For various reasons, the surveys were not sent until Fall 2013 with the hiring of a second fulltime BS/N faculty member who was given release time to work on outcomes.

6. Outcomes: Job Placement

		n=2 20% *3 Year:* NA at this time. **<u>July 2010</u>** **Cohort #2** N=6 *6 mo+ Alumni Survey:* n=1 16.67% *3 Year:* NA at this time. **<u>February 2010</u>** **Cohort #1** *6 mo+ Alumni Survey*: 0% N=1 *3 Year*: NA at this time. **<u>1/30/08</u> No data to report**		Assess Nov. 2009
	3. 30% of graduates will enroll in formal advanced education within three years following graduation (i.e., higher ed programs, prof. certification programs, clinical specialization, etc**.**	**<u>2015:</u>** **<u>6-months survey</u>** Cohort # 12: N=10 (60% responded to survey n=6) 33% are enrolling/enrolled in an advanced program **<u>3-Year Survey</u>**	**ELA Met**	**Continue to monitor/trend to determine if reasonable benchmark. Review Fall/2015** [Fall/2015 Stakeholders Meeting]

6. Outcomes: Job Placement

	(6 mo. Survey & 3-Year Survey)	Cohort # 7: N=18 (44% responded/n=8) 38% are enrolled in an advanced program. **<u>2014:</u>** **<u>6 months Survey</u>** Cohort # 11 N=16 (50% responded to survey n/8) 38% are enrolled in an advanced program **<u>3-Year Surey</u>** Cohort # 6: N=7 (43% responded to survey n=3) 33% are enrolled in an advanced program **<u>Fall 2013:</u>** **Cohorts #7,8,9 (**44 combined alumni from Cohorts #7,8,9) 6 mo+ Alumni Survey - 12% = 32% indicated they have enrolled in formal education programs since graduation	**<u>ELA met using aggregated data</u>** Continue to monitor/trend until 2014.	Continue to monitor/trend until 2015 to reassess for possible new benchmark. [2014 Stakeholders Meeting] Continue to monitor/trend until 2014 to reassess for possible new benchmark. Will monitor/trend each cohort separately. [2013 Stakeholders Meeting]

6. Outcomes: Job Placement

		Cohort #3 N=10 3 Years: 46% indicated they have enrolled in formal education programs since graduation **Feb. 2013** **Cohort #7** N=18 *6 mo+ Alumni Survey* **Cohort** #2 N=6 *3 Year:* **July 2012** **Cohort #6** N=6 *6 mo+ Alumni Survey* **Cohort #1 N**=1 *3 Year:* **Feb. 2012** **Cohort #5** N=12 *6 mo+ Alumni Survey* *3 Year:* NA at this time. **July 2011**	**ELA met.** Continue to assess. Cohort #7 *6 mo.+ Alumni Survey* not sent until Fall 2013; see above Cohort #2 *3 Year Survey* not sent Cohort #6 *6 mo+ Alumni Survey* not sent Cohort #1 *3 Year Survey* not sent Cohort #5 *6 mo. + Alumni Survey* not sent	Surveys were not sent to Alumni from Spring 2012-Summer 2013 The individual who was charged with the task of sending out the surveys resigned December 2011. A replacement for that position was not hired until mid-April 2012. For various reasons, the surveys were not sent until Fall 2013 with the hiring of a second fulltime BS/N faculty member who was given release time to work on outcomes.

6. Outcomes: Job Placement

		Cohort #4 N=5 *6 mo+ Alumni Survey* *3 Year:* NA at this time. **February 2011** **Cohort #3** N=10 *6 mo+ Alumni Survey:* n=2 20% *3 Year:* NA at this time. **July 2010** **Cohort #2** N=6 *6 mo+ Alumni Survey:* n=1 16.67% *3 Year:* NA at this time. **February 2010** **Cohort #1** *6 mo+ Alumni Survey*: 0% N=1 *3 Year*: NA at this time. **1/30/08** No data to report	Cohort #4 *6 mo+ Alumni Survey* not sent Cohort #3 *6 mo. + Alumni:* **ELA not met**. 2 of 10 alumni have enrolled in formal education programs. Cohort #2 *6 mo+ Alumni Survey*: **ELA not met.** 1 of 6 alumni has enrolled in formal education programs. Cohort #1 *6 mo+ Alumni Survey*: **ELA not met.** The one alumnus from Cohort #1 has not enrolled in a formal education program**.** 1st survey post grad. will be sent 6 mos. after graduation.	Continue to monitor and Assess Cohort #4 (July 2011) Continue to monitor and Assess Cohort #3's Employers (Feb. 2011) Continue to monitor and Assess Cohort #2's Employers (July 2010)

6. Outcomes: Job Placement

STANDARD 6 OUTCOMES: STUDENT LEARNING OUTCOMES*					
Plan				Implementation	
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance, or Revision
*Rogers State University has a prescriptive format for assessing student learning outcomes. The format is similar to ACEN's expectations and does demonstrate analysis of student learning. The following pages are excerpted from the BS/N programs 2012-2013 Assessment Report. The Student Learning Outcomes (SLOs) assessed were in effect for the 2012-2013 AY. The SLOs were changed in May 2013 for implementation during the 2013-2014 AY. As such, the SLOs on the following pages are different than the SLOs listed in the 2013-2014 BS/N Nursing Student Handbook.					

Rogers State University
Bachelor of Science Nursing Program
Systematic Plan of Evaluation with 2013 ACEN Standards

A. **Student Learning Outcomes**	B. **Assessment Measures**	C. **Performance Standards**	D. **Sampling Methods**	E. **Sample Size** **(N)**	F. **Results**	G. **Conclusions**
1.Expand his/her professional role as a provider of care to incorporate nursing theory into the design and coordination of safe nursing care of individuals, families, local, and global community population.	1a. Family, Community & Public Health I: Family Assessment Paper from NURS 4224 which addresses designing and coordinating safe nursing care of persons, families groups and communities.	1a. 90% of the students in NURS 4224 Family, Community, & Public Health Nursing will score 74% or higher on the Family Assessment papers using the grading criteria form the rubric.	1a.100% of NURS 4224 students will be included in the sample.	1a: Academic Year: 2014-2015 Fall/14 N=11 Spring/15 N=24 Summer/15 Not offered Academic Year 2013-2014 Fall/13 N=14 Spring/14 N=10 Summer/14 Not offered	100% scored 74% or higher 100% scored 74% or higher	1a.SLO Met: 100% met criteria, Will continue to monitor & wait for feedback from ACEN & UAC Committee. **Strengths:** Students are able to design and coordinate care for persons, families groups and communities as demonstrated by assessment papers and "just in time" conversations between faculty and students and within the student group to learn about different families and communities how they function. 1a. Met – will monitor

				Academic Year 2012-2013 Fall/12 N= 13 Cohort # 8 Spring/13 N= 18 Cohort # 9 Summer/13 Not offered	100% scored 74% or higher	1a Conclusion: 100% of the students (in both courses) made 74% or higher on the Family Assessment. Assessment Performance Standard met both times the course was offered during 2012-13.
	1b. Community Capstone Project (paper and poster presentation) assigned in NURS 4234 which addresses assessing a community epidemiologically, selecting a community health educational need, designing and implementing an educational plan to address the	1b. 90% of students in NURS 4234 Family Community & Public Health Nursing II will score 74%/ 2.0/ C average or higher.) on Capstone Project.	1b. Using a program approved grading criteria rubric for this assignment, course faculty observed and listened to the students' community presentation. Simple pre- and	1b: Academic Year: 2014-2015 Fall/14 N=11 Spring/15 N=24 Summer/15 Not offered Academic Year 2013-2014	100% scored 74% or higher 100% scored 74% or	**SLO Met:** 100%/ met criteria Fall. Spring only 88% met criteria of 90%., Will continue to monitor & wait for feedback from UAC Committed. **Student Learning Outcome Met:** 1b.Conclusion: Community Capstone

	identified need.		post-tests were given to the community members participating to measure affectedness of presentation. The capstone paper and poster presentation summarizing the community presentation were graded. 100% of NURS 4234 students are included in the sample.	Fall/13 N=14 Spring/14 N=10 Summer/14 Not offered <u>Academic Year 2012-2013</u> Fall/12 N= 13 Cohort # 8 Spring/13 N= 18 Cohort # 9 Summer/13 Not offered	higher 100% scored 74% or higher	Project required students to pull together all that they have learned in the BS/N program and to assess a community, determine a health need, design and implement a health program that addresses the assessed need and then evaluate the process. Students had to demonstrate critical thinking, problem solving, collaboration, and team-building skills in addition to communicating orally and in written format. This assignment addresses many aspects of the BS/N program goals and student learning outcomes. It will be continued for the upcoming academic year. **Strengths:** Data gathering and analyzing skills were developed. Identification and defining persons, families groups

						and communities was explored. Critical thinking skills were utilized to complete this project successfully. The students were also exposed to community needs & engaged to assess & address the identified issues. In addition, the community has the opportunity to observe RSU/ BSN students' commitment to the community. **Weakness:** A 5-week time period to accomplish a capstone project of this magnitude is challenging for the students. The length of time for this assignment to be completed will be discussed during a curriculum review. **Student Learning Outcome Met:: Expand his/her professional role as a provider of**

	1 c. Professional nursing behaviors on Field Experience Evaluation tool for NURS 4224). (*Professional behaviors are identified on the Field Evaluation form and include expectations that students consider: individual and cultural differences, environmental influences, legal and ethical rights and societal values for persons, families, groups and communities with a variety of health needs, problems, and issues within	1c. 90% of students enrolled in NURS 4224 Family Community Public Health Nursing I, will provide professional nursing care as evidenced by site checks made by faculty (observation), journaling, preceptor evaluations, & achievement of passing the professional nursing behavioral components on the Field Experience Evaluation form.	1c. Using a program approved Field Experience Evaluation tool, course faculty assess students' demonstration of professional nursing behaviors* during their field experiences through observation, student journaling, and preceptor feedback. 100% of NURS 4224B students will be included in the sample.	1c: Academic Year: 2014-2015 Fall/14 N=11 Spring/15 N=24 Summer/15 Not offered Academic Year 2013-2014 Fall/13 N=14 Spring/14 N=10 Summer/14 Not offered Academic Year	100% scored 74% or higher 100% scored 74% or higher	**care to incorporate nursing theory into the design and coordination of safe nursing care of persons, families, groups and communities.** **SLO Met:** 100% met criteria, Will continue to monitor & wait for feedback from ACEN & UAC Committee. 1c. Conclusion: Students considered individual and cultural differences, environmental influences, legal and ethical rights and societal values for persons, families, groups and communities with a variety of health needs, problems, and issues within diversified health care settings as demonstrated by observation (site checks), review of journaling, &

	diversified health care settings.)	This is a pass or fail component of the course. .		2012-2013 Fall/12 N= 13 Cohort # 8 Spring/13 N= 18 Cohort # 9 Summer/13 Not offered	100% scored 74% or higher	preceptor evaluations of all students enrolled in 4224. Interpretation of results demonstrates all students enrolled provided professional nursing behaviors* during their field experiences, therefore made a passing score. **Strength:** Students are experiencing multiple layers of the community by going to a variety of sites during field hours. Appreciating the complexity of communities & how they function is a critical step toward understanding public health today. **Weakness**: The experience/knowledge gained is largely dependent on the mentoring/sharing received from the preceptor.

						<u>Student Learning Outcomes Met:</u>: Expand his/her professional role as a provider of care to incorporate nursing theory into the design and coordination of safe nursing care of persons, families, groups and communities **Advocate for the provision of ethical and legally sound professional nursing care which focuses on achievement of cost-effective, quality outcomes.**
2a.Advocate for the provision of ethical and legally sound professional nursing care which focuses on achievement of cost-effective,	2a. Professional Nursing behaviors evaluated using Field Experience Evaluation tool for NURS 4214 which evaluates the student's ability to relate organization	2a. 90% of students enrolled in NURS 4214 Management & Leadership in Nursing, will be able to relate the objectives to field experience sites as evidenced by	2a. 100% of NURS 4214 students will be included in the sample	2a. <u>Academic Year 2014-2015</u> Fall/14 N=11 Spring/15 Not offered Summer/15	2a. Pass/Fail: No grade assigned. 100% Passed during the academic year	SLO Met: 100% met criteria, Will continue to monitor & wait for feedback from ACEN & UAC Committee. 2a. Conclusion: Application of students'

quality outcomes.	philosophy and theory to nursing practice, compares/contrasts leadership and management principles in a healthcare setting, analyze a HCO using leadership, management and change theories as they relate to nursing practice settings, apply decision-making and problem solving process to nursing practice and healthcare setting, analyze basic management methods, tools, strategies, and skills, and describe concepts of resource management.	site checks made by faculty (observation), journaling, preceptor evaluations, & achievement of passing score the professional nursing behavioral components on the Field Experience Evaluation form. This is a pass or fail component of the course. .		N=24 <u>Academic Year 2013-2014</u> Fall/13 N=10 Spring/14 Not offered Summer/14 N= 18 Fall/15 N=24 <u>Academic Year 2012-2013</u> Fall/12 N=8 Spring/13 Not offered Summer/13 N=13 Spr 13 <u>Cohort # 9</u> N = 15	<u>Pass/Fail no grade assigned</u> <u>Pass 14</u> <u>Incomplete 1</u> Pass/Fail: No grade assigned. 100% Passed during the academic year	comprehension of management and leadership theory was demonstrated through the students' ability to focus on organization philosophy and theory and compare this to nursing practice, identify leadership and management principles in a healthcare setting, analyzing a HCO using leadership, management and change theories as they relate to nursing practice settings, apply decision-making and problem solving processes to nursing practice and healthcare settings, analyzing basic management methods, tools, strategies, and skills, and describe concepts of resource management. **Strengths**: The diversity of the nursing leadership opportunities available for

						the BSN students give them opportunities to observe a variety of management approaches based on the mission & philosophy of the organization <u>Student Learning Outcomes Met:</u> Advocate for the provision of ethical and legally sound professional nursing care which focuses on achievement of cost-effective, quality outcomes. Demonstrate leadership and management competencies including critical thinking, problem-solving, effective communication and collaboration skills. ELA/SLO Met Continue to monitor.

	2b. BS/N Student Learning Outcome # 2: Advocate for the provision of ethical professional nursing care which focuses on culturally competent cost-effective quality outcomes.	2b. 90% of BS/N graduates completing the graduate survey (program completion survey) during their last upper division nursing course will report that they advocate for the provision of ethical professional nursing care which focuses on culturally competent cost-effective quality outcomes. Graduate/ program survey was developed by BS/N faculty. Survey questions correspond to program outcomes; course objectives, student learning outcomes and national nursing accreditation standards.	2b. 100% of students completing the upper division nursing courses were given a survey & will be included in the sample	2b. Fall/2014 (CH #12) N=10 Summer/15 (CH # 13) N=22 Fall/2013 (C.H.#10) N= 14 Summer/14 (C.H. # 11) N=16 2b. <u>Fall/12</u> N=13 (Cohort #8) <u>Sum '13</u> N=15 (Cohort #9)	Fall/2014 CH # 12 100% Strongly Agree Summer/15 CH # 13 100% Strongly Agree Fall/2013 100% Strongly Agree Cohort # 10 100% Strongly Agree <u>Summer/14</u> N=16 63.3% = Strongly Agree 27.7% = Agree 2b. Fall/12 84.6% = Strongly Agree 7.7% = Agree N=13 (cohort #8) <u>Summer/13</u> 57.1% = Strongly Agree 42.9% = Agree N=15 (Cohort #9)	2b. Conclusion<u>:</u> >90% of students reported they agree or strongly agree in both cohorts. **Strength:** Data is now available to allow for evidence-based decision making. . **ELA/SLO Met** Continue to monitor. **<u>Student Learning Outcome Met:</u>:** End of program surveys provide students with an opportunity for feedback related to their perception of what they have learned and provide data for faculty and stakeholders to consider if learning did indeed occur as well as what

						could or should be done differently. Continue administering graduate program completion survey for student enrolled in the last upper division nursing course.
3. Demonstrate leadership and management competencies including professional growth in critical thinking, problem solving, effective communication, and collaboration skills.	3a. The students will read, present discuss, and be graded with a rubric on The Institution of Medicine, Robert Woods Johnson Foundation *The Future of Nursing.* The student will assess the role of the RN in transformation of practice, research, education, and leadership. The student will apply the emerging role of the RN as applied to new health care	3a.90% of students enrolled in NURS 4214 Leadership and Management will demonstrate leadership and management competencies as evidenced by achievement of a composite score of 75% on presentations, discussions, and web assignments	3a. 100% of NURS 4214 students will be included in the sample	Academic Year 2014-2015 Fall/14 N=11 Spring/15 Not offered Summer/15 N=24 Academic Year 2013-2014 Fall/13 N=10 Spring/14 Not offered Summer/14 N= 18 Fall/15 N=24	Fall/2014 100% earned >75% Summer/2015 100% earned >75% Fall/2013 100% earned >75% Summer/2014 100% earned >75%	3a. Conclusion: This demonstrates that students have expanded their knowledge and are able to interpret the changing roles of nursing in the context of change. **Student Learning Outcomes Met:** Advocate for the provision of ethical and legally sound professional nursing care which focuses on achievement of cost-effective, quality outcomes. Demonstrate leadership

6. Outcomes: Student Learning Outcomes

	legislation such as the Affordable Care Act on web assignments. Grading will be accomplished by use of a rubric as well as class discussions.			Academic Year 2012-2013 Fall/12 N=8 Spring/13 Not offered Summer/13 N=13	Fall/2012 100% earned >75% Summer/2013 100% earned >75%	and management competencies including critical thinking, problem-solving, effective communication and collaboration skills. Appraise research and evidence-based findings for implementation with selected nursing practice functions. Evaluate the employment of information technology for the purpose of enhancing quality of nursing care.

	Surveys: 3b. Graduate (Program Completion survey)	3b. 90% of BS/N graduates completing the graduate survey (program completion survey) during their last upper division nursing course will report that believe they demonstrate leadership & management competencies including professional growth in critical thinking, problem solving, effective communication, and collaboration skills. Graduate/ program survey was developed by BS/N faculty. Survey questions correspond to program outcomes; course objectives, student learning. outcomes and national nursing	3b.100% of students completing the upper division nursing courses were given a survey & will be included in the sample	Academic Year 2014-2015 Fall/14 N=11 Spring/15 Not offered Summer/15 N=24 Academic Year 2013-2014 Fall/13 N=10 Spring/14 Not offered Summer/14 N= 18 Fall/15 N=24 Academic Year 2012-2013 Fall/12 N=8 Spring/13 Not offered Summer/13 N=13	3b. Fall/2014 Strongly Agree 72% Agree 28% Summer/2015 Strongly Agree 42% Agree 56% Neutral 2% 3b. Fall/2013 Strongly Agree 67% Agree 32% Neutral 1% Summer/14 Strongly Agree 60% Agree 40% 3b. Fall/12 N=13 76.9% = Strongly Agree 15.4% = Agree 3b. Summer/13 N = 15 71.4% = Strongly Agree	3b Conclusion:>90% of students reported they agree or strongly agree in all cohorts. Strength: Data is now available to allow for evidence-based decision making. **Student Learning Outcome Met:** End of program surveys provide students with an opportunity for feedback related to their perception of what they have learned and provide data for faculty and stakeholders to consider if learning did indeed occur as well as what could or should be done differently. Continue administering graduate program completion survey for student enrolled in the last upper division nursing course.

		accreditation standards.			28.6% = Agree	
4. Student will appraise research and evidence-based findings for nursing practice.	4a. NURS 4213 Nursing Science and Research Nursing Poster Presentation	4a. 90% of students enrolled in NURS 4213 Nursing Science and Research will submit and present a satisfactory Poster presentation that describes implementation of evidence-based findings as demonstrated by a score of 74% or higher.	4a. Using a program approved grading criteria rubric for this assignment, course faculty observed and listened to the students' presentation. 100% of NURS 4213 students are included in the sample.	Academic Year 2014-2015 Fall/14 N=11 Spring/15 N-24 Summer/15 Not offered Academic Year 2013-2014 Fall/13 N=10 Spring/14 N=18 Summer/14 Not offered Academic Year 2012-2013 Fall/12 N=8 Spring/13 N=13 Summer/13	Fall/2014 100% scored >74% Spring/2015 100% scored >74% Fall/2013 100% scored >74% Spring/2014 100% scored >74% Fall/2012 100% scored >74% Spring/2013 100% >74%	4a. ELA/SLO Met Will review with ACEN & UA Committee. 4. Conclusion: >90% of students in NURS 4213 scored satisfactory or higher level with their poster presentations. **Strength:** RSU RN-BSN students gain beginning skills in discerning valid research outcomes from invalid results. Additionally, students learn significance of practicing nursing that is evidence-based. **Student Learning Outcome Met:** Satisfactory completion of

				Not offered	.	this assignment demonstrates students' ability to locate evidence-based findings that support nursing procedures or policies and communicate this evidence via poster and podium presentations.
5. Evaluate how information technology enhances the quality of nursing care.	5a. Evaluation of the student's use of specialized databases for nursing and health-related information as demonstrated by presentations & a written paper that requires a minimum of 5 research-based articles that are less than 5 years old.	5a.90% of students enrolled in Professional Nursing Roles, NURS 4003, will satisfactorily use professional electronic databases to identify, discuss, and apply informatics to collect appropriate & factual data for the required presentation &K written paper. (passing score = 74%/2.0/C)	5a. Using a grading criteria rubric, faculty assess students; utilization of specialized databases to obtain appropriate nursing & health-related information as previously described. 100% of NURS 4003 students will be included in the sample.	Academic Year 2014-2015 Fall/14 N=11 Spring/15 N-24 Summer/15 Not offered Academic Year 2013-2014 Fall/13 N=10 Spring/14 N=18 Summer/14 Not offered Academic Year	Fall/2014 100% earned > 74% Spring/2014 100% earned > 74% Fall/2013 100% earned > 74% Spring/2014 100% earned >74%	5a. ELA/SLO Met Will review with ACEN & UA Committee. 5a. Conclusion: The students were able to correctly retrieve professional nursing & health related information from professional databases. **Strengths**: Provides a new avenue for the student to open a window into evidence-based nursing practice. **Student Learning Outcome Met**

				2012-2013 Fall/12 N=8 Spring/13 N=13 Summer/13 Not offered	Fall/2012 100% earned > 74% Spring/2013 100% earned > 74%	

1) Provide the names and signatures of all faculty members who contributed to this report and indicate their respective roles:

Faculty Members	Roles in the Assessment Process	Signatures
Dr. Teri Bycroft	Collected data, analyze data, prepare report, review report	Dr. Teri Bycroft
Dr. Marla Smith	Collected data, analyze data, prepare report, review report	Dr. Marla Smith

2) Reviewed by:

Titles	Names	Signatures	Date
Department Head	Lynn Korvick, PhD, MS, RN, CNE	Lynn Korvick	3/8/16
Dean	Keith Martin, PhD	Keith W. Martin	3/8/2016

* Minutes unavailable, unable to validate.