Unit Missions

Nursing Mission Statement

Mission statement
The mission of the Delta State University Robert E. Smith School of Nursing is to transform healthcare in the Mississippi Delta and beyond by preparing graduates to be nurse leaders at the baccalaureate, master, and doctoral levels through excellence in education, evidence-based research, interprofessional practice, and multidimensional partnerships in a diverse society.

Learning Outcomes

➥BSN-SON_01: Clinical Concepts

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome

1. Apply nursing, natural and behavioral science concepts to the practice of nursing (clinical concepts or CC). GE #5.

Data Collection (Evidence)
HESI end of BSN program exam scores; BSN and RNBSN end of program evaluations (*Note: RNBSN end of program evaluations began being collected separate from BSN in 2010); employer/advisory evaluations (*Note: data combined for both BSN and RNBSN).

Results of Evaluation
Learning Outcome #1: Apply nursing, natural and behavioral science concepts to the practice of nursing (clinical concepts or CC)
Clinical Concepts (Mean)

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
EXAM 1	770	802	819	943	961	983	963	947	940
EXAM 2	845	856	904	896	891	1026	937	943	926
EXAM 3	833	727	878	950	902	968	880	900	892

BSN End of program surveys (Mean for LO#1)

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
	3.9	4.1	4.4	4.1	4.6	4.46	4.67	5.0	4.6

RNBSN End of program surveys (Mean for LO#1)

YEAR	2010	2011	2012	2013	2014
	4.05	4.50	4.58	4.42	4.0

Employer/advisory council surveys (Mean for LO#1) [combined BSN & RNBSN data]

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
	4.5	4.5	4.4	3.5	4.0	3.83	4.16	5.0	4.0

Use of Evaluation Results
Student mean clinical concepts exam scores on the HESI exit exam given in NUR 408 had an overall mean score of 930 (which is within the HESI recommended performance score of 900 or above) for 2013 (a minimum 900 score is required for success in NUR 408). Dedicated Education Units (DEUs) are beginning to be implemented into both Adult Health clinical courses (NUR 335 and NUR 336) in conjunction with the Mississippi Office of Nursing Workforce. UG syllabi will be reviewed by course

faculty for changes and updates to nursing practice, national trends, and nationally standardized exams (currently Elsevier Evolve HESI exams-specialty exams given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisors and students determine strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas.

With NUR 408 requiring at least one score of 900 to pass the course and the letter grade earned is calculated by the HESI Exit Exams counting for 95% of the course grade, with each HESI Exit Exam counting 31.66%. The Meds Publishing program (an online nursing academic enhancement program) has been replaced by ATI, which continues to be available to all students as well as a live HESI NCLEX-RN review for senior students. All but three senior nursing students earned at least one 900 on the HESI exit exam and graduated. Those senior nursing students retested during the spring 2013 semester and obtained the minimum score of 900 and graduated.

End of program surveys of students and satisfaction surveys of alumni and employers on LO 1 also remain good with student ratings (on a five point scale) of the BSN program of study 5.0, RNBSN program of study 4.42, and an employer/advisory rating of 5.0, which all are better than or consistent with previous years.

We will continue to obtain feedback from BSN & RNBSN students, alumni and employers and monitor ratings and recommendations for improvement; revise curriculum as needed. We will watch for downward trends in employer ratings on LO 1 and take action accordingly. Continue to monitor national education, practice (NCLEX) and MS IHL/CCNE standards for BSN programs and revise curriculum as needed.

Use of Evaluation Results
Student mean clinical concepts exam scores on the HESI exit exam given in NUR 408 had an overall mean score of 919 (which is within the HESI recommended performance score of 900 or above) for 2014 (a minimum 900 score is required for success in NUR 408). Dedicated Education Units (DEUs) continue to be implemented into both Adult Health clinical courses (NUR 335 and NUR 336) in conjunction with the Mississippi Office of Nursing Workforce. UG syllabi continue to be reviewed by course faculty for changes and updates to nursing practice, national trends, and nationally standardized exams (currently Elsevier Evolve HESI exams-specialty exams given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisors and students determine strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas.

NUR 408 requires at least one score of 900 to pass the course and the letter grade earned is calculated by the HESI Exit Exams counting for 95% of the course grade, with each HESI Exit Exam counting 31.66%. The Meds Publishing program (an online nursing academic enhancement program) has been replaced by ATI, which continues to be available to all students. Students also now have the Elsevier HESI Platinum Bundle available. This bundle includes NCLEX Review and books on Professionalism, Delegation and Assignments, as well as Computerized Adaptive Learning and

Testing practice exams. The senior students also participated in a live on-campus HESI NCLEX-RN review. All senior nursing students earned at least one 900 on the HESI exit exam and graduated. End of program surveys of students and satisfaction surveys of alumni and employers on LO 1 have declined with student ratings (on a five point scale) of the BSN program of study 4.6 as compared to a score of 5.0 in 2013, RNBSN program of study ratings of 4.0 as compared to 4.42 in 2013, and an employer/advisory rating of 4.0 as compared to a score of 5.0 in 2013; these scores are consistent with previous years ratings.

We will continue to obtain feedback from BSN & RNBSN students, alumni and employers and monitor ratings and recommendations for improvement; revise curriculum as needed. We will watch for downward trends in employer ratings on LO 1 and take action accordingly. Continue to monitor national education, practice (NCLEX) and MS IHL/CCNE standards for BSN programs and revise curriculum as needed.

BSN-SON_02: Nursing Concepts

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
Learning Outcome #2: Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care to diverse clients in a collaborative environment [critical thinking (CT), therapeutic community (TC), therapeutic nursing interventions (TNI), and cultural awareness/human diversity (CA) within the nursing process (NP) and standards of care (SOC-legal/ethical considerations]. GE #1, #2, #5, #7 & #10

Data Collection (Evidence)
HESI end of BSN program exam scores; BSN and RNBSN end of program evaluations (*Note: RNBSN end of program evaluations began being collected separate from BSN in 2010); employer/advisory evaluations (*Note: data combined for both BSN and RNBSN).

Results of Evaluation
Learning Outcome #2: Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care to diverse clients in a collaborative environment [critical thinking (CT), therapeutic communication (TC), therapeutic nursing intervention (TNI), and cultural awareness/human diversity (CA) within the nursing process (NP) and standards of care (SOC-legal/ethical considerations].
Nursing Concepts (Mean) – Exam #1 *denotes Not Tested

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
CT	755	771	852	879	964	934	962	951	899
TC	788	717	823	794	979	915	908	830	907
TNI	761	783	857	891	968	941	974	965	909
CA	594	443	1041	1096	863	854	1070	972	1104
NP	1032	781	859	878	968	958	974	973.8	915
SOC	716	750	873	828	828	937	781	1004	765

Nursing Concepts (Mean) – Exam #2

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
CT	879	808	864	885	889	974	945	931	906
TC	873	829	799	813	986	999	970	897	874
TNI	876	803	860	903	882	967	945	933	921
CA	819	998	562	1111	1093	1026	1122	852	885
NP	884	819	843	899	909	976	941	923	896
SOC	871	840	882	896	920	969	856	772	952

Nursing Concepts (Mean) – Exam #3

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
CT	844	815	855	887	900	943	933	923	915
TC	850	575	842	799	998	862	879	951	914
TNI	855	869	863	896	894	951	942	925	900
CA	720	811	863	1103	699	1021	442	959	*
NP	847	828	1145	908	900	927	945	932	880
SOC	867	741	842	886	945	957	960	942	826

BSN End of program surveys (Mean for LO#2)

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
	3.33	4.2	3.9	4.2	4.7	4.49	4.50	5.0	4.7

RNBSN End of program surveys (Mean for LO#2)

YEAR	2010	2011	2012	2013	2014
	3.95	4.4	4.64	4.5	4.0

Employer/advisory council surveys (Mean for LO#2) [combined BSN & RNBSN data]

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
	4.7	4.8	4.8	3.5	5.0	3.83	4.16	5.0	4.0

Use of Evaluation Results
The student nursing concepts mean exam scores on the HESI exit exam given in NUR 408 have trended downward compared to 2013, with the exception of TC (therapeutic communication) and CA (cultural awareness) which trended upward. TC went from 893 in 2013 to 898 in 2014 and CA went from 928 in 2013 to 995 in 2014 (900 or above is the recommended score; 850-899 is an acceptable score according to HESI). The overall mean scores for 2014 were: CT-907 as compared to 935, TNI-909 as compared to 941, NP-897 as compared to 943, and SOC-848 as compared to 906 (a minimum 900 score is required for success in NUR 408). In 2011, therapeutic communication first demonstrated a downward trend that lasted until 2013 [2011 overall mean score of 862]. UG faculty members have continued to emphasize this concept in classroom content and clinical experiences, thus an improvement in overall mean score for 2014. Faculty members were advised of the decreased scores in CT, TNI, NP and SOC for continued monitoring of these subject areas and to take corrective action if scores continue to decrease.

Dedicated Education Units (DEUs) continue to be implemented into both Adult Health clinical courses (NUR 335 and NUR 336) in conjunction with the Mississippi Office of Nursing Workforce. UG syllabi continue to be reviewed by course faculty for changes and updates to nursing practice, national trends, and nationally standardized exams (currently Elsevier Evolve HESI exams-specialty exams given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisors and students determine strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas.

NUR 408 requires at least one overall HESI Exit Exam score of 900 to pass the course and the letter grade earned is calculated with the HESI Exit Exams counting for 95% of the course grade, with each HESI Exit Exam counting 31.66%. The Meds Publishing program (an online nursing academic enhancement program) has been replaced by ATI, which continues to be available to all students. Students also now have the Elsevier HESI Platinum Bundle available. This bundle includes NCLEX Review and books on Professionalism, Delegation and Assignments, as well as Computerized Adaptive Learning and Testing practice exams. The senior students also participate in a live on-campus HESI NCLEX-RN review. All senior nursing students earned at least one 900 on the HESI exit exam and graduated.

End of program surveys of students and satisfaction surveys of alumni and employers on LO 1 also remain good with student ratings (on a five point scale) of the BSN program of study 4.7 as compared to a score of 5.0 in 2013, RNBSN program of study 4.0 as compared to a score of 4.42 in 2013, and an employer/advisory rating of 4.0 as compared to a score of 5.0 in 2013; these scores are consistent with previous years ratings.

We will continue to obtain feedback from BSN & RNBSN students, alumni and employers and monitor ratings and recommendations for improvement; revise curriculum as needed. We will watch for downward trends in employer ratings on LO 1 and take action accordingly. Continue to monitor national education, practice (NCLEX) and MS IHL/CCNE standards for BSN programs and revise curriculum as needed.

BSN-SON_03: Leadership

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
Learning Outcomes #3 and 5: Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession [leadership]. GE # 9

Data Collection (Evidence)
HESI end of program exam scores; BSN end of program evaluations; employer evaluations

Results of Evaluation

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Leadership (Mean)

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
EXAM 1	734	781	816	902	948	936	981	941	878
EXAM 2	909	716	869	896	868	972	955	939	901
EXAM 3	848	751	853	908	925	956	897	905	888

BSN End of program surveys (Mean for LO#3 & LO#5)

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2104
	4.0	4.2	3.8	4.2	4.7	4.67	4.67	5.0	4.7

RNBSN End of program surveys (Mean for LO#3 & LO#5)

YEAR	2010	2011	2012	2013	2014
	4.0	4.75	4.63	4.58	4.0

Employer/advisory council surveys (Mean for LO#3 & LO#5) [combined BSN & RNBSN data]

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
	4.8	4.8	4.8	3.5	5.0	3.83	4.16	4.67	3.75

Use of Evaluation Results
The student leadership mean exam scores on the HESI exit exam given in NUR 408 continues a downward trend with a decreased 2014 overall mean score of 889 (which is below the HESI recommended minimum performance score of 900 score as required for success in NUR 408) as compared to the 2013 overall mean score of 928. Leadership is threaded throughout the curriculum with greater emphasis in the courses of NUR 402/442. As part of the Education Redesign efforts by the schools of nursing in Mississippi, we plan to continue to examine the concept of leadership in a gap analysis with the 2015 calendar year (this analysis was put on hold as we were preparing for a national and state accreditation visit) February 2015). The information obtained from the gap analysis regarding this concept, as well as other concepts, will be used to revise curriculum. UG faculty members will be made aware of this decrease in the overall mean score from the previous year and place more emphasis on this concept in the classroom content and clinical experiences. UG syllabi will be reviewed by course faculty for changes and updates to nursing practice, education redesign, national trends, and nationally standardized exams (currently Elsevier Evolve HESI exams-specialty exams given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisors and students determine strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas. Nursing faculty continue to encourage the use of the ATI online nursing academic enhancement program; it is available to all students as well as a live HESI NCLEX-RN review for senior students.

End of program surveys of students and employers/advisory surveys on LO # 3 remain good with BSN student overall mean scores (on a five point scale) of 4.7 as compared to the score of 5.0 in 2013, and with the RNBSN program of study overall mean score of LO # 3 decreasing to 4.0 as compared to 4.63 in 2013. Employer rating on LO # 3 decreased to 4.0 as compared to a score of 4.67 in 2013.

We will continue to obtain feedback from BSN and RNBSN students and employers, and monitor ratings and make recommendations for improvement to appropriate faculty members and revise curriculum as needed. Continue to monitor national education, practice (NCLEX) and MS IHL/CCNE standards for BSN and RNBSN programs and revise curriculum as needed.

BSN-SON_04: Evidence Based Practice

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
Learning Outcome #4: Utilize research in the delivery of health care [evidence based practice].GE #3& #4

Data Collection (Evidence)
HESI end of BSN program exam scores; BSN and RNBSN end of program evaluations (*Note: RNBSN end of program evaluations began being collected separate from BSN in 2010); employer/advisory evaluations (*Note: data combined for both BSN and RNBSN).

Results of Evaluation
Learning Outcome #4: Utilize research in the delivery of health care [evidence based practice]. GE #3 & #4 Scholarship for Evidence Based Practice (Mean) - *denotes Not Tested

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
EXAM 1	311	521	225	898	942	971	1009	984	876
EXAM 2	NT*	998	NT*	910	902	986	948	942	888
EXAM 3	NT*	387	595	909	889	962	884	908	873

BSN End of program surveys (Mean for LO #4)

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
	3.5	4.2	3.5	4.2	4.7	4.67	4.44	5.0	4.5

RNBSN End of program surveys (Mean for LO #4)

YEAR	2010	2011	2012	2013	2014
	4.05	4.7	4.73	4.67	4.0

Employer/advisory council surveys (Mean for LO #4) [combined BSN & RNBSN data]

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
	3.4	4.0	4.1	3.5	1.0	3.83	3.83	4.67	4.0

Use of Evaluation Results

The student evidence based practice mean exam scores on the HESI exit exam given in NUR 408 has trended downward as compared to the previous calendar year with an overall mean score of 876 in 2014 as compared to 928 in 2013 (a minimum 900 score is required for success in NUR 408). This score, continues the downward trend identified in 2012. Nursing faculty will be notified of this downward trend for monitoring and action as needed. UG syllabi will continue to be reviewed by course faculty for changes and updates to nursing practice, national trends, and nationally standardized exams (The nursing program currently uses Elsevier Evolve HESI exams-specialty exams given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisers and students determine strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas. Faculty members will continue to encourage students to utilize the ATI online nursing academic enhancement program, which is available to all students as is as a live HESI NCLEX-RN review for senior students. Students also now have the Elsevier HESI Platinum Bundle available. This bundle includes NCLEX Review and books on Professionalism, Delegation and Assignments, as well as Computerized Adaptive Learning and Testing practice exams. Research/Evidence Based Practice content is included in all of these resources.

End of program surveys of students and employers/advisory surveys on LO 4 remain above average with student ratings (using a five point scale) of the BSN program of study LO 4 scoring 4.5 as compared to 5.0 in 2013, and RNBSN program of study LO 4 scoring 4.0 as compared to 4.59 in 2013; the employer/advisory council rating on LO 4 decreased to 4.0 as compared to a score of 4.67 in 2013.

We will continue to obtain feedback from BSN and RNBSN students and employers/advisory council, and monitor ratings and make recommendations for improvement to appropriate faculty members to revise the curriculum as needed. We will also continue to monitor national education, practice (NCLEX) and MS IHL/CCNE standards for BSN and RNBSN programs and revise curriculum as needed.

BSN-SON_05: Professionalism

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome

Learning Outcome #5: Advocate for improvement in healthcare through participation in professional and political processes [leadership]. GE # 9

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Data Collection (Evidence)
HESI end of BSN program exam scores; BSN and RNBSN end of program evaluations (*Note: RNBSN end of program evaluations began being collected separate from BSN in 2010); employer/advisory evaluations (*Note: data combined for both BSN and RNBSN).

Results of Evaluation
Leadership (Mean)

YEAR	2013	2014
EXAM 1	972	878
EXAM 2	863	901
EXAM 3	918	888

BSN End of program surveys (Mean)

YEAR	2013	2014
	5.0	4.5

RNBSN End of program surveys (Mean for LO#3 & LO#5)

YEAR	2013	2014
	4.5	4.0

Employer/advisory council surveys (Mean) [combined BSN & RNBSN data]

YEAR	2013	2014
	4.67	4.0

Use of Evaluation Results
The student professionalism mean exam scores on the HESI exit exam given in NUR 408 had an overall mean score of 889 during calendar year 2014. This compares to a score of 918 in 2013, which was the first year for this category as LO 5 was combined with LO 3 in previous years. An overall minimum 900 score is required for success in NUR 408. Professionalism is threaded throughout the curriculum with greater emphasis in the courses of NUR 314 and NUR 402/442. As part of the Education Redesign efforts by the schools of nursing in Mississippi initiated in 2012, we will resume examination of the concept of professionalism in a curriculum gap analysis (the GAP analysis was put on hold due to a state and national accreditation site visit in February 2015). The information obtained from the gap analysis regarding this concept, as well as other concepts, will be used to revise the curriculum. UG syllabi will be reviewed by course faculty for changes and updates to nursing practice, education redesign, national trends, and nationally standardized exams (currently Elsevier

Evolve HESI exams-specialty exams given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisors and students determine individual strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas.

We also continue to utilize ATI for the student learning enhancement plan, which is available to all students as well as a live HESI NCLEX-RN review for senior students and encourage all students to take advantage of the Elsivier HESI Platinum Package textbook and online resources.

End of program surveys of students and employers/advisory surveys on

LO # 5 are good with a student overall mean score (using a five point scale) of the BSN program of study 4.5, which is a decrease from a score of 5.0 in 2013; the RNBSN program of study overall mean score of LO # 5 decreased to 4.0 as compared to 4.5 in 2013. Employer rating on LO # 5 decreased to 4.0 as compared to 4.67 in 2013. These ratings will be shared with the faculty teaching this content (NUR 402/442) for review/improvement of leadership content and RNBSN students surveyed again in 2014 to assess for improvement.

We will continue to obtain feedback from BSN and RNBSN students and employers, and monitor ratings and make recommendations for improvement to appropriate faculty members; revise curriculum as needed. Continue to monitor national education, practice (NCLEX) and MS IHL/CCNE standards for BSN and RNBSN programs and revise curriculum as needed.

BSN-SON_06: Physiological and Psychosocial Integrity

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
Program Outcome #6: Provide individualized nursing care that focuses on health promotion and disease and injury prevention [physiologic integrity or PI and psychosocial integrity or PsI]. GE #8

Data Collection (Evidence)
HESI end of BSN program exam scores; BSN and RNBSN end of program evaluations (*Note: RNBSN end of program evaluations began being collected separate from BSN in 2010); employer/advisory evaluations (*Note: data combined for both BSN and RNBSN).

Results of Evaluation
Physiologic Integrity [PI] and Psychosocial Integrity [PsI] (Mean) – Exam #1

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
PI	747	715	838	893	954	976	962	782	785
PsI	639	773	849	809	985	920	990	943	939

Physiology Integrity [PI] and Psychosocial Integrity [PsI] (Mean) – Exam #2

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YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
PI	875	859	884	904	865	970	967	936	827
PsI	924	846	791	872	895	982	890	941	912

Physiology Integrity [PI] and Psychosocial Integrity [PsI] (Mean) – Exam #3

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
PI	838	872	857	929	923	860	914	888	858
PsI	878	648	843	793	914	956	814	920	879

BSN End of program surveys (Mean for LO #6)

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
	3.9	4.1	4.1	4.1	4.6	4.56	4.67	5.0	4.7

RNBSN End of program surveys (Mean for LO #6)

YEAR	2010	2011	2012	2013	2014
	3.95	4.3	4.73	4.5	4.0

Employer/advisory council surveys (Mean for LO #6) [combined BSN & RNBSN data]

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
	4.0	4.2	4.2	3.5	5.0	3.83	4.00	4.67	3.75

Use of Evaluation Results
The student physiologic integrity overall mean exam score on the HESI exit exam given in NUR 408 continued a downward trend from 823 in 2014 as compared to 928 in 2013 and 948 in 2012 This score is below the HESI recommended score of 900 or above. The student psychosocial integrity mean scores increased to 910 in 2014 as compared to 869 in 2013 and 898 during calendar year 2012; (a minimum 900 score is required for success in NUR 408; a score range of 850-899 is considered acceptable performance by HESI, but not by the school of nursing). Psychosocial integrity is introduced during the first semester in NUR 302/332 (Fundamentals of Client Care) and threaded throughout the curriculum with emphasis in NUR 307/337 (Psychiatric/Mental Health Nursing). This continued downward trend in Psysiologic Integrity will be reported to all nursing faculty, particularly those teaching in the course of NUR 307/337 so UG syllabi can be reviewed for changes and updates to nursing practice and national trends. In addition, 25% of the hours in clinical courses will continue to be dedicated to simulation lab hours so students can experience and practice psychosocial integrity (in addition to other nursing care knowledge needs identified). A nationally standardized exam will be utilized to assess for effectiveness (the Elsevier Evolve HESI exams-specialty exams are currently given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisors and students determine strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas. Nursing faculty will also continue to encourage student use of the ATI online nursing academic enhancement program, which is available to all students, as

well as a live HESI NCLEX-RN review for senior students and encourage students to take advantage of the Elisvier HESI Platinum Package resources.

End of program surveys of students and employer/advisory council surveys on LO 6 remain good with student ratings (using a five point scale) of the BSN program of study LO 6 scoring 4.7, which is a decrease from the score of 5.0 in 2013, and the RNBSN program of study LO 6 scoring 4.0, which is a decrease from 5.0 in 2103. The employer/advisory council rating on LO 6 decreased to 3.75 as compared to 4.67 in 2013.

We will continue to obtain feedback from BSN and RNBSN students and employers/advisory council, and monitor ratings and make recommendations for improvement to appropriate faculty members; revise curriculum as needed. Continue to monitor national education, practice (NCLEX) and MS IHL/CCNE standards for BSN and RNBSN programs and revise curriculum as needed.

Delta State University FY2015 Unit Level Report
Department: Robert E. Smith School of Nursing
BSN-SON_07: Safe Effective Care
Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
Program Outcome #7: Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach [safe, effective, care environment or SECE]. GE #9

Data Collection (Evidence)
HESI end of program exam scores; BSN end of program evaluations; employer evaluations

Results of Evaluation
Learning Outcome #7: Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach [safe, effective, care environment or SECE]. GE #9
Safe, Effective, Care Environment [SECE] (Mean)

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
EXAM 1	805	765	900	842	908	869	920	1003	894
EXAM 2	890	701	853	856	871	971	935	926	946
EXAM 3	880	847	849	846	900	919	1026	945	915

BSN End of program surveys (Mean for LO #7)

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
	3.4	4.0	3.9	3.9	4.7	4.38	4.56	5.0	4.7

RNBSN End of program surveys (Mean for LO #7)

YEAR	2010	2011	2012	2013	2014
	4.0	4.6	4.67	4.58	4.0

Employer/advisory council surveys (Mean for LO #7) [combined BSN & RNBSN data]

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
	3.5	3.9	4.0	3.5	4.0	3.83	4.16	4.67	4.0

Use of Evaluation Results
The student mean exam scores for safe, effective care on the HESI exit exam given in NUR 408 trended downward this year with an overall mean score of 918 as compared to 958 in calendar year 2013 and 960 during calendar year 2012. The score of 918, however, still exceeds the recommended HESI score (a minimum 900 score is required for success in NUR 408). The simulation lab coordinator will continue to increase use of simulations specific to this learning outcome during calendar year 2013. This concept of safe, effective care is taught throughout the curriculum. However, much emphasis has been placed on Quality and Safety Education for Nurses (QSEN) competencies, all UG syllabi will be reviewed by course faculty for changes and updates to nursing practice and national trends specific to patient safety and effective care. A nationally standardized exam (currently Elsevier Evolve HESI exams are used in the nursing program, these are specialty

exams given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisors and students determine strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas. Faculty will continue to encourage students to utilize the ATI online nursing academic enhancement program, which is available to all students, as well as a live HESI NCLEX-RN review for senior students.

End of program surveys of students and employers/advisory council surveys on LO 7 have trended downward, but no item scored less than a 3.0 (using a five point scale) of the BSN program of study LO 7 scoring 4.7, which is a decrease from 5.0 in 2013, and the RNBSN program of study LO 7 scoring 4.0 which is also a decrease from the score of 4.58 in 2013. The employer/advisory council rating on LO 7 was a 4.0, which is a decrease as compared to the score of 4.67 in 2013.

We will continue to obtain feedback from BSN and RNBSN students and employers/advisory council, and monitor ratings and make recommendations for improvement to appropriate faculty members; revise curriculum as needed. Continue to monitor national education, practice (NCLEX) and MS IHL/CCNE standards for BSN and RNBSN programs and revise curriculum as needed.

⬌DNP_SON_01: Theory/Research

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
Learning Outcome #1: Develop and evaluate new practice approaches based on science from nursing and other disciplines.

Data Collection (Evidence)
1. Portfolio(s) with evidence of learning outcome accomplishment
2. Presentation of the Scholarly Project (which addresses all DNP learning outcomes) at a peer reviewed local, regional, state or national professional health care event.
3. Publication of the Scholarly Project in a peer reviewed journal.
4. DNP End of Program Evaluations.
5. Employer/Advisory Council Evaluations.

Results of Evaluation

2014	2015	2016	2017	2018
Portfolio	4/4			
Scholarly Project Presentation	4/4			
Scholarly Project Publication	0/4			

Student End of Program Evaluation	4.0			
Employer/Advisory Council Evaluation	N/A			

* First DNP class graduated December 2014, no employer evaluations available as of yet

Four of four students submitted completed comprehensive portfolios to the DNP faculty.
Four of four students presented their scholarly project at a peer reviewed health care event. Two were prize winners at the event.
   -Poster presentation "Making Moves in the Delta: The Effects of Implementing the We Can! Energizing Our Families: Parent Program in an Elementary School at Jackson State University in Jackson MS, Misconceptions in Epidemiology, Healthcare Policy, and Health Disparities Symposium December 01, 2014. First Place Winner.
   -Poster presentation "Save a Foot, Save a Life: Implementation of an Evidence-Based Diabetic Foot Prevention Education Program" at the Mississippi Nurses Convention, Biloxi, MS October 2014. Second Place Winner.
   -Oral presentation "Influence of Prescribing Behavior and Clinical Decision Making of Primary Care Providers Using the Mississippi Prescription Monitoring Program" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
   -Oral presentation "Effects of a Healthy Lifestyle Education Program on Nutrition Behaviors, Attitudes and Knowledge and Physical Activity Behaviors of 4th and 5th Grade Students in an Inner-city School" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
All four DNP students submitted manuscripts of their scholarly project for publication, none have been accepted thus far.

Use of Evaluation Results
We will continue to evaluate DNP portfolios and scholarly projects for incorporation of all DNP learning outcomes and their relationship to nursing advanced practice didactic and clinical experiences, and to require presentation and encourage publication submission of the scholarly project. HESI APRN exams will be administered to non FNP DNP students and results reported once obtained (projected HESI administration 2016). We will continue to obtain feedback from the DNP student graduates, and employers/advisory council and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

DNP_SON_02: Healthcare Delivery Systems

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
Learning Outcome #2: Employ leadership skills to design and evaluate strategies that improve care delivery and outcomes for diverse populations.

Data Collection (Evidence)
1. Portfolio(s) with evidence of learning outcome accomplishment
2. Presentation of the Scholarly Project (which addresses all DNP learning outcomes) at a peer reviewed local, regional, state or national professional health care event.
3. Publication of the Scholarly Project in a peer reviewed journal.
4. DNP End of Program Evaluations.
5. Employer/Advisory Council Evaluations

Results of Evaluation

2014	2015	2016	2017	2018
Portfolio	4/4			
Scholarly Project Presentation	4/4			
Scholarly Project Publication	0/4			
Student End of Program Evaluation	4.0			
Employer/Advisory Council Evaluation	N/A			

* First DNP class graduated December 2014, no employer evaluations available as of yet

Four of four students submitted completed comprehensive portfolios to the DNP faculty.
Four of four students presented their scholarly project at a peer reviewed health care event. Two were prize winners at the event.
   -Poster presentation "Making Moves in the Delta: The Effects of Implementing the We Can! Energizing Our Families: Parent Program in an Elementary School at Jackson State University in Jackson MS, Misconceptions in Epidemiology, Healthcare Policy, and Health Disparities Symposium December 01, 2014. First Place Winner.
   -Poster presentation "Save a Foot, Save a Life: Implementation of an Evidence-Based Diabetic Foot Prevention Education Program" at the Mississippi Nurses Convention, Biloxi, MS October 2014. Second Place Winner.
   -Oral presentation "Influence of Prescribing Behavior and Clinical Decision Making of Primary Care Providers Using the Mississippi Prescription Monitoring Program" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
   -Oral presentation "Effects of a Healthy Lifestyle Education Program on Nutrition Behaviors, Attitudes and Knowledge and Physical Activity Behaviors of 4th and 5th Grade Students in an Inner-city School" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
All four DNP students submitted manuscripts of their scholarly project for publication, none have been accepted thus far.

Use of Evaluation Results

We will continue to evaluate DNP portfolios and scholarly projects for incorporation of all DNP learning outcomes and their relationship to nursing advanced practice didactic and clinical experiences, and to require presentation and encourage publication submission of the scholarly project. HESI APRN exams will be administered to non FNP DNP students and results reported once obtained (projected HESI administration 2016). We will continue to obtain feedback from the DNP student graduates, and employers/advisory council and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

DNP_SON_03: Monitoring/Ensuring Quality of Health Care Practice

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome

Lead interprofessional teams and partnerships to analyze and improve health outcomes for individuals, families, and communities.

Data Collection (Evidence)

1. Portfolio(s) with evidence of learning outcome accomplishment
2. Presentation of the Scholarly Project (which addresses all DNP learning outcomes) at a peer reviewed local, regional, state or national professional health care event.
3. Publication of the Scholarly Project in a peer reviewed journal.
4. DNP End of Program Evaluations.
5. Employer/Advisory Council Evaluations.

Results of Evaluation

2014	2015	2016	2017	2018
Portfolio	4/4			
Scholarly Project Presentation	4/4			
Scholarly Project Publication	0/4			
Student End of Program Evaluation	4.0			
Employer/Advisory Council Evaluation	N/A			

* First DNP class graduated December 2014, no employer evaluations available as of yet

Four of four students submitted completed comprehensive portfolios to the DNP faculty.
Four of four students presented their scholarly project at a peer reviewed health care event. Two were prize winners at the event.
   -Poster presentation "Making Moves in the Delta: The Effects of Implementing the We Can!

Energizing Our Families: Parent Program in an Elementary School at Jackson State University in Jackson MS, Misconceptions in Epidemiology, Healthcare Policy, and Health Disparities Symposium December 01, 2014. First Place Winner.

   -Poster presentation "Save a Foot, Save a Life: Implementation of an Evidence-Based Diabetic Foot Prevention Education Program" at the Mississippi Nurses Convention, Biloxi, MS October 2014. Second Place Winner.

   -Oral presentation "Influence of Prescribing Behavior and Clinical Decision Making of Primary Care Providers Using the Mississippi Prescription Monitoring Program" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.

   -Oral presentation "Effects of a Healthy Lifestyle Education Program on Nutrition Behaviors, Attitudes and Knowledge and Physical Activity Behaviors of 4th and 5th Grade Students in an Inner-city School" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014. All four DNP students submitted manuscripts of their scholarly project for publication, none have been accepted thus far.

Use of Evaluation Results
We will continue to evaluate DNP portfolios and scholarly projects for incorporation of all DNP learning outcomes and their relationship to nursing advanced practice didactic and clinical experiences, and to require presentation and encourage publication submission of the scholarly project. HESI APRN exams will be administered to non FNP DNP students and results reported once obtained (projected HESI administration 2016). We will continue to obtain feedback from the DNP student graduates, and employers/advisory council and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

DNP_SON_04: Professional Role

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
Assume a leadership role in the application and dissemination of best evidence for practice to promote efficient, effective, and equitable patient-centered care.

Data Collection (Evidence)
1. Portfolio(s) with evidence of learning outcome accomplishment
2. Presentation of the Scholarly Project (which addresses all DNP learning outcomes) at a peer reviewed local, regional, state or national professional health care event.
3. Publication of the Scholarly Project in a peer reviewed journal.
4. DNP End of Program Evaluations.
5. Employer/Advisory Council Evaluations.

Results of Evaluation

2014	2015	2016	2017	2018
Portfolio	4/4			

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Department: Robert E. Smith School of Nursing

Scholarly Project Presentation	4/4			
Scholarly Project Publication	0/4			
Student End of Program Evaluation	4.0			
Employer/Advisory Council Evaluation	N/A			

* First DNP class graduated December 2014, no employer evaluations available as of yet

Four of four students submitted completed comprehensive portfolios to the DNP faculty.
Four of four students presented their scholarly project at a peer reviewed health care event. Two were prize winners at the event.
    -Poster presentation "Making Moves in the Delta: The Effects of Implementing the We Can! Energizing Our Families: Parent Program in an Elementary School at Jackson State University in Jackson MS, Misconceptions in Epidemiology, Healthcare Policy, and Health Disparities Symposium December 01, 2014. First Place Winner.
    -Poster presentation "Save a Foot, Save a Life: Implementation of an Evidence-Based Diabetic Foot Prevention Education Program" at the Mississippi Nurses Convention, Biloxi, MS October 2014. Second Place Winner.
    -Oral presentation "Influence of Prescribing Behavior and Clinical Decision Making of Primary Care Providers Using the Mississippi Prescription Monitoring Program" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
    -Oral presentation "Effects of a Healthy Lifestyle Education Program on Nutrition Behaviors, Attitudes and Knowledge and Physical Activity Behaviors of 4th and 5th Grade Students in an Inner-city School" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
All four DNP students submitted manuscripts of their scholarly project for publication, none have been accepted thus far.

Use of Evaluation Results
We will continue to evaluate DNP portfolios and scholarly projects for incorporation of all DNP learning outcomes and their relationship to nursing advanced practice didactic and clinical experiences, and to require presentation and encourage publication submission of the scholarly project. HESI APRN exams will be administered to non FNP DNP students and results reported once obtained (projected HESI administration 2016). We will continue to obtain feedback from the DNP student graduates, and employers/advisory council and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

Delta State University FY2015 Unit Level Report
Department: Robert E. Smith School of Nursing

DNP_SON_05: Legal and Regulatory Issues

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
Design, influence, and implement health care and ethical policies that affect financing, practice regulation, access to care and outcomes for individuals, families, and communities.

Data Collection (Evidence)
1. Portfolio(s) with evidence of learning outcome accomplishment
2. Presentation of the Scholarly Project (which addresses all DNP learning outcomes) at a peer reviewed local, regional, state or national professional health care event.
3. Publication of the Scholarly Project in a peer reviewed journal.
4. DNP End of Program Evaluations.
5. Employer/Advisory Council Evaluations.

Results of Evaluation

2014	2015	2016	2017	2018
Portfolio	4/4			
Scholarly Project Presentation	4/4			
Scholarly Project Publication	0/4			
Student End of Program Evaluation	4.0			
Employer/Advisory Council Evaluation	N/A			

* First DNP class graduated December 2014, no employer evaluations available as of yet

Four of four students submitted completed comprehensive portfolios to the DNP faculty.
Four of four students presented their scholarly project at a peer reviewed health care event. Two were prize winners at the event.
   -Poster presentation "Making Moves in the Delta: The Effects of Implementing the We Can! Energizing Our Families: Parent Program in an Elementary School at Jackson State University in Jackson MS, Misconceptions in Epidemiology, Healthcare Policy, and Health Disparities Symposium December 01, 2014. First Place Winner.
   -Poster presentation "Save a Foot, Save a Life: Implementation of an Evidence-Based Diabetic Foot Prevention Education Program" at the Mississippi Nurses Convention, Biloxi, MS October 2014. Second Place Winner.
   -Oral presentation "Influence of Prescribing Behavior and Clinical Decision Making of Primary Care Providers Using the Mississippi Prescription Monitoring Program" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
   -Oral presentation "Effects of a Healthy Lifestyle Education Program on Nutrition Behaviors, Attitudes and Knowledge and Physical Activity Behaviors of 4th and 5th Grade Students in an Inner-city School" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
All four DNP students submitted manuscripts of their scholarly project for publication, none have been accepted thus far.

Use of Evaluation Results

We will continue to evaluate DNP portfolios and scholarly projects for incorporation of all DNP learning outcomes and their relationship to nursing advanced practice didactic and clinical experiences, and to require presentation and encourage publication submission of the scholarly project. HESI APRN exams will be administered to non FNP DNP students and results reported once obtained (projected HESI administration 2016). We will continue to obtain feedback from the DNP student graduates, and employers/advisory council and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

DNP_SON_06: Cultural Competence

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome

Analyze scientific data and synthesize concepts to develop, implement, and evaluate interventions that address health promotion and disease prevention for culturally diverse populations.

Data Collection (Evidence)

1. Portfolio(s) with evidence of learning outcome accomplishment
2. Presentation of the Scholarly Project (which addresses all DNP learning outcomes) at a peer reviewed local, regional, state or national professional health care event.
3. Publication of the Scholarly Project in a peer reviewed journal.
4. DNP End of Program Evaluations.
5. Employer/Advisory Council Evaluations.

Results of Evaluation

2014	2015	2016	2017	2018
Portfolio	4/4			
Scholarly Project Presentation	4/4			
Scholarly Project Publication	0/4			
Student End of Program Evaluation	4.0			
Employer/Advisory Council Evaluation	N/A			

* First DNP class graduated December 2014, no employer evaluations available as of yet

Four of four students submitted completed comprehensive portfolios to the DNP faculty.
Four of four students presented their scholarly project at a peer reviewed health care event. Two were prize winners at the event.
    -Poster presentation "Making Moves in the Delta: The Effects of Implementing the We Can!

Energizing Our Families: Parent Program in an Elementary School at Jackson State University in Jackson MS, Misconceptions in Epidemiology, Healthcare Policy, and Health Disparities Symposium December 01, 2014. First Place Winner.

   -Poster presentation "Save a Foot, Save a Life: Implementation of an Evidence-Based Diabetic Foot Prevention Education Program" at the Mississippi Nurses Convention, Biloxi, MS October 2014. Second Place Winner.

   -Oral presentation "Influence of Prescribing Behavior and Clinical Decision Making of Primary Care Providers Using the Mississippi Prescription Monitoring Program" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.

   -Oral presentation "Effects of a Healthy Lifestyle Education Program on Nutrition Behaviors, Attitudes and Knowledge and Physical Activity Behaviors of 4th and 5th Grade Students in an Inner-city School" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
All four DNP students submitted manuscripts of their scholarly project for publication, none have been accepted thus far.

Use of Evaluation Results
We will continue to evaluate DNP portfolios and scholarly projects for incorporation of all DNP learning outcomes and their relationship to nursing advanced practice didactic and clinical experiences, and to require presentation and encourage publication submission of the scholarly project. HESI APRN exams will be administered to non FNP DNP students and results reported once obtained (projected HESI administration 2016). We will continue to obtain feedback from the DNP student graduates, and employers/advisory council and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

DNP_SON_07: Managing/Negotiating Health Care Delivery Systems

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
Utilize and evaluate information and communication technologies to improve health care and to implement change in health care systems.

Data Collection (Evidence)
1. Portfolio(s) with evidence of learning outcome accomplishment
2. Presentation of the Scholarly Project (which addresses all DNP learning outcomes) at a peer reviewed local, regional, state or national professional health care event.
3. Publication of the Scholarly Project in a peer reviewed journal.
4. DNP End of Program Evaluations.
5. Employer/Advisory Council Evaluations.

Results of Evaluation

2014	2015	2016	2017	2018
Portfolio	4/4			

Scholarly Project Presentation	4/4			
Scholarly Project Publication	0/4			
Student End of Program Evaluation	4.0			
Employer/Advisory Council Evaluation	N/A			

* First DNP class graduated December 2014, no employer evaluations available as of yet

Four of four students submitted completed comprehensive portfolios to the DNP faculty.
Four of four students presented their scholarly project at a peer reviewed health care event. Two were prize winners at the event.
   -Poster presentation "Making Moves in the Delta: The Effects of Implementing the We Can! Energizing Our Families: Parent Program in an Elementary School at Jackson State University in Jackson MS, Misconceptions in Epidemiology, Healthcare Policy, and Health Disparities Symposium December 01, 2014. First Place Winner.
   -Poster presentation "Save a Foot, Save a Life: Implementation of an Evidence-Based Diabetic Foot Prevention Education Program" at the Mississippi Nurses Convention, Biloxi, MS October 2014. Second Place Winner.
   -Oral presentation "Influence of Prescribing Behavior and Clinical Decision Making of Primary Care Providers Using the Mississippi Prescription Monitoring Program" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
   -Oral presentation "Effects of a Healthy Lifestyle Education Program on Nutrition Behaviors, Attitudes and Knowledge and Physical Activity Behaviors of 4th and 5th Grade Students in an Inner-city School" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
All four DNP students submitted manuscripts of their scholarly project for publication, none have been accepted thus far.

Use of Evaluation Results
We will continue to evaluate DNP portfolios and scholarly projects for incorporation of all DNP learning outcomes and their relationship to nursing advanced practice didactic and clinical experiences, and to require presentation and encourage publication submission of the scholarly project. HESI APRN exams will be administered to non FNP DNP students and results reported once obtained (projected HESI administration 2016). We will continue to obtain feedback from the DNP student graduates, and employers/advisory council and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

DNP_SON_08: Clinical Management

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome

Utilize advanced clinical judgement and specialty focused competencies to improve the care of diverse populations.

Data Collection (Evidence)

1. Portfolio(s) with evidence of learning outcome accomplishment
2. Presentation of the Scholarly Project (which addresses all DNP learning outcomes) at a peer reviewed local, regional, state or national professional health care event.
3. Publication of the Scholarly Project in a peer reviewed journal.
4. DNP End of Program Evaluations.
5. Employer/Advisory Council Evaluations.

Results of Evaluation

2014	2015	2016	2017	2018
Portfolio	4/4			
Scholarly Project Presentation	4/4			
Scholarly Project Publication	0/4			
Student End of Program Evaluation	4.0			
Employer/Advisory Council Evaluation	N/A			

* First DNP class graduated December 2014, no employer evaluations available as of yet

Four of four students submitted completed comprehensive portfolios to the DNP faculty.
Four of four students presented their scholarly project at a peer reviewed health care event. Two were prize winners at the event.
   -Poster presentation "Making Moves in the Delta: The Effects of Implementing the We Can! Energizing Our Families: Parent Program in an Elementary School at Jackson State University in Jackson MS, Misconceptions in Epidemiology, Healthcare Policy, and Health Disparities Symposium December 01, 2014. First Place Winner.
   -Poster presentation "Save a Foot, Save a Life: Implementation of an Evidence-Based Diabetic Foot Prevention Education Program" at the Mississippi Nurses Convention, Biloxi, MS October 2014. Second Place Winner.
   -Oral presentation "Influence of Prescribing Behavior and Clinical Decision Making of Primary Care Providers Using the Mississippi Prescription Monitoring Program" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
   -Oral presentation "Effects of a Healthy Lifestyle Education Program on Nutrition Behaviors, Attitudes and Knowledge and Physical Activity Behaviors of 4th and 5th Grade Students in an Inner-city School" MNA Roundtable at the Mississippi Nurses Convention, Biloxi MS, October 2014.
All four DNP students submitted manuscripts of their scholarly project for publication, none have been accepted thus far.

Use of Evaluation Results

We will continue to evaluate DNP portfolios and scholarly projects for incorporation of all DNP learning outcomes and their relationship to nursing advanced practice didactic and clinical experiences, and to require presentation and encourage publication submission of the scholarly project. HESI APRN exams will be administered to non FNP DNP students and results reported once obtained (projected HESI administration 2016). We will continue to obtain feedback from the DNP student graduates, and employers/advisory council and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

MSN-SON_01: Cultural Competence

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome

*Learning Outcome #1: Integrate nursing, related sciences, and emerging evidence to improve health outcomes and safety for diverse populations.
*Learning Outcomes changed for the 2012 calendar year – only FNP students were enrolled in the MSN program during the 2012 calendar year

Data Collection (Evidence)

Elsevier Evolve APRN HESI exam (a standardized exam administered at the end of program starting spring 2011); MSN end of program surveys (measures program outcomes conducted electronically through the capstone courses by faculty and IRP with aggregate data reported by the Program Effectiveness Committee (PEC) to the RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

Learning Outcome #1: Integrate nursing, related sciences, and emerging evidence to improve health outcomes and safety for diverse populations

YEAR	2012	2013	2014
EXAM	779	880	Exam 1: 503
	N/A	N/A	Exam 2: 599

MSN End of program surveys (Mean for LO #1)

YEAR	2012	2013	2014

| | 4.62 | 4.65 | 4.36 |

Employer/advisory council surveys (Mean for LO #1)

YEAR	2012	2013	2014
	4.25	5.0	4.5

Use of Evaluation Results
The APRN HESI exam is now required for graduation from the MSN program for the FNP students as the APRN final exam; Students are now given two opportunities to obtain the minimum score of 800 on the HESI APRN exam in the last semester. Students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will have to take and pass the traditional MSN comprehensive exam. Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the average scores for cultural competence in 2014 are less than the recommended performance score This is a decrease increase from the mean scores of of 880 in 2013 and 779 in 2012. The scores in 2013 increased after implementing the following changes in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. Faculty members will place added emphasis on this content throughout the curriculum. An individualized enrichment (remediation) plan will continue to be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas.
Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of 4.36 and 4.5 on a 5 point scale, respectively as compared to the 2013 score so 4.65 and 5.0 . These mean scores indicated that both students and employers/advisory council believed LO 1 was achieved "above average".
We will continue to obtain feedback from graduate students and employers/advisory council; monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for MSN programs of Family Nurse Practitioner (FNP), Nurse Administrator (NA), and Nurse Educator (NE) to revise curriculum as needed.

MSN-SON_02: Healthcare Delivery Systems

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
*Learning Outcome #2: Utilize leadership skills to design and implement strategies that improve care delivery and outcomes.

Delta State University FY2015 Unit Level Report
Department: Robert E. Smith School of Nursing

*Learning Outcomes changed for the 2012 calendar year – only FNP students were enrolled in the MSN program during the 2012 calendar year

Data Collection (Evidence)
Elsevier Evolve APRN HESI exam (a standardized exam administered at the end of program starting spring 2011); MSN end of program surveys (measures program outcomes conducted electronically through the capstone courses by faculty and IRP with aggregate data reported by the Program Effectiveness Committee (PEC) to the RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation
Learning Outcome #2: Utilize leadership skills to design and implement strategies that improve care delivery and outcomes.

YEAR	2012	2013	2014
EXAM	962	766	Exam 1: 888
	N/A	N/A	Exam 2: 894

MSN End of program surveys (Mean for LO #2)

YEAR	2012	2013	2014
	4.69	4.59	4.36

Employer/advisory council surveys (Mean for LO #2)

YEAR	2012	2013	2014
	4.25	5.0	4.5

Use of Evaluation Results
Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the overall average score of 891 is within the recommended performance score (800 or greater). This is an improvement from 2013 score of 766 in 2013 but still below the score of 962 in 2012. This is after implementing the following changes in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, students had two opportunities to make the minimum APRN HESI score required for completion of the program. Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that are now incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive

exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam. Two students did not score a cumulative score of 800 or more on either of the two HESI APRN exams and took the traditional written comprehensive exam. Both were successful on the comprehensive exam.

Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of 4.7 and 4.5 on a 5 point scale, respectively, the 2013 scores were 4.59 and 5.0 in 2013. These mean scores indicated that both students and employers/advisory council believed LO 2 was achieved "above average". We will continue to obtain feedback from graduate students and employers/advisory council; monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for MSN programs of Family Nurse Practitioner (FNP), Nurse Administrator (NA), and Nurse Educator (NE) to revise curriculum as needed.

MSN-SON_03: Monitoring/Ensuring Quality of Healthcare Practice

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome

*Learning Outcome #3: Contribute to the integration of healthcare services to improve quality and safety across the continuum of care.
*Learning Outcomes changed for the 2012 calendar year – only FNP students were enrolled in the MSN program during the 2012 calendar year

Data Collection (Evidence)

Elsevier Evolve APRN HESI exam (a standardized exam administered at the end of program starting spring 2011); MSN end of program surveys (measures program outcomes conducted electronically through the capstone courses by faculty and IRP with aggregate data reported by the Program Effectiveness Committee (PEC) to the RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

Learning Outcome #3: Contribute to the integration of healthcare services to improve quality and safety across the continuum of care.

YEAR	2012	2013	2014
EXAM	741	778	Exam 1: 734
			Exam 2: 690

MSN End of program surveys (Mean for LO #3)

YEAR	2012	2013	2014
	4.88	4.59	4.43

Employer/advisory council surveys (Mean for LO #3)

YEAR	2012	2013	2014
	4.25	5.0	4.5

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the average score of the two exams of 712 is below the recommended performance score of 800 or greater. This is a decrease from the 2013 score of 778 and of 741 in 2012 after implementing the following changes in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). These changes were implemented Spring 2013. Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that have been incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam. Two students did not obtain the HESI APRN minimum score of 800 on either exam but were successful on the written comprehensive exam.

Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of 4.7 and 4.5 as compared to 2013 scores of 4.59 and 5.0 on a 5 point scale, respectively. These mean scores indicated that both students and employers/advisory council believed LO 3 was achieved "above average".

We will continue to obtain feedback from graduate students and employers/advisory council; monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for MSN programs of Family Nurse Practitioner (FNP), Nurse Administrator (NA), and Nurse Educator (NE) to revise curriculum as needed.

MSN-SON_04: Theory/Research

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome

*Learning Outcome #4: Translate theory and research to provide evidence based nursing practice and improve outcomes.

*Learning Outcomes changed for the 2012 calendar year – only FNP students were enrolled in the MSN program during the 2012 calendar year

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Data Collection (Evidence)

Elsevier Evolve APRN HESI exam (a standardized exam administered at the end of program starting spring 2011); MSN end of program surveys (measures program outcomes conducted electronically through the capstone courses by faculty and IRP with aggregate data reported by the Program Effectiveness Committee (PEC) to the RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

Learning Outcome #4: Translate theory and research to provide evidence based nursing practice and improve outcomes.

YEAR	2012	2013	2014
EXAM	788	945	Exam 1: 526
	N/A	N/A	Exam 2: 463

MSN End of program surveys (Mean for LO #4)

YEAR	2012	2013	2014
	4.56	4.59	4.43

Employer/advisory council surveys (Mean for LO #4)

YEAR	2012	2013	2014
	4.0	5.0	4.5

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the mean score of the two exams of 475 is substantially below the 2013 score of 945 and below the recommended performance score of 800 or greater. This is also a decrease from the mean score of 788 in 2012. Curriculum changes implemented spring 2013 included : 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, faculty members also gave the APRN HESI exam twice during the final semester (1st exam to establish a baseline of knowledge and then the 2nd exam to note improvements and for a grade). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Students who scored at or above the recommended minimum score of 800 do not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam. Two students did not attain the minimum score of 800 on either of the HESI APRN exams, but were successful on the written comprehensive exam.

Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of 4.43 and 4.5 as compared to 2013 scores of 4.59 and 5.0 on a 5 point scale, respectively. These mean scores indicated that both students and employers/advisory council believed LO 4 was achieved "above average".

We will continue to obtain feedback from graduate students and employers/advisory council; monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for MSN programs of Family Nurse Practitioner (FNP), Nurse Administrator (NA), and Nurse Educator (NE) to revise curriculum as needed.

MSN-SON_05: Managing/Negotiating Health Care Delivery Systems

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
*Learning Outcome #5: Promote the use of information and communication technologies to provide safe, quality, and cost effective healthcare.
*Learning Outcomes changed for the 2012 calendar year – only FNP students were enrolled in the MSN program during the 2012 calendar year

Data Collection (Evidence)
Elsevier Evolve APRN HESI exam (a standardized exam administered at the end of program starting spring 2011); MSN end of program surveys (measures program outcomes conducted electronically through the capstone courses by faculty and IRP with aggregate data reported by the Program Effectiveness Committee (PEC) to the RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation
Learning Outcome #5: Promote the use of information and communication technologies to provide safe, quality, and cost effective healthcare.

	2012	2013	2014
EXAM	741	789	Exam 1: 922
	N/A	N/A	Exam 2:585

End of program surveys (Mean for LO #5)

YEAR	2012	2013	2014
	4.75	4.71	4.50

/advisory council surveys (Mean for LO #5)

YEAR	2012	2013	2014
	4.0	5.0	4.0

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the average score of 754 is below the 2013 score of 789 and is also below the recommended performance score of 800 or greater. This is an increase from the mean score of 741 in 2012 after implementing the following changes in the FNP curriculum spring 2013: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, faculty members also gave the APRN HESI exam twice during the final semester (1st exam to establish a baseline of knowledge and then the 2nd exam to note improvements and for a grade). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam. Two students did not score 800 or more on the two HESI APRN exams but were successful on the written comprehensive exam.

Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of4.5 and 4.0 as compared to 2013 scores of 4.71 and 5.0 on a 5 point scale, respectively. These mean scores indicated that both students and employers/advisory council believed LO 5 was achieved "above average".

We will continue to obtain feedback from graduate students and employers/advisory council; monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for MSN programs of Family Nurse Practitioner (FNP), Nurse Administrator (NA), and Nurse Educator (NE) to revise curriculum as needed.

MSN-SON_06: Legal and Regulatory Issues

Start: 7/1/2014
End: 6/30/2015
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Learning Outcome

*Learning Outcome #6: Analyze and interpret the effects of healthcare policies, ethics, and regulatory processes to influence practice and outcomes.
*Learning Outcomes changed for the 2012 calendar year – only FNP students were enrolled in the MSN program during the 2012 calendar year

Data Collection (Evidence)

Elsevier Evolve APRN HESI exam (a standardized exam administered at the end of program starting spring 2011); MSN end of program surveys (measures program outcomes conducted electronically through the capstone courses by faculty and IRP with aggregate data reported by the Program Effectiveness Committee (PEC) to the RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

Learning Outcome #6: Analyze and interpret the effects of healthcare policies, ethics, and regulatory processes to influence practice and outcomes.

YEAR	2012	2013	2014
EXAM	760	669	Exam 1: 1002
			Exam 2: not tested

MSN End of program surveys (Mean for LO #6)

YEAR	2012	2013	2014
	4.62	4.65	4.43

Employer/advisory council surveys (Mean for LO #6)

YEAR	2012	2013	2014
	4.0	5.0	4.0

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the score of 1002 is well above the 2013 score of 669 and the recommended performance score of 800 or greater. Curriculum changes implemented in spring 2013 will continue: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Future plans are to use the 2nd APRN HESI as the APRN final exam; students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam. Two students did not obtain the required 800 score on either of the HESI APRN exams but were successful on the written comprehensive exam.

Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of 4.43 and 4.0 as compared to 2013 scores of 4.65 and 5.0 on a 5 point

scale, respectively. These mean scores indicated that both students and employers/advisory council believed LO 6 was achieved "above average".

We will continue to obtain feedback from graduate students and employers/advisory council; monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for MSN programs of Family Nurse Practitioner (FNP), Nurse Administrator (NA), and Nurse Educator (NE) to revise curriculum as needed.

MSN-SON_07: Professional Role

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
*Learning Outcome #7: Employ collaborative leadership strategies to advocate, mentor, and function within inter-professional teams and partnerships.
*Learning Outcomes changed for the 2012 calendar year – only FNP students were enrolled in the MSN program during the 2012 calendar year

Data Collection (Evidence)
Elsevier Evolve APRN HESI exam (a standardized exam administered at the end of program starting spring 2011); MSN end of program surveys (measures program outcomes conducted electronically through the capstone courses by faculty and IRP with aggregate data reported by the Program Effectiveness Committee (PEC) to the RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation
Learning Outcome #7: Employ collaborative leadership strategies to advocate, mentor, and function within inter-professional teams and partnerships.

YEAR	2012	2013	2014
EXAM	759	773	Exam 1: 811
			Exam 2: 828

MSN End of program surveys (Mean for LO #7)

YEAR	2012	2013	2014
	4.62	4.65	4.43

Employer/advisory council surveys (Mean for LO #7)

YEAR	2012	2013	2014
	4.0	5.0	4.5

Use of Evaluation Results
Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI APRN Exit Exam, the average score of 820 from the two exams is predictive of success and above the recommended performance score of 800 or greater. This is also an increase from the 2013 score of 773 and the 2012 score of 759 after implementing the following changes in spring 2013 in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam. Two students did not score at or above 800 but were successful on the written comprehensive exam.
Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of4.43 and 4.5 as compared to 2013 scores of 4.65 and 5.0 on a 5 point scale, respectively. These mean scores indicated that both students and employers/advisory council believed LO 7 was achieved "above average".
We will continue to obtain feedback from graduate students and employers/advisory council; monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for MSN programs of Family Nurse Practitioner (FNP), Nurse Administrator (NA), and Nurse Educator (NE) to revise curriculum as needed.

MSN-SON_08: Health Promotion and Disease Prevention
Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
*Learning Outcome #8: Integrate individual and populations based health promotion and prevention strategies to provide equitable, efficient, and effective global healthcare.
*Learning Outcomes changed for the 2012 calendar year – only FNP students were enrolled in the MSN program during the 2012 calendar year.

Data Collection (Evidence)
Elsevier Evolve APRN HESI exam (a standardized exam administered at the end of program starting spring 2011); MSN end of program surveys (measures program outcomes conducted electronically through the capstone courses by faculty and IRP with aggregate data reported by the Program

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Effectiveness Committee (PEC) to the RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

Learning Outcome #8: Integrate individual and populations based health promotion and prevention strategies to provide equitable, efficient, and effective global healthcare.

YEAR	2012	2013	2014
EXAM	795	884	Exam 1: 948
	N/A	N/A	Exam 2:890

MSN End of program surveys (Mean for LO #8)

YEAR	2012	2013	2014
	4.88	4.65	4.43

Employer/advisory council surveys (Mean for LO #8)

YEAR	2012	2013	2014
	4.0	5.0	4.0

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the average score of the two exams of 919 exceeds the 2013 score of 884 and is also above the recommended performance score of 800 or greater. This continues an increasing trend from the mean score of 795 in 2012 after implementing the following changes in the FNP curriculum spring 2013: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam. Two students did not obtain a score of 800 on either exam but were successful on the written comprehensive exam.

Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of 4.43 and 4.0 as compared to 2013 scores of 4.65 and 5.0 on a 5 point scale, respectively. These mean scores indicated that both students and employers/advisory council believed LO 8 was achieved "above average".

We will continue to obtain feedback from graduate students and employers/advisory council; monitor ratings and recommendations for improvement. Faculty members will continue to monitor national

nursing education, APRN competencies, and practice standards for MSN programs of Family Nurse Practitioner (FNP), Nurse Administrator (NA), and Nurse Educator (NE) to revise curriculum as needed.

MSN-SON_09: Clinical Management

Start: 7/1/2014
End: 6/30/2015
Providing Department: Robert E. Smith School of Nursing

Learning Outcome
*Learning Outcome #9: Apply advanced knowledge, skills, and competencies to design, implement, and evaluate direct and indirect care for individuals, families, and communities.
*Learning Outcomes changed for the 2012 calendar year – only FNP students were enrolled in the MSN program during the 2012 calendar year

Data Collection (Evidence)
Elsevier Evolve APRN HESI exam (a standardized exam administered at the end of program starting spring 2011); MSN end of program surveys (measures program outcomes conducted electronically through the capstone courses by faculty and IRP with aggregate data reported by the Program Effectiveness Committee (PEC) to the RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation
Learning Outcome #9: Apply advanced knowledge, skills, and competencies to design, implement, and evaluate direct and indirect care for individuals, families, and communities.

YEAR	2012	2013	2014
EXAM	756	796	Exam 1: 872
	N/A	N/A	Exam 2: 817

MSN End of program surveys (Mean for LO #9)

YEAR	2012	2013	2014
	4.81	4.65	4.29

Employer/advisory council surveys (Mean for LO #9)

YEAR	2012	2013	2014
	4.0	5.0	4.0

Use of Evaluation Results

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Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the average score of the two exam of 845 is above the recommended performance score of 800 or greater and also above the 2013 score of 796. This is also an increase from the mean score of 756 in 2012. The following changes were implemented in spring 2013 in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam. Two students did not score 800 on either of the two HESI APRN exams, but were successful on the written comprehensive exam.

Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of 4.29 and 4.0 as compared to 2013 scores of 4.65 and 5.0 on a 5 point scale, respectively. These mean scores indicated that both students and employers/advisory council believed LO 9 was achieved "above average".

We will continue to obtain feedback from graduate students and employers/advisory council; monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education, APRN competencies, and practice standards for MSN programs of Family Nurse Practitioner (FNP), Nurse Administrator (NA), and Nurse Educator (NE) to revise curriculum as needed.

Unit Goals

SON 2015_01: Develop and maintain high quality graduate and undergraduate curricula

Start: 7/1/2014
End: 6/30/2015

Unit Goal

The Robert E. Smith School of Nursing will continue to develop and maintain high quality graduate and undergraduate curricula that are sensitive to health care needs of a multicultural society.

Evaluation Procedures

a. Collection of aggregated student data related to program effectiveness annually.
b. Recruitment and retention of qualified nursing faculty as needed.
c. Continued participation in educational consortium agreement (MECDNP).
d. Incorporate innovative technology into the curriculum.
e. Progression in the GAP analysis of BSN curriculum (both BSN and RN-BSN programs of study)
f. Review and revision of the baccalaureate curriculum (both BSN and RN-BSN programs of study) based on findings of the GAP analysis.
g. Prepare for RN-DNP initial MS IHL and CCNE accreditation visit.
   1. Demonstrate placement of AACN essentials in all BSN (including RNBSN) courses.
   2. Review and revise graduate level FNP curriculum to reflect inclusion of current FNP competencies.
   3. Demonstrate placement of AACN essentials and FNP competencies in all graduate core and FNP specialty courses.
   h. Incorporate QSEN criteria into the graduate nursing program.

Actual Results of Evaluation

Results of evaluation:

- BSN mean HESI score (national percentile rank),see attached file 2013 Learning Outcomes.

YEAR	2006	2007	2008	2009	2010	2011	2012	2013	2014
EXAM 1	757(23)	771(31)	850(55)	877(49)	967(83)	939(73)	972(81)	951(74)	910(49)
EXAM 2	864(51)	815(43)	864(59)	879(49)	888(64)	972(81)	939(73)	932(69)	901(49)
EXAM 3	854(48)	816(43)	854(55)	884(67)	900(67)	943(74)	946(74)	928(68)	887(49)

- BSN NCLEX-RN 1st write pass rates

YEAR	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
RATE	89%	94%	78%	75%	85%	72%	83%	97%	96%	97%	96%	85%*	84%

*The National Council of State Boards of Nursing (NCSBN) increased the passing standard of the NCLEX-RN by one logit effective spring 2013. The National 1st write

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NCLEX-RN pass rate for 2013 was 82%
https://www.ncsbn.org/Table_of_Pass_Rates_2014.pdf.
The overall NCLEX-RN pass rate since 2010 (first plus subsequent writes) is 100%;
with the exception of 2013 at 95% (one graduate has not retaken the NCLEX-RN exam
after the first write).

- Graduate APN mean HESI score (national mean score-no percentile rank)

2011	2012	2013	2014
701/817	747/826	795/859	859/830

- APN Certification Exam pass rate

Graduate APN Certification pass rate

YEAR	2002	2003	2004	2005	2006	2007	2008
RATE	88%	100%	100%	100%	100%	100%	100%

YEAR	2009	2010	2011	2012	2013	2014
RATE	100%	100%	100%	100%	100%	100%

- Results of analysis for accreditation essentials and guidelines for undergraduate and graduate programs

Twenty six (26) course syllabi for the BSN (NUR 305, 309, 335, 402, 405, 408, 442 and 445), RNBSN (309, 311, 314 and 331), MSN (620, 612, 616, 620, 621, 623, 624, 625, 642 and 646), and DNP (704, 708, 720, and 790) programs were audited during the spring, summer, and fall semesters of 2013. The linking of AACN Essentials process began in the fall of 2013 at the MSN Level. Since some courses scheduled for audit were not offered, there is no data to report, see attached file Standard III: Program Quality and Course Audit 2014.
The undergraduate program was analyzed for incorporation of AACN Essentials/Competencies fall 2104. Expected individual student learning outcomes are consistent with the roles for which the program is preparing its graduates. Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines which are clearly evident within the curriculum, expected individual student learning.
The graduate curriculum was reviewed for incorporation of the AACN Essentials/Competencies. Each Essential/Competency was incorporate into one or more courses, see attached files Essentials/Competencies review 2014 and Three Year Course Audit.

- Results of BSN analysis

The Undergraduate Program curriculum was assessed with comparison to national trends, national and state accreditation standards/essentials, the licensure exam blueprint (NCLEX-RN), and societal needs. The Curriculum Redesign project spearheaded by the MS Office of Nursing Workforce and the Mississippi Council of Deans and Directors of Nursing Programs was postponed due to the national and state accreditation self-study and site visit February 2015. The BSN and RNBSN curriculum resume analysis for

eleven (11) nurse of the future competencies, i.e. Patient Centered Care, Professionalism, Leadership, System Based Practice, Informatics, Communication, Teamwork and Collaboration, Safety, Quality Improvement, Evidence Based Practice and Nursing Knowledge in the future.

- *Community of Interest* (COI) evaluations: results of student evaluations each semester of faculty, courses, clinical courses, clinical agencies and preceptors, alumni, employers, and the Advisory Council evaluation forms, see file Standard IV: Program Effectiveness.

Student biannual evaluations
Students evaluate faculty, courses, clinical courses, clinical agencies and preceptors each spring and fall semester. All met or exceeded the benchmark of receiving at least a score of 3.0 on student evaluations, see attached file Faculty Benchmarks 2013.
BSN, RNBSN and MSN end of program satisfaction evaluations
The undergraduate and graduate students rated the program outcomes favorably, with BSN scores ranging from 4.57-4.71, RNBSN scores ranging from 4.42-4.67, and MSN scores ranging from 4.59-4.76. Alumni completed one and three year surveys and scored the nursing program learning outcomes BSN-1yr 4.29-4.71, BSN 3yr 4.0-5.0; RNBSN 1yr 4.5 for all outcomes, RNBSN 3yr 3.8 for all outcomes; MSN 1yr 4.0-4.67, MSN 3yr 3.5-3.75, see files titled BSN end of program, one year evaluations and three year evaluations; RNBSN end of program, one year evaluations and three year evaluations; and MSN end of program, one year evaluations and three year evaluations,
Employer satisfaction evaluations
Employers of nursing graduates (undergraduate and graduate) rated the program a 4.67 out of 5 on all program learning outcomes, see file titled Employer Survey.
Advisory Council survey
Six surveys were returned by Employers/Advisory Council members for 2014.
100% of employers expressed satisfaction with the program(s) of study and with graduate performance in the workplace. A score of 3.0 or better was received on all questions included in the Employer Survey.
- Results of feasibility of simulation lab accreditation
Due to budget constraints, accreditation of the simulation lab will be postponed at this time.
- Feasibility of incorporation of QSEN criteria into graduate nursing program
Initiation of incorporation of QSEN criteria is planned for fall 2014.
- Enhance/maintain Faculty Expertise through continuing education and faculty practice
The Faculty Development Committee did not offer any continuing education opportunities in 2014 for nursing faculty, however, funding was sufficient ($1,000 per faculty member) for each faculty member to meet the MS IHL requirements of at least 10 contact hours annually. See attached file Faculty Development Annual Report.
All nursing faculty members attended continuing education programs offered off campus and attained at least 10 CEU's as required by Mississippi IHL accreditation standards. The mean number of CEU's attained during 2014 was 38.24, see attached file Standard IV - 2104, pages 23-27, Faculty Benchmarks 2014, benchmark #1.
Non-doctoral prepared faculty members are encouraged to pursue doctoral degrees, especially in nursing as the advent of the Doctor of Nursing Practice (DNP) programs offers another opportunity for nursing faculty to obtain an additional advanced/terminal degree in their discipline. One non-doctorally prepared nurse practitioner faculty member started a DNP program in fall 2014 and is on track to complete December 2015. An additional faculty member has interest in starting a DNP program within the next calendar year.
Thirteen out of 15 faculty members engaged in faculty clinical practice during 2014, see attached file Standard IV - 2104, pages 23-27, Faculty Benchmarks 2014, benchmark #10.
See also attached file Faculty Benchmarks Aggregated Data 2010-2014.

Use of Evaluation Results

a. Undergraduate and Graduate Program curriculum

   1. Continued modification of undergraduate and Graduate Programs based on IHL standards for nursing programs, AACN essentials, NONPF guidelines, QSEN recommendation, student, alumni and employer feedback.

   2. Preparation for MS IHL and CCNE accreditation site visit spring 2015 for new RN-DNP program.

   3. Continuation of work on the GAP analysis with Mississippi Deans and Directors Council of Schools of Nursing and redesign of nursing education as needed.

   4. Strategization of methods that will increase participation of the Nursing Advisory Council in evaluation of the nursing program.

   5. Hiring of additional qualified faculty members as student numbers increase.

   6. Continuation of integration of nursing, related sciences, and emerging evidence to improve health outcomes and safety for diverse populations.

   7. Continuation of utilization of leadership skills to design and implement strategies that improve care delivery and outcomes.

- 2014 Annual Report Faculty Development Committee
- 2014 BSN 1 Year BSN Alumni Survey -Final-1
- 2014 BSN 3 Year BSN Alumni Survey -Final
- 2014 BSN End of Program Satisfaction Survey -Final Draft
- 2014 DNP Program Satisfaction Survey_Report
- 2014 RN_BSN Program Satisfaction Survey - Final Copy as of 11 03 2014
- FACULTY_BENCHMARKS_2010_2014
- MSN 3 year alumni survey_2014report_2011graduates
- MSN Program Satisfaction Survey_2014
- PEC Advisory Council Employer Survey Report 2014
- STANDARD IV_2014_version02-9-15___A_B_C_D_E_F_G_H

SON 2015_02: Maintain and increase recruitment and retention of nursing students

Start: 7/1/2014
End: 6/30/2015

Unit Goal
The School of Nursing will increase enrollment and graduation rates.

Evaluation Procedures
Feedback through the comprehensive School of Nursing MPE, in particular: recruitment (community college, public school, health care facility career fairs, etc) and community service activities (health fairs, 1st aid booths, etc), admission, enrollment and retention data, results of Institutional Research reports of student evaluations of each nursing course, faculty, clinical, clinical faculty, clinical site(s), and preceptors. Results from the *Community of Interest (COI):* all programs (BSN, RNBSN, MSN, DNP) nursing student End of Program Satisfaction surveys, one and three year alumni surveys, employer surveys, and advisory council surveys.

Delta State University FY2015 Unit Level Report
Department: Robert E. Smith School of Nursing
Actual Results of Evaluation

Results of Evaluation:

Implement DNP program

The DNP program was initiated fall 2013 with six students (5 post master's, 1 post baccalaureate) starting the program of study. Four completed the program of study. The remaining two withdrew for non-academic reasons; the program graduation/completion rate is calculated as the percent of students with a date of graduation that is accomplished $\leq$ 150% of the date they started the program, excluding those who left the program for non-academic reasons, as per MS IHL and CCNE accreditation standards. This gives us a DNP graduation rate of 100%.

Utilize Marketing Plan to increase enrollment in the RN-BSN and MSN programs

Results of implementation of this plan:

Nursing faculty reported participating in 37 recruitment activities for 2014 that included recruiting at clinical sites of health care facilities (left brochures, personal communications, etc.). See attached file Faculty Benchmarks. Nursing faculty and staff made contact and followed up with 57 family/friends of summer 2014 orientees, and attended and made follow up contact with attendees

at 21 fall 2014 recruitment events (included in the 37 activities above) for a total of 757 documented contacts for a total of 932 contacts with follow up, see attached file Student Affairs Annual Report.

Utilize the Student Retention and Remediation (Enrichment) Plan for undergraduate and graduate programs.

The BSN retention plan was developed considering its on campus delivery. Specific retention strategies used are:

1. HESI Admission Assessment Exam
2. Orientation
3. SUPPORT Program for family members
4. Boot Camp
5. Program Advisement
6. Course Advisement
7. Referral to the Academic Support Lab
8. Referral to the Writing Center
9. Referral to the Testing and Counseling Center
10. Math Seminar
11. ATI Modules
12. HESI Examinations and Platinum Package for preparation for examinations
13. NUR 408 Nursing Synthesis

Using State and National accreditation criteria for graduation rates, the BSN graduation rate for the class of 2014 was 89%.

The RNBSN retention plan was developed considering its online delivery. Specific retention strategies are:

1. Orientation– offered both on campus and online.
2. Program Advisement –on campus and online
3. Course Advisement
4. Critical Thinking Examination
5. Referral to the Academic Support Lab
6. Referral to the Writing Center
7. Referral to the Testing and Counseling Center

Using State and National accreditation criteria for graduation rates, the RN-BSN graduation rate for the class of 2014 was 91%.

The MSN retention plan was developed considering its online delivery. Specific retention

strategies are:

1. Orientation – offered on campus and online
2. Program Advisement
3. Course Advisement
4. Referral to the Academic Support Lab
5. Referral to the Writing Center
6. Referral to the Testing and Counseling Center
7. HESI Examinations
8. NUR 680 Family Nurse Practitioner Review Course.

Using State and National accreditation criteria for graduation rates, the MSN graduation rate for the class of 2014 was 94%.
2014 Enrollment and retention of undergraduate and graduate students.
Undergraduate
BSN
a. 100+ students applied to the BSN program, 85 were qualified, 60 were sent acceptance letters and 25 sent alternate letters. 60 actually started the program of study fall 2014**.**
b. Admissions to the pre-licensure BSN nursing program increased by 58% (from 38 to 60) for fall 2014.
c. Nursing boot camp has continued to be well received by nursing students starting the program of study fall 2014.
RNBSN
a. 19 (as compared to 29 in 2103) RN students applied to the RNBSN program, 19 were
qualified and sent acceptance letters and 11 actually started the program of
study. Admissions remained stable from summer 2013-fall 2014 (11 to 11).
b. Students continue to be positive regarding the online course delivery; the combination
of extremely limited, optional in-class time & online is a good balance and facilitates
academic progress while employed.
c. On-line efforts will continue as appropriate for course learning activities for the RNBSN program.
The two semester RNBSN program was initiated in fall 2014.
Graduate
MSN
a. 24 students applied to the MSN program (all NPs), 19 were qualified and sent letters
of acceptance and 15 actually started the program of study fall 2013). There were no applicants for
either the Nurse Administrator or Nurse Educator options for this year. Admissions remained stable
from fall 2013-fall 2014 (15 to 15).
b. On-line efforts will continue as appropriate for course learning activities for the
MSN   program.
DNP
a. 22 students applied to the DNP program, 10 were qualified and sent letters of acceptance and 6
actually started the program of study fall 2013. Four completed the program December 2014.
c. On-line efforts will continue as appropriate for course learning activities for the RNDNP program.
Monitor retention/graduation rates per MS IHL and CCNE accreditation standards.
1. The program completion rate is calculated as the percent of students with a date of graduation that
is accomplished $\leq$ 150% of the date they started the program, excluding those who left the program
for non-academic reasons, as per MS IHL and CCNE accreditation standards.
2. The accreditation required standard for average completion rates for all program
levels (BSN, RN-BSN, MSN) for the three (3) most recent calendar years is 70% or higher
The BSN, RNBSN, MSN and DNP programs all exceeded this standard.

4. The 2014 BSN completion rate was 89%, RNBSN was 91%, MSN was 94%, and DNP was 100% using the accreditation criteria above. Please see attached files Standard IV: Program Effectiveness and Graduation Rates.

Evaluate, maintain and obtain current and new support resources

Grant funding to increase student and faculty numbers, student retention, and facility expansion as needed. The nursing program was successful in obtaining HRSA grant funding in the amount of $1,467,896.00 over the next 3 years (2013-2016) for a Delta States Rural Development Network Grant for Service Region A, PI Dr. Shelby Polk, in the amount of $1,574,546.00. This grant funded a Healthy Lifestyles Center in Cleveland, with similar health education and services planned for Ruleville and Leland, MS. Over the next two years, services will expand to 20 Mississippi Delta counties. A HRSA AENT grant (PI Dr. Vicki Bingham) was funded in the amount of $329,632 and will be utilized for MSN FNP scholarships. The HRSA MECDNP grant has one year remaining in the amounts of $20,000 and has been used to purchase equipment for the NP student practice clinic rooms, faculty development, and commodities. We plan to continue to explore alternate sources of funding for faculty positions, student scholarships and other learning resources to maintain mandated accreditation agency faculty student FNP ratios, and updating equipment while maintaining/increasing admissions.

The faculty benchmark for student advising was met in 2014 with 100% (15/15) of nursing faculty members participating in spring and fall 2014 early registration, and individual advising as well. The Total number of students advised in 2014 = 657, the average # students/faculty member advised/faculty = 43.8. See file Faculty Benchmarks 2010-2014.

Use of Evaluation Results

1. Revise marketing and recruitment plan as needed and as resources allow
2. Continued implementation of, with refinement as needed, the student retention plan
3. Enhancement of the physical learning environment as resources allow
4. Evaluation and maintenance of current support resources

- FACULTY_BENCHMARKS_2010_2014
- StdAffairs2014annualreport

SON 2015_03: Maintain Community Support by increasing Outreach, Service, and Partnerships; Offer a Wellness Program via the Nursing Healthy Lifestyles Center to provide the University and Community the Opportunity to Know the Benefits of Healthy Living.
Start: 7/1/2014
End: 6/30/2015

Unit Goal
The School of Nursing will strive to increase outreach, service, and partnership initiatives to benefit the citizens of the region through the wellness program(s) offered by the School of Nursing's Healthy Lifestyles Center, maintain community support by active participation of nursing with the community of interest (COI), and maintain relationships with all donors.

a. Support evidence-based research initiatives to improve healthcare in the Delta region
b. Participate in service-learning activities
c. Provide continuing education initiatives for the nursing and medical community
d. Seek funding partnerships
e. Seek continued grant funding for the School of Nursing Healthy Lifestyles Center

Evaluation Procedures

Report of volunteer learning activities for nursing faculty members and students per the Student Affairs Annual Report and the report of service learning hours. Number of nursing and/or medical continuing education offerings per the Faculty Development Annual Report. Date of the Healthy Lifestyles Center's opening. Reports of successful grant and other outside funding, research based health initiatives, service learning activities, and IHL requirements for continuing education, as well as support professional coursework per the MPE Faculty Benchmark report and/or individual Faculty "Brag Facts."

Actual Results of Evaluation

1. Maintenance/increase in nursing scholarships/outside funding. Event participation by nursing faculty and students to increase/maintain visibility of the RESSON.
Results of Evaluation:
Maintenance/increase in nursing scholarships/outside funding.
   The school of nursing designated additional funding for specified Robert E. Smith Nursing Scholarships (2 recruitment, 2 retention and 4 contingency scholarships) from the estate gift of Robert E. Smith.
Scholarships
1. Kennedy Joli Smith Nursing Scholarship
2. Dana Lamar Nursing Scholarship
3. Samuels Nursing Scholarship
4. Branton-Woodall Nursing Award
5. American Legion Auxillary Scholarship
6. Dr Barbara Powell Scholarship
7. North Sunflower Medical Future Nurse Scholarship
8. Arlene Ward Bradshaw Nursing Award
9. Bryan/Hafter March of Dimes
10. James B Stone Scholarship
11. Nursing School Scholarship
12. Ferretti/Karnstedt Nursing Scholarship
13. Dr & Mrs Thomas Clay School of Nursing Scholarship
14. Hollingsworth Scholarship
15. Kate Kittle Memorial Scholarship
16. Kate Smith Kittle Memorial
17. Eugene Kittle Sr Memoral Nursing Scholarship
18. Blake Nursing Scholarship
19. Ellis Nursing Scholarship
20. Louise Brown Memorial Nursing Scholarship
21. Robert E. Smith Nursing Scholarships
22. Hilpert Family Nursing Scholarship
Event participation by nursing faculty and students to increase/maintain visibility of the School of Nursing.

10/15 faculty members, both staff members, and students participated in a total of 37 recruitment events; see attached file Faculty Benchmarks 2014 and Student Affairs Annual Report, 31of which were documented recruitment events (with participants turning in contact cards requesting more information), during summer orientations, through tours of the nursing building, at various Mississippi health care facilities, associate degree nursing program career fairs, and in community events (community health fairs and first aid booths at Crossties, Octoberfest, and at each DSU home football game), 3,029 documents contacts and follow up were made, see attached file Standard IV Faculty Benchmarks 2014.

2. Continued support of nursing faculty as appropriate to accommodate their IHL requirements and personal professional coursework while maintaining excellence in program provisions for the SON. $1,000 per faculty member was available during 2014 for faculty development activities. 100% (15/15) of faculty members obtained at least 10 CEUs in 2014. Total CEUS = 573.6; average CEUS/faculty = 38.24/faculty member. See attached file Standard IV, Faculty Benchmarks, benchmark #1.

4. Grant funding was approved for continuation in 2014 for the Healthy Lifestyles Center that will be staffed by School of Nursing faculty and is used as a clinical agency for nursing students at all levels (undergraduate and graduate), particularly for FNP students for health assessment check-offs and other clinical check-offs.

5. Support of students and faculty has continued as appropriate and as resources are available to accommodate research based health initiatives, service learning activities, and IHL requirements for continuing education, as well as support professional coursework, while maintaining excellence in program provisions.
8/15 (53.3%) faculty presented research during 2014. Faculty presentations at the local level = 1; faculty presentations at state level = 4; faculty presentations at regional level = 4; faculty presentations at national level = 1.

6. The School of Nursing continues to be active in initiatives to improve healthcare in the Delta Region (Healthy Lifestyle Center [HLC]-over 1000 clients and health care providers have been served through the HLC thus far) and in service-learning activities (N = 18 for a total of 33,286 volunteer hours). These activities will continue as feasible and as funding is available.

7. Communication of nursing activities continues to be facilitated through the use of the *Pulse (*the biannual SON newsletter)*, Post It Notes*, the DSU e-news flyer, and the individual information centers in departments, DSU library displays, and through campus e-mail.

Use of Evaluation Results
Continued support of nursing faculty as appropriate to accommodate IHL continuing education requirements and personal professional coursework while maintaining excellence in program provisions for the SON. Maintained support of the School of Nursing SNA and faculty community outreach activities. Establishment/continuation of nursing faculty practice and graduate student clinical experiences in the Healthy Lifestyles Center.
The School of Nursing is very active in initiatives to improve healthcare in the Delta Region and in service-learning activities. These activities will continue as feasible. Additional funding will be sought to continue support of the HLC after the initial grant period ends in 2016.
The School of Nursing will continue to support students and faculty as appropriate and as resources are available, to accommodate research based health initiatives, service learning activities, and IHL requirements for continuing education, as well as support professional coursework, while maintaining excellence in program provisions.
Based upon feedback, additional health information will be provided to participants at health fairs and other nursing community activities. Additional assessments will also be considered and implemented when feasible. Communication will continue to be facilitated through the use of the *Pulse (*the biannual SON newsletter)*, Post It Notes*, the DSU e-news flyer, and the individual

information centers in departments, DSU library displays, and through campus e-mail. Graduates working in the Delta will continue to serve as a recruitment avenue for future classes.

SON 2015_04: Ensure Data Integrity

Start: 7/1/2014
End: 6/30/2015

Unit Goal

All nursing faculty members will appropriately trained in Banner advising

Evaluation Procedures

1. Report of annual Banner training/updates in the Faculty Development Annual Report with faculty sign-in sheet.
2. Report of Banner advisement training for new faculty members.
3. At least 20% of nursing student files will be reviewed annually for evidence of advisement on the Nursing Interaction Form and for accuracy and completion.

Actual Results of Evaluation

1. New nursing faculty members will report receiving Banner training.
The School of Nursing hired one new faculty member in 2014 and she received Banner training during her new faculty orientation in August.
2. Nursing faculty members will be trained/updated annually in the use of Banner data for student advisement.
Judy Haney, Senior Secretary for the RESSON gave 100% (15/15) of nursing faculty members refresher training in the use of CAPP August 18, 2014. A headcount was done instead of a sign-in roster. See attachment Faculty Development Annual Report.
3. Nursing students will be advised using accurate Banner data by nursing faculty advisers.
Nursing faculty members have reported using Banner's CAPP and Degree Audit programs when advising students.
4. Nursing faculty members will document student advisement using the Nursing Interaction Form.
87% (13/15) of nursing faculty members documented student advisement using the Nursing Interaction form during spring and fall 2014 early registration. Faculty members were reminded of the importance of documentation evidence when advising students.
5. Reviewed nursing student files will be accurate and complete.
30% (106/350) of the nursing student folders on file in the RESSON were reviewed. 90% (95/016) had complete transcripts, completed interaction forms, health requirements (TB skin test, immunizations) and CPR certifications on file. 10% were missing one or more required documents. Students were notified and corrections made for 100% completion of documentation.

Use of Evaluation Results

1. Increase in faculty comfort with and use of Banner student advisement programs.
2. More accurate and timely advising of students.
3. More accurate and complete documentation in student folders.

- 2014 Annual Report Faculty Development Committee
- STANDARD IV_2014_version02-9-15   A_B_C_D_E_F_G_H

SWOT analyses

📏 Nursing SWOT Analysis CY 2014
Start: 7/1/2014
End: 6/30/2015

Strengths
1. Diverse, highly qualified and engaged faculty and staff
2. Highly qualified students and graduates
3. Physical resources
a. Adequate space to accommodate increased admissions of pre-licensure BSN students (the other programs are online).
    b. identification and furnishing of a dedicated study area.
     c. Technology resources
        1. Simulation Lab
        2. Computer Lab
        3. SMART Classrooms
4. RNDNP program 1st cohort graduated December 2014, Fall 2014 new enrollment N = 3; all are progressing and on track for program completion.
5. Two semester RNBSN program started fall 2014 with 18 admitted; substantial growth in this program is anticipated
6. External support
    a. Grant funding obtained for selected MSN FNP students from the HRSA AENT grant program
    b. Grant funding continued for year two from HRSA for the Healthy Lifestyles Center
    c. Additional monies available for Robert E. Smith nursing scholarship
5. Increased faculty recruitment efforts; one new nursing faculty member hired.

Weaknesses
1. Aging technology (simulation mannequins and computers).
2. Limited funding for IHL mandated nursing faculty development.
3. Obtaining stable resources to fund additional faculty members to accommodate increased nursing students admissions remains a challenge.

Opportunities
1. Changing to a two semester RNBSN program of study will likely increase admissions to that program
2. HRSA AENT grant funding for graduate students
3. Potential for increase in graduate admissions as with RNDNP program continues to be successful.
4. Additional monies (total $3,100,000) received from the Robert Smith estate for nursing school needs, including student scholarships may help address needs to update technology, for faculty development, and offer additional help to students experiencing financial difficulties.

Threats
Decreased faculty morale and complaints due to financial constraints

Executive Summaries

⚙️Executive Summary SON_CY_2014

Diversity Compliance Initiatives and Progress
Plan of Compliance
The School of Nursing had a complement of 15 full-time faculty members in spring and fall 2014. Three (3) of the full-time faculty (20%) are African-American.Recruitment efforts continue to target a national pool with specific online advertisements to Minority Nurse, an AACN listserve of deans of school of nursing in liberal arts and small colleges and universities and the National Student Nurses' Association broadcast email for faculty positions. Approximately 24% (n = 12) of the School of Nursing's Advisory Council members (N = 50) are African-American.
2. Describe faculty exchange arrangement between "other race" institutions and indicate the number of faculty members involved.
There were no faculty exchange arrangements during 2014.
Describe the special efforts made to assist incumbent "other race" personnel to upgrade credentials for promotions to higher ranked positions. Indicate the number of employees involved. All three African American faculty members graduated from nursing doctoral programs with financial assistance from the school of nursing. All three are also now in tenure track positions.
3. Identify distinguished professorships of "other race" personnel brought to the campus in 2012.
No distinguished professorships of "other race" personnel were brought to the campus for the school of nursing in 2014.
4. Describe the cooperative programs involving both faculty and students between "other race" institutions and indicate the number of persons involved.
The School of Nursing is the sponsor of a HRSA Delta Healthy Families grant (PI is Dr. Shelby Polk, director of the FNP programs and nursing faculty), which is working to serve one of the predominant needs of the Delta (diabetes) experienced by the poor, the indigent, and the minority races. A Healthy Lifestyles Center has been established through this grant in Cleveland, MS, and serves members of all races. The grant purpose serves three groups of people: Patients, Providers, and Communities. We offer various programs and services for each group of people. Over 1,000 people have been served thus far through this grant (Patients - 400 - 450; Providers - 32; People in the Community - 550 - 600). Diabetes workshops have been held for health care providers, a health fair for DSU students was held on campus and nursing held a DSU children's summer camp "Quest for Health" Kids Kollege). In addition, faculty/staff members of the School of Nursing continue to serve on the advisory (CRAFT) board of the Cleveland School District Allied Health Program and on the advisory board of the Coahoma Community College Department of Health Sciences. The School of Nursing has donated books to the Allied Health Program, assisted with fund raising ideas and the DSU Student Nurse Association has continued "adopting" the Allied Health Program by partnering members with Allied Health students and coaching them for Health Occupations Students of America (HOSA) State and Regional competitions in our skills/simulation lab. Plans have been finalized to bring the HOSA 2015 Northern District Conference to campus February 2015.
5. Identify new programs approved in 2014 which will have potential of attracting "other race" students and faculty members.
The School of Nursing strives to increase recruitment of nursing students, which is likely to increase the numbers of nurses in the Delta by being highly visible in the community via first aid booths. The SON is active in regional Health Fairs, at university and local events (Pigpickin', Homecoming, Oktoberfest, Crossties Festival, home football games), and in summer camps (Reach for the Stars Camp with Kids Kollege) combined with recruitment efforts and special events that

target youth/new DSU college students for future nursing careers. These efforts have met with good success. The Quest for Health Kids Kollege Camp (June 22-26, 2015) had 26 attendees with 73% Caucasian and 27% other races (6 African American, 1 Hispanic).

6. Identify and describe efforts and accomplishments in strengthening existing programs and thereby attracting "other race" students and faculty members.

BSN – The BSN classes continue to be predominately Caucasian in spite of efforts to increase minority representation in this group. 60 students were admitted to the BSN program fall 2014; 33% were minorities (which is a threefold increase over lasts years minority representation of 11%); 19 (32%) were African American and 1 (2%) was Asian. We will continue our efforts to recruit minority students to the BSN nursing program by participating in recruitment events for the predominately minority student population Delta public high schools. We have continued with the SUPPORT project to help prepare nursing students to be successful in nursing school. We will also continue with a part-time admission option for at-risk students. We have also continued with enrichment activities to assist identified nursing students with challenges on national standardized nursing exams. Faculty members will continue to be challenged to identify struggling students early in each course and work with them to increase their knowledge and understanding of the material and to refer them to the Student Support Center as needed.

RNBSN – Twenty-three students were admitted to the RNBSN program fall 2014; 30% were minorities; all seven minorities were African American. 2014 enrollment increased by 100% in the RN-BSN program (23 compared to 11 last year (2013). The change to a two semester online program has increased the opportunities for AD-RN nurses to advance up the professional career ladder. Historically the associate degree programs have a higher percentage of minority students, thus DSU School of Nursing recruitment in this pool has ultimately increased the number of minority nurses with a baccalaureate degree. In addition, the RNDNP program was designed specifically for the non-baccalaureate prepared RN and should also result in increased nursing admissions. In an additional effort to increase minority representation in this cohort, outside funding (grants, private scholarship donors) will also be sought to help assist these students with tuition and other costs of obtaining a baccalaureate degree.

MSN – Twenty students were admitted to the MSN program in fall 2014; 25% (as compared to 13% in 2013) were minorities; 20% (4) were African American and 5% (1) was Asian. The Robert E. Smith School of Nursing offers the only BSN and MSN programs in the Delta region, thus affording minorities the opportunity for regional access to graduate nursing education. Since financial concerns can be an obstacle for minority students in obtaining a graduate degree, the School of Nursing will seek outside funding (federal grants, private scholarship donors) to help support these students and increase enrollment.

DNP - 17 students were admitted to the DNP program fall 2014, 47% were minorities (compared to 17% in 2013), 7 (41%) were African American and 6% (1) were Asian.

 * Since the majority of Delta State University's faculty, staff and students are classified as "White," the term "other race," as used above, is to be defined as including those individuals classified by the U.S. Census Bureau as American Indian, Alaskan Native, Asian, Black or African American, Hispanic, Native Hawaiian, or other Pacific Islander.

Economic Development Initiatives and/or Impact
Nineteen (19) prelicensure BSN and 12 RN-BSN students successfully completed the Bachelor of Science in nursing program in 2014. Currently, 84% (16/19) of these students are employed within the state of Mississippi; Two of the remaining 3 graduates are employed at the Cleveland Clinic in Ohio and one is employed at Oshner's Clinic in New Orleans, LA. All these graduates are employed in various health care agencies, ranging from inpatient hospital care to community home health. All of the graduates were employed immediately after graduation. The 2013 median salary for Registered Nurses was $66,200/year http://money.usnews.com/careers/best-jobs/registered-

nurse/salary. This translates to $2,0572,200 in total BSN wages paid to these graduates from the health care industry. Approximately 400 undergraduate students at the University have selected a pre-nursing plan of study to prepare for admission into the generic nursing program. Intensive and extensive recruitment efforts have been launched by the University and Nursing School and throughout the nation. Schools of Nursing continue to turn away thousands of qualified nursing applicants. According to AACN's report on the projected nursing shortage in the U.S. http://www.aacn.nche.edu/media-relations/fact-sheets/nursing-shortage 566 entry level baccalaureate nursing schools turned away 79,659 qualified nursing school applicants, due to an insufficient number of faculty, clinical sites, classroom space, clinical preceptors, and budget constraints.

Sixteen MSN (NP track) students graduated Spring 2014. Fourteen of these graduates are currently working within the state of Mississippi and all were employed immediately after graduation in various health care agencies (primary health care clinics, etc). The 2013 median salary for Nurse Practitioners was $92,670/year http://money.usnews.com/careers/best-jobs/nurse-practitioner/salary. This translates into $1, 482,720 in total NP wages paid to these graduates from the health care industry.

Four DNP (FNP track) students graduated fall 2014. All of these graduates are currently working within the state of Mississippi and were employed immediately upon graduation. The 2013 median salary for Nurse Practitioners (including those with a DNP) was $92,670/year http://money.usnews.com/careers/best-jobs/nurse-practitioner/salary. This translates into $370,680 in total FNP wages paid to these graduates from the health care industry.

The School's mission and strategic plan supports the University's mission and goals. The School contributes to the economic and health status in the Delta region and the state of Mississippi. The need for baccalaureate nurses at the professional entry level in an increasingly complex health care system is well substantiated. In addition, employers are starting to require that RNs in management positions obtain a BSN degree or risk demotion or job loss. The Delta State University nursing graduates are in demand at the local, state, regional, and national levels.

The nursing profession provides a rich resource, Delta State nursing graduates, to the people of Mississippi. Nurses are essential contributors to health care in an increasingly complex system. Economically, this educational investment will have a long-term proactive impact in the Delta. These graduates are prepared to work in a variety of settings with clients of cultural diversity. Baccalaureate nurses are prepared as generalists. Master's prepared nurses are educated to work as administrator, educators, or practitioners. Among the many roles, Delta State graduates are prepared to function in community health agencies where family planning, health promotion, and disease prevention services, including immunizations, are provided to the public.

When health care is remote or too costly, the morbidity of chronic and acute diseases will continue to be ever present in increasing statistics, thus an excess of state dollars will continue to go to Medicaid and Welfare payments. Healthy Mississippians who are employable are contributors to the overall economic infrastructure and promote the interests of our state.

ONE-YEAR ECONOMIC DEVELOPMENT PLAN (July 1, 2013-June 30, 2014)
The School of Nursing plans to:

- Increase enrollment for both undergraduate and graduate programs.
- Maintain online access for RN-BSN program and continue with a 2 semester program.
- Maintain online access for MSN and continue to seek funding for scholarships.
- Continue to recruit for the RNDNP program.
- Seek additional external funding to assist in easing budget constraints.

The anticipated research productivity with the RNDNP program will provide economic gain to the state through Delta State and through the outcomes of nursing research on health care changes particularly in the areas of rural healthcare access and delivery.

Service Learning:

The School of Nursing had no service learning hours that met a strict definition of the same. However, nursing faculty, staff and students did log 32,459 clinical and volunteer hours for CY 2014. According to the website http://www.independentsector.org/programs/research/volunteer_time.html; volunteer hours during CY 2014 were worth $22.14/hr. This translates to $718,642 in added value to DSU, the community and State of Mississippi.

Grants, Contracts, Partnerships

The total number of grants written/submitted decreased during 2014 (N=4) decreased as compared to 2013 (N=6), however, the total amount of grant funding decreased only slightly increased to $574,848.67 in 2013 as compared to $575,848.67 in 2013. This is an increase of $515,005.34 (around an 84% increase in grant dollars).

-Bingham, V. (2013). HRSA Advanced Education Nurse Traineeship (AENT) Grant. Submitted application for the HRSA Advanced Education Nursing Traineeship (AENT) grant for scholarship monies to graduate students in the amount of $347,680.00 over two years.

-Bingham, V (2013) Hearin Foundation grant application for student scholarships in the Doctor of

-Carlson, L. (2013). Third (and final) year of the Mississippi Doctorate of Nursing Practice (DNP) Consortium Grant ($90,000 over 3 years).

-Polk, S. (2013). Delta Health Alliance TEAM Sugar Free. Funded ($20,000).

-Polk, S. (2013) HRSA Office of Rural Health Policy - *Delta States Rural Development Network Grant Program, 3* year HRSA Grant. Funded ($1,574,546.00 over 3 years).

Partnerships:

-The estate of Robert E. Smith dispersed an additional $3,100,000 for RESSON needs, including additional Smith Nursing Scholarships.

-The Bolivar Medical Foundation donated $302,782 for additional nursing faculty members and technology needs.

-The North Sunflower Medical Center donated $48,000 for each of two years (total $96,000) for additional nursing faculty members.

Brag Facts:

Committees reporting to unit
DSU Robert E. Smith School of Nursing to IHL: Program & Committee Organizational Structure

BOARD OF TRUSTEES **INSTITUTIONS OF HIGHER LEARNING**

PRESIDENT of DSU

Provost and Vice President for Academic Affairs to the President

School of Nursing Faculty Organization
Dean
Faculty Organization Committee

COAP
Standing Committees
Faculty Development
Student Affairs
Program Effectiveness
Undergraduate Program
Graduate Program

Programs
COAP
Undergraduate*
BSN & RN-BSN
Graduate*
Administrator, Educator & Practitioner**
(*Curriculum, Resource Admissions)
(**FNP Track Director oversees all NP curricular matters)

Department: Robert E. Smith School of Nursing

Overview (brief description of scope)
Vision
Robert E. Smith School of Nursing…..Transforming Healthcare in the Mississippi Delta and beyond…..one exceptional nurse at a time!
Mission
The mission of the Delta State University Robert E. Smith School of Nursing is to transform healthcare in the Mississippi Delta and beyond by preparing graduates to be nurse leaders at the baccalaureate, master, and doctoral levels through excellence in education, evidence-based research, interprofessional practice, and multidimensional partnerships in a diverse society.
Philosophy
The philosophy of the faculty of the Delta State University Robert E. Smith School of Nursing is consistent with the goals and mission of the University. The faculty believes clinical and theoretical scholarly inquiry fosters the development of the nursing profession. Nursing embodies the art and science of caring, which is the nurturing, skillful act of being with another to promote optimum health and derives its mission of service from societal needs. Society is the organizing framework composed of individuals, families, and communities that is governed by morals, ethics, and laws. We believe that each individual is unique and possesses the right to informed choices in the attainment of health care services. Health is a dynamic state of being influenced by the spiritual, cultural, psychological, physical and societal components, which interact with the environment. The state of health is influenced by the perception of the individual and society. Nursing facilitates the health status of the individual through interacting with systems and assisting in the movement toward an optimum level of well-being.
Baccalaureate Program Outcomes
1. Apply nursing, natural, and behavioral science concepts to the practice of nursing. 2. Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care to diverse clients

in a collaborative environment. 3. Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession. 4. Utilize research in the delivery of health care. 5. Advocate for improvement in healthcare through participation in professional and political processes. 6. Provide individualized nursing care that focuses on health promotion and disease and injury prevention. 7. Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach.

Graduate Program Outcomes

Master of Science in Nursing (MSN) Program:

1. Integrate nursing, related sciences, and emerging evidence to improve health outcomes and safety for diverse populations. 2. Utilize leadership skills to design and implement strategies that improve care delivery and outcomes. 3. Contribute to the integration of healthcare services to improve quality and safety across the continuum of care. 4. Translate theory and research to provide evidence based nursing practice and improve outcomes. 5. Promote the use of information and communication technologies to provide safe, quality, and cost effective healthcare. 6. Analyze and interpret the effects of healthcare policies, ethics, and regulatory processes to influence practice and outcomes. 7. Employ collaborative leadership strategies to advocate, mentor, and function within inter-professional teams and partnerships. 8. Integrate individual and population based health promotion and prevention strategies to provide equitable, efficient, and effective global healthcare. 9. Apply advanced knowledge, skills, and competencies to design, implement, and evaluate direct and indirect care for individuals, families, and communities.

Doctor of Nursing Practice (DNP) Program:

1. Develop and evaluate new practice approaches based on science from nursing and other disciplines. 2. Employ leadership skills to design and evaluate strategies that improve care delivery and outcomes for diverse populations. 3. Lead interprofessional teams and partnerships to analyze and improve health outcomes for individuals, families, and communities. 4. Assume a leadership role in the application and dissemination of best evidence for practice to promote efficient, effective, and equitable patient-centered care. 5. Design, influence, and implement health care and ethical policies that affect 11 Revised: 12/2014 financing, practice regulation, access to care, and outcomes for individual, families, and communities. 6. Analyze scientific data and synthesize concepts to develop, implement, and evaluate interventions that address health promotion and disease prevention for culturally diverse populations. 7. Utilize and evaluate information and communication technologies to improve health care and to implement change in health care systems. 8. Utilize advanced clinical judgment and specialty focused competencies to improve the care of diverse populations

ORGANIZATIONAL AND ADMINISTRATIVE STRUCTURE

Dean The Dean of the Robert E. Smith School of Nursing is nominated by the President of the University upon recommendation of the Provost/Vice President of Academic Affairs and appointed by the Mississippi Board for Institutions of Higher Learning (IHL). The Dean communicates with the IHL through the President and the Provost/Vice President of Academic Affairs. The Dean is responsible to the Provost/Vice President of Academic Affairs for the academic and fiscal management of the Robert E. Smith School of Nursing and the undergraduate and graduate programs.

Chair of Academic Programs The Dean delegates responsibility for the undergraduate and graduate programs to the Chair of Academic Programs (COAP).

Faculty Faculty participates in the governance of the Robert E. Smith School of Nursing through the plenary faculty organization committee. Additionally, full time faculty members serve on standing and ad hoc committees. Staff Additional employees in the SON include a Secretary to the Dean and a Secretary to the faculty.

Students participate in the governance of the SON by serving as non-voting members of standing committees. (Faculty Organization, Student Affairs, Program Effectiveness, Faculty Development

Committees).
More detailed information about the nursing programs can be found
at http://www.deltastate.edu/school-of-nursing/

Degree Program Addition/Deletions and/or Major Curriculum Changes:
Changes made in the past year:
Changes in the general education requirements at DSU to reduce requirements in literature and
history from 6 hours each to 3 hours each resulted in the nursing faculty members adding two new
courses to the prelicensure BSN program of study (NUR 313 Communications in Nursing-2 hours,
and NUR 320 Nursing Informatics-3 hours) and adding one hour to NUR 402 Management of Client
Care. Changes made to the RNBSN program due to the same general education requirement changes
include adding 3 hours to NUR 358 for a total of 6 hours (Communication in Nursing content will
now be included in this course) and the addition of NUR 320 Nursing Informatics-3 hours.

Personnel:
An excellent complement of full-time faculty, staff, and part-time faculty enable the School of
Nursing to fulfill the mission and insure that students achieve program outcomes.

Table VA: 2014 Full-Time, Part-Time, & Adjunct Faculty Members & Staff Roster
Full-Time Faculty
Lizabeth L. Carlson, DNS, RNC Dean & Professor, Tenured
Debra F. Allen, MSN, RN Instructor
Vicki L. Bingham, PhD, RN Chair and Associate Professor, Tenured
Lacey Blessitt, MSN, RN, BC Instructor
Catherine Hays, EdD, RN Associate Professor, Tenured
Addie Herrod, DNP, RN, BC Instructor
Monica Jones, DNP, RN, BC Instructor
Donna Koestler, MSN, RN Instructor
Emily Newman, MSN, MEd, Instructor
Elizabeth Overstreet, MSN, RN, BC Instructor
Shelby Polk DNP, RN, BC Assistant Professor
D. Louise Seals, EdD, RN, CNE Associate Professor, Tenured
Betty Sylvest, DNS, RN, CNE Associate Professor, Tenured
Carleen Thompson, DNP, RN, BC. Assistant Professor
Janye Wilson, MSN, RN
Part-Time Faculty
Jean Grantham, MSN, RN, BC Instructor
Full-Time Staff
Carla Lewis ....Secretary to the Dean
Judy Haney.. Secretary to the Faculty

Nursing Faculty Benchmarks
FACULTY BENCHMARKS 2014

#	DESCRIPTION	MET	NOT MET	COMMENT
1	100% of nursing faculty attain at least 10 contact hours annually	MET 100%		• 15/15 (100%) faculty met or exceeded 10 contact hours during 2014

				- Total contact hours = 403.1 - Average contact hours per faculty = 38.24
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	MET 93.3%		14/15 (93.3%) faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2014
3	100% of nursing faculty participate in academic advisement each semester for students enrolled in program and for students pursuing enrollment in nursing programs	MET 100%		15/15 (100%) faculty participated in academic advisement. The total number of students advised by each faculty ranged from 12 to 159. - Total number of students advised in 2014 = 657 - Average # students advised/faculty = 43.8
4	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	MET 66.6%		10/15 (66.6%)faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach
5	40% of nursing faculty will present research findings at conferences at the state, regional, or national level	MET 53.3%		8/15 faculty presented during 2014 Oral Presentations: - International - 0 - National - 1 - Regional - 4 - State - 4 - Local - 1 - Local - 0
6	10% of faculty will submit or be published in a peer reviewed	MET 33.3%		5/15 (33.3%) faculty submitted for publication or were

	journal/book as an author, reviewer, or editor			• published in a peer reviewed journal/book as an author, reviewer, or editor • 5 faculty submitted for publication; 1 faculty published
7	10% of nursing faculty will submit a grant or serve as a grant reviewer	MET 13.3%		• 2/15 (13.3%) faculty submitted or was awarded a grant and/or was a grant reviewer • 2 grants submitted • 1 grant new award in 2014 - $329,632 • 1 grant awarded continuing funding for year 2 -$524,787 • Total grants awarded in 2014 = $854,419
8	100% of nursing faculty serve on three or more RESSON standing committees	MET 100%		• 15/15 (100%) faculty serve on three or more Robert E Smith School of Nursing committees • Total number of committees range from 3 – 6.
9	75% of RESSON faculty serve on one or more University committee, council, taskforce or other appointed/elected positions	MET 80.0%		• 12/15 (80.0%) faculty serve on one or more University committee, council, taskforce, or other appointed/elected position. • The number of committees faculty serve on range from 0 – 5 • The average number of committees the 12 faculty members serve pm = 2.5
10 **New 2013**	100% of nursing faculty participate in two or more recruitment events annually		NOT MET 66.6%	• 10/15 (66.6%) nursing faculty participated in two or more

				• recruitment events in 2014 • Faculty participated in a total of 37 recruitment events during 2014 • Total # of documented participants at the 37 events = 3,029 • Sic of the 37 events did not provide the number of participants/participant lists
11	75% of nursing faculty hold members hold membership in professional organizations at state, national, or international levels.	MET 86.6%		• 13/15 (86.6%) faculty hold membership in professional organizations • The number of professional organizations per faculty ranges from 2 - 9
12	40% of nursing faculty hold leadership positions in professional organizations at local, regional, state, national, or international levels.	MET 60%		• 9/15 (60%) faculty hold leadership positions in professional organizations • 2 at local level • 1 at regional level • 7 at state level
13	60% of faculty will participate in community services	MET 66.6%		• 10/15 (66.6%) faculty participated in community services
14	60% of faculty will engage in faculty practice to maintain nursing competency	MET 86.6%		• 13/15 faculty engaged in practice during 2014

Brag Facts:
The Robert E. Smith School of Nursing's RN-BSN program was named the 2015 #1 RNBSN Online program in the US by RNBSNOnline.org.
Faculty:
Debra F. Allen, MSN, RN
Instructor

2014-2015

<u>Professional Organizations</u>

- MNA District #21 Member
- MNA District #21 Delegate to Convention Mississippi Nurses Association Vice-President 2014-2015
- MNA Legislative Affairs Committee 2007-2015
- Mississippi Nurses Foundation –Nightingale Awards Committee
- Mississippi Nurses Foundation – Car Tag Stipend Scholarship Committee 2013-present
- Sigma Theta Tau International, Honor Society of Nursing, Pi Xi Chapter, President for 2009-2013; Treasurer for 2013-2015
- National League of Nursing, member
- OAK, Leadership Honor Society, member
- Transcultural Nursing Society Networking Chapter of Alabama and Mississippi member

<u>University Involvement</u>

- Faculty Senate Senator for 2011-2017, secretary for 2012-2015
- Faculty Senate Committee on nominations co-chair, 2012-2015
- Delta Health and Wellness Committee, 2008-2013
- DSU Wellness Committee, 2009-2015
- GST Instructor, 2000-2013/FYS Instructor, 2014-2015
- Merit Pay Appeals Committee, 2012-2015
- Student Success Committee, 2014-present

<u>School of Nursing Activities</u>

- Student Affairs Committee, Chair, 2012-2015
- Student Nurses Association, Faculty Advisor

<u>Community Activities</u>

- Junior Auxiliary of Greenville, associate member
- Advisory/Craft Committee for the Cleveland Career Development and Technology Center, 2008-2014
- DSU Student Nurses' Association –community service activities <u>Awards and Honors</u>
- MASN mentor of the Year Award, 2014

Vicki Bingham, PhD, RN, CPE
Chair of Academic Programs
2014-2015

<u>Professional Organizations</u>

- Served on the Executive Board as Secretary of the Mississippi Council of Deans and Directors – re-elected for another two year term in April, 2013
- Served as Chair of the Mississippi Baccalaureate and Higher Degree Nursing Council – re-elected in April, 2015
- Served as a Mississippi Institutes of Higher Learning site visitor for nursing education by serving on the Accreditation Review and Evaluation Committee
- Served as a board member on the Bolivar Medical Center Board of Trustees
- Received national certification as a Certified Patient Educator (CPE)

<u>Scholarly Activities</u>

Grants

- Submitted application for the HRSA Advanced Education Nursing Traineeship (AENT) grant for scholarship monies to graduate students in the amount of $347,680.00 – awarded (received $173, 120.00 for year 1 and $174, 560.00 for year 2)

Lizabeth Carlson, DNS, RN
Dean and Professor
2014-2015
Professional Organizations
- Mississippi Council of Nursing Deans and Directors Vice Chair
- Mississippi Council of Baccalaureate and Higher Programs of Nursing Member
- AWHONN Member
University Involvement
- Dean's Council Member
- Academic Council Member
- DSU Job Evaluation Committee Member
School of Nursing Activities
- Dean
- Building Manager
Scholarly Activities
- Research Article Reviewer for MORE Evidence Based Nursing

Addie Herrod, DNP, FNP, BC
Assistant Professor
2014-2015
Scholarly Activities
- Electronic Poster Presentation at 7th Annual Doctor of Nursing Practice Conference in Nashville, TN
- Poster Presentation at Sigma Theta Tau International Region 8 Conference in Murfreesboro, TN
Monica M. Jones, DNP, FNP, BC
Assistant Professor
2014-2015
School of Nursing Activities
- Completed the Million Hearts Initiative Partnership for DSU RESSON, February 2015
- Coordinated the first DSU RESSON Million Hearts Event with 13 fellows certified, April 2015
- Coordinated and participated in the 2015 Tech Savvy Workshop, April 2015
- MECDNP Leadership Institute Planning Committee & Attendant, April 2015
- MECDNP Leadership Institute 2015 CEU application presenter
- MECDNP Consortium Representative for DSU RESSON
- DSU RESSON Information Technology Governance Committee representative
Community Activities
- Interim Program Director Crossroads North Clinic Ryan White Program Parts B & C, June 2014-September 2014
- Presenter for Breast Cancer Awareness at Antioch Baptist Church, October 2014
- AAUW membership initiated with a recommendation and award of the Dorothy Shawhan Memorial Scholarship to a DSU RESSON BSN student for the first time in our school's history

Delta State University FY2015 Unit Level Report
Department: Robert E. Smith School of Nursing

Emily Newman, MSN, RN
Instructor
2014-2015
Professional Organizations
- American Society for Clinical Pathology Member
- Mississippi Rural Health Association Member
- Mississippi Nurses Association (MNA) District 323 Member
- National Student Nurses' Association, Inc. Sustaining Member
- Sigma Theta Tau International Honor Society of Nursing, Pi Xi Chapter President 2013-2017
- Transcultural International Nursing Society Member
University Involvement
- DSU General Education Committee Member
- Technology in Teaching Symposium Presenter
School of Nursing Activities
- HOSA North District Leadership Conference Coordinator
- BSN Boot Camp Coordinator
- PEC Committee Member
Community Activities
- DSU Student nurses' Association Community Service Activities
Honors and Awards
- DSU Connected Educator Award

Elizabeth Julyn Overstreet, MSN, FNP, BC
Instructor
2014-2015
- Admitted to the Doctor of Nursing Practice Program-Fall 2014
- Completed Fall Semester with 4.0 grade point average

Shelby Polk, DNP, FNP, BC
Assistant Professor
2014-2015

Service to the Community
- Opened and manager of the Healthy Lifestyles Center Scholarly Activities
- Wrote and was awarded a HRSA three year Healthy Delta Families Grant (~$1,000,000total)

Louise Seals, EdD, RN
Assistant Professor
2014-2015
Professional Memberships
- Served as Board Member and President of Mississippi Chapter of American Psychiatric Nursing Association
- Currently serving on American Psychiatric Nursing Association Graduate Education Committee
- Planning 4th annual MS Chapter of American Psychiatric Nursing Association conference scheduled for September 20, 2015.

Scholarly Activity

- Serving as reviewer for abstracts submitted for **APNA 29th Annual Conference**. Theme:*collaborating in an Evolving Health Care System: Opportunities to Advance Psychiatric-Mental Health Nursing*
- Presided at Ms. Chapter State meeting of the American Psychiatric Nursing Association in Indianapolis, Indiana in October 2015.

Betty Sylvest, DNS, RN

PUBLICATIONS

- Books
  Chapter
  - Baldwin, J. H., Morgan, C. O., and **Sylvest, B.** Health Promotion and Wellness. In K. Lundy & S. Janes. (Eds.). (2016). Community Health Nursing: Caring for the public's health. (2nd ed.). Sudbury, MA: Jones and Bartlett Publishers.
  - Bradley-Springer, L. and **Sylvest, B**. Health education in the community. In K.S. Lundy & S. Janes. (Eds) (2016). Community health nursing: Caring for the public's health. (2nd ed.). Sudbury, MA: Jones and Bartlett Publishers.

Student Nurses Association (SNA)

2014-2015

SNA Student members were active in over 34 service projects this year. Three DSU Students served on the Mississippi Student Nurses Association Board: Mary Hodges, Vice President, Christopher Williams, Nominations and elections Chair and Kenneth Thomas- Nominations and elections Representative: North and in October, 4 DSU SNA students were elected to MASN Board to serve: Tyler Coman, Vice President; Badel K; Director of Communications; Sarah Yawn, Director of Breakthrough to Nursing; and Tevelle Marion Nominations and elections Representative: North. We had 12 students attend the MASN Convention in Biloxi in October and we were awarded the MASN "Nightingale Chapter of the Year Award" for the third year in a roll. This award is given to the chapter that has shown tremendous involvement in their SNA chapter, including community service, active participation at convention, involvement of members throughout various activities of nursing school, and a display of a positive image of nursing. DSU SNA was represented by Tyler Coman as a delegate to NSNA and 3 other members attended the NSNA Convention in Phoenix, Arizona.

This student organization participated in the Staff Council Food Drive on campus by collecting over 100 non-perishable items that were distributed to the shelters in Cleveland. SNA took BPs at the Rice Luncheon and provided a first aid station for DSU Move-in Day, Pig pickin' and all and Crossties Festival in Cleveland. They participated in monthly health education display in DSU library with handouts and community teaching projects providing health information in the various venues. Members collected coke can tops for the Ronald McDonald House at St. Jude and collected cans for recycling and sold them for fundraising monies. They sent 8 children Christmas boxes for Operation Christmas child and collected coats and blankets for St. Vincent DePaul. SNA collected Preemie clothes for the babies in the DRMC NICU, toys for the pediatric unit and first aid collections with seminar for sixth graders. They taught hygiene classes for fifth graders and provided hand washing project for kindergarten classes at 2 area schools. They presented a healthy lifestyles seminar for College Students and presented to fraternity and dormitories on campus. They supported the international students by purchasing goodies for Holiday week. They collect Box Tops points for area elementary schools and have donated Dog/cat food, toys and newspapers to the Bolivar County Humane society. They participated in organ donor challenge against Mississippi

Delta State University FY2015 Unit Level Report
Department: Robert E. Smith School of Nursing

College winning the challenge with most points for awareness in organ donation and $500.00 for reaching our goal!

Comparative data

CREDIT HOUR PRODUCTION							
	Summer 2014		Fall 2014		Spring 2015	
	UG	GR	UG	GR	UG	GR
NUR	36	144	1664.5	502	1416	561

ENROLLMENT BY MAJOR*						
	Summer 2013		Fall 2013		Spring 2014	
	UG	GR	UG	GR	UG	GR
Nursing	14	2	118	36	96	35
Nursing – RN/BSN Tract	0	0	23	0	18	0
Nursing Practice	0	0	0	23	0	15
Total	14	2	141	59	114	50

*Note 1 additional student was enrolled in nursing as a second major in Fall 14 and Spring 15.

2013-14 Graduates	
Nursing	
BSN	35
MSN	12
DNP	4

<div align="center">
Faculty Development Committee
2014 Annual Report
</div>

Faculty Development Committee Functions

1. Annually reviews and makes recommendations for changes in Faculty and Staff Handbook
2. Recommend continuing education offerings as required by the Mississippi Board of Trustees of State Institutions of Higher Learning (IHL) (include Community of interest when appropriate).
3. Make recommendations to the Dean related to faculty development funding.
4. Assist in recruiting and retaining qualified and diverse faculty members.

Members

Louise Seals, Chair
Jayne Wilson, Secretary
Lacey Blessitt
Heather Wilkey
Vicki Bingham (ex officio member)
Student Representatives:

Student Members:
BSN Representatives
     Mary Hodges,(S1),
     Shauna Allen(SRI),
     Bobbie Johnson (RN-BSN),
     Natasha West (G II),
     Jennifer Goss(G IV)
RN/BSN Representatives:
MSN Representatives:

Meetings for academic year

Met monthly on Tuesday Spring 2014 and Monday Fall 2014
Minutes for January 10, February 11, March ___, April, August __, September ___.
October ___, and November ____ attached (Appendix A)

Summary of Functions, Actions and Recommendations for 2014

A. Review of Faculty and Staff Handbook
   1. Faculty and Staff Handbook reviewed by dividing into 4 sections and member volunteer assignment to part for edits, clarification, and present findings to commute for review and recommendation. Revised and made available Spring 2014. New annual revisions begun in Fall 2014. Committee members made page divisions and assumed responsibility for edits. Edits submitted in November by members.
   2. Suggested revisions to be finalized in January and brought forth to Faculty Org in February 2015.

   Actions: Edits to be reviewed and voted upon in Fac Org spring 2015

Handbook Revisions: Bound copies to be made available Fall 2015

3. Discussion of linking Handbook to RESSON Homepage continues to be discussed.

   Action: Recommend continuation of working toward this goal for 2015

Continuing Education Offerings to Meet IHL Requirements and COI

1. Annual faculty needs assessment survey conducted each fall.
- Results of survey September 2014:
  - Best time for offerings on Monday @ noon
  - Interests: varied with test item writing, simulation, updates on current available campus technology, and using Canvas resources to link Standards, Program, Course, and Unit outcomes to assignments

Outcomes:

1. Emily Newman presented her 312 Canvas Pathophysiology course to faculty demonstrating linking of Program, Course, Unit, and Assignment outcomes in Fall 2014 Course.
2. Emily Newman presented Leardale represenentive for our area to demonstrate capabilities of SimPad use for use in simulation skills check off. Objectives & CEU's were optional. 13 Undergraduate faculty attended.
3. COI consideration in 2013 with Hurst Review to be presented January 27; however did not occur due to lack of commitment to guarantee 50 attendees.
   A)015.

Function: Make recommendations to the Dean related to faculty development funding.

- August 2014 Dean announced that each faculty member would be allotted $1000.00 for faculty development. This amount was based upon availability of funding.
- 100% of faculty met required 10 CEU for 2014

Additional Action: To keep Faculty informed regarding need for extra assistance and funding for individual faculty, the Faculty Development Committee agreed to began a data base to track track faculty CEU's. Jayne Wilson volunteered to initiate this process. Periodic e-mail reminders to faculty with overall compliance

Action: Discuss continuation of Database in 2015 and make decision to bring to Fac Org for vote.

CEU Bulletin board: Posting of Webnars, conferences, and other resources on Bulleting board in Faculty Lounge continues with plan to evaluate included in Faculty Development Annual Survey in Fall.

B. Function: <u>Assist Recruitment and Retention of diverse faculty members.</u>
1. Continuation of exploration of best practices for orientation over 2014.
2. Orientation check list compiled and revised by new faculty members: Jayne Wilson, and Julyn Overstreet in spring. Dr. Bingham, COAP used suggestions and tweaked form for orienting new faculty in fall 2014.
3. Plan: Investigate best practices for new faculty orientation that include, on line courses, volunteer faculty mentors, and informal round table discussions.
4. <u>Action</u>: Submit Formal Revised Faculty Check List for approved and implementation in 2015

<u>Retention</u>: PEC Annual Faculty Environmental Survey results indicated faculty were overall satisfied with facilities and services of University and School of Nursing.

1. Plan: continue to monitor results of this annual survey.
2. Action: Explore open forum with faculty to discuss and brain storm

Delta State University
Robert E. Smith School of School of Nursing
2014 Undergraduate BSN One Year Alumni Survey

I. BSN Alumni:
- A. 1 year BSN results—graduated December 2013. Total number graduated = 19.
  In December 2013, nineteen (19) BSN students graduated. Electronic surveys were sent to all graduates and resulted in a return of one 1) (5.26%) survey.

- B. Demographic Data:
  1. Age range
     a. 23 to 26 - 1 (100%)
  2. Gender: Female 1 (100%)
  3. Ethnicity
     a. African American 1 (100%)
  4. State(s) where licensed: MS – 1 (100%)
  5. Employed Full-Time: 1 (100%)
  6. Working as a Registered Nurse: 1 (100%)
  7. Place employed: Hospital - 1 (100%)
  8. Primary nursing responsibility:
     a. Staff Nurse – 1 (100%)
  9. Serve Residents of the Mississippi Delta
     a. Yes – 1 (100%)

- C. Further Education
  - Currently Enrolled
    a. Yes – 0
    b. No - 1 (100%)
  - Highest Degree Currently Held
    a. Bachelor – 1 (100%)
    b. Master – 0 (0.0%)
    c. Doctorate – 0 (0.0%)
  - Plan to Return
    a. Yes – 1 (100%)
       i. MSN – Administrator 1 (100%)
    b. No – 0

- D. Achievement of Program Outcomes:

BSN Program Outcomes	Mean
Apply nursing, natural, and behavioral science concept to the practice of nursing.	5.0
Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care in a collaborative environment	5.0
Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession.	5.0
Utilize research in the delivery of health care	5.0
Advocate for the improvement in healthcare through participation in professional and political processes	5.0
Provide individualized nursing care that focuses on health promotion and disease and	5.0

BSN Program Outcomes	Mean
injury prevention	
Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach	5.0

E. Achievement of BSN Program Purposes:

Purposes of the Program	*Mean*
Prepares nurses to function in the practice role as a BSN prepared registered Nurse.	*5.0*
Prepares for continuous learning and advanced study	*5.0*

F. Quality of the BSN Program:

Items	*Mean*
Overall quality of BSN education at DSU SON	*5.0*
Overall quality of general education courses required as a pre requisite to the program	*5.0*
Overall quality of required Clinical practice sites utilized during your attendance at DSU	*5.0*
Overall BSN faculty accessibility while you were in the DSU program	*5.0*
Overall helpfulness of faculty while you were in the BSN program	*5.0*
Overall faculty level of expertise while you were in the BSN program	*5.0*
Overall rating of Classroom facilities/equipment while you were on campus at DSU	*5.0*
Overall Quality of library services provided while you were attending DSU	*5.0*
Overall quality of web-based or web-enhanced courses that you took while in the BSN program	*5.0*
Overall quality of Feedback from clinical preceptors	*5.0*
Overall quality of clinical experience that you received during your course of study	*5.0*

Items	*Mean*
Overall rating of advisement while you attended the BSN program	*5.0*
Overall Instructional materials	*5.0*
Overall rating of classroom facilities/equipment	*5.0*
Overall rating of skills lab	*5.0*
Overall rating of Simulation lab	*5.0*
Overall rating of computer lab	*5.0*

G. Indicated they would recommend BSN Program
 1. Yes – 1 (100%)
 2. No – 0

H. Strengths of the BSN program at DSU
 1. Quality of Courses – **100%**
 2. Flexibility of Faculty – **100%**
 3. Teaching Expertise – **100%**
 4. Web-based or web-enhanced format – **100%**

I. Weaknesses/Areas to Improve:
 1. Flexible classes – 100%
 2. Library support/availability – 100%
 3. Recruitment efforts – 100%
 4. Faculty support – 100%

II. General Summary:

The results of the 1 Year BSN 2013 Alumni Survey netted a 5.26% return rate. The one respondent was an African American female employed full-time in a hospital setting that services the citizens of the Mississippi Delta. The respondent was not currently enrolled in a degree seeking program but plans to complete a higher degree in the future. The ratings on each program outcome were 5.0. Mean scores for accomplishment of the purposes of the program were all 5.0. Quality of program items all received mean scores of 5.0. Quality of courses, flexibility of faculty, teaching expertise, and web-based or web-enhanced format were identified as strengths of the program. Weaknesses identified included flexible classes, library support/availability, recruitment efforts, and faculty support. The respondent indicated she would recommend the program to a friend.

Delta State University
Robert E. Smith School of Nursing
2014 BSN Three Year Alumni Survey Summary Report

I. BSN Alumni:

    A. 3 year BSN results—graduated December 2011; Total number graduated = 34.
        In December 2011, thirty-four (34) BSN students graduated. Electronic
        surveys were sent to all graduates and resulted in a return of 6 (17.64%)
        surveys.

    B. Demographic Data:
        1. Age range
            a. 23 to 26 = 3 (50%)
            b. 27 – 30 = 2 (33.33%)
            c. 36 & over 1 (16.67%)
        2. Gender:
            a. Female - 5 (83.33%)
            b. Male - 1 (16.67%)
        3. Ethnicity
            a. Caucasian - 6 (100%)
        4. State(s) where licensed
            a. AK - 1 (16.67%)
            b. MS – 4 (66.67%)
            c. TN – 1(16.67%)
        5. Employed Full-Time:
            a. No – 2 (33.33%)
            b. Yes - 4 (66.67%)
        6. Working as a Registered Nurse
            a. No – 0 (0%)
            b. Yes - 6 (100%)
        7. Place employed
            a. Hospital – 5 (83.33%)
            b. Other – 1 (16.67%)
        8. Primary nursing responsibility:
            a. Staff Nurse – 5 (83.33%)
            b. Charge Nurse – 1 (16.67%)
        9. Serve Residents of the Mississippi Delta
            a. No – 2 (33.33%)
            b. Yes – 4 (66.67%)
    C. Further Education
         • Currently Enrolled
            a. No - 3 (50%)
            b. Yes - 3 (50%)
         • Highest Degree Currently Held
            a. Bachelor – 4 (66.7%)
            b. Master – 2 (33.33%)
            c. Doctorate – 0 (0.0%)
         • Plan to Return

Delta State University
Robert E. Smith School of Nursing
2014 BSN Three Year Alumni Survey Summary Report

      a. No – 1 (16.67%)
      b. Yes – 5 (83.33%)
             i. MSN – Nurse Practitioner – 3 (60%)
           ii. DNP – 2 (40%)

D. Achievement of program outcomes:

BSN Program Outcomes	Mean
Apply nursing, natural, and behavioral science concept to the practice of nursing.	4.17
Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care in a collaborative environment	4.5
Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession.	4.5
Utilize research in the delivery of health care	4.0
Advocate for the improvement in healthcare through participation in professional and political processes	4.33
Provide individualized nursing care that focuses on health promotion and disease and injury prevention	4.33
Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach	4.33

E. Achievement of BSN Program Purposes:

Purposes of the Program	*Mean*
Prepares nurses to function in the practice role as a BSN prepared registered Nurse.	*4.5*
Prepares for continuous learning and advanced study	*4.67*

F. Quality of the BSN Program:

Items	*Mean*
Overall quality of BSN education at DSU SON	*4.33*
Overall quality of general education courses required as a pre requisite to the program	*4.17*

Delta State University
Robert E. Smith School of Nursing
2014 BSN Three Year Alumni Survey Summary Report

Items	*Mean*
Overall quality of required Clinical practice sites utilized during your attendance at DSU	*3.33*
Overall BSN faculty accessibility while you were in the DSU program	*4.33*
Overall helpfulness of faculty while you were in the BSN program	*4.33*
Overall faculty level of expertise while you were in the BSN program	*4.17*
Overall rating of Classroom facilities/equipment while you were on campus at DSU	*4.17*
Overall Quality of library services provided while you were attending DSU	*4.0*
Overall quality of web-based or web-enhanced courses that you took while in the BSN program	*4.0*
Overall quality of Feedback from clinical preceptors	*3.83*
Overall quality of clinical experience that you received during your course of study	*3.5*
Overall rating of advisement while you attended the BSN program	*4.33*
Overall Instructional materials	*4.17*
Overall rating of classroom facilities/equipment	*4.17*
Overall rating of skills lab	*4.33*
Overall rating of Simulation lab	*4.33*
Overall rating of computer lab	*4.33*

G. Indicated they would recommend BSN Program
1. No – 0 (0%)
2. Yes – 6 (100%)

H. Strengths of the BSN program at DSU
1. Quality of courses – 83.33%
2. Faculty support – 66.67%
3. Dean support – 50%
4. Quality of Program Advisement – 33.33%
5. Teaching expertise – 33.33%

Delta State University
Robert E. Smith School of Nursing
2014 BSN Three Year Alumni Survey Summary Report

I. Weaknesses/Areas to Improve:
1. Web-based or web-enhanced format – 50%
2. Flexible classes – 50%
3. Teaching expertise – 16.67%
4. Library support/availability – 16.67%
5. Library holdings – 16.67%
6. Recruitment Efforts – 16.67%
7. Technical support – 16.67%
8. Faculty Support – 16.67%
9. Dean support – 16.67%

II. General Summary:

The results of the 3 Year BSN 2013 Alumni Survey netted a 17.64% return rate. Six respondents were Caucasian; five were female; one was male. Four were employed full-time with six employed as a registered nurse (RN). Five were employed in a hospital setting and one employed as other with no comment for clarification. Three of the respondents were currently enrolled in degree seeking program, and three respondents plan to complete a higher degree in the future. The ratings on each program outcome were 4.0 or better. Mean scores for accomplishment of the purposes of the program were all 4.17 or better. Quality of program items all received mean scores of 3.3 or better. Quality of courses, faculty support, dean support, quality of program advisement, and teaching expertise were identified as strengths of the program. Weaknesses identified included web-based or web-enhanced format, flexible classes, teaching expertise, library support/availability, library holdings, recruitment efforts, technical support, faculty support, and dean support. All six respondents would recommend the BSN program to a friend.

Delta State University
Robert E. Smith School of School of Nursing
2014 Undergraduate BSN End of Program Satisfaction Survey

Nineteen (19) undergraduate BSN students completed the End of Program Satisfaction Survey in December 2014. Ten (10) students completed the BSN End of Program Satisfaction Survey electronically for a 52.63% response rate. The results are compiled and summarized.

1. Purpose of the Program

BSN Purpose of the Program	Mean
Prepares for professional nursing practice as a generalist	4.7
Prepares for continuous learning and advanced study	4.7

2. Baccalaureate Program Outcomes

BSN Program Outcomes	Mean
Apply nursing, natural and behavioral science concepts to the practice of nursing	4.6
Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care to diverse clients in a collaborative environment	4.7
Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession	4.7
Utilize research in the delivery of health care	4.5
Advocate for improvement in healthcare through participation in professional and political processes	4.5
Provide individualized nursing care that focuses on health promotion and disease and injury prevention	4.7
Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach	4.7

Comment(s):

- Recommend not having the HESI 900 score to graduate the program. Only have them for practice and preparation for the NCLEX.

- I would have liked to have had a stronger background in patho and pharm. Both of those classes have been my weakness and it shows on the HESI exams. Perhaps those two classes should be evaluated to see if a change is needed in the way the class is taught.

3. Quality of Instruction

Course	Mean
NUR 302 Fundamentals of Client Care	4.88
NUR 303 Health Assessment	4.63
NUR 304 Pharmacology	4.13
NUR 305 Nursing the Adult Client I	4.56
NUR 306 Nursing the Adult Client II	4.44

NUR 307 Mental Health/Psychiatric Nursing	3.67
NUR 309 Nursing Research	3.25
NUR 312 Basic Pathophysiology	3.63
NUR 314 Health Policy and Ethical Decision Making	4.0
NUR 401 Maternity Nursing	4.0
NUR 402 Management of Client Care	4.33
NUR 403 Community Health Nursing	3.11
NUR 405 Pediatric Nursing	4.56
NUR 408 Nursing Synthesis	4.56
NUR 492 EKG Interpretation	4.14

Comment(s):

- NUR 306: including a new teacher was a hard and challenging adjustment/ 307: Dr seals is a much better instructor without a powerpoint and i think that teachers should be able to have powerpoints available but also be allowed to teach in a way that students understand/ 309: writing a research proposal was not helpful, i think that actually reading articles and understanding the stats and numbers would have been better/ 314: the individual seminars were fine except that if i was the only student who researched ethics then the rest of the class would lack the understanding that i have because i did all the research/ 402: i feel like the class was very repetitive of previous classes (eg 314), I believe this class could be incorporated into all the other classes and this class would not be needed at the end of the semesters./403: again, i believe that this class could be incorporated into previous classes and could be eliminated.

4. Clinical and Practicum Quality

Course	Mean
NUR 332 Fundamental of Client Care Practicum	4.63
NUR 333 Health Assessment Practicum	4.57
NUR 335 Nursing the Adult Client I Practicum	4.44
NUR 336 Nursing the Adult Client II Practicum	4.44
NUR 337 Maternal Health/Psychiatric Nursing Practicum	3.56
NUR 441 Maternity Nursing Practicum	4.0
NUR 442 Management of Client Care Practicum	4.44
NUR 443 Community Health Nursing Practicum	2.78
NUR 445 Pediatric Nursing Practicum	3.78
NUR 406 Nursing Preceptorship	4.78

Comment(s):

- Some facilities were too small to offer much experience such as the health departments, pediatric unit in Greenwood, maternity unit in Indianola, and Whitfield.

Whitfield is a larger facility but students were not allowed to actually participate in the care of the patients which did not help teach the art of caring for psyc patients.

- Community Health clinical should be scheduled on days that there are going to be more clinical experience available (immunization days) at the facility on that particular day. We got experience in clinical, but not in administering vaccinations.

5. Quality of Physical Resources and Facility

Rate the Quality of the Following	Mean
Audiovisual equipment (SMART classroom capabilities, video camera, etc.)	4.33
Skills lab equipment and supplies	4.22
Computer lab software and hardware programs	4.11
Simulation equipment and supplies	4.33
Student Facilities (copier, vending machines, refrigerator, microwave, etc.)	3.89
Academic support lab	3.75
Writing center	3.25
Technology Programs (Typhon, Conferencing, Canvas Learning Management System)	3.56
IT support	3.63
Library support	3.67

Comment(s):

- academic support lab and writing center: i did not utilize these departments except when required by an instructor

6. Overall satisfaction indicators:

- The physical environment of the Robert E. Smith School of Nursing classrooms is conducive to optimal learning.

  9 = Yes (100%)
  0 = No

Comment(s):

- However, better temperature regulation in the classrooms would have been nice.
- I'd suggest that students bring a jacket if they don't like the cold.

- I would recommend the DSU Robert E. Smith School of Nursing to a friend or colleague.

Delta State University
Robert E. Smith School of School of Nursing
2014 Undergraduate BSN End of Program Satisfaction Survey
9 = Yes (100%)
0 = No
Comment(s):

- i have received so many compliments on how well i perform and testing due to my education from dsu son/ i have recommended dsu son bsn program to many and several were accepted this past fall.

7. Reported strengths of the BSN program in descending order.

Strengths	
Preparation for licensure	4.38
Quality of courses	4.13
Teaching expertise	4.25
Flexibility of faculty	4.0
Quality of program advisement	4.13
Web-enhanced format	3.63
Simulation lab equipment & supplies	3.63
Skills lab equipment & supplies	3.63
Technical support	3.5
Flexible classes	3.57
Library holdings	2.71
Library support/availability	3.0

8. Reported greatest needs of improvement in descending order.

Simulation lab equipment & supplies	3.44
Skills lab equipment & supplies	3.44
Flexibility of faculty	3.0
Flexible classes	3.14
Library holdings	3.25
Library support/availability	3.13
Quality of program advisement	2.75
Web-enhanced format	3.13
Technical support	2.75
Preparation for licensure	3.13
Quality of courses	3.0
Teaching expertise	2.71

Comment(s) – Changes you would suggest:
- Having classes offered both semesters.
- I would suggest more direction on various assignments and more coordination between faculty.

- Not having the 900 to graduate the program, a better course for psych nursing and more prepared teacher for that course also. Community needs to be adjusted also.
- Use the SIMULATION lab more with scenarios.
- Strengthen patho, pharm, and maternity classes. Consider allowing students to go to clinicals for maternity, pediatric, and psyc at other facilities that will offer better experiences for students.
- I would suggest making some of the classes like Med-Surg I and II available in the fall and the spring.

9. Summary

The data from the ten (52.63%) undergraduate BSN students provided information that demonstrated they generally felt confident about program outcomes and were generally satisfied with courses, instructions, and resources. All (100%) of the respondents would not only recommend the program but also felt the environment was conducive to learning.

DNP Program Satisfaction Survey

2014 Graduate DNP Program Satisfaction Survey Report

In December of 2014, four (4) DNP (Family Nurse Practitioner) students graduated. Electronic surveys were completed by 2 (50.0%) of the DNP students who graduated in December 2014. Results are compiled and summarized.

DNP Purpose of the Program:	MEANS
Prepares graduates to be nurse leaders at the doctoral level	4.0
Prepares graduates for evidence-based research, innovative practice, and multidimensional partnerships in a diverse society	4.0

DNP Program Outcomes:	Means
Develop and evaluate new practice approaches based on science from nursing and other disciplines.	4.0
Employ leadership skills to design and evaluate strategies that improve care delivery and outcomes for diverse populations.	4.0
Lead interprofessional teams and partnerships to analyze and improve health outcomes for individuals, families, and communities.	4.0
Assume a leadership role in the application and dissemination of best evidence for practice to promote efficient, effective, and equitable patient-centered care.	4.0
Design, influence, and implement health care an ethical policies that affect financing, practice regulation, access to care and outcomes for individual, families, and communities	4.0
Analyze scientific data and synthesize concepts to develop, implement, and evaluate interventions that address health promotion and disease prevention for culturally diverse populations.	4.0
Utilize and evaluate information and communication technologies to improve health care and to implement change in health care systems.	4.0
Utilize advanced clinical judgment and specialty focused competencies to improve the care of diverse populations.	4.0

COMMENTS: I believe that if communication between certain faculty and students was more constructive rather than destructive, the educational experience would have been much higher quality, more meaningful, and more conducive to learning.

Quality of Instruction - Core Courses:	Means
NUR 701 Advanced Theory/ Ethical Issues in Advance Nursing	4.0
NUR 704 Healthcare Policy and Economics in Clinical Practice	3.5
NUR 706 Evidenced Based Nursing Practice: Theory, Design, & Model	3.5
NUR 708 Advanced Statistics for Clinical Practice	4.0
NUR 710 Epidemiology/Population Health	4.5
NUR 720 Leadership and Role Development in Advanced Nursing Practice	4.0
NUR722 Business Management/Quality Care	3.5
NUR724 Information Management/Decision Support	4.0
NUR 787 Scholarly Project Development	2.5
790 Scholarly Project	2.5

FNP Specific Courses:	Means
NUR 602 Advanced Health Assessment	0.0

NUR 605 Advanced Pharmacology	0.0
NUR 624 Differential Diagnosis	0.0
NUR 630 Family Nurse Practice I	0.0
NUR 634 Family Nurse Practice II	0.0
NUR 638 Family Nurse Practice III	0.0
NUR 680 FNP Review Course	0.0

COMMENTS: There are no responses.

Family Nurse Practitioner Specific Practicum Courses:	Means
NUR 625 Advanced Health Assessment Practicum	0.0
NUR 631 Family Nurse Practice I Practicum	0.0
NUR 635 Family Nurse Practice II Practicum	0.0
NUR 639 Family Nurse Practice III Practicum	0.0

COMMENTS: There are no comments

Quality of Resources and Facility	Means
Audiovisual equipment (SMART classroom capabilities, video camera, etc.)	5.0
Simulation/Lab Equipment and Supplies	0.0
Computer lab software and hardware programs	5.0

Student facilities and equipment (copier, vending machines, refrigerator, microwave, etc.)	4.0
Academic support lab	4.0
Writing center	4.0
Technology Programs (Typhon, Conferencing, Shadow Health, Canvas Leaning Management System)	4.0
IT support	4.0
Library support	4.5

COMMENTS: There are no responses

What do you see as the overall strengths of the DNP program at DSU?	Means
Preparation for Certification	**4.0**
Flexible Classes	**4.5**
Online	**4.5**
Flexibility of Faculty	**4.0**
Teaching Expertise	**3.5**
Quality of Courses	**4.0**
Simulation/Skills lab equipment & supplies	**5.0**
Library support/availability	**4.5**
Quality of Program Advisement	**4.0**
Library holdings	**4.0**
Technical Support	**4.0**

COMMENTS: There are no responses

What do you see as the greatest need for improvement in the DNP program at DSU?	Means
Preparation for Certification	2.5
Flexible Classes	2.0
Online	2.0

Flexibility of Faculty	2.5
Teaching Expertise	2.5
Quality of Courses	2.5
Simulation/Skills lab equipment & supplies	1.0
Library support/availability	2.0
Quality of Program Advisement	2.0
Library holdings	2.0
Technical Support	2.0

COMMENTS: There is no response

Overall Satisfaction Indicator	Means
I would recommend the Delta State University Robert E. Smith School of Nursing DNP Program to a friend or colleague.	100% (2 of 2 answers yes)

The data from 2 DNP [post -FNP] students provided information that supported they were generally pleased with the program and confident about their preparation for functioning as a nurse leader in the doctorial role and program outcomes were met. 100 percent of the students would recommend the program to a friend or colleague. Overall strengths of the program were reported with mean scores of 3.5 (teaching expertise) to 5.0 (Simulation/Skills Lab equipment and supplies).   The greatest needs for improvement indicated by the students were reported with mean scores of 1.0 (Simulation/Skills lab equipment & supplies) to 2.5 (Flexibility of faculty, teaching expertise, and quality of courses). There were no additional comments made in regards to the strengths and areas for improvement.

The following should be taken into account concerning these survey results:

1). Only FNP DNP students graduated from this first cohort of students. Program questions specific to the nurse practitioner were N/A yielding 0.0 mean score.

2). All DNP program outcomes were met with a mean average rating of 4.0.

3). All core courses received a mean average rating of 2.5 to 4.0.

Delta State University
School of Nursing
Program Effectiveness Committee
2014 Undergraduate RN-BSN Program Satisfaction Survey

One of the twelve (8.3%) RN-BSN students submitted electronic surveys. Results are compiled and summarized as detailed below.

1. Purpose of the Program

RN-BSN Purpose of the Program	Mean
Prepares for professional nursing practice as a generalist	4.0
Prepares for continuous learning and advanced study	4.0

2. RN-BSN Program Outcomes

RN-BSN Program Outcomes	Mean
Apply nursing, natural, and behavioral science concept to the practice of nursing.	4.0
Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care in a collaborative environment	4.0
Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession.	4.0
Utilize research in the delivery of health care	4.0
Advocate for the improvement in healthcare through participation in professional and political processes	4.0
Provide individualized nursing care that focuses on health promotion and disease and injury prevention	4.0
Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach	4.0

COMMENTS:
   None Provided

3. Quality of Instruction

Course	Mean
NUR 311 Comprehensive Health Assessment	4.0
NUR 312 Basic Pathophysiology	4.0
NUR 358 Transition to Professional Nursing	4.0
NUR 309 Nursing Research	4.0
NUR 314 Health Policy and Ethical Decision Making	4.0
NUR 403 Community Health Nursing	4.0
NUR 402 Management of Client Care	4.0
NUR 409 Evidence Based Practice	4.0

COMMENTS:
   None provided

4. Clinical and Practicum Quality

Course	Mean
NUR 331 Comprehensive Health Assessment	4.0
NUR 407 Directed Study	4.0
NUR 442 Management of Client Care	4.0
NUR 443 Community Health Nursing	4.0

COMMENTS:
    None provided.

5. Quality of Physical Resources and Facility

Rate the Quality of the Following	Mean
Audiovisual equipment (TV/VCR, SMART classroom capabilities, video camera, etc.)	4.0
Skills lab equipment and supplies	4.0
Computer lab software and hardware programs	4.0
Electronic equipment for student use (copier, vending machines, refrigerator, microwave, etc.)	4.0
Academic support lab	4.0
Writing center	4.0
Technology Programs (Turning Point, Typhon, WIMBA, Blackboard)	4.0
IT support	4.0
Library support	4.0

COMMENTS:
    None Provided

6. Overall satisfaction indicators:

    I would recommend the DSU Robert E. Smith School of Nursing to a friend or colleague.

        Yes = 1 (100%)

COMMENTS:
    None Provided

7. Reported strengths of the RN-BSN program

    1. Flexible classes – 100%
    2. Teaching expertise – 100%

3. Quality of courses – 100%
4. Faculty support – 100%
5. Quality of program advisement – 100%
6. Library support/availability – 100%
7. Online format – 100%
8. Skills lab equipment and supplies – 100%

     COMMENTS:
        None Provided

8. Reported greatest needs for improvement

    1. Technical support – 100%

     COMMENTS:
        None Provided

9. Suggested Changes

    "Not as many research papers and cut some of the clinical hours."

10. Summary

The data from one (1) RN-BSN student provided information that demonstrated she felt confident about the preparation for not only a professional nursing practice but also as a generalist. The respondent (100%) would recommend the program to a friend or colleague. Flexible classes, teaching expertise, quality of courses, faculty support, quality of program advisement, library support/availability, online format and skills lab equipment and supplies identified as overall strengths for this program. The only item identified as an area needing improvement was technical support. The respondent recommended decreasing the number of research papers and clinical hours to improve the program.

FACULTY BENCHMARKS 2010

#	DESCRIPTION	MET	NOT MET	COMMENT	RECOMMENDATION
1	100% of nursing faculty will attain at least 10 CE units annually	X 100%		• 14/14 faculty met or exceeded 10 contact hours during 2010 • Total contact hours = 350.76 • Average contact hours per faculty = 25.05	1. 100% of nursing faculty will attain a minimum of 10 contact hours (IHL standard)
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester		**X** **71.42%**	• 10/14 faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2010	1. Clarify whether evaluations are DSU or RESSON • Recommendation: All faculty report on RESSON evaluations
3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	X 71.42%		• 10/14 faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach	1. Clarify: Did faculty conduct the activity or just taught in the course where simulation was incorporated? • Recommendation: Include on the benchmark only if faculty assisted with/conducted the activity during their assigned section of the course
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level		**X** **35.71%**	• 5/14 faculty presented • International • 5 National • 4 Regional • 3 State	1. Clarify: Presentations type - research findings, peer-reviewed, etc. • Recommendation: Reword benchmark based on DSU tenure policy • Identify type of presentations in benchmark – poster, oral, etc. • Clarify: If faculty present at non-peer reviewed events where does this go in the portfolio and annual evaluation?
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor		**X** **7.14%**	• 1/14 faculty was published in a non-peer reviewed journal	1. Clarify: Base this benchmark from tenure policy also. Does submitting for publication count as scholarship or does the article have to be published? 2. Clarify: If faculty publish in a non-peer reviewed journal/book/etc where does this go in the portfolio and annual evaluation?

6	10% of nursing faculty will submit a grant or serve as a grant reviewer	X 28.57%		• 4/14 faculty submitted or was awarded a grant and/or was a grant reviewer • 6 grants submitted • 5 grants awarded for a total of $159,551 • 2 grants reviewed	1. Clarify: If a grant is submitted but not awarded does this meet the benchmark? 2. Clarify: What is considered a grant review? Does it have to be peer-reviewed?
7	60% of faculty will participate in community services	X 78.57%		• 11/14 faculty participated in community services Faculty participated in a total of 45 events	
8	60% of faculty will engage in faculty practice to maintain nursing competency	X 71.42%		• 10/14 faculty engaged in practice	1. Clarify: Does faculty have to report total hours practiced during the year? How much practice maintains competency? • NPs are required to practice a minimum of 1500 hours during the 5 year certification period (minimum 300 hrs/year or 6 hours/week)

FACULTY BENCHMARKS 2011

#	DESCRIPTION	MET	NOT MET	COMMENT
1	100% of RESSON faculty will attain at least 10 contact hours annually		**X** **92.85%**	• 13/14 faculty met or exceeded 10 contact hours during 2011 • Total contact hours = 287 • Average contact hours per faculty = 20.5
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	X 92.85%		• 13/14 faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2011
3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	X 71.42%		• 10/14 faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level		**X** **28.57%**	• 4/14 faculty presented during 2012 Oral Presentations: • International • National - • Regional • State - 1 • Local Poster Presentations: • International • National • Regional - 1 • State - 2

#	DESCRIPTION	MET	NOT MET	COMMENT
				• Local -
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor	X 21.42%		• 3/14 faculty • 2 were book reviewers • 1 was published
6	10% of nursing faculty will submit a grant or serve as a grant reviewer	X 35.71%		• 5/14 faculty submitted or was awarded a grant and/or was a grant reviewer • grants submitted – 4 • grants awarded for a total of 2 of 3 - $43,572.00
7	100% of RESSON faculty serve on two or more RESSON standing committees	X 100%		• 14/14 faculty serve on two or more RESSON standing committees
8	75% of RESSON faculty serve on one or more University committee, council, taskforce or other appointed/elected positions		X 71.42%	• 10/14 faculty serve on one or more University committee, council, taskforce, or other appointed/elected position
9	60% of faculty will participate in community services	X 85.71%		• 13/14 faculty participated in community services • Faculty participated in a total of 44 events
10	60% of faculty will engage in faculty practice to maintain nursing competency	X 64.28%		• 9/14 faculty engaged in practice

FACULTY BENCHMARKS 2012

#	DESCRIPTION	MET	NOT MET	COMMENT
1	100% of RESSON faculty will attain at least 10 contact hours annually	X 100%		• 14/14 faculty met or exceeded 10 contact hours during 2012 • Total contact hours = 481.71 • Average contact hours per faculty = 34.40
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	X 92.85		• 13/14 faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2012
3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	X 64.28		• 9/14 faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach

#	Description	MET	NOT MET	COMMENT
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level	X 57.14%		• 8/14 faculty presented during 2012 Oral Presentations: • International • National - 3 • Regional • State - 1 • Local Poster Presentations: • International • National • Regional - 5 • State • Local - 1
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor		**X 7.14%**	• 1/14 faculty was a peer-reviewer
6	10% of nursing faculty will submit a grant or serve as a grant reviewer	X 35.71%		• 5/14 faculty submitted or was awarded a grant and/or was a grant reviewer • grants submitted – 7 • grants awarded for a total of 4 of 5 - $22,550 • 1 unknown until summer • grants reviewed
7	100% of RESSON faculty serve on two or more RESSON standing committees	X 100%		• 14/14 faculty serve on two or more RESSON standing committees
8	75% of RESSON faculty serve on one or more University committee, council, taskforce or other appointed/elected positions	X 85.71%		• 12/14 faculty serve on one or more University committee, council, taskforce, or other appointed/elected position
9	60% of faculty will participate in community services	X 85.71%		• 12/14 faculty participated in community services during 2012 • Faculty participated in a total of 57 events during 2012
10	60% of faculty will engage in faculty practice to maintain nursing competency		**X 57.14%**	• 8/14 faculty engaged in practice during 2012

Should we add benchmarks related to advisement and recruitment?

FACULTY BENCHMARKS 2013

#	DESCRIPTION	MET	NOT MET	COMMENT
1	100% of nursing faculty attain at least 10 contact hours annually	MET 100%		• 14/14 (100%) faculty met or exceeded 10 contact hours during 2013 • Total contact hours = 403.1 • Average contact hours per faculty = 28.79
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	MET 100%		• 15/15 (100%) faculty met or exceeded 3.0 on all faculty/course/clinical

3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	MET 53.3%		evaluations during spring, summer, fall semesters in 2013 • 8/15 (53.3%) faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level	MET 40.0%		• 6/15 faculty presented during 2012 Oral Presentations: • International - 0 • National - 0 • Regional - 0 • State - 2 • Local - 3 Poster Presentations: • International - 0 • National - 0 • Regional - 0 • State - 7 • Local - 0
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor		NOT MET 6.6%	• 1/15 (6.6%) faculty Reviewer for 7 chapters in a book Author of two (2) chapters submitted in 2013 and will be published in 2014
6	10% of nursing faculty will submit a grant or serve as a grant reviewer	MET 20.0%		• 3/15 (20.0%) faculty submitted or was awarded a grant and/or was a grant reviewer • Established Grants continued – 1 – 3rd year $20,000 • New Grants submitted – 3 • Grants awarded 1 - $1,000 – one year grant award 1 - $1,574,546 – three year grant award
7	100% of RESSON faculty serve on three or more Robert E Smith School of Nursing committees	MET 100%		• 15/15 (100%) faculty serve on three or more Robert E Smith School of Nursing committees
8	75% of RESSON faculty serve on one or more University committee, council, taskforce or other appointed/elected positions	MET 80.0%		• 12/15 (80.0%) faculty serve on one or more University committee, council, taskforce, or other appointed/elected position
8.1 New 2013	100% of nursing faculty participate in two or more recruitment events annually		NOT MET 92.85%	• 13/14 (92.85%) nursing faculty participated in two or more recruitment events in 2013 • Faculty participated in a total of 33 recruitment events during 2013
8.2	100% of nursing faculty participate in academic advisement each semester for students enrolled in programs and for students pursuing enrollment in a nursing program			•
9	60% of faculty will participate in community services	MET 86.6%		• 13/15 (86.6%) faculty participated in community services • Faculty participated in a total of 45 community events
10	60% of faculty will engage in faculty practice to maintain nursing competency	MET 60.0%		• 9/15 faculty engaged in practice during 2013

FACULTY BENCHMARKS 2014

#	DESCRIPTION	MET	NOT MET	COMMENT
1	100% of nursing faculty attain at least 10 contact hours annually	MET 100%		• 15/15 (100%) faculty met or exceeded 10 contact hours during 2014 • Total contact hours = 403.1 • Average contact hours per faculty = 38.24
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	MET 93.3%		• 14/15 (93.3%) faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2014
3	100% of nursing faculty participate in academic advisement each semester for students enrolled in program and for students pursuing enrollment in nursing programs	MET 100%		• 15/15 (100%) faculty participated in academic advisement. The total number of students advised by each faculty ranged from 12 to 159. • Total number of students advised in 2014 = 657 • Average # students advised/faculty = 43.8
4	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	MET 66.6%		• 10/15 (66.6%) faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach
5	40% of nursing faculty will present research findings at conferences at the state, regional, or national level	MET 53.3%		• 8/15 faculty presented during 2014 Oral Presentations: • International - 0 • National - 1 • Regional - 4 • State - 4 • Local - 1 • Local - 0
6	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor	MET 33.3%		• 5/15 (33.3%) faculty submitted for publication or were published in a peer reviewed journal/book as an author, reviewer, or editor • 5 faculty submitted for publication; 1 faculty published
7	10% of nursing faculty will submit a grant or serve as a grant reviewer	MET 13.3%		• 2/15 (13.3%) faculty submitted or was awarded a grant and/or was a grant reviewer • 2 grants submitted • 1 grant new award in 2014 - $329,632 • 1 grant awarded continuing funding for year 2 -$524,787 • Total grants awarded in 2014 = $854,419
8	100% of nursing faculty serve on three or more RESSON standing committees	MET 100%		• 15/15 (100%) faculty serve on three or more Robert E Smith School of Nursing committees • Total number of committees range from 3 – 6.
9	75% of RESSON faculty serve on one or more University committee, council, taskforce or other appointed/elected positions	MET 80.0%		• 12/15 (80.0%) faculty serve on one or more University committee, council, taskforce,

				• or other appointed/elected position. • The number of committees faculty serve on range from 0 – 5 • The average number of committees the 12 faculty members serve pm = 2.5
10 **New 2013**	100% of nursing faculty participate in two or more recruitment events annually		NOT MET 66.6%	• 10/15 (66.6%) nursing faculty participated in two or more recruitment events in 2014 • Faculty participated in a total of 37 recruitment events during 2014 • Total # of documented participants at the 37 events = 3,029 • Sic of the 37 events did not provide the number of participants/participant lists
11	75% of nursing faculty hold members hold membership in professional organizations at state, national, or international levels.	MET 86.6%		• 13/15 (86.6%) faculty hold membership in professional organizations • The number of professional organizations per faculty ranges from 2 - 9
12	40% of nursing faculty hold leadership positions in professional organizations at local, regional, state, national, or international levels.	MET 60%		• 9/15 (60%) faculty hold leadership positions in professional organizations • 2 at local level • 1 at regional level • 7 at state level
13	60% of faculty will participate in community services	MET 66.6%		• 10/15 (66.6%) faculty participated in community services
14	60% of faculty will engage in faculty practice to maintain nursing competency	MET 86.6%		• 13/15 faculty engaged in practice during 2014

DELTA STATE UNIVERSITY
ROBERT E. SMITH SCHOOL OF NURSING
FACULTY BENCHMARKS
5 YEAR AGGREGATE DATA
2010 - 2014

YEAR	FACULTY BENCHMARKS - TEACHING			FACULTY BENCHMARKS - SCHOLARSHIP				FACULTY BENCHMARK - SERVICE				FACULTY BENCHMARK PRACTICE
	#1	#2	#3	#4	#5	#6	#7	#8	8.1	8.2	#9	#10
	100% of nursing faculty will attain at least 10 CE units annually	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	40% of nursing faculty will present research findings at conferences at the state, regional, or national level	10% of nursing faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor	10% of nursing faculty will submit a grant or serve as a grant reviewer	100% of nursing faculty will serve on three or more RESSON committees	75% of nursing faculty serve on one or more University committee, council, taskforce, or other appointed-elected positions	100% of nursing faculty participate in two or more recruitment events annually *New benchmark 2013*	100% of nursing faculty participate in academic advisement each semester for students enrolled in programs and for students pursuing enrollment in a nursing program *New benchmark 2013*	60% of nursing faculty participate in community services	60% of faculty will engage in faculty practice to maintain nursing competency
2010	100% Met	**71.42% Not Met**	71.42% Met	**35.71%**	**7.14%**	28.57% Met	n/a	n/a			78.57% Met	71.42% Met

Year				Not Met	Not Met							
2011	**92.85% Not Met**	92.85% Met	71.42% Met	**28.57% Not Met**	21.42% Met	35.71% Met	100% Met	**71.42% Not Met**			85.71% Met	64.28% Met
2012	100% Met	92.85% Met	64.28% Met	57.14% Met	**7.14% Not Met**	35.71% Met	100% Met	85.71% Met			85.71% Met	**57.14% Not Met**
2013	100% Met	100% Met	53.3% Met	40.0% Met	**6.6% Not Met**	20.0% Met	100% Met	80.0% Met	**92.85% Not Met**		86.6% Met	60.0% Met
2014	100% Met	93.3% Met	100% Met	66.6% Met	53.3% Met	13% Met	100% Met	80% Met	**86.6% Not Met**	100% Met	66.6% Met	86.6% Met

Delta State University Robert E. Smith School of Nursing
3 Year MSN Alumni Survey 2014

I. MSN Alumni

A. 3 year Graduate Results—Graduated 2011; Total number graduated = 33
In May of 2011, thirty three (21 FNP, 9 NA, & 3 NE) MSN students
graduated. Electronic surveys were sent to graduates and resulted in six (18%-
3 FNP, 2 NE, 1 NA) surveys returned.

B. Demographic Data
1. Age range: 6 (100%) from 36 and over.
2. Gender 6 (100%) females.
3. Ethnicity: 3 (50%) Caucasian; 3 (50%) African American
4. Role Concentration: 3 (50%) Family Nurse Practitioners; 2
(33%) Nurse Educators; 1 (17%) Nurse Administrator
5. Certification: 2 (33%) reported being certified as Family Nurse
Practitioner. 1 (17%) reported being certified as a Nurse
Administrator. 1 (17%) reported being certified as a Nurse
Educator. 2 (33%) did not report certification.
6. State licensed as a Registered Nurse. 6 (100%) are licensed in
Mississippi; Other states – 2 (33%) Louisiana; 1 (17%) Missouri;
1 (17%) California & Massachusetts.
7. State certified as Advanced Practice Nurse. 4 (66%) Mississippi;
1 (17%) Missouri; 2 (33%) not certified in any state.
8. Certified in a specialty area of practice. 2 (33%) reported
specialty certification. 4 (67%) denied specialty certification.
9. Employed: 5 (83%) are employed full time in the role they were
prepared for in their MSN program at DSU.
10. Provide care to MS Delta Residents: 2 (33%) practice nursing
for residents of the Mississippi Delta Region; 4 (66%)
respondents replied no.
11. Place Employed: 1 (16%) are employed in a School of Nursing;
2 (33%) are employed in a hospital; 1 (33%) is employed in a
Physician's Office; Rural Health Clinic 1 (33%); 1 (16%) Other-
Director of Clinical Services.
12. Further education: 5 (83%) of the respondents denied currently
being in school; 1 (16%) reported being currently in school.
13. 5 (83%) reported plans to obtain a doctorate; 1 (16%) denied
plans to obtain a doctorate outside of nursing.

C. Achievement of Program Outcomes

Graduate Program Objectives	Mean
Integrate nursing, related sciences, and emerging evidence to improve	4.00

health outcomes and safety for diverse populations.	
Utilize leadership skills to design and implement strategies that improve care delivery and outcomes	*4.17*
Contribute to the integration of healthcare services to improve quality and safety across the continuum of care.	*4.17*
Employ collaborative leadership strategies to advocate, mentor, and function within inter-professional teams and partnerships.	*4.17*
Translate theory and research to provide evidence based nursing practice and improve outcomes.	*4.17*
Analyze and interpret the effects of healthcare policies, ehtics, and regulatory processes to influence practice and outcomes.	*4.17*
Integrate individual and population based health promotion and prevention strategies to provide equitable, efficient, and effective global healthcare.	*4.17*
Promote the use of information and communication technologies to provide safe, quality, and cost effective healthcare.	*4.17*
Apply advanced knowledge, skills, and competencies to design, implement, and evaluate direct and indirect care for individuals, families, and communities.	*4.17*

D. Achievement of Graduate Program Purposes

Purposes of the Program	*Mean*
Prepares for functioning in the advanced practice role as a family nurse practitioner, nurse administrator, and/or nurse educator.	*4.00*
Prepares for continuous learning and doctoral study.	*4.00*

E. Level of Satisfaction with DSU Robert E. Smith School of Nursing MSN
   Program

Survey Items	Mean
Education in the DSU School of Nursing	4.33
Core courses	4.17
Clinical courses	4.17
Specialty courses	4.00
Clinical practice sites	4.40
Clinical experience	4.40
Feedback from clinical preceptors	4.60
Advisement	4.33
On-line format	4.33
Graduate faculty accessibility	4.33
Helpfulness of graduate faculty	4.33
MSN Faculty level of expertise	4.33
Classroom facilities/equipment	4.33
DSU library services	4.17
Technology support services	4.17
Skills lab	4.17
Computer lab	4.17
Computer software/programs	4.17
Instructional materials/resources	4.17

F. 5 (83%) indicated they would recommend the program.

G. Strengths of the MSN program at DSU

Survey Items	*Percentages*
On-line format	83.33%
Faculty Support	66.67%
Flexible Classes	66.67%
Flexibility of Faculty	66.67%
Teaching Expertise	66.67%
Quality of Courses	50.00%
Technical Support	50.00%
Dean Support	50.00%
Quality of Program Advisement	33.33%
Preparation of Certification	16.67%
Library Support/Availability	16.67%
Nurse Practitioner Director Support	16.67%
No Opinion	16.67%
Chair of Academic Programs support	0.00%
Recruitment Efforts	0.00%
Library Holdings	0.00%
Other	0.00%

H. Weaknesses/Areas to Improve

Survey Items	*Percentages*
On-line format	0.00%
Faculty Support	16.67%
Flexible Classes	0.00%
Flexibility of Faculty	16.67%
Teaching Expertise	16.67%
Quality of Courses	16.67%
Technical Support	0.00%
Dean Support	0.00%
Quality of Program Advisement	16.67%
Preparation of Certification	0.00%
Library Support/Availability	0.00%
Nurse Practitioner Director Support	0.00%
No Opinion	50.00%
Chair of Academic Programs support	0.00%
Recruitment Efforts	16.67%
Library Holdings	16.67%
Other	0.00%

II. General Summary:

The results of this survey of 2011 graduates netted an 18% return rate from 6 females. The six graduates consisted of 3 FNPs, 2 NE, and 1 NA. Four (100%) were employed full-time. Two (50%) were practicing in the Mississippi Delta. Two worked in a hospital, one in a physician's office, one in a school of nursing, one in a rural health clinic, and one as a director of clinical services (setting not disclosed. The ratings on each program outcomes ranged from 4.00 to 4.17. The program purposes were rated 4.00. The evaluation of program satisfaction netted mean scores of 4.00 to 4.60. Some of the greatest strengths of the program were online format, faculty support, flexible classes, flexibility of faculty, teaching expertise, quality of courses, technical support, and dean support. Five (83%) of respondents stated they would recommend the MSN program.

Delta State University
Robert E. Smith School of Nursing
Program Effectiveness Committee

2014 Graduate MSN Program Satisfaction Survey

In May of 2014, sixteen (16) MSN (Family Nurse Practitioner) students graduated. Electronic surveys were completed by the fourteen (87.5%) MSN students who graduated in May 2014. Results are compiled and summarized.

Purpose of the Program

MSN Purpose of the Program	Mean
Prepares for functioning in an advanced practice role	4.36
Prepares for advanced study	4.36

MSN Program Outcomes

MSN Program Outcomes	Mean
Integrate nursing, related sciences, and emerging evidence to improve health outcomes and safety for diverse populations	4.43
Utilize leadership skills to design and implement strategies that improve care delivery and outcomes	4.36
Contribute to the integration of healthcare services to improve quality and safety across the continuum of care	4.36
Translate theory and research to provide evidence based nursing practice and improve outcomes	4.43
Promote the use of information and communication technologies to provide safe, quality, and cost effective healthcare	4.43
Analyze and interpret the effects of healthcare policies, ethics, and regulatory processes to influence practice and outcomes	4.50
Employ collaborative leadership strategies to advocate, mentor, and function within inter-professional teams and partnerships	4.43
Integrate individual and populations based health promotion and prevention strategies to provide equitable, efficient, and effective global healthcare	4.43
Apply advanced knowledge, skills, and competencies to design, implement, and evaluate direct and indirect care for individuals, families, and communities	4.29

COMMENTS:
- No further input
- Program needs better organization
- None

Quality of Instruction

Core Courses	Mean
NUR 601 Advanced Theoretical Issues in Nursing and Ethics	4.50
NUR 604 Advanced Health care Policy and Politics	4.64
NUR 606 Advanced Nursing Research and Evidenced Based Strategies	4.64
NUR 607 Instructional Methodologies	4.67
NUR 687/690 Research Project/Thesis	4.64

Nurse Administration Specific Courses	Mean
NUR 615 Administrative Concepts	5.00
NUR 616 Nursing Administration I	5.00
NUR 619 Nursing Administration II	5.00
NUR 622 Nursing Administration III – Role Synthesis	4.80
MGT 600 Management Problems	5.00
MBA 505 Productivity Software for Executives	5.00
MGT 605 Human Resource Management	5.00
MGT 620 Recruitment, Selection, and Performance Appraisal	5.00

Nurse Educator Specific Courses	Mean
NUR 602 Advanced Health Assessment	4.55
NUR 605 Advanced Pharmacology	4.27
NUR 612 Adult Education I	5.00
NUR 613 Adult Education II	5.00
NUR 614 Adult Education III	5.00
NUR 617 Curriculum Design and Evaluation	5.00
NUR 621 Role Synthesis (Nurse Educators)	5.00
NUR 623 Teaching and Learning Theory	5.00

FNP Specific Courses	Mean
NUR 602 Advanced Health Assessment	4.57
NUR 605 Advanced Pharmacology	4.36
NUR 624 Differential Diagnsis	4.64

NUR 630 Family Nurse Practice I	4.29
NUR 634 Family Nurse Practice II	4.14
NUR 638 Family Nurse Practice III	4.21
NUR 620 Role Synthesis (Nurse Practitioner)	4.43
NUR 680 FNP Review Course	4.64

Nursing Elective Courses	Mean
NUR 686 (EKG Interpretation)	4.25

Clinical and Practicum Quality

Nurse Administrator Specific Practicum Courses:	Mean
NUR 645 Administrative concepts Practicum	3.00
NUR 646 Nursing Administration I Practicum	3.00
NUR 649 Nursing Administration II Practicum	3.00
NUR 622 Nursing Administration III – Role Synthesis Practicum	3.00

Nurse Educator Specific Practicum Courses:	Mean
NUR 618 Nurse Educator Practicum	3.00
NUR 625 Advanced Health Assessment Practicum	4.00
NUR 642 Adult Education I Practicum	3.00
NUR 643 Adult Education II Practicum	3.00
NUR 644 Adult Education III Practicum	3.00

Family Nurse Practitioner specific Practicum Courses:	Mean
NUR 625 Advanced Health Assessment Practicum	4.43
NUR 631 Family Nurse Practice I Practicum	4.21
NUR 635 Family Nurse Practice II Practicum	4.21
NUR 639 Family Nurse Practice III Practicum	4.21

Quality of Resources and Facility

Rate the Quality of the Following	Mean

Audiovisual equipment (TV/VCR, SMART classroom capabilities, video camera, etc.)	4.42
Skills lab equipment and supplies	4.50
Computer lab software and hardware programs	4.55
Simulation equipment and supplies	4.40
Electronic equipment for student use (copier, vending machines, refrigerator, microwave, etc.)	4.20
Academic support lab	4.22
Writing center	4.25
Technology Programs (Turning Point, Typhon, WIMBA, Blackboard)	3.91
IT support	4.33
Library support	4.33

Overall Satisfaction Indicators:

___ I would recommend the DSU School of Nursing to a friend or colleague.

12 students (85.7%) responded Yes
2 student (14.2%) responded No

COMMENTS:
- There are no responses.

Reported strengths of the MSN program in descending order:
1. Flexible Classes – 57.14%
2. Preparation for Certification – 50.00%
3. Supportive Nurse Practitioner Director – 42.86%
4. Online format – 35.71%
5. Flexibility of Faculty – 28.57%
6. Quality of Courses – 28.57%
7. Faculty Support – 28.57%
8. Teaching Expertise – 21.43%
9. Quality of Program Advisement – 21.43%
10. Library support/availability – 21.43%
11. Library holdings – 21.43%
12. Supportive Chair of Academic Programs – 21.43%
13. Skills lab equipment & supplies – 21.43%
14. Recruitment Efforts – 14.29%
15. Administrative Support – 14.29%
16. Supportive Dean – 14.29%
17. No Opinion – 14.29%
18. Technical Support – 7.14%
19. Other, please specify – 0.00%

COMMENTS:
- There are no responses.

The greatest reported need for improvement reported in descending order.
1. Other, please specify – 42.86%
2. No Opinion – 35.71%
3. Teaching Expertise – 21.43%
4. Flexible Classes – 14.29%
5. Preparation for certification – 14.29%
6. Flexibility of Faculty – 7.14%
7. Administrative Support – 7.14%
8. Quality of Courses – 0.00%
9. Recruitment Efforts – 0.00%
10. Technical Support – 0.00%
11. Faculty Support – 0.00%
12. Online format – 0.00%
13. Library holdings – 0.00%
14. Skills Lab equipment and supplies – 0.00%
15. Supportive Nurse Practitioner Director – 0.00%
16. Library support/availability – 0.00%
17. Quality of Program Advisement – 0.00%
18. Supportive Dean – 0.00%
19. Supportive COAP – 0.00%

COMMENTS:

- Faculty to be more prepared and return grades promptly
- Preparation for on campus student appearances. Put packets together prior to day of.
- Above when state prepartion for certification exam, meaning that the Barley review book should be introduce earlier in the course of study. This will give students more time to review while in the program and also clears up alot of information
- Lecture and more teaching of the material from instructors
- Organization
- Better organization

ADDITIONAL COMMENTS:
- Acknowlegements: Mrs. Judy, without her all would be lost at RESSON. I'm sure everyone would agree. She is the source of all information. When Mrs. Judy does not have an answer to my question, I fear that it is not known by anyone. However, she always has an accurate and reliable resource that does have the answer available. It's kinda freaky really:-) Dr. Bingham, the best. She is flexible with due dates and that is really important to busy students. She expects excellence, but conveys a respectful non condescending demeanor. Dr. Harrod, kind. She expects quality work on all assignments. She is professional and conveys empathy without compromising policy. Dr. Polk, the real deal. She is a very effective multitasker, enough said...... Dr. Adams, an excellent faculty

member. Dr. Adams conveys an excellent knowledge base. As a whole the faculty are awesome, but it appears that they are grossly overworked. Meaning from my viewpoint they have to many irons in the fire per person. It is difficult to be really great in any specific area if one is overextended. I often felt that faculty were not adequately prepared for on campus events with students. Calendar dates are assigned prior to students coming on campus as we all know. It would be great to come to campus and be given well prepared well organized printed materials, faculty appeared well prepared for presentations, and demonstrated knowledge of subject matter in a cohesive manner. My suggestions are: -Put together packets of need to know information, course materials, and support materials from all courses that will be attended during the time the students are on campus. -Encourage students to start reviewing Barkley at the beginning of the NP program -Make uphold and graham mandatory from beginning -provide students with a list of urls of top guideline sites in addition to encouraging them to use sources they find independently (It is very overwhelming when you don't know where to even begin) -Do a complete visual and verbal demonstration of a head to toe assessment performed by faculty in the summer session prior to start of semester 1. Once instructors have completed the 1 hour demonstration of how this assessment is to be done then do the breakout sessions as they are currently done. It would be helpful to see it all pulled together. -If a faculty puts it in writing that an assignment will be posted on a certain date, then follow
thru or at least offer students the courteous of an explanation. We are paying for our education and this is requested as a professional courtesy. -It should be absolutely mandatory for grades to be posted within a reasonable time frame. Less than 1 week should be the target. -Advanced pharmacology textbooks: DISCARD, THEY ARE NOT HELPFUL OR USER FRIENDLY!

- no comment

Summary

The data from 14 MSN [FNP] students provided information that supported they were generally pleased with the program and confident about their preparation for functioning in an advanced practice role. Slightly over 85 percent (85.7%) of the students would recommend the program to a friend or colleague. Flexible classes, preparation for certification, support of the NP Director, online format, were among the top overall strengths reported for this program. The greatest needs for improvement indicated by the students were listed in other comments. This list included more organization, better preparation for on campus student visits, more lectures from faculty on course content, and return of grades promptly. Over thirty five percent (35.71%) had no opinion for greatest needs for improvement. The following should be taken into account concerning these survey results:

1). Only FNP MSN students graduated from this program, questions specific to the nurse educator and nurse administrator programs were answered by some of the participants.

2). All MSN program outcomes were met with a mean average rating of 4.43 or greater.

3). All core courses received a mean average rating of 4.50 or greater.

4). All FNP specific courses received a mean average rating of 4.14 to 4.64.

5). Nursing elective courses (NUR 686 EKG Interpretation) was rated 4.25.

6). FNP specific practicum courses received a mean average rating of 4.21 to 4.43.

7). Overall quality of the program received a mean average rating of 3.91 to 4.55.

Delta State University
Robert E. Smith School of Nursing
Program Effectiveness Committee
Advisory Council Employer Survey 2014 Report

Six (6) survey were completed by advisory council and employers in 2014 (n=6). Three (3) was emailed to designated personnel but not returned to School of Nursing.

1. Surveys distribution includes (but not limited to) hospitals, home health care agencies, and other nursing services provided to the community (i.e. AirVac) one hundred percent (100%) of the respondents (n=6) was from hospitals.

2. Each facility provided description of the agency/facility as follows:

    The six facilities responding identified their hospital as an **acute care** facility. Of the six acute care facilities, they were further identified as providing care in Rehabilitation, Geri-psych units, Skilled Nursing and Swing Bed units; other services in outpatient clinics for primary care, rural health, and specialty clinics. The facilities also provide care/services through home health and hospice agencies, nursing home long term care and Assisted living facilities.

HOSPITAL	Acute Care	Long Term Acute Care (LTAC)	Rehabilitation	Skilled Nursing	Geri-Psych	Correctional	Other **Swing Bed**
	6	0	4	2	4	0	1

OUTPATIENT CLINIC	Primary Care	Rural Health	Mental Health	Retail	Specialty	Other
	3	2	0	0	2	

HOME HEALTH	1
HOSPICE	2
NURSING HOME/LONG TERM CARE	3
ASSISTED LIVING	1
OTHER (please specify type)	

3. Titles/positions identified on the survey ranged from CNO to the category of 'other'. The percentage of the six respondents are as follows:
    - Four facilities (66.67%) held the position of nurse recruiter
    - One facility (16.6%) held the position staff nurse
    - One facility (16.6%) held the position as other (position was not identified).

4. Assessment of agency size inferred from the number of nurses employed show the following:
   - Three agencies (50%) employed 100 or more nurses in their agency/facility.
   - Two agencies (33%) employed 51-100 nurses in their agency/facility
   - One agency (17%) employed 11-30 nurses in their agency/facility

5. Number of DSU graduates employed by these agencies was varied. The percentage reported from each facility is:
   - Three agencies (50%) employed 11–30 of our graduates
   - One agency (16.6%) employed 31-50 of our graduates
   - One agency (16.6%) employed less than 10 of our graduates
   - One agency (16.6%) was unsure of the number of graduates hired

6. Numbers of RN vacancies indicated from the responding agencies
   - Four of the facilities (67%) indicated > than 10 vacancies
   - One of the facilities (16.5%) indicated 11-30 vacancies
   - One of the facilities (16.5%) indicated 51-100 vacancies

7. Highest vacancy areas, representing
   - 50% were in the Med/Surgical & ICU/CCU
   - 33% were in the Emergency Department
   - 17% were in the Ambulatory Care and Surgery Department

8. ATTRIBUTES OF BSN AND MSN GRADUATES as rated by the responding agencies of a DSU BSN and/or MSN prepared nurse

ATTRIBUTES	Mean Rating	Response Rating
Dependable	4.6	100%
Accountable	4.1	100%
Leadership Skills	4.0	83%
Knowledge Base	4.0	83%
Clinical Skills	4.0	83%
Communication Skills	4.1	100%
Critical Thinking Skills	4.0	83%
Caring	4.2	83%
Cultural Awareness/Diversity	4.2	83%

9. The respondents offered three (3) recommendations for the DSU Robert E. Smith School of Nursing program.
   - Would like to see the nurses be able to document more based on patient's diagnosis and assessment instead of allowing the EHR dictate standards of documentation. Use critical thinking skills, it is a must.
   - Teach students they will not graduate making the money of someone with 20 years of experience is making and hospitals don't close nights, weekends or holidays.
   - Great job with your students. They are very professional when we deal with them through the HR processing. Our managers seem to like these students as well.

10. There were one recommendations offered or additional comments for the BSN or MSN graduates:
    - I have hired two of your graduates both were really good workers but have moved on now to work at a larger facility.

- Mean Ratings of Program Outcomes

    A. BSN Program Outcomes (N=4). Four of the six employers completed

Program Outcome	Mean Rating	Response Rating
To what extent do DSU BSN graduates assist in meeting the needs of your agency/facility related in nursing?	4	100%
How do DSU BSN graduates assist in meeting the needs of your agency/facility related to nursing:		
a. Decrease number of RN vacancies	3	100%
b. Functions in leadership roles	4.5	100%
c. Collaborates and partners with inter-professional teams	4.5	100%
d. Mentor for nursing staff	3.5	100%
e. Patient advocate	4.5	100%
f. Other (specify) _____		No response No response
(1) Apply nursing, natural, and behavioral science concepts to practice	4	100%
(2) Utilize critical thinking, communication, and therapeutic nursing interventions within the nursing process	4	100%
(3) Practice leadership as self-directed professional accountable to self, society, and the evolving nursing profession	3.75	100%

	Mean	Response
(4) Participate in research/evidence-based practice to enhance health care delivery	4	100%
(5) Improve healthcare delivery through interdisciplinary collaboration, coordination, and consultation	4	100%
(6) Provide individualized nursing care that focuses on health promotion and prevention	3.75	100%
(7) Apply information and patient care technology to improve healthcare delivery	4	100%

B. MSN Program Outcomes (N=2) Two of the six employers completed

Program Outcome	Mean Rating	Response Rating
To what extent do DSU MSN graduates assist in meeting the needs of your agency/facility related in nursing?	4.5	100%
How do DSU MSN graduates assist in meeting the needs of your agency/facility related to nursing:		
a. Decrease number of RN vacancies	4.5	100%
b. Functions in leadership roles	4.5	100%
c. Collaborates and partners with inter-professional teams	4.5	100%
d. Mentor for nursing staff	4.5	100%
e. Patient advocate	4.5	100%
f. Other (specify) _____	No response	
(1) Integrate nursing and related sciences to improve health outcomes	4.5	100%
(2) Apply leadership skills to improve healthcare delivery and outcomes	4.5	100%
(3) Improves healthcare delivery through interdisciplinary collaboration, coordination and consultation	4.5	100%
(4) Utilizes evidence-based nursing practice to improve healthcare outcomes	4.5	100%

(5) Promotes the use of information and patient care technology to improve healthcare delivery	4	100%
(6) Influences practice and healthcare outcomes through policy and regulatory processes	4	100%
(7) Use leadership strategies to function as advocates/mentors within teams and partnerships	4.5	100%
(8) Utilize health promotion and prevention strategies to individuals, families, and communities	4	100%
(9) Demonstrates competency in practice through application of advanced nursing knowledge and skills	4	100%

The survey response is low but improved from 2013. Respondents were the employers who attended the Nurse Recruitment Day, 9/12/14. The three surveys emailed to employers to participate did not return a survey.

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.						
#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAME FOR DATA COLLECTION & ANALYSIS	PERSON OR COMMITTEE RESPONSIBLE FOR DATA COLLECTION & ANALYSIS	LOCATION OF EVIDENCE AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	REPORT OF FINDINGS If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year	BENCHMARK MET NOT MET

IV.A	A systematic process is used to determine program effectiveness.	1. A written, comprehensive, ongoing, systematic process is used to determine program effectiveness and includes:
		• Completion rates
		• Licensure, certification, employment rates
		• Admission rates
		• Data collected to assess achievement of program outcomes
		• Timelines for
		  a. data collection
		  b. review of expected and actual outcomes
		  c. analysis
		• Periodic review and/or revision of systematic process
			Fall and Spring	mJones
				
				Secretary to the Dean
				
				Secretary to the Faculty
				
				Director of the NP Programs
				
				COAP
				
				Dean
					Location:
					Secretary to the Dean's Office
					
					Documents:
					BSN Admit List Fall 2014
					
					BSN Graduation List Fall 2014
					
					RN-BSN Admit List Fall 2014
					
					RN-BSN Graduation List Fall 2014
					
					MSN Admit List Fall 2014
						BSN
						With the acceptance of each BSN class, an excel table of student names admitted to the program is started. This list is very detailed and includes the following information:
						-ID number
						-Delta/non-Delta resident
						-Demographic information
						-Full or part time study
						-Previous degree(s) earned
						
						After graduation additional data is collected for this table:
						-NCLEX passage (1st or 2nd attempt)
						-Delta employment
						-MS employment
						-Specific names of employers
						-Graduate school status
						
						Additional information listed on this table:
							MET

					MSN Graduation List Fall 2014 DNP Admit List Fall 2014 DNP Graduation List Fall 2014 Table E-VIII. Evaluation Calendar for Programs	-total number of completed student applications -number of acceptance letters sent initially sent -number of alternate letters sent -declined alternate status -alternates not offered admission -total number of students enrolled -number of students accepted but declined admission -number of students not qualified/not accepted Another excel table is done (annually) for each BSN graduating class that has the same information **RN-BSN** With the acceptance of each RN-BSN class, an excel table of student names admitted to the program is started. This list is very detailed and includes the following information: -ID number -Delta/non-Delta resident -Demographic information -Full or part time study -Previous degree(s) earned with name of degree After program completion additional data is collected for this table: -Completion of the program -Eligibility to return	

| | | | | | | | -Entered MSN program

Additional information listed on this table:
-number of applications
-number of acceptance letters sent
-number of students enrolled
-number of students sent acceptance letters but declined admission
-number provisionally admitted, denied full admission due to being unsuccessful on State Boards or unsuccessful on pre-requisites
-number qualified, not accepted
-number of students not qualified/not accepted

Another excel table is done (annually) for each RN-BSN graduating class that has the following information:
-ID number
-Delta/non-Delta resident
-Demographic information
-Full or part time study
-Previous degree(s) earned with name of degree
-semester entered the program
-students entering the MSN program

MSN
With the acceptance of each MSN class, an excel table of student names admitted to the program is started. This list is very detailed and includes the following | |

					information: -ID number -Delta/non-Delta resident -Demographic information -Full or part time study -Previous degree(s) earned with name of degree -number of hours (if part time) -MSN track entering -post master's degree student -previous master's or bachelor's degree in another area -any current (APN) certifications Another excel table is done (annually) for each MSN graduating class that has the following information: -ID number -Delta/non-Delta resident -Demographic information -Full or part time study -MSN track completed - post master's degree student -previous master's or bachelor's degree in another area -Certification passage (1st or 2nd attempt) -Delta employment -MS employment with agency, type of setting, & position -Specific names of employers -Graduate school status	

| | | | | | | **DNP** With the acceptance of each DNP class, an excel table of student names admitted to the program is started. This list is very detailed and includes the following information: -ID number -Delta/non-Delta resident -Demographic information -Full or part time study -Previous degree(s) earned with name of degree -number of hours (if part time) -DNP track entering -post master's degree student -previous master's or bachelor's degree in another area -any current (APN) certifications | |
| | | | | | | Another excel table is done (annually) for each DNP graduating class that has the following information: -ID number -Delta/non-Delta resident -Demographic information -Full or part time study -DNP track completed - post master's degree student -previous master's or bachelor's degree in another area -Certification passage (1st or 2nd attempt) -Delta employment -MS employment with agency, type of | |

							setting, & position -Specific names of employers -Graduate school status Information confirming NCLEX or Certification passage status is collected on a frequent basis after graduation from the program. Some students will call the school of nursing to report their status. The graduate BSN student status is checked (via the BON (MS, AR, etc.) website) weekly after graduation until all licensure statuses is confirmed. BON reports are sent to the school later with results in writing. For the FNP students, BON websites are also checked on a monthly basis until all graduate results are confirmed. AANP & AACN also provide a written copy of certification results annually. All findings related to licensure and certification is communicated to faculty & staff via campus email. And discussion of these results continues during Faculty Org. Student Program Satisfaction Surveys are completed during the last semester of study which is as follows: BSN- fall RN-BSN- Spring MSN- Spring Community of Interest Surveys are done in the Spring as follows:	

| | | | | | | Alumni (1 & 3 year graduate-all programs) Employers Advisory Council (done in the fall also) Survey data is analyzed by PEC and Summary reports are presented submitted to PEC chair and presented to faculty & Staff during FacOrg in the Spring. Surveys are reviewed by PEC. Any recommendations for revisions are done within this committee and presented to faculty for further or a vote approval. | |

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IV.B	Program completion rates demonstrate program effectiveness.	1. The completion rate time period is defined at all entry points across all program levels.	N/A	C. Thompson	MS Nursing Degree Programs Accreditation Standards Procedure Manual Appendix C, (July 2013) p. 29	The completion rate time period is defined at all entry points (BSN, RN-BSN, MSN, and DNP) as 150% of the program length, excluding those who left the program for personal (nonacademic) reasons.	MET
		2. The program completion rate formula is available.	N/A	C. Thompson	Office of Administrative Assistant to the Dean MS Nursing Degree Programs Accreditation Standards Procedure Manual Appendix C (July 2013) p. 29	The program completion rate formula is available in the office of the Administrative Assistant to the Dean and in the MS Nursing Degree Programs Accreditation Standards Procedure Manual Appendix C, (July 2013) p. 29	MET
		3. The completion rate across all program levels (BSN, RN-BSN, MSN, DNP) for the most recent calendar year is 70% or higher.	Annually	C. Thompson	Office of Administrative Assistant to the Dean	The completion rate for the 2014 BSN class 45%. Twenty- nine students were admitted; Six students were returning and 66% graduated within the 150% timeframe. Four students are eligible to return. Five students are not eligible to return. Seven students are anticipated to graduate in 2015 which will yield a 69% pass rate.	NOT MET

						The completion rate for the 2014 RN-BSN graduating class is 90.9%. Eleven students were admitted; zero students were returning, and ten students graduated within the 150% timeframe. One student withdrew and is eligible to return. The completion rate for the 2014 MSN graduating class is 69.5%. Twenty-three students were admitted; zero students were returning; and sixteen students graduated within the 100% timeframe. Five students withdrew and are eligible to return. Zero students withdrew and are not eligible to return. Two students are scheduled to graduate in 2015 (150% timeframe) which would increase the projected completion rate to 18 students (78%). The completion rate for the 2014 DNP graduating class is 66.6%. Six students were admitted; zero students were returning; and four students graduated within the 100% timeframe. Two students withdrew and are eligible to return. Zero students withdrew and are not eligible to return. Plan of Action: Initiate exit interviews, review admission criteria, curriculum content, and develop remediation plans as needed.	
		4. The average completion rates for all	Annually			Office of Administrative Assistant to the Dean	The average completion rate for the BSN program for the 3 most recent years is 65%. 2012=78%; 2013= 71.8%; 2014=45%	NOT MET

		program levels (BSN, RN-BSN, MSN, DNP) for the three (3) most recent calendar years is 70% or higher.		C. Thompson		***If the 7 students graduate in 2015 as anticipated, 2014 completion rate will be 69% and the 3 year average will be 73%. The average completion rate for the RN-BSN program for the 3 most recent years is 77.5%. 2012=66.7; 2013=75%; 2014=90.9% The average completion rate for the MSN program for the 3 most recent years is 74.8%. 2012=75%; 2013=80%; 2014=69.5% The average completion rate for the DNP program for the 3 most recent years is N/A due to only one graduating class/year.	

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IV.C	Licensure and certification pass rates demonstrate program effectiveness.	5. The NCLEX-RN pass rate is 80% or higher for first-time takers for the most recent calendar year	Calendar Year 2014	Jean Grantham	Office of Administrative Assistant to the Dean	The 2014 NCLEX-RN pass rate for first-time takers is 84% which is higher than the expected rate of 80% or higher	MET
		The average NCLEX-RN pass rate for the three most recent calendar years is 80% or higher for first-time takers	Calendar Years 2012,2013 and 2014	Jean Grantham	Office of Administrative Assistant to the Dean	The average NCLEX-RN pass rate for first-time takers for the three most recent calendar years is 92% which is higher than the expected rate of 80% for first time takers. 2012 - 33/34 – 97% 2013 – 27/28 – 96% 2014 – 16/19 – 84%	Met
		6. Certification pass rates for ANCC and AANP for the most recent calendar year is 80% or higher	Calendar Year 2014	Jean Grantham	Office of Administrative Assistant to the Dean Office of the Director of NP Programs	The first write pass rate for AANP in 2014 is 91% (11/12). This exceeds the expected 80% for first write. The pass rate for first write for ANCC in 2014 is 100 %(6 /6) This exceeds the expected 80% for first time takers.	Met Information is self-reported for ANCC – Incomplete information from ANCC at this time
		The average	Calendar Years	Jean Grantham	Office of Administrative	The average pass rate for AANP for the past	

	certification pass rates for ANCC and AANP for the three most recent calendar years are 80% or higher	2012, 2013, and 2014		Assistant to the Dean Office of Director of NP Programs	three years is 97.33% which exceeds the expected 80% 2012 - 11/12 – 92% 2013 - 8/8 - 100% 2014 - 12/12 - 100% The average pass rate for ANCC for the past three years is93.33% which exceeds the expected 80% 2012 – (4/5) - 80% 2013 – (5/5) - 100% 2014 - (6 /6) – 100% (self-reported)	MET 2014 data for ANCC -is self - reported Incomplete information for ANCC at this time MET

DELTA STATE UNIVERSITY
ROBERT E. SMITH SCHOOL OF NURSING
MASTER PLAN FOR EVALUATION
2014

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IV..D	Employment rates demonstrate program effectiveness	1. Employment rates are collected separately for each degree program (BSN, MSN, DNP and post-graduate APRN certificate) within 12 months of program completion	One and three year alumni surveys are collected to determine job placement rates of BSN and MSN graduates. The DNP has its first graduating class December 2014.	C. Thompson	Surveys are collected and evaluated by PEC committee member (Addie Herrod)	BSN 1 year alumni survey yielded 1 return of ? surveys distributed. BSN 3 year alumni survey yielded 6 return of ? surveys distributed. RN to BSN 1 year alumni survey yielded 4 returns of 12 surveys distributed, 33.33%. RN to BSN 3 year alumni survey yielded 1 return of 14 surveys distributed, 7.14%. MSN 1 year alumni survey yielded 6 returns of 16 surveys distributed, 37.5%. MSN 3 year alumni survey yielded 6 returns of 33 surveys distributed, 18%. DNP had first graduating class 12/14.	MET
		2. Employment rates are 70% or higher	One and three year alumni surveys are collected to determine job		Surveys are collected and evaluated by PEC committee members (Addie Herrod)	Of the one response received from the 1 year BSN alumni survey, the one respondent indicated full time employment (100%). Of the six responses received from the 3 year	MET

		placement rates of BSN and MSN graduates. The DNP has its first graduating class December 2014.			BSN alumni survey, all six respondents indicated full time employment (100%). Of the four responses received from the 1 year RN to BSN alumni survey, three respondents indicated full time employment, 75%. Of the one response received from the 3 year RN to BSN alumni survey, the one respondent indicated full time employment (100%). Of the six responses received from the 1 year MSN alumni survey, all six respondents indicated full time employment (100%). Of the six responses received from the 3 year MSN alumni survey, five respondents indicated full time employment (83%).	
			C. Thompson			

#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAME FOR DATA COLLECTION & ANALYSIS	PERSON OR COMMITTEE RESPONSIBLE FOR DATA COLLECTION & ANALYSIS	LOCATION OF EVIDENCE AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	REPORT OF FINDINGS If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year	BENCHMARK MET NOT MET
IV.E	Program outcomes demonstrate program effectiveness.	1. Students across all program levels (BSN, RN-BSN, MSN, DNP) are satisfied with the program as evidenced by a benchmark score of 3.0 or better on the End of Program Satisfaction Survey questions	**BSN** Fall Semester **RN-BSN** Spring Semester **MSN** Spring Semester	mJones PEC Chair COAP	BSN, RN-BSN, AND MSN Program Satisfaction Surveys A copy of the 2014 BSN, RN-BSN, and MSN Summary of End of Program Satisfaction Surveys	**BSN 2014 PROGRAM SATISFACTION SURVEY RESULTS** A mean score of 3.0 or better was not received on each of the End of Program Satisfaction Survey questions 9/19 (47.3%) response rate 5 responses < 3.0 *Clinical and Practicum* *Quality:Using the scale, please rate the overall quality of the clinical experiences and/or practicums for clinical courses* *NUR 443 Community Health Nursing Practicum 2.78* *Overall strengths of the BSN program at DSU:* *Library holdings 2.71* *Greatest need for improvement in the BSN program at DSU* *Teaching Expertise 2.71* *Technical support 2.75* Quality of program advisement 2.75 **RN-BSN 2014 PROGRAM SATISFACTION SURVEY RESULTS** A mean score of 3.0 or better was received on each of the End of Program Satisfaction	**NOT MET** Change Benchmark to: 1. Students *who complete the End of Program Satisfaction Survey* across all program levels (BSN, RN-BSN, MSN, DNP) are satisfied with the program as evidenced by a benchmark score of 3.0 or better on

						Survey questions 4/12 (33%) response rate No responses < 3.0 **MSN 2014 PROGRAM SATISFACTION SURVEY RESULTS** A mean score of 3.0 or better was received on each of the End of Program Satisfaction Survey questions 14/16 (87.5%) response rate No responses < 3.0 **DNP 2014 PROGRAM SATISFACTION SURVEY RESULTS** A mean score of 3.0 or better was received on each of the End of Program Satisfaction Survey questions 2/4 (50%) response rate 13 responses < 3.0 *Quality of Instruction: Core Courses* *NUR 787 Scholarly Project Development 2.50* *790 Scholarly Project 2.50* *Greatest need for improvement in the DNP program at DSU* *Preparation for Certification 2.50* *Flexible Classes2.00* *Online 2.00* *Flexibility of Faculty2.50* *Teaching Expertise 2.50* *Quality of Courses 2.50* *Simulation/Skills lab equipment & Supplies1.00* *Library support/availability 2.00*	90% of the questions included on the End of Program Satisfaction Survey questions *Suggested changes made in 2012:* *Students are satisfied at all levels with the program as evidenced by a score of 3.0 or better on 90% of the questions included on the BSN, RN-BSN, and MSN End of Program Satisfaction Survey*

				Quality of Program Advisement 2.00 *Library holdings 2.00* *Technical Support 2.00*	
2. Alumni across all program levels (BSN, RN-BSN, MSN, DNP) are satisfied with the program as evidenced by a benchmark score of 3.0 or better on the One (1) and Three (3) Year Alumni Surveys	Spring Semester	mJones PEC Chair COAP	1 Year BSN Survey Summary 3 Year BSN Survey Summary 1 Year RN-BSN Survey Summary 3 Year RN-BSN Survey Summary 1 Year MSN Survey Summary 3 Year MSN Survey Summary	**1 year BSN Survey results** 6/34 responses – 17% response rate Mean scores on each question on the survey is 3.0 or greater No responses < 3.0 **3 year BSN Survey results** 6/34 responses – 17% response rate Mean scores on each question on the survey is 3.0 or greater No responses < 3.0 **1 year RN-BSN Survey results** 4/12 responses – 33% response rate Mean scores on each question on the survey is 3.0 or greater No responses < 3.0 **3 year RN-BSN Survey results** 1/14 responses – 7.14% response rate Mean scores on each question on the survey is 3.0 or greater No responses < 3.0 **1 year MSN Survey results** 6/16 responses – 37.5% response rate	**MET** Change Benchmark: Alumni *who completed the End of Program Satisfaction Survey* across all program levels (BSN, RN-BSN, MSN, DNP) are satisfied with the program as evidenced by a benchmark score of 3.0 or better on 90% of the questions on the One (1) and Three (3) Year Alumni Surveys *Suggested changes made in 2012:90% of the questions included on the Alumni 1 & 3 Year Surveys received scores of*

						Mean scores on each question on the survey is 3.0 or greater <mark>No responses < 3.0</mark> **3 year MSN Survey results** <mark>6/33 responses – 18% response rate</mark> Mean scores on each question on the survey is 3.0 or greater <mark>No responses < 3.0</mark>	*3.0 or better*

		3. 80% of alumni across all program levels (BSN, RN-BSN, MSN, DNP) indicate advanced degrees and/or certifications have been obtained since graduation
		
		4. 90 % Alumni who complete the 1 and 3 year surveys plan to obtain advanced degrees and/or certifications.
			Spring Semester	mJones
				
				PEC Chair
				
				COAP
					1 Year BSN Survey Summary
					
					3 Year BSN Survey Summary
					
					1 Year RN-BSN Survey Summary
					
					3 Year RN-BSN Survey Summary
					
					1 Year MSN Survey Summary
					
					3 Year MSN Survey Summary
						1 year BSN Alumni:
						Further Education
						  Currently Enrolled
						    Yes – 0
						    No - 1 (100%)
						  Highest Degree Currently Held
						    Bachelor – 1 (100%)
						Plan to Return
						    Yes – 1
						    (100%)
						
						3 year BSN Alumni:
						Further Education
						  Currently Enrolled
						    Yes – 3 (50%)
						    No - 3 (50%)
						  Highest Degree Currently Held
						    Bachelor – 4 (67.6%)
						    Master's – 2 (33.3%)
						  Plan to Return
						    Yes –5 (83.3%) No – 1 (16.7%)
						
						RN/BSN Alumni:
							NOT MET
							No way to clearly determine the answer to benchmark according to questions on alumni surveys. Survey or benchmark needs rewording.
							1. Survey asks what is the highest degree you currently hold. Some students already had degrees prior to coming into our program.
							2. Survey asks what type of certification do you hold? They could have had a certification prior to coming to our program. So this

						<u>1 year RN/BSN results:</u>
						Further Education
						    Currently Enrolled
						        Yes – 0
						        No - 3 (75%)
						        No Answer – 1 (25%)
						    Highest Degree Currently Held
						        Bachelor – 3 (75%)
						        No Answer – 1 (25%)
						    Plan to Return
						        Yes – 25 (50%) Undecided –
						        1 (25%)
						        No Answer – 1 (25%)
						
						<u>3 year RN/BSN results:</u>
						Further Education
						    Currently Enrolled
						        Yes – 0
						        No - 1 (100%)
						    Highest Degree Currently Held
						        Bachelor – 0 (0.0%)
						        Master – 1 (100.0%)
						        Doctorate – 0 (0.0%)
						   Plan to Return
						        Yes – 0
						        No – 1 (100%)
						
						MSN Alumni:
						<u>1 year MSN results:</u>
						Further education:
						6 (100%) of the respondents denied currently being in school.
						3 (50%) reported plans to obtain a DNP.
						3 (50%) denies plans to return to school.
							does not provide us with the information we need to answer benchmark.
							REVISE EVALUATION TO GATHER NECESSARY DATA
							
							1. 80% of alumni who completed the 1 and 3 year Alumni surveys across all program levels (BSN, RN-BSN, MSN, DNP) indicate advanced degrees and/or certifications have been obtained since graduation
							
							Suggested changes made in 2012:80% alumni

						3 year MSN results: Further education: 5 (83%) of the respondents denied currently being in school. 1 (16%) reported being currently in school. 5 (83%) reported plans to obtain a doctorate 1 (16%) denied plans to obtain a doctorate outside of nursing.	*who complete the 1 and 3 year Alumni surveys indicate advanced degrees and/or certifications have been obtained since graduation* *Add:* *90% alumni who complete the 1 & 3 year Alumni surveys plan to obtain advanced degrees and/or certifications*
	MET	5. 80% employers express satisfaction with the program as evidenced by a benchmark score of 3.0 or better on Employer Surveys	Spring and Fall	mJones PEC Chair COAP	Program Effectiveness Committee Advisory Council Employer Survey 2014 Report	A score of 3.0 or better was received on all questions included in the Employer Survey. 6 surveys were received from employers during 2014	**MET** 100% (6/6) expressed satisfaction with the program.
		6. 90% employers who complete the Employer Survey indicate satisfaction with student					**MET** 100% (6/6) expressed

		performance in the workplace					satisfaction with the performance in the workplace.
		7. Student retention rates across all program levels (BSN, RN-BSN, MSN, DNP) are 80% or better.	Fall and Spring	mJones Secretary to the Dean COAP	**Location:** Secretary to the Dean's Office	**BSN students** (admitted Fall 2012 – graduated Dec. 2014) 29 admitted 13 graduated on schedule 7 continuing, to graduate Dec. 2014 4 withdrew, but eligible to return 5 not eligible to return **RN-BSN students** (admitted Summer 2013 – graduated Spring 2014) 11 admitted 01 transferred 12 graduated on schedule 00 withdrew, but eligible to return **MSN students** (admitted Fall 2012 – graduated Spring 2014) 17 admitted 16 graduated on schedule 01 withdrew, but eligible to return 00 not eligible to return **DNP students** (admitted Fall 2013 – graduated Fall 2014) 06 admitted 04 graduated on schedule 02 withdrew, but eligible to return	**NOT MET** BSN Retention Rate – 69% RN-BSN Retention Rate – 100% REVISE BENCHMARK TO ASK FOR RETENTION FOR EACH CLASS AT EACH PROGRAM LEVEL EACH SEMESTER. MSN Retention Rate – 94%

							DNP Retention Rate –67%

#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAME FOR DATA COLLECTION & ANALYSIS	PERSON OR COMMITTEE RESPONSIBLE FOR DATA COLLECTION & ANALYSIS	LOCATION OF EVIDENCE AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	REPORT OF FINDINGS If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year	BENCHMARK MET NOT MET
IV.F	Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness. *Expected faculty outcomes are:* • *Are identified for the faculty as a group* • *Incorporate expected levels of achievement* • *Reflect expectations of faculty in their roles and evaluation of faculty performance* • *Are consistent with and contribute to*	1. 100% of RESSON faculty attain at least 10 CEUs annually		S. Polk		• 15/15 (100%) faculty attained 10 or greater continuing education units (CEUs). The total number of CEUS obtained by each faculty ranged from 10.0 to 76.3 • Total CEUS = 573.6 Average CEUS/faculty = 38.24	MET

	achievement of the program's mission and goals; and • *Are congruent with institution and program expectations* *Actual faculty outcomes are presented in the aggregate for the faculty as a group, analyzed, and compared to expected outcomes*						
		2. 80% of RESSON faculty attain mean scores of 3.0 or better on all faculty, course, clinical evaluation each semester		S. Polk		14/15 (93.3%) faculty attained mean scores of 3.0 or above on all evaluations in 2014	MET
		3. 100% of nursing faculty participate in academic advisement each semester for students enrolled in programs and for students		S. Polk		• 15/15 (100%) faculty participated in academic advisement. The total number of students advised by each faculty ranged from 12 to 159. • Total students advised in 2014 = 657 Average # students advised/faculty = 43.8	MET

		pursuing enrollment in nursing programs					
		4. 40% of RESSON faculty incorporate simulation activities into the Clinical Practicum courses in which they teach		S. Polk		10/15 (66.6%) faculty incorporated simulation activities into the Clinical/Practicum courses in which they taught in 2014	MET
		5. 40% of RESSON faculty present research findings at conferences at the state, regional, national, or international level		S. Polk		• 8/15 (53.3%) faculty presented research during 2014 • # faculty presentations at local level = 1 • # faculty presentations at state level = 4 • # faculty presentations at regional level = 4 # faculty presentations at national level = 1	MET
		6. 10% of RESSON faculty submit for publication or are published in a peer		S. Polk		• 5/15 (33.3%) faculty submitted for publication or were published in a peer reviewed journal/book as an author, reviewer, or editor • 5 faculty submitted for publication 1 faculty published	MET

		reviewed journal, book, etc as an author, reviewer, or editor					
		7. 10% of RESSON faculty submit a grant proposal or are awarded grant funding, or serve as a grant reviewer		S. Polk		• 2/15 (13.3%) faculty submitted grants and/or received grants during 2014 • 2 grants submitted in 2014 • 1 grant awarded in 2014 - $329,632 • 1 grant awarded Year 2 - $524,787 Total grants funds received in 2014 = $854,419	MET
		8. 100% of RESSON faculty serve on three or more RESSON standing committees		S. Polk		• 15/15(100%) faculty serve on 3 or more School of Nursing committees The total committees range from 3 - 6	MET
		9. 75% of RESSON faculty serve on one or more University committee, council, taskforce, or				• 12/15 (80%) faculty serve on one or more University committee, council, taskforce or other appointed/elected positions • The number of committees, etc the 12 faculty serve on range from 0 – 5 The average # of university committees, etc served on by the 12 faculty = 2.5	MET

		other appointed or elected positions				
		10. 100% of nursing faculty participate in two or more recruitment events annually		S. Polk		• 10/15 (86.6%) faculty participated in two or more recruitment events in 2014 • The # events by each of the 10 faculty ranged from 2 – 9 • Three (3) faculty participated in 1 recruitment event • Total # participants at the 37 events attended = 3,029 Six of the 37 events included on faculty benchmarks did not provide the number of participants at the events	NOTMET
		11. 75% of RESSON faculty hold membership in professional organizations at state, national, or international levels		S. Polk		• 13/15 (*86.6%) faculty hold membership in professional organizations The number of professional organizations per faculty range from 2 - 9	MET
		12. 40% of RESSON faculty hold leadership positions in professional		S. Polk		• 9/15 (60%) hold leadership positions in professional organizations • 2 at local level • 17 at state level 1 at regional level	MET

		organizations at state, national, international levels				
		13. 60% of RESSON faculty participate in community services		S. Polk		• 10/15 (66.6%) faculty participated in community service • Total # of participants included in benchmark information = 1,765 Five faculty benchmarks did not include number of participants	MET
		14. 60% of faculty will engage in faculty practice to maintain nursing competency		S. Polk		13/15 (86.6%) engage in faculty practice	MET

#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAME FOR DATA COLLECTION & ANALYSIS	PERSON OR COMMITTEE RESPONSIBLE FOR DATA COLLECTION & ANALYSIS	LOCATION OF EVIDENCE AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	REPORT OF FINDINGS If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year	BENCHMARK MET NOT MET
IV.G	The program defines and reviews formal complaints according to established policies.	1. A formal complaint is defined and made available to RESSON students, faculty, and staff	Calendar Year 01/01/2014 through 12/31/2014	BSylvest	Chair of Academic Programs Calendar Year 01/01/2014 through 12/31/2014	See Undergraduate and Graduate Student Handbooks for definition of Complaint. Undergraduate Handbook page 23 on the 12/14 revision Graduate Student Handbook page 28 in the 12/14 revision	Met
		2. 100% of all formal complaints are reviewed and maintained according to policy.	Calendar Year 01/01/2014 through 12/31/2014	BSylvest	Chair of Academic Programs Calendar Year 01/01/2014 through 12/31/2014	One complaint went forward to the COAP and stopped there. This student initiated the complaint and followed the procedure noted in the Graduate Student Handbook.	Met

#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAME FOR DATA COLLECTION & ANALYSIS	PERSON OR COMMITTEE RESPONSIBLE FOR DATA COLLECTION & ANALYSIS	LOCATION OF EVIDENCE AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	REPORT OF FINDINGS If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year	BENCHMARK MET NOT MET
IV.H	Data analysis is used to foster ongoing program improvement.	7. Actual outcomes are compared to expected outcomes regarding: a. Completion rates b. Licensure and certification pass rates c. End of Program Satisfaction Survey across all program levels (BSN, RN-BSN, MSN, DNP) d. One (1) and Three (3) Year Alumni Surveys e. Employer	Fall 2011- Dec 2014 Fall 2012- May2014 Fall2011- Dec2014	Jean Grantham	Office of Administrative Assistant to the Dean	**a. Completion Rates** The expected completion rate for the 2014 BSN graduating class 70 % within 150% timeframe which meets the expected rate of 70% within the 150% timeframe. (Of 29 admitted in the Fall of 2012, 13 graduated in 100% of time and 7 are on track to graduate within 150% of the time. Of the remaining 7 – 4 withdrew and were eligible to return, 5 were not eligible to return) The expected completion rate for the 2014 RN-BSN graduating class is 90.9 % (10/11) within 150% timeframe which exceeds the expected rate of 70% within the 150% timeframe. (11 were admitted in Summer of 2013 and 10 graduated in the Spring of 2014 – the one that withdrew stated personal reasons for withdrawal) The expected completion rate for the 2014 MSN graduating class is 78.2 % within the 150% timeframe which meets the expected rate of 70% within the 150% timeframe. – (23 were admitted in Fall of 2012, 16 graduated at 100% of time and 2 are on track to	BSN-MET RNBSN - MET MSN – MET A graduate student enrichment contract which includes remediation plan for unsuccessful check-

		Satisfaction Surveys f. Formal Complaints	Fall 2012 – Dec 2014			graduate at 150% of time. Of the remaining – 1 withdrew for personal reasons and 4 were eligible to return but have not)	offs was approved by members of Faculty Org on 4/28/2014
		Discrepancies between actual and expected outcomes inform areas for improvement				The expected completion rate for the 2014 DNP graduating class is 100%. (Of the 6 admitted, 4 graduated within 100% of time – 2 withdrew for personal reasons).	DNP – MET
						b. The licensure and certification pass rates The licensure and certification pass rate for the 2013 BSN class is 95% which exceeds the expected rate of 80%. (The 2013 class took NCLEX in 2014. The licensure data for the Dec 2014 class is not complete at this time)	BSN-MET
	MSN -Met					The licensure and certification pass rate for the 2014 MSN class is 100% which exceeds the expected rate of 80%. (includes self-reported data for 6 students who took ANCC)	MSN -Met
						The licensure and certification pass rate for the past three years is 97.33% for AANP and 93.33% for ANNC which is above the expected rate of 80%. AANP 2012 - 11/12 – 92% 2013 - 8/8 - 100% 2014 - 12/12 - 100% ANCC 2012 – (4/5) - 80% 2013 – (5/5) - 100% 2014 - (6/6) - 100% (self-reported)	

						C. 2013 End of Program Satisfaction Survey 2014 End of Program Satisfaction Survey for the BSN exceeded the benchmark score of 3.0 or better on each section of the End of Program Satisfaction Survey questions. There were individual items which received less than 3.0 a.) Quality of clinical experience NUR443 – comment stated lack of opportunity to practice immunization skills b) library holdings c.) teaching expertise comments included strengthening Pharm, Patho, and Maternity classes also to schedule Maternity, Peds, and Psych at different facilities, provide better instructions on various assignments d.) technical support e.) advisement	c. BSN MET
						2014 End of Program Satisfaction Survey for RN-BSN exceeded the benchmark of 3.0 or better – All answers were over 3.0 100% of answers receiving a 4.0 or better.	RNBSN-Met
	MSN- Met					2014 End of Program Satisfaction Survey for MSN exceeds the benchmark of 3.0 or better. All answers were over 3.0.	MSN- Met
						D .Alumni Satisfaction	D. BSN – 1YR MET
						The 1yr alumni surveys (2014) for the BSN program exceeded the benchmark of 3.0. All answers were 3.0 or higher for each answer.	
		F. Formal Complaints				The 3yr alumni survey for the BSN program exceeded the benchmark of 3.0.	BSN-3YR MET

					All answers were 3.0 or higher.	
			Jean Grantham	F. DSU website SON Handbooks COAP office		RNBSN1yr met
					The 1 yr RN-BSN Alumni Survey exceeded the benchmark of 3.0 or better. 100% were 4.5 or better.	
						RNBSN3yr met
					The 3 yr RN-BSN Alumni Survey exceeded the benchmark of 3.0 or better. 100% were 3.5 or better	
						MSN1yr met
					The 1 yr MSN Alumni Survey exceeded the benchmark of 3.0. 100% were 4.00 or better.	
						MSN3YR – MET
					The 3yr MSN alumni survey exceeded the benchmark of 3.0 or better on all questions. 100% of questions received a score or 4.0 or better.	
						MET
					E. Employer Satisfaction Survey exceeded the benchmark of 3.0 or better on all questions.	
						F. Met
					F. Formal Complaints – There was one formal complaint filed during 2014. This was addressed at School of Nursing and did not advance to a higher level. After review there were no indications that changes were needed to the class or the complaint process.	
		RESSON faculty are	Calendar year 2013	Jean Grantham	Faculty Organization	100% of full-time and part-time faculty members are members of at least 3	MET

| | | engaged in the program improvement process | | | minutes and tracking form - Office of Administrative Assistant to the Dean

UG & G Program minutes - Office of Administrative Assistant to the Dean | committees with in the School of Nursing. 100% are members of Faculty Organization. Each faculty member is a member of the Undergraduate and/or Graduate Program committee depending on their course assignments. 100% of faculty members are a member of one of the three standing committees – Faculty Development, Student Affairs, and Program Effectiveness.
Faculty participate in program improvement process through monthly Undergraduate and Graduate Program meetings. Items are brought forth from these meetings to the monthly Faculty Organization meetings. Additional meeting are called as needed. Actions and decisions are tracked and included in the minutes of each meeting. See Faculty/Staff handbook (pp. 11- 18) for Bylaws and specifics of each committee. | |
| | | | | | Participation in MPE data collection, analysis, and Report of Findings
 Office of Administrative Assistant to the Dean
Faculty org minutes 2/14, 3/14, 4/14, 8/14, 10/14, | Each faculty member is assigned to a groups for a particular MPE standard. The groups work together to collect data, analysis findings and compile a report of findings for that standard. These reports are then presented in faculty organization meetings so that all faculty members can have input prior to the compilation and acceptance of the final report | MET |

DELTA STATE UNIVERSITY
ROBERT E. SMITH SCHOOL OF NURSING
MASTER PLAN FOR EVALUATION
2014

				11/14, 12/14		

To: Dr. Lizabeth Carlson, Dean; Dr. Vicki Bingham, Chair; School of Nursing

From: Office Institutional Research & Planning

Date: July 24, 2015

Subject: Academic Year Report Information for the School of Nursing

The following information contains Summer 2014, Fall 2014, and Spring 2015 credit hours produced, enrollment, and graduates for academic year 2014/15. If you need additional information, or have any questions regarding this information, please contact IRP at x4052.

CREDIT HOUR PRODUCTION						
	Summer 2014		Fall 2014		Spring 2015	
	UG	GR	UG	GR	UG	GR
NUR	36	144	1664.5	502	1416	561

ENROLLMENT BY MAJOR*						
	Summer 2013		Fall 2013		Spring 2014	
	UG	GR	UG	GR	UG	GR
Nursing	14	2	118	36	96	35
Nursing – RN/BSN Tract	0	0	23	0	18	0
Nursing Practice	0	0	0	23	0	15
Total	14	2	141	59	114	50

*Note 1 additional student was enrolled in nursing as a second major in Fall 14 and Spring 15.

2013-14 Graduates	
Nursing	
BSN	35
MSN	12
DNP	4

Credit Hour Production							
	Summer		Fall		Spring		
	UG	GR	UG	GR	UG	GR	Total
NUR							
AY 2015	36	144	1664.5	502	1416	561	4323.5
AY 2014	121	82	1060	321	915	602	3,101
AY 2013	146	86	1,134	364	647	484	2,861
AY 2012	302	100	1,444	326	924	483	3,579
AY 2011	217	94	1,322	544	956	695	3,828
AY Totals							
AY 2015	36	144	1664.5	502	1416	561	4323.5
AY 2014	121	82	1,060	321	915	602	3,101
AY 2013	146	86	1,134	364	647	484	2,861
AY 2012	302	100	1,444	326	924	483	3,579
AY 2011	217	94	1,322	544	956	695	3,828

Enrollment by Major						
	Summer		Fall		Spring	
	UG	GR	UG	GR	UG	GR
Nursing						
AY 2015	14	2	141	36	114	35
AY 2014	18	7	97	36	72	38
AY 2013	18	2	103	37	63	34
AY 2012	26	15	128	34	85	30
AY 2011	29	6	120	57	87	77
Nursing Practice						
AY 2015	0	0	0	23	0	15
AY 2014	0	0	0	7	0	6
AY 2013	0	0	0	0	0	0
AY 2012	0	0	0	0	0	0
AY 2011	0	0	0	0	0	0
AY Totals						
AY 2015	14	2	141	59	114	50
AY 2014	18	7	97	43	72	44
AY 2013	18	2	103	37	63	34
AY 2012	26	15	128	34	85	30
AY 2011	29	6	120	57	87	77

Graduates				
	Nursing			
	BSN	MSN	DNP	Total
AY 2015	35	12	4	51
AY 2014	33	16	0	49
AY 2013	40	10	0	50
AY 2012	53	13	0	66
AY 2011	42	30	0	72