

Unit Missions

Nursing Mission Statement

Providing Department: Robert E. Smith School of Nursing

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.

Related Items

There are no related items.

Learning Outcomes

BSN-SON 01: LO Clinical Concepts


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 #3 & #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).

 2016 RN_BSN Program Satisfaction Survey - Final

 2016_PEC Advisory Council Employer Survey Report

 End of Program_BSNGrads_Fall2016

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	2010	2011	2012	2013	2014	2015	2016
EXAM 1	961	983	963	947	940	880	887
EXAM 2	891	1026	937	943	926	878	882
EXAM 3	902	968	880	900	892	903	915

BSN End of Program Surveys (Mean for LO #1)

YEAR	2010	2011	2012	2013	2014	2015	2016
	4.6	4.46	4.67	5.0	4.6	4.88	4.60

RNBSN End of Program Surveys (Mean for LO #1)

YEAR	2010	2011	2012	2013	2014	2015	2016
	4.05	4.50	4.58	4.42	4.0	4.53	4.70

Advisory/Employer Surveys (Mean for LO #1)

YEAR	2013	2014	2015	2016
	3.0	4.0	3.75	4.37

Use of Evaluation Results

Student mean clinical concepts exam scores on the three (3) HESI Exit Exams given in NUR 408 Nursing Synthesis had an overall mean score of 895 for 2016. This score is in the "acceptable performance" range by HESI, but not the "recommended" which is a minimum score of 900. A minimum score of 900 on at least one (1) of the HESI Exit Exams is required for success in the course of NUR 408 and to graduate from the BSN nursing program. 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%. During Fall 2016, all senior nursing students earned at least one (1) 900 on the HESI Exit Exam and graduated. First write pass rate increased from 80% to 87%.

Dedicated Education Units (DEUs) continue to be implemented in both NUR 335 Nursing the Adult Client I Practicum and NUR 336 Nursing the Adult Client II Practicum. The coordinator of our DEUs, Dr. Donna Koestler, continues to collaborate with selected healthcare agencies and facilitators to ensure learning experiences have value and both formative/summative evaluations are occurring.

An undergraduate (BSN & RNBSN) curriculum retreat was held in May 2016 to review course content based upon HESI exam scores. Each course syllabus was reviewed by faculty members for revisions and updates to nursing practice, national trends, standards of care, and nationally standardized exams (Elsevier Evolve HESI specialty exams are given as the final exam for each course in which one is 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 customized midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. Each standardized and customized exam score is used to assist faculty advisors and students to 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. The curriculum review yielded that the HESI final exam percentages would be unchanged; the pedagogy of our medical-surgical courses would be re-visited by the Instructor of Record (IOR) and different methodologies attempted; a more structured delivery of the content in NUR 408 Nursing Synthesis; incorporation of new technology learning (i.e. TurningPoint and Evolve Adaptive Learning/Quizzing) would be incorporated across all the curriculum in both BSN and RNBSN programs.

End of program/satisfaction surveys for BSN & RNBSN students LO #1 also remain at an "agree" rating (on a five point likert scale) - BSN - 4.60 and RNBSN - 4.70, which is slightly decreased from the previous year for the BSN program, but better ratings for the RNBSN. The advisory/employer survey revealed a rating of 4.37 on a five point likert scale. This rating improved from the previous year (2015) in which a rating of 3.75 was received in 2015.

We will continue to obtain feedback through surveys and recommendations from BSN & RNBSN students, alumni,

and employers to revise curriculum as needed. We will continue to monitor national education, practice (NCLEX) and MS IHL/CCNE standards for BSN programs and revise curriculum as needed. If downward trends in advisory/employer ratings are noted then we will take action accordingly.

Related Items



Gen Ed 03: Quantitative Skills

Definition

symbolic and numeric computation, analysis, and interpretation



Gen Ed 05: Human Behavior and Culture

Definition

an understanding of the nature of individuals, societies, and the global community

BSN-SON 02: LO Nursing Concepts


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

Data Collection (Evidence)

HESI exit exam scores for BSN; 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).

 2016 RN_BSN Program Satisfaction Survey - Final

 2016_PEC Advisory Council Employer Survey Report

 End of Program_BSNGrads_Fall2016

Results of Evaluation

Nursing Concepts (Mean) – Exam #1

YEAR	2010	2011	2012	2013	2014	2015	2016
CT	964	934	962	951	899	870	871
TC	979	915	908	830	907	912	874
TNI	968	941	974	965	909	867	870
CA	863	854	1070	972	1104	762	883
NP	968	958	974	973	915	875	857
SOC	828	937	781	1004	765	842	923

Nursing Concepts (Mean) – Exam #2

YEAR	2010	2011	2012	2013	2014	2015	2016
CT	889	974	945	931	906	891	862
TC	986	999	970	897	874	921	857
TNI	882	967	945	933	921	912	885
CA	1093	1026	1122	852	885	971	1070
NP	909	976	941	923	896	877	902
SOC	920	969	856	772	952	830	1002

Nursing Concepts (Mean) – Exam #3 - * denotes not Tested

YEAR	2010	2011	2012	2013	2014	2015	2016
CT	900	943	933	923	915	876	928
TC	998	862	879	951	914	811	923
TNI	894	951	942	925	900	894	936
CA	699	1021	442	959	*	971	*
NP	900	927	945	932	880	873	911
SOC	945	957	960	942	826	963	867

BSN End of Program Surveys (Mean for LO #2)

YEAR	2010	2011	2012	2013	2014	2015	2016
	3.95	4.4	4.64	4.5	4.0	5.0	4.65

RNBSN End of Program Surveys (Mean for LO #2)

YEAR	2010	2011	2012	2013	2014	2015	2016
	3.95	4.4	4.64	4.5	4.0	4.53	4.70

Advisory/Employer Surveys (Mean for LO #2)

YEAR	2013	2014	2015	2016
	5.0	4.0	4.37	4.62

Use of Evaluation Results

The student nursing concepts mean exam scores on the three (3) HESI Exit Exams administered in NUR 408 Nursing Synthesis trended upward compared to 2015 in all areas. A score of 900 or above is "recommended performance" and 850-899 is an "acceptable performance" according to HESI. The overall mean scores in each of the other nursing concept for 2016 as compared to 2015 were as follows: CT - 887 as compared to 879, TC 875 as compared to 881, TNI 897 as compared to 891, CA 977 compared to 901, NP 890 as compared to 875, SOC 931 compared to 878. As noted, all of these mean scores are in an "acceptable performance" range. In the UG curriculum retreat, HESI mean scores in these nursing concepts were discussed with continued emphasis to be placed on these concepts in classroom content and clinical experiences. Students have access to additional resources through Elsevier Evolve as part of a bundle package that includes NCLEX Review, books on Professionalism,

Delegation, and Prioritization, as well as Computerized Adaptive Learning and Quizzing. A live on-campus NCLEX-Review was provided by Hurst Review prior to school starting for fall 2017. These mean scores will be monitored for trends in the upcoming AY with corrective action taken if these scores decrease.

End of Program/Satisfaction surveys and Advisory/Employer surveys for both BSN and RNBSN students regarding LO #2 remain good with a rating of: BSN End of Program/Satisfaction - 4.65 as compared to 5.0 (2015); RNBSN End of Program/Satisfaction - 4.70 as compared to 4.53(2015); and Advisory/Employer - 4.62 as compared to 4.37 (2015). These rating scores illustrated an upward trend for 2016.

We will continue to monitor our ratings and seek recommendations for feedback from our BSN & RNBSN students, alumni, and employers. If downward trends in the ratings occur, we will revise the curriculum accordingly. In addition to this feedback, we will continue to monitor national education, practice (NCLEX) and MS IHL/CCNE standards for BSN/RNBSN programs; revise the curriculum as needed.

Related Items

There are no related items.

 **BSN-SON 03: LO Leadership**




Providing Department: Robert E. Smith School of Nursing

Learning Outcome

Learning Outcome #3: Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession [leadership]. GE # 1, #2, & #5

Data Collection (Evidence)

HESI exit exam scores in the BSN; BSN & RNBSN end of program/satisfaction surveys; and advisory/employer surveys

-  2016 RN_BSN Program Satisfaction Survey - Final
-  2016_PEC Advisory Council Employer Survey Report
-  End of Program_BSNGrads_Fall2016

Results of Evaluation

Leadership (Mean)

YEAR	2010	2011	2012	2013	2014	2015	2016
EXAM 1	948	936	981	941	878	871	907
EXAM 2	868	972	955	939	901	867	938
EXAM 3	925	956	897	905	888	871	923

BSN End of Program Surveys (Mean for LO #3)

YEAR	2010	2011	2012	2013	2014	2015	2016
	4.7	4.67	4.67	5.0	4.7	4.75	4.60

RNBSN End of Program Surveys (Mean for LO #3)

YEAR	2010	2011	2012	2013	2014	2015	2016
	4.0	4.75	4.63	4.58	4.0	4.71	4.75

Advisory/Employer Surveys (Mean for LO #3)

YEAR	2013	2014	2015	2016
	4.67	3.75	4.25	4.25

Use of Evaluation Results

The student leadership mean scores on the HESI Exit Exams administered in NUR 408 Nursing Synthesis improved with an overall mean score of 923 during the 2016 calendar year (which is at the "recommended performance" as noted by HESI). Leadership is threaded throughout the curriculum with greater emphasis in the courses of NUR 402/442 Management of Client Care/Management of Client Care Practicum. Students were provided with clinical experiences that occurred on designated hospital units under the direction of a faculty member. Leadership and management concepts were taught, observed, and practiced on these units. UG faculty members revised syllabi to incorporate the changes to the clinical learning experiences, as well as inclusion of current 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 course of NUR 402/442 has a HESI specialty exam that is administered as the final exam). The percentage of the grade for each course varies depending on the level of the nursing course, with higher level courses having a greater weight for the HESI. In addition, 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 online nursing academic enhancement programs (i.e. Evolve).

End of program surveys of students and advisory/employer surveys for both BSN & RNBSN on LO #3 indicate a consistent trend in the overall mean scores (on a five point scale) - BSN End of Program survey - 4.60 as compared to 4.75 (2015); RNBSN End of Program survey - 4.75 as compared to 4.71 (2015); and Advisory/Employer survey - 4.25 mean score consistently in 2015 and 2016.

We will continue to obtain feedback from BSN and RNBSN students, alumni, and employers. Survey ratings will be monitored and recommendations for improvement made to UG faculty members so curriculum can be revised. National education trends, "best" practices and state/national accreditation standards for both the BSN and RNBSN programs will be monitored with curriculum revisions as needed.

Related Items

There are no related items.

BSN-SON 04: LO Evidence Based Practice


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 #1

Data Collection (Evidence)

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

 2016 RN_BSN Program Satisfaction Survey - Final

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 End of Program_BSNGrads_Fall2016

Results of Evaluation

Scholarship for Evidence Based Practice (Mean) - *denotes Not Tested

YEAR	2010	2011	2012	2013	2014	2015	2016
EXAM 1	942	971	1009	984	876	867	854
EXAM 2	902	986	948	942	888	834	862
EXAM 3	889	962	884	908	873	890	870

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

YEAR	2010	2011	2012	2013	2014	2015	2016
	4.7	4.67	4.44	5.0	4.5	4.63	4.60

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

YEAR	2013	2014	2015	2016
	5.0	4.5	4.65	4.75

Advisory/Employer Surveys (Mean for LO #4)

YEAR	2013	2014	2015	2016
	4.67	4.0	3.75	4.25

Use of Evaluation Results

The student evidence based practice mean exam scores on the HESI Exit exam given in NUR 408 Nursing Synthesis stayed consistent with the previous calendar year with an overall mean score of 862 compared to 864 (2015). While this is considered an "acceptable performance" by HESI, it does not meet the required minimum score of 900 for success in NUR 408 and to graduate. UG faculty members will continue to review and revise syllabi for inclusion of changes and updates of nursing education trends, "best" practices, nationally standardized exams. The nursing program currently uses Elsevier Evolve HESI -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 members will continue to encourage students to utilize the online nursing academic enhancement programs (i.e. Evolve), which is available to all students as is as a live HESI NCLEX-RN review for senior students. Students also have the Elsevier HESI Platinum Bundle which includes NCLEX Review and books on Professionalism, Delegation, and Prioritization, as well as Computerized Adaptive Learning/Quizzing and Practice Exams. Research/Evidence Based Practice content is included in all of these resources.

Related Items

There are no related items.

BSN-SON 05: LO Professionalism

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. GE #1, #2, & #5

Data Collection (Evidence)

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

 2016 RN_BSN Program Satisfaction Survey - Final

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 End of Program_BSNGrads_Fall2016

Results of Evaluation

Professionalism/Leadership (Mean)

YEAR	2013	2014	2015	2016
EXAM 1	972	878	790	860
EXAM 2	863	901	720	875
EXAM 3	918	888	952	851

BSN End of Program surveys (Mean)

YEAR	2013	2014	2015	2016
	5.0	4.5	4.88	4.60

RNBSN End of Program surveys (Mean)

YEAR	2013	2014	2015	2016
	4.5	4.0	4.65	4.85

Advisory/Employer surveys (Mean)

YEAR	2013	2014	2015	2016
	4.67	4.0	4.0	4.12

Use of Evaluation Results

The student professionalism mean scores on the HESI Exit Exams administered in NUR 408 Nursing Synthesis slightly improved with an overall mean score of 862 during the 2016 calendar year (which is at the "acceptable performance" as noted by HESI, but below the required minimum HESI score of 900 to be successful in NUR 408

Nursing Synthesis and to graduate) as compared to 821 in 2015. Professionalism is threaded throughout the curriculum with greater emphasis in the courses of NUR 314 Health Policy/Politics and Ethical Decision Making and NUR 402/442 Management of Client Care/Management of Client Care Practicum. Students were provided with clinical experiences that occurred on designated hospital units under the direction of a faculty member. Leadership and management concepts were taught, observed, and practiced on these units. UG faculty members have revised syllabi to incorporate the changes to the clinical learning experiences, as well as inclusion of current nursing practice, education redesign, national trends, and nationally standardized exams (currently Elsevier Evolve HESI-specialty exams given as the final exam for each course in which there is a HESI exam available - the course of NUR 402/442 has a HESI specialty exam that is administered as the final exam). The percentage of the grade for each course varies depending on the level of the nursing course, with higher level courses having a greater weight for the HESI. In addition, 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 online nursing academic enhancement programs (i.e. Evolve).

End of program surveys of students and advisory/employer surveys for both BSN & RNBSN on LO #5 indicate a trend upward from the overall mean scores (on a five-point scale) - BSN End of Program survey - 4.60 as compared to 4.88 (2015); RNBSN End of Program survey - 4.85 as compared to 4.65 (2015); with the mean scores of the Advisory/Employer surveys of 4.12 (2016) compared to 4.0 (2015).

We will continue to obtain feedback from BSN and RNBSN students, alumni, and employers. Survey ratings will be monitored and recommendations for improvement made to UG faculty members so curriculum can be revised. National education trends, "best" practices and state/national accreditation standards for both the BSN and RNBSN programs will be monitored with curriculum revisions as needed

Related Items

There are no related items.

BSN-SON 06: LO Physiological and Psychosocial Integrity

Providing Department: Robert E. Smith School of Nursing

Learning Outcome

Learning 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 #1, #3, & #5

Data Collection (Evidence)

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

 2016 RN_BSN Program Satisfaction Survey - Final

 2016_PEC Advisory Council Employer Survey Report

 End of Program_BSNGrads_Fall2016

Results of Evaluation

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

YEAR	2010	2011	2012	2013	2014	2015	2016
PI	954	976	962	782	785	846	868
PsI	985	920	990	943	939	934	821

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

YEAR	2010	2011	2012	2013	2014	2015	2016
PI	865	970	967	936	827	887	957
PsI	895	982	890	941	912	783	868

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

YEAR	2010	2011	2012	2013	2014	2015	2016
PI	923	860	914	888	858	883	909
PsI	914	956	814	920	879	910	847

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

YEAR	2010	2011	2012	2013	2014	2015	2016
	4.6	4.56	4.67	5.0	4.7	4.88	4.65

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

YEAR	2013	2014	2015	2016
	4.5	4.0	4.71	4.85

Advisory/Employer surveys (Mean for LO #6)

YEAR	2013	2014	2015	2016
	4.67	3.75	4.25	4.25

Use of Evaluation Results

The student physiologic integrity overall mean exam score on the HESI exit exam given in NUR 408 Nursing Synthesis revealed an increase of 911 in 2016 as compared to 872 in 2015. Whereas, the psychosocial integrity overall mean exam score revealed a decrease from 876 in 2015 to 845 in 2016. The scores on the physiologic integrity is at the "recommended performance" level as psychosocial integrity is "below acceptable performance". This score is below the HESI "recommended performance" score of 900 or above which is required for success in NUR 408 and to graduate. Psychosocial integrity is introduced during the first semester in NUR 302/332 Fundamentals of Client Care/Fundamentals of Client Care Practicum and threaded throughout the curriculum with emphasis in NUR 307/337 Psychiatric Mental Health Nursing/Psychiatric Mental Health Nursing Practicum. The concept of Physiologic integrity is introduced during the first semester of NUR 302/332 Fundamentals of Client Care/Fundamentals of Client Care Practicum and threaded throughout the curriculum with emphasis in NUR 305/335 Nursing the Adult Client Care I/Nursing the Adult Client Care I Practicum and NUR 306/336 Nursing the Adult Client Care II/Nursing the Adult Client Care II Practicum. Based upon the review of syllabi at the UG curriculum retreat, simulation continued to be incorporated into the medical-surgical practicum courses (NUR 335/336) and began being incorporated into the psychiatric-mental health practicum course (NUR 337) this past fall semester. Also, the Instructor of Record (IOR) of NUR 307/337 changed the course textbook to one that has adaptive learning/quizzing included. A nationally standardized exam will continue to be used as the final exam in

both NUR 307 and 306 with a customized exam administered in NUR 305. The percentage of the grade for each course varies depending on the level of the nursing course, with higher level courses having a greater weight for the HESI (national standardized exams). In addition to these exams, a midcurricular exam will be administered to students during the 3rd semester (this fall) of the BSN program that consists of 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. UG faculty members will continue the use of nursing academic online enhancement programs (i.e. Evolve).

End of Program surveys of students and advisory/employer surveys on LO #6 remain good since 2013. These overall student ratings (using a five-point scale) for 2016 are as follows: BSN program of study - 4.65 as compared to 4.88 for 2015; RNBSN program of study - 4.85 as compared to 4.71 Advisory/Employer survey - 4.25 as compared to 4.25.

We will continue to obtain feedback from BSN and RNBSN students and advisory/employers by monitoring the survey ratings and make recommendations for improvement; national education trends, "best" practices, professional competencies, and state/national accreditation standards will be monitored; curriculum will be revised as needed.

Related Items

There are no related items.

BSN-SON 07: LO Safe Effective Care


Providing Department: Robert E. Smith School of Nursing

Learning Outcome


Learning Outcome #7: Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach [safe, effective, care environment or SECE]. GE #1, #2, #3, & #5

Data Collection (Evidence)

HESI exit exam scores in the BSN; BSN end of program surveys; advisory/employer surveys

 2016 RN_BSN Program Satisfaction Survey - Final

 2016_PEC Advisory Council Employer Survey Report

 End of Program_BSNGrads_Fall2016

Results of Evaluation

Safe, Effective, Care Environment [SECE] (Mean)

YEAR	2010	2011	2012	2013	2014	2015	2016
EXAM 1	908	869	920	1003	894	888	882
EXAM 2	871	971	935	926	946	950	879
EXAM 3	900	919	1026	945	915	884	953

BSN End of Program survey (Mean for LO #7)

YEAR	2010	2011	2012	2013	2014	2015	2016
	4.7	4.38	4.56	5.0	4.7	4.88	4.55

RNBSN End of Program survey (Mean for LO #7)

YEAR	2013	2014	2015	2016
	4.58	4.0	4.76	4.80

Advisory/Employer surveys (Mean for LO #7)

YEAR	2013	2014	2015	2016
	4.67	4.0	4.12	4.0

Use of Evaluation Results

The student mean exam scores for safe, effective care on the HESI exit exam given in NUR 408 Nursing Synthesis trended slightly downward this year with an overall mean score of 905 as compared to the score of 907 in 2015 and 918 in 2014. However, this score of 905 exceeds the "recommended performance" by HESI and the required minimum score of 900 for success in NUR 408 and to graduate. Quality and Safety Education for Nurses (QSEN) standards are being incorporated into course content and practicum experiences (both in healthcare facilities and simulation) beginning in the NUR 302/332 Fundamentals of Client Care/Fundamentals of Client Care Practicum and threaded throughout the BSN curriculum. These scores will continue to be monitored with a nationally standardized exam at the end of designated courses and prior to completion of the program. 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. Students will continue to be encouraged to utilize nursing academic online enhancements (i.e. Evolve), as well as HESI NCLEX-RN review for senior students.

End of program surveys of students and advisory/employer surveys indicated an upward trend in the overall mean score for LO #7. For the BSN end of program survey, the overall mean score was 4.55 this year as compared to 4.88 in 2015; the RNBSN end of program survey revealed an overall mean score of 4.80 this year as compared to 4.76 in 2015; and the advisory/employer survey demonstrated an overall mean score of 4.0- this year as compared to 4.12 in 2015.

We will continue to obtain feedback from BSN and RNBSN students and advisory council/employers; monitor ratings and make recommendations for improvement; and continue to monitor national education trends, "best" practices, professional competencies, and state/national accreditation standards. Curriculum will be revised as needed.

Related Items

There are no related items.

DNP_SON 01: LO Theory/Research

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)

Portfolio(s) with evidence of learning outcomes accomplished


Defense of the Scholarly Project (which addresses all DNP learning outcomes) to the DNP Scholarly Project Advisory Committee.

Submission of an Abstract at a state, regional, national, or international professional conference

DNP End of Program Evaluations

Employer/Advisory Council Evaluations

 2016_PEC Advisory Council Employer Survey Report

 End of the Program_DNPGrads_Fall2016

Results of Evaluation

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

ACTIVITY/YEAR	2014	2015	2016
Portfolio	4/4	2/2	4/4
Defense of Scholarly Project	4/4	2/2	4/4
Submission of Abstract	0/4	2/2	4/4
DNP End of Program Evaluation	4.0	4.0	5.0
Advisory Council/Employer Evaluation	*	No responses	5.0

*First DNP cohort graduated December 2014, no employer evaluations available

Four of four students submitted comprehensive portfolios to the DNP faculty members.

Four of four students defended successfully their scholarly projects to their DNP Scholarly Project Advisory Committee

Four of four students submitted abstracts for presentations. Three of four students had their abstracts accepted for presentations. Two students presented at the Mississippi Nurses Association (MNA) convention, Research Roundtable in October 2016. One student presented at the Texas Nurses Association in September 2016. One student who presented at the MNA Research Roundtable was a prizewinner at the event.

- Roundtable Presentation - *Lifestyle Modifications to Reduce Type II Diabetes*

First Place Winner

-Roundtable Presentation - *Stewards of Children: Advocacy for Sexual Child Abuse Prevention*

Podium Presentation - *Anticholinergic-Prescribing Practices In Older Community-Dwelling African-Americans*

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. Within this last year, graduate faculty members decided to not require a presentation or publication. However, they did decide to require an abstract submission to a state, regional, national, or international professional event. All students must defend their scholarly projects to their DNP Scholarly Project Advisory Committee.

For those students seeking the Family Nurse Practitioner (FNP) certification, they are required to take HESI APRN Exit exams. The first student in the DNP program who earned eligibility to write the FNP certification exam graduated in Spring 2017. Therefore, results of APRN exit exams and certification pass rates will be reported in FY2018. We will continue to obtain feedback from the DNP student graduates, and advisory council/employers and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education trends, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

Related Items

There are no related items.

DNP_SON 02: LO Healthcare Delivery Systems

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 outcomes accomplished
2. Defense of the Scholarly Project (which addresses all DNP learning outcomes) to the DNP Scholarly Project Advisory Committee.
3. Submission of an Abstract at a state, regional, national, or international professional conference
4. DNP End of Program Evaluations
5. Employer/Advisory Council Evaluations

 2016_PEC Advisory Council Employer Survey Report

 End of the Program_DNPGrads_Fall2016

Results of Evaluation

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

ACTIVITY/YEAR	2014	2015	2016
Portfolio	4/4	2/2	4/4
Defense of Scholarly Project	4/4	2/2	4/4
Submission of Abstract	0/4	2/2	4/4
DNP End of Program Evaluation	4.0	4.0	5.0
Advisory Council/Employer Evaluation	*	No responses	4.0

*First DNP cohort graduated December 2014, no employer evaluations available

Four of four students submitted comprehensive portfolios to the DNP faculty members.

Four of four students defended successfully their scholarly projects to their DNP Scholarly Project Advisory Committee

Four of four students submitted abstracts for presentations. Three of four students had their abstracts accepted for presentations. Two students presented at the Mississippi Nurses Association (MNA) convention, Research Roundtable in October 2016. One student presented at the Texas Nurses Association in September 2016. One student who presented at the MNA Research Roundtable was a prizewinner at the event.

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First Place Winner

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Podium Presentation - *Anticholinergic-Prescribing Practices In Older Community-Dwelling African-Americans*

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. Within this last year, graduate faculty members decided to not require a presentation or publication. However, they did decide to require an abstract submission to a state, regional, national, or international professional event. All students must defend their scholarly projects to their DNP Scholarly Project Advisory Committee.

For those students seeking the Family Nurse Practitioner (FNP) certification, they are required to take HESI APRN Exit exams. The first student in the DNP program who earned eligibility to write the FNP certification exam graduated in Spring 2017. Therefore, results of APRN exit exams and certification pass rates will be reported in FY2018. We will continue to obtain feedback from the DNP student graduates, and advisory council/employers and monitor survey ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education trends, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

Related Items

There are no related items.

DNP_SON 03: LO Monitoring/Ensuring Quality of Health Care Practice

Providing Department: Robert E. Smith School of Nursing

Learning Outcome

Learning Outcome #3: 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 outcomes accomplished
2. Defense of the Scholarly Project (which addresses all DNP learning outcomes) to the DNP Scholarly Project Advisory Committee.
3. Submission of an Abstract at a state, regional, national, or international professional conference
4. DNP End of Program Evaluations
5. Employer/Advisory Council Evaluations

 2016_PEC Advisory Council Employer Survey Report

 End of the Program_DNPGrads_Fall2016

Results of Evaluation

Learning Outcome #3: Lead interprofessional teams and partnerships to analyze and improve health outcomes for individuals, families, and communities.

ACTIVITY/YEAR	2014	2015	2016
Portfolio	4/4	2/2	4/4
Defense of Scholarly Project	4/4	2/2	4/4
Submission of Abstract	0/4	2/2	4/4
DNP End of Program Evaluation	4.0	4.0	5.0
Advisory Council/Employer Evaluation	*	No responses	5.0

*First DNP cohort graduated December 2014, no employer evaluations available

Four of four students submitted comprehensive portfolios to the DNP faculty members.

Four of four students defended successfully their scholarly projects to their DNP Scholarly Project Advisory Committee

Four of four students submitted abstracts for presentations. Three of four students had their abstracts accepted for presentations. Two students presented at the Mississippi Nurses Association (MNA) convention, Research Roundtable in October 2016. One student presented at the Texas Nurses Association in September 2016. One student who presented at the MNA Research Roundtable was a prizewinner at the event.

- Roundtable Presentation - *Lifestyle Modifications to Reduce Type II Diabetes*

First Place Winner

-Roundtable Presentation - *Stewards of Children: Advocacy for Sexual Child Abuse Prevention*

Podium Presentation - *Anticholinergic-Prescribing Practices In Older Community-Dwelling African-Americans*

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. Within this last year, graduate faculty members decided to not require a presentation or publication. However, they did decide to require an abstract submission to a state, regional, national, or international professional event. All students must defend their scholarly projects to their DNP Scholarly Project Advisory Committee.

For those students seeking the Family Nurse Practitioner (FNP) certification, they are required to take HESI APRN Exit exams. The first student in the DNP program who earned eligibility to write the FNP certification exam graduated in Spring 2017. Therefore, results of APRN exit exams and certification pass rates will be reported in FY2018. We will continue to obtain feedback from the DNP student graduates, and advisory council/employers and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education trends, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

Related Items

There are no related items.

DNP_SON 04: LO Professional Role

Providing Department: Robert E. Smith School of Nursing

Learning Outcome

Learning Outcome #4: 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 outcomes accomplished
2. Defense of the Scholarly Project (which addresses all DNP learning outcomes) to the DNP Scholarly Project Advisory Committee.
3. Submission of an Abstract at a state, regional, national, or international professional conference
4. DNP End of Program Evaluations
5. Employer/Advisory Council Evaluations

 2016_PEC Advisory Council Employer Survey Report

 End of the Program_DNPGrads_Fall2016

Results of Evaluation

Learning Outcome #4: Assume a leadership role in the application and dissemination of best evidence for practice to promote efficient, effective, and equitable patient-centered care.

ACTIVITY/YEAR	2014	2015	2016
Portfolio	4/4	2/2	4/4
Defense of Scholarly Project	4/4	2/2	4/4
Submission of Abstract	0/4	2/2	4/4
DNP End of Program Evaluation	4.0	4.0	5.0
Advisory Council/Employer Evaluation	*	No responses	5.0

*First DNP cohort graduated December 2014, no employer evaluations available

Four of four students submitted comprehensive portfolios to the DNP faculty members.

Four of four students defended successfully their scholarly projects to their DNP Scholarly Project Advisory Committee

Four of four students submitted abstracts for presentations. Three of four students had their abstracts accepted for presentations. Two students presented at the Mississippi Nurses Association (MNA) convention, Research Roundtable in October 2016. One student presented at the Texas Nurses Association in September 2016. One student who presented at the MNA Research Roundtable was a prizewinner at the event.

- Roundtable Presentation - *Lifestyle Modifications to Reduce Type II Diabetes*
First Place Winner

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Podium Presentation - *Anticholinergic-Prescribing Practices In Older Community-Dwelling African-Americans*

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. Within this last year, graduate faculty members decided to not require a presentation or publication. However, they did decide to require an abstract submission to a state, regional, national, or international professional event. All students must defend their scholarly projects to their DNP Scholarly Project Advisory Committee.

For those students seeking the Family Nurse Practitioner (FNP) certification, they are required to take HESI APRN Exit exams. The first student in the DNP program who earned eligibility to write the FNP certification exam graduated in Spring 2017. Therefore, results of APRN exit exams and certification pass rates will be reported in FY2018. We will continue to obtain feedback from the DNP student graduates, and advisory council/employers and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education trends, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

Related Items

There are no related items.

DNP_SON 05: LO Legal and Regulatory Issues

Providing Department: Robert E. Smith School of Nursing

Learning Outcome

Learning Outcome #5: 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 outcomes accomplished
2. Defense of the Scholarly Project (which addresses all DNP learning outcomes) to the DNP Scholarly Project Advisory Committee.
3. Submission of an Abstract at a state, regional, national, or international professional conference
4. DNP End of Program Evaluations
5. Employer/Advisory Council Evaluations

 2016_PEC Advisory Council Employer Survey Report

 End of the Program_DNPGrads_Fall2016

Results of Evaluation

Learning Outcome #5: Design, influence and implement health care and ethical policies that affect financing, practice regulation, access to care, and outcomes for individuals, families, and communities.

ACTIVITY/YEAR	2014	2015	2016
Portfolio	4/4	2/2	4/4
Defense of Scholarly Project	4/4	2/2	4/4
Submission of Abstract	0/4	2/2	4/4
DNP End of Program Evaluation	4.0	4.0	5.0
Advisory Council/Employer Evaluation	*	No responses	5.0

*First DNP cohort graduated December 2014, no employer evaluations available

Four of four students submitted comprehensive portfolios to the DNP faculty members.

Four of four students defended successfully their scholarly projects to their DNP Scholarly Project Advisory

Committee

Four of four students submitted abstracts for presentations. Three of four students had their abstracts accepted for presentations. Two students presented at the Mississippi Nurses Association (MNA) convention, Research Roundtable in October 2016. One student presented at the Texas Nurses Association in September 2016. One student who presented at the MNA Research Roundtable was a prizewinner at the event.

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First Place Winner

-Roundtable Presentation - *Stewards of Children: Advocacy for Sexual Child Abuse Prevention*

Podium Presentation - *Anticholinergic-Prescribing Practices In Older Community-Dwelling African-Americans*

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. Within this last year, graduate faculty members decided to not require a presentation or publication. However, they did decide to require an abstract submission to a state, regional, national, or international professional event. All students must defend their scholarly projects to their DNP Scholarly Project Advisory Committee.

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Related Items

There are no related items.

DNP_SON 06: LO Cultural Competence

Providing Department: Robert E. Smith School of Nursing

Learning Outcome

Learning Outcome #6: 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 outcomes accomplished
2. Defense of the Scholarly Project (which addresses all DNP learning outcomes) to the DNP Scholarly Project Advisory Committee.
3. Submission of an Abstract at a state, regional, national, or international professional conference
4. DNP End of Program Evaluations
5. Employer/Advisory Council Evaluations

Results of Evaluation

Learning Outcome #6: Analyze scientific data and synthesize concepts to develop, implement, and evaluate interventions that address health promotion and disease prevention for culturally diverse populations.

ACTIVITY/YEAR	2014	2015	2016
Portfolio	4/4	2/2	4/4
Defense of Scholarly Project	4/4	2/2	4/4
Submission of Abstract	0/4	2/2	4/4
DNP End of Program Evaluation	4.0	4.0	5.0
Advisory Council/Employer Evaluation	*	No responses	5.0

*First DNP cohort graduated December 2014, no employer evaluations available

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Podium Presentation - *Anticholinergic-Prescribing Practices In Older Community-Dwelling African-Americans*

Use of Evaluation Results

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Related Items

There are no related items.

DNP_SON 07: LO Managing/Negotiating Health Care Delivery Systems

Providing Department: Robert E. Smith School of Nursing


Learning Outcome

Learning Outcome #7: 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 outcomes accomplished
2. Defense of the Scholarly Project (which addresses all DNP learning outcomes) to the DNP Scholarly Project Advisory Committee.
3. Submission of an Abstract at a state, regional, national, or international professional conference
4. DNP End of Program Evaluations
5. Employer/Advisory Council Evaluations

 2016_PEC Advisory Council Employer Survey Report

 End of the Program_DNPGrads_Fall2016

Results of Evaluation

Learning Outcome #7: Utilize and evaluate information and communication technologies to improve health care and to implement change in health care systems.

ACTIVITY/YEAR	2014	2015	2016
Portfolio	4/4	2/2	4/4
Defense of Scholarly Project	4/4	2/2	4/4
Submission of Abstract	0/4	2/2	4/4
DNP End of Program Evaluation	4.0	4.0	5.0
Advisory Council/Employer Evaluation	*	No responses	5.0

*First DNP cohort graduated December 2014, no employer evaluations available

Four of four students submitted comprehensive portfolios to the DNP faculty members.

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First Place Winner

-Roundtable Presentation - *Stewards of Children: Advocacy for Sexual Child Abuse Prevention*

Podium Presentation - *Anticholinergic-Prescribing Practices In Older Community-Dwelling African-Americans*

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. Within this last year, graduate faculty members decided to not require a presentation or publication. However, they did decide to require an abstract submission to a state, regional, national, or international professional event. All students must defend their scholarly projects to their DNP Scholarly Project Advisory Committee.

For those students seeking the Family Nurse Practitioner (FNP) certification, they are required to take HESI APRN Exit exams. The first student in the DNP program who earned eligibility to write the FNP certification exam graduated in Spring 2017. Therefore, results of APRN exit exams and certification pass rates will be reported in FY2018. We will continue to obtain feedback from the DNP student graduates, and advisory council/employers and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education trends, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

Related Items

There are no related items.

DNP_SON 08: LO Clinical Management

Providing Department: Robert E. Smith School of Nursing


Learning Outcome

Learning Outcome #8: 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 outcomes accomplished
2. Defense of the Scholarly Project (which addresses all DNP learning outcomes) to the DNP Scholarly Project Advisory Committee.
3. Submission of an Abstract at a state, regional, national, or international professional conference
4. DNP End of Program Evaluations
5. Employer/Advisory Council Evaluations

 2016_PEC Advisory Council Employer Survey Report

 End of the Program_DNPGrads_Fall2016

Results of Evaluation

Learning Outcome #8: Utilize advanced clinical judgment and specialty focused competencies to improve the care of diverse populations.

ACTIVITY/YEAR	2014	2015	2016
Portfolio	4/4	2/2	4/4
Defense of Scholarly Project	4/4	2/2	4/4
Submission of Abstract	0/4	2/2	4/4
DNP End of Program Evaluation	4.0	4.0	5.0
Advisory Council/Employer Evaluation	*	No responses	5.0

*First DNP cohort graduated December 2014, no employer evaluations available

Four of four students submitted comprehensive portfolios to the DNP faculty members.

Four of four students defended successfully their scholarly projects to their DNP Scholarly Project Advisory Committee

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Roundtable in October 2016. One student presented at the Texas Nurses Association in September 2016. One student who presented at the MNA Research Roundtable was a prizewinner at the event.

- Roundtable Presentation - *Lifestyle Modifications to Reduce Type II Diabetes*
First Place Winner

-Roundtable Presentation - *Stewards of Children: Advocacy for Sexual Child Abuse Prevention*

Podium Presentation - *Anticholinergic-Prescribing Practices In Older Community-Dwelling African-Americans*

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. Within this last year, graduate faculty members decided to not require a presentation or publication. However, they did decide to require an abstract submission to a state, regional, national, or international professional event. All students must defend their scholarly projects to their DNP Scholarly Project Advisory Committee.

For those students seeking the Family Nurse Practitioner (FNP) certification, they are required to take HESI APRN Exit exams. The first student in the DNP program who earned eligibility to write the FNP certification exam graduated in Spring 2017. Therefore, results of APRN exit exams and certification pass rates will be reported in FY2018. We will continue to obtain feedback from the DNP student graduates, and advisory council/employers and monitor ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education trends, APRN competencies, and practice standards for the DNP program of Family Nurse Practitioner (FNP) to revise the curriculum as needed.

Related Items

There are no related items.

MSN-SON 01: LO Scientific Foundation

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

 2016_MSINProgramSatisfactionSurveyReport_Spring Graduates of 2016

 2016_PEC Advisory Council Employer Survey Report

Results of Evaluation

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

safety for diverse populations.

YEAR	2013	2014	2015	2016
EXAM 1	880	503	864	760
EXAM 2	N/A	599	754	819

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

YEAR	2012	2013	2014	2015	2016
	4.62	4.65	4.36	4.40	4.45

Advisory Council/Employer surveys (Mean for LO #1)

YEAR	2012	2013	2014	2015	2016
	4.25	5.0	4.5	4.5	4.5

Use of Evaluation Results

The APRN HESI exam is now the final exam and required for graduation from the MSN program of the FNP students; 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 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 successes by Elsevier Evolve HESI Exit Exam, the overall mean scores for these two APRN Exit exams in scientific foundation was 790 in 2016, "below the acceptable performance" score. This is a decrease from the mean exam score of 809 in 2015. The following changes have been implemented in the FNP curriculum: 1) change in Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Addition of an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Addition of one credit hour to NUR 602 Advanced Health assessment (from 2 to 3 hours); and 4) Addition of one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and 5) deletion of one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). Faculty members will place added emphasis on this content throughout the curriculum. An individualized enhancement (remediation) plan will continue to be implemented for each student who has an overall score below 800 on the APRN Exit Exam and in specific content areas.

Overall mean scores from both the MSN End of Program survey and the Advisory Council/Employer surveys demonstrated scores of 4.45 and 4.5 respectively for 2016 on a five-point scale. These mean scores indicated that both students and advisory council/employers "agreed" that LO #1 was met.

We will continue to obtain feedback from graduate students and advisory council/employers and monitor survey ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education trends, 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.

Related Items

There are no related items.

MSN-SON 02: LO Healthcare Delivery Systems

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.

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

 2016_MSNProgramSatisfactionSurveyReport_Spring Graduates of 2016

 2016_PEC Advisory Council Employer Survey Report

Results of Evaluation

YEAR	2013	2014	2015	2016
EXAM 1	766	888	714	535
EXAM 2	N/A	894	851	758

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

YEAR	2012	2013	2014	2015	2016
	4.69	4.59	4.36	4.50	4.55

Advisory Council/Employer surveys (Mean for LO #2)

YEAR	2012	2013	2014	2015	2016
	4.25	5.0	4.5	4.25	4.0

Use of Evaluation Results

The APRN HESI exam is required for graduation from the MSN program of the FNP students as the APRN final exam; Students are 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 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 successes by Elsevier Evolve HESI Exit Exam, the overall mean scores for these two APRN Exit exams in healthcare delivery systems was 647 in 2016, below the required score of 800, and "needs further preparation". This is a decrease from the mean exam score of 783 in 2015. The following changes have been implemented in the FNP curriculum with the anticipation that future improvements will be seen in the scores: 1) change in Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Addition of an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Addition of one credit hour to NUR 602 Advanced Health assessment (from 2 to 3 hours); and 4) Addition of one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and 5) deletion of one

credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). Faculty members will place added emphasis on this content throughout the curriculum. An individualized enhancement (remediation) plan will continue to be implemented for each student who has an overall score below 800 on the APRN Exit Exam and in specific content areas. Overall mean scores from both the MSN End of Program survey and the Advisory Council/Employer surveys demonstrated scores of 4.55 and 4.0 respectively for 2016 on a five-point scale. These mean scores indicated that both students and advisory council/employers "agreed" that LO #2 was met.

We will continue to obtain feedback from graduate students and advisory council/employers and monitor survey ratings and recommendations for improvement. Faculty members will continue to monitor national nursing education trends, 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.

Related Items

There are no related items.

MSN-SON 03: LO Quality of Healthcare Practice

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

 2016_MSINProgramSatisfactionSurveyReport_Spring Graduates of 2016

 2016_PEC Advisory Council Employer Survey Report

Results of Evaluation

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

YEAR	2013	2014	2015	2016
EXAM 1	778	734	819	750
EXAM 2	N/A	690	748	832

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

YEAR	2012	2013	2014	2015	2016
	4.88	4.59	4.43	4.40	4.55

Advisory Council/Employer surveys (Mean for LO #3)

YEAR	2012	2013	2014	2015	2016
	4.25	5.0	4.5	4.25	4.5

Use of Evaluation Results

The APRN HESI exam is required for graduation from the MSN program of the FNP students as the APRN final exam; Students are 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 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 successes by Elsevier Evolve HESI Exit Exam, the overall mean scores for these two APRN Exit exams in quality of healthcare services was 791 in 2016, below the required score of 800, but an "acceptable performance" score according to HESI. This is an increase from the mean exam score of 784 in 2015. There has been improvement in these scores since the following changes have been implemented in the FNP curriculum: 1) change in Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Addition of an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Addition of one credit hour to NUR 602 Advanced Health assessment (from 2 to 3 hours); and 4) Addition of one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and 5) deletion of one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). Faculty members will place added emphasis on this content throughout the curriculum. An individualized enhancement (remediation) plan will continue to be implemented for each student who has an overall score below 800 on the APRN Exit Exam and in specific content areas. Overall mean scores from both the MSN End of Program survey and the Advisory Council/Employer surveys demonstrated scores of 4.55 and 4.50 respectively for 2016 on a five-point scale. These mean scores indicated that both students and advisory council/employers "agreed" that LO #3 was met.

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

Related Items

There are no related items.

MSN-SON 04: LO Theory/Research

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

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

the SON Faculty Organization during monthly meetings as appropriate).

 2016_MSNProgramSatisfactionSurveyReport_Spring Graduates of 2016

 2016_PEC Advisory Council Employer Survey Report

Results of Evaluation

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

YEAR	2013	2014	2015	2016
EXAM 1	945	526	784	880
EXAM 2	N/A	463	900	667

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

YEAR	2012	2013	2014	2015	2016
	4.56	4.59	4.43	4.20	4.55

Advisory Council/Employer surveys (Mean for LO #4)

YEAR	2012	2013	2014	2015	2016
	4.0	5.0	4.5	4.0	4.5

Use of Evaluation Results

The APRN HESI exam is required for graduation from the MSN program of 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 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 successes by Elsevier Evolve HESI Exit Exam, the overall mean scores for these two APRN Exit exams in theory/research was 774 in 2016, above the required score of 800, and a 'recommended performance' score according to HESI. This is a decrease from the mean exam score of 842 in 2015. The following changes have been implemented in the FNP curriculum: 1) change in Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Addition of an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Addition of one credit hour to NUR 602 Advanced Health assessment (from 2 to 3 hours); and 4) Addition of one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and 5) deletion of one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). Faculty members will place added emphasis on this content throughout the curriculum. An individualized enhancement (remediation) plan will continue to be implemented for each student who has an overall score below 800 on the APRN Exit Exam and in specific content areas. Overall mean scores from both the MSN End of Program survey and the Advisory Council/Employer surveys demonstrated scores of 4.55 and 4.5 respectively for 2016 on a five-point scale. These mean scores indicated that both students and advisory council/employers "agreed" that LO #4 was met.

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

Related Items

There are no related items.

MSN-SON 05: LO Technology and Information Literacy

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

 2016_MSINProgramSatisfactionSurveyReport_Spring Graduates of 2016

 2016_PEC Advisory Council Employer Survey Report

Results of Evaluation

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

YEAR	2013	2014	2015	2016
EXAM 1	789	922	916	747
EXAM 2	N/A	585	715	779

MSN End of Program surveys (Mean for LO #5)

YEAR	2012	2013	2014	2015	2016
	4.75	4.71	4.50	4.50	4.45

Advisory Council/Employer surveys (Mean for LO #5)

YEAR	2012	2013	2014	2015	2016
	4.0	5.0	4.0	4.5	4.5

Use of Evaluation Results

The APRN HESI exam is required for graduation from the MSN program of the FNP students as the APRN final exam; Students are 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 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 successes by Elsevier Evolve HESI Exit Exam, the overall mean scores for these two APRN Exit

exams in technology and information literacy was 763 in 2016, below the required score of 800, and an "acceptable performance" score according to HESI. This is a decrease from the mean exam score of 815 in 2015. The following changes have been implemented in the FNP curriculum: 1) change in Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Addition of an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Addition of one credit hour to NUR 602 Advanced Health assessment (from 2 to 3 hours); and 4) Addition of one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and 5) deletion of one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). Faculty members will place added emphasis on this content throughout the curriculum. An individualized enhancement (remediation) plan will continue to be implemented for each student who has an overall score below 800 on the APRN Exit Exam and in specific content areas. Overall mean scores from both the MSN End of Program survey and the Advisory Council/Employer surveys demonstrated scores of 4.45 and 4.5 respectively for 2016 on a five-point scale. These mean scores indicated that both students and advisory council/employers "agreed" that LO #5 was met.

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

Related Items

There are no related items.

MSN-SON 06: LO Legal and Regulatory Issues

Providing Department: Robert E. Smith School of Nursing

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

 2016_MSNProgramSatisfactionSurveyReport_Spring Graduates of 2016

 2016_PEC Advisory Council Employer Survey Report

Results of Evaluation

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

YEAR	2013	2014	2015	2016
EXAM 1	669	1002	870	771
EXAM 2	N/A	N/A	861	775

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

YEAR	2012	2013	2014	2015	2016
	4.62	4.65	4.43	4.30	4.55

Advisory Council/Employer surveys (Mean for LO #6)

YEAR	2012	2013	2014	2015	2016
	4.0	5.0	4.0	4.25	4.0

Use of Evaluation Results

The APRN HESI exam is required for graduation from the MSN program of the FNP students as the APRN final exam; Students are 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 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 successes by Elsevier Evolve HESI Exit Exam, the overall mean scores for these two APRN Exit exams in legal and regulatory issues was 773 in 2016, above the required score of 800, and an "acceptable performance" score according to HESI. This is a decrease from the exam score of 866 in 2015. The following changes have been implemented in the FNP curriculum with the anticipation of future improvement in scores: 1) change in Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Addition of an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Addition of one credit hour to NUR 602 Advanced Health assessment (from 2 to 3 hours); and 4) Addition of one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and 5) deletion of one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). Faculty members will place added emphasis on this content throughout the curriculum. An individualized enhancement (remediation) plan will continue to be implemented for each student who has an overall score below 800 on the APRN Exit Exam and in specific content areas. Overall mean scores from both the MSN End of Program survey and the Advisory Council/Employer surveys demonstrated scores of 4.55 and 4.50 respectively for 2016 on a five-point scale. These mean scores indicated that both students and advisory council/employers "agreed" that LO #6 was met.

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

Related Items

There are no related items.

MSN-SON 07: LO Professional Role

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

 2016_MSNProgramSatisfactionSurveyReport_Spring Graduates of 2016

 2016_PEC Advisory Council Employer Survey Report

Results of Evaluation

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

YEAR	2013	2014	2015	2016
EXAM 1	773	811	851	728
EXAM 2	N/A	828	717	803

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

YEAR	2012	2013	2014	2015	2016
	4.62	4.65	4.43	4.30	4.55

Advisory Council/Employer surveys (Mean for LO #7)

YEAR	2012	2013	2014	2015	2016
	4.0	5.0	4.5	4.25	4.5

Use of Evaluation Results

The APRN HESI exam is required for graduation from the MSN program of the FNP students as the APRN final exam; Students are 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 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 successes by Elsevier Evolve HESI Exit Exam, the overall mean scores for these two APRN Exit exams in professional role was 849 in 2016, above the required score of 800, and a "recommended performance" score according to HESI. This is an increase from the mean exam scores of 784 in 2015. The following changes have been implemented in the FNP curriculum with the anticipation of future improvement in scores: 1) change in Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Addition of an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Addition of one credit hour to NUR 602 Advanced Health assessment (from 2 to 3 hours); and 4) Addition of one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and 5) deletion of one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). Faculty members will place added emphasis on this content throughout the curriculum. An individualized enhancement (remediation) plan will

continue to be implemented for each student who has an overall score below 800 on the APRN Exit Exam and in specific content areas. Overall mean scores from both the MSN End of Program survey and the Advisory Council/Employer surveys demonstrated scores of 4.45 and 4.50 respectively for 2016 on a five-point scale. These mean scores indicated that both students and advisory council/employers "agreed" that LO #7 was met.

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

Related Items

There are no related items.

 **MSN-SON 08: LO Health Promotion and Disease Prevention**

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

 2016_MSNSonProgramSatisfactionSurveyReport_Spring Graduates of 2016

 2016_PEC Advisory Council Employer Survey Report

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	2013	2014	2015	2016
EXAM 1	884	948	883	820
EXAM 2	N/A	890	724	878

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

YEAR	2012	2013	2014	2015	2016
	4.88	4.65	4.43	4.30	4.45

Advisory Council/Employer surveys (Mean for LO #8)

YEAR	2012	2013	2014	2015	2016
	4.0	5.0	4.0	4.25	4.0

Use of Evaluation Results

The APRN HESI exam is required for graduation from the MSN program of the FNP students as the APRN final exam; Students are 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 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 successes by Elsevier Evolve HESI Exit Exam, the overall mean scores for these two APRN Exit exams in professional role was 849 in 2016, below the required score of 800, but a "recommended performance" score according to HESI. This is an increase from the mean exam scores of 784 in 2015. The following changes have been implemented in the FNP curriculum with the anticipation of future improvement in scores: 1) change in Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Addition of an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Addition of one credit hour to NUR 602 Advanced Health assessment (from 2 to 3 hours); and 4) Addition of one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and 5) deletion of one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). Faculty members will place added emphasis on this content throughout the curriculum. An individualized enhancement (remediation) plan will continue to be implemented for each student who has an overall score below 800 on the APRN Exit Exam and in specific content areas. Overall mean scores from both the MSN End of Program survey and the Advisory Council/Employer surveys demonstrated scores of 4.55 and 4.0 respectively for 2015 on a five-point scale. These mean scores indicated that both students and advisory council/employers "agreed" that LO #7 was met.

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

Related Items

There are no related items.

MSN-SON 09: LO Clinical Management

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 SON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall SON Nurse Career Fair, collected by the SON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the SON 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	2013	2014	2015	2016
EXAM 1	796	872	827	806
EXAM 2	N/A	817	733	800

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

YEAR	2012	2013	2014	2015	2016
	4.81	4.65	4.29	4.40	4.36

Advisory Council/Employer surveys (Mean for LO #9)

YEAR	2012	2013	2014	2015	2016
	4.0	5.0	4.0	4.25	4.5

Use of Evaluation Results

The APRN HESI exam is required for graduation from the MSN program of the FNP students as the APRN final exam; Students are 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 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 successes by Elsevier Evolve HESI Exit Exam, the overall mean scores for these two APRN Exit exams in clinical management was 803 in 2016, below the required score of 800, but a "recommended performance" score according to HESI. This was an increase from the mean exam scores of 780 in 2015. The following changes have been implemented in the FNP curriculum with the anticipation of future improvement in scores: 1) change in Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Addition of an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Addition of one credit hour to NUR 602 Advanced Health assessment (from 2 to 3 hours); and 4) Addition of one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and 5) deletion of one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours). Faculty members will place added emphasis on this content throughout the curriculum. An individualized enhancement (remediation) plan will continue to be implemented for each student who has an overall score below 800 on the APRN Exit Exam and in specific content areas. Overall mean scores from both the MSN End of Program survey and the Advisory Council/Employer surveys demonstrated scores of 4.36 and 4.5 respectively for 2016 on a five-point scale. These mean scores indicated that both students and advisory council/employers "agreed" that LO #9 was met.

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

Related Items

There are no related items.

Unit Goals



SON 2017_01: Develop and maintain high quality graduate and undergraduate curricula

Progress: Completed

Providing Department: Robert E. Smith School of Nursing

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

1. Continue to collect aggregated student data related to program effectiveness annually.
2. Recruit and retain qualified nursing faculty as needed.
3. Continue participation in the DNP educational consortium agreement.
4. Continue incorporation of innovative technology into the curriculum.
5. Continue review and revision of the baccalaureate curriculum (both BSN and RN-BSN programs of study) based on findings of the GAP analysis, national and state standards, and best practices.
6. Inclusion and linkage of AACN essentials in all undergraduate (BSN & RNBSN) courses.
7. Continue review and revision as needed of AACN essentials and FNP competencies in all graduate core and FNP specialty courses.
8. Continue review and revision as needed of QSEN criteria into the undergraduate and graduate nursing program.

Actual Results of Evaluation

- a. Four faculty positions filled during Summer 2016, but yielded only two new faculty members in Instructor of Nursing positions because existing faculty members were hired in the Assistant Professors in Nursing positions. Two tenure-track faculty positions remain unfilled at this time with aggressive advertisement being conducted.
- b. We continue to participate in the Mississippi Educational Consortium for the Doctor of Nursing Practice (MECDNP). From this consortium, we received a second year of grant funding from a subaward agreement.
- c. Adaptive quizzing, Zoom conferencing, and Lock-Down Monitor Browser have been incorporated in both the undergraduate and graduate curriculum.
- d. The GAP analysis of BSN curriculum (both BSN and RN-BSN programs of study) was not completed during the 2016 calendar year.
- e. The baccalaureate curriculum (both BSN and RN-BSN programs of study) was reviewed with course revisions in regards to course descriptions (acknowledging capstone courses and writing intensive courses) and decreasing credit hours to reduce overall program credit hours to 120. The Master and Doctorate curriculum was reviewed with course revisions in regards to course descriptions (acknowledging capstone courses and better alignment with other courses in the program of study). In the Doctor of Nursing Practice (DNP) program of study, there are not only multiple entry points, but also exit points [i.e. students earn the BSN degree, MSN degree or certificate which makes them eligible to write the certification exam, and the DNP degree]. The Continuous Improvement Progress Report (CIPR) was drafted and submitted to CCNE in a timely manner (see attached). End of Program Satisfaction results from all programs [BSN, RN-BSN Completion, MSN, and DNP] "agree to strongly agree" (on a likert scale) that they are satisfied with the programs (see attached documents).
- f. All baccalaureate and graduate courses linked AACN essentials as noted in the syllabi.
- g. All graduate courses in the FNP curriculum incorporated FNP core and population-focused competencies.
- h. QSEN competencies were incorporated in the undergraduate (BSN) clinical courses from the simulation experiences, but not inclusive in all undergraduate (BSN) courses and graduate (MSN & DNP) courses.

- i. NCLEX-RN pass rates for 2016 BSN graduates were 87% (1st write) and 97% (1st writes and repeaters). These percentages are above the national averages of 85% and 70%, respectively.
- j. Certification exam pass rates for 2016 MSN graduates were 98% (1st write on all types of certification exams) and 100% (1st write and repeaters on all types of certification exams).

-  2016 RN_BSN Program Satisfaction Survey - Final
-  2016_MSUNProgramSatisfactionSurveyReport_Spring Graduates of 2016
-  CIPR_Appendices_DSU_BSN_MSN_June 01 2016
-  CIPR_DSU_BSN_MSN_June 01 2016
-  End of Program_BSNGrads_Fall2016
-  End of the Program_DNPGrads_Fall2016

Use of Evaluation Results

1. Continue to advertise and recruit qualified faculty members to fill vacant positions, as well as accreditation needs in student/faculty ratio as enrollment increases.
2. Continue modification of undergraduate and graduate curriculum based on IHL standards for nursing programs, AACN essentials, NONPF guidelines, QSEN recommendation, student, alumni and employer feedback.
3. Submission of Substantive Change reports to both national and state accreditation bodies as required during curriculum revisions.
4. Form a more formal Nursing Advisory Council to provide program evaluation and feedback.

Related Items

SP1.Ind02: National / Standardized Test Scores

Indicators

SP1.Ind03: Academic and support services

Indicators

SP1.Ind08: Curriculum Development and Revision

Indicators

curriculum review

program review

accreditation

SP3.Ind01: Faculty and staff hiring

Indicators

SP3.Ind03: Distance Education training

Indicators

Participation in training

Availability/number of training sessions

 **SP3.Ind04: Technology training**

Indicators

Available training

Training utilized

 **SP3.Ind07: Credentials**

Indicators

Faculty credentials (all personnel categories, academic programs)

Staff credentials (all as required by accreditation)

 **SP3.Ind08: Evaluations**

Indicators

Faculty course evaluations

Staff evaluations

Administrative evaluations (including IEO)

 **SP4.Ind01: IHL reports**

Indicators

timely, accurate

protocol established and followed

 **SP5.Ind02: Continuing Education**

Indicators

Intersession offerings (number)

Non-traditional (workshops, CEU's)

 **SON 2017_02: Maintain and Increase recruitment and retention of nursing students**

Progress: Completed

Providing Department: Robert E. Smith School of Nursing

Unit Goal

The Robert E. Smith School of Nursing will increase enrollment and retention rates in both undergraduate and graduate programs.

Evaluation Procedures


1. Enrollment and retention data from MPE, DSU IRP, and End of Course Reports

2. Marketing/Recruitment Plan managed by the SON Student Affairs Committee
3. Retention Strategies implemented in both the UG and Graduate program
4. Scholarship awards and grant funding

 NUR_AY 1516

 NUR_AY 1617

 SON Advisement Policy

 SON Recruitment and Marketing Plan

 SON Student Enrichment Contract

Actual Results of Evaluation

BSN

- a. 76 students applied to the BSN program of study for Fall 2016 - 60 applicants were qualified - based upon physical space and faculty/student ratio, 35 were sent acceptance letters (had 5 students returning, thus 40 students in the cohort) and 25 students were sent alternate letters. By the beginning of the Fall 2016 semester, we had accepted all of the students who received alternate letters and wanted to be considered for possible admission, except for approximately 7 (because those who were accepted either chose another nursing school to attend, did not attend the mandatory orientation, unsuccessful or did not enroll in courses that were pending for admission).
- b. Admissions to the pre-licensure BSN program remained consistent from Fall 2015 (37) to Fall 2016 (35).
- c. Nursing boot camp was conducted during the first week of school and various faculty members were responsible for specific content and providing course orientation. This requirement continues to be well received by nursing students.
- d. BSN Orientation and Family Support Orientation continues to be held prior at the end of the Spring semester and prior to the Summer beginning. The BSN Orientation agenda items are adjusted based upon new faculty and student feedback. The evaluation comments from those who attend the Family Support Orientation continue to be positive with suggestions that were incorporated into the May 2017 orientation.

RNBSN

- a. 34 (as compared to 40 in 2015) RN students applied to the RNBSN program, 25 were qualified and sent acceptance letters and 20 actually started the program of study with 5 returns (total of 25). This was a slight increase from the enrollment in fall 2015.
- b. Students continue to be positive regarding the online course delivery; this format provides a good balance and facilitates academic progress while employed. The two semester RNBSN program continues to be a "draw".
- c. The total credit hours for the program was reduced from 124 to 120 during the 2016-2017 AY due to redundancy of content.
- d. Teaching/learning strategies for online learning continue to be evaluated and changed as appropriate. The online orientation module for the RNBSN students continues to be revised to provide comparable orientation experiences for both those who attend face-to-face and online.

MSN

- a. 22 students applied to the MSN program (all FNPs), 20 were qualified and sent letters of acceptance and 12 actually enrolled in the program of study for fall 2016. While the number of applicants continues to decrease, there has been an increase in the number of applicants and interest in the DNP program.
- b. Teaching/learning strategies for online learning continue to be evaluated and changed as appropriate.

DNP

a. 11 students applied to the DNP program, 6 students were qualified and sent letters of acceptance. All 6 students started the program - [1 RN-DNP, 1 BSN-DNP, 4 Post Master (FNP)-DNP].

b. Teaching/learning strategies for online learning continue to be evaluated and changed as appropriate

- Utilization of the SON Recruitment/Market Plan to increase enrollment in the RNBSN, MSN, and DNP programs

a. Eleven of the twelve (91.7%) faculty members participated in 2 or more of the 19 total recruitment events held throughout the year. From these 19 recruitment events, faculty members encountered approximately 1,182 potential students. These recruitment activities were at clinical sites of health care facilities, community colleges, community events.

b. All 12 (100%) faculty members advised approximately 536 students during 2016, including potential students, newly admitted students, and enrolled students.

(see attached Faculty Benchmark Aggregated Data and Student Affairs Annual Report)

- Utilization of the Student Retention and Remediation (Enrichment) Plan for undergraduate and graduate programs

BSN Retention Plan with specific strategies for face-to-face delivery:

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. HESI Examinations and Platinum Package for preparation for examinations (standardized exams, computerized adaptive testing [CAT], adaptive learning and quizzing)

12. NUR 408 Nursing Synthesis

Using state and national accreditation criteria for graduate rates, the graduation 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 of non-academic reasons. The benchmark for graduation is 70%. The BSN graduation rate for the class of 2016 was 39/56 (70%).

RNBSN Retention Plan with specific strategies for online delivery:

1. Orientation - offered online

2. Program Advisement - on campus and online

3. Course Advisement

4. Referral to the Academic Support Lab

5. Referral to the Writing Center

6. Referral to the Testing and Counseling Center

Using state and national accreditation criteria for graduate rates, the graduation 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 of non-academic reasons. The benchmark for graduation is 70%. The RNBSN graduation rate for the class of 2016 was 21/25 (81%).

MSN Retention Plan with specific strategies for online delivery:

1. Orientation - offered both face-to-face 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 graduate rates, the graduation 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 of non-academic reasons. The benchmark for graduation is 70%. The MSN graduation rate for the class of 2016 was 19/20 (95%).

DNP Retention Plan with specific strategies for online delivery:

1. Orientation - offered both face-to-face 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 - for non-FNP students

8. NUR 680 Family Nurse Practitioner Review Course - for non-FNP students

Using state and national accreditation criteria for graduate rates, the graduation 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 of non-academic reasons. The benchmark for graduation is 70%. Due to the program of study [Post-Master (FNP)] only 4 of the 5 students were eligible to graduate during the 2016 calendar year. Therefore, the DNP graduation rate for the eligible class during 2016 was 4/5 (80%).

Scholarship Awards and Outside Grant funding obtained to assist with recruitment and retention:

a. The School of Nursing designated additional funding for specified Robert E. Smith School of Nursing

Scholarships (4 retention, and 9 contingency scholarships) from the estate gift of Robert E. Smith

b. Continued established scholarships in the School of Nursing:

1. Kennedy Joli Smith Nursing Scholarship

2. Dana Lamar Nursing Scholarship

3. Penny & Willard Samuel Nursing Scholarship

4. American Legion Auxiliary #165 Scholarship

5. Dr. Barbara Powell Scholarship
6. North Sunflower Medical Future Nurse Scholarship
7. Arlene Ward Bradshaw Nursing Award
8. Bryan/Hafter March of Dimes
9. Ferretti/Karnstedt Nursing Scholarship
10. Dr. & Mrs. Thomas Clay School of Nursing Scholarship
11. R.T. Hollingsworth Scholarship
12. Kate Kittle Memorial Scholarship
13. Kate Smith Kittle Memorial
14. Eugene Kittle Sr Memorial Nursing Scholarship
15. Smith-Kittle Endowed Nursing Scholarship
16. Blake Nursing Scholarship
17. Robert E. Smith Nursing Scholarships
18. Hilpert Family Nursing Scholarship
19. Bolivar Medical Foundation Scholarship
20. Proud Nurse Okra Scholarship
21. Bettybell T Watzek & Bessie J. Taylor Scholarship
22. Elaine Corder Memorial Scholarship
23. Ellis Family Scholarship
24. Feduccia Nursing Scholarship
25. Methodist Men's Club Scholarship
26. Mississippi Nurses Foundation Scholarship
27. Sherry Van Liew Auxiliary Nursing Scholarship

b. A HRSA grant in the amount of \$1,467,896.00 over the next 3 years (2014-2017) was awarded as a Delta State Rural Development Network Grant for Service Region A. The PI of the Delta Healthy Families Project is Dr. Shelby Polk. This grant funded a Healthy Lifestyle Center in Cleveland with education services offered on nutrition, physical activity, prevention and management of diabetes, cardiovascular disease, and obesity. The grant ended July 31, 2017 without any additional grant funding received. However, a no-cost extension was awarded in the amount of \$875,690 until July 31, 2018. The Grant Leadership Committee will seek ways to sustain the center and programs during the 2017-2018 AY.

c. A HRSA AENT grant was awarded in the amount of \$178,952 for 1 year to be utilized for scholarships to FNP students in the MSN & DNP degree programs. Dr. Vicki Bingham is the PI.

d. The HRSA MECDNP grant has one year remaining in the amount of \$20,000 and has been used to purchase equipment for NP student practice clinic rooms, faculty development, and commodities.

e. 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.

 FACULTY BENCHMARKS 2016

 StdAffairs2016annualreport

Use of Evaluation Results

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

Related Items

SP1.Ind03: Academic and support services

Indicators

SP1.Ind06: Advising -- access to improved, comprehensive, and directed/targeted advising

Indicators

SP1.Ind07: Resources: access to appropriate library and learning resources

Indicators

SP1.Ind08: Curriculum Development and Revision

Indicators

curriculum review

program review

accreditation

SP2.Ind01: Enrollment

Indicators

SP2.Ind02: Retention

Indicators

SP2.Ind03: Graduation Rate

Indicators

SP2.Ind04: Degrees

Indicators

SP2.Ind07: Scholarships and Aid

Indicators

SP2.Ind08: Recruitment activities and improvements

Indicators

recruitment goals, activities, improvements

SP3.Ind03: Distance Education training

Indicators

Participation in training

Availability/number of training sessions

SP3.Ind04: Technology training

Indicators

Available training

Training utilized

SP3.Ind08: Evaluations

Indicators

Faculty course evaluations

Staff evaluations

Administrative evaluations (including IEO)

SP4.Ind03: External resources

Indicators

Capitol campaign

Unit fundraising

Alumni/Foundation reports

Grants submitted and funded

Bonds

Earmarks

SP4.Ind04: Facilities Management

Indicators

Deferred maintenance

Renovations

New construction

Campus aesthetics/appearance

Master planning

SP4.Ind07: Website

Indicators

Review (committee)

Use

Improvements/maintenance schedule

Personnel assigned

SP4.Ind14: Marketing, Publicity, Advertising

Indicators

marketing, publicity efforts, advertising, budgets, diversity efforts

SP5.Ind01: Distance Education Offerings

Indicators

online offerings (courses, programs, enrollment)

off-campus offerings (courses, programs, enrollment)

SON 2017_03: Maintain Community Support by Increasing Outreach, Service, and Partnerships

Progress: Completed

Providing Department: Robert E. Smith School of Nursing

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.

1. Support evidence-based health initiatives to improve healthcare in the Delta region
2. Participate in service-learning activities
3. Provide continuing education for the nursing and medical community
4. Seek funding partnerships
5. Seek continued grant funding for the School of Nursing Healthy Lifestyles Center

Evaluation Procedures

1. Report of evidence based health initiatives of the Healthy Lifestyle Center
2. Report of volunteer learning activities for nursing faculty members and service learning hours by students.
3. Report of continuing education to the nursing and medical community
4. Reports of successful grant and other outside funding

Actual Results of Evaluation

- Evidence-based health initiatives to improve healthcare

Through the Healthy Lifestyle Center several health initiatives have been offered that focused on health promotion/prevention. These initiatives have included education programs (CDC Diabetes Prevention Program [DPP], Diabetes Self-Management, ShapeDown, Weight-loss programs [New Directions and Thin Within], and physical activity.

- Event participation by nursing faculty members and students to increase/maintain visibility of the School of Nursing
 - a. 11/12 (91.7%) faculty members, along with staff and students participated in a total of 19 recruitment events (see attached Faculty Benchmark 2016 and Student Affairs Annual Report) [with contact information received on participants] through tours of the nursing building, various healthcare facilities, and community college career fairs. From these recruitment events, approximately 1,182 participants provided contact information and inquired about the nursing programs (BSN, RNBSN, MSN, DNP).
 - b. 12/12 (100%) faculty members participated in 50+ community events (community health fairs, first aid booths at DSU Move-in Day, Crossties, and Octoberfest). Nursing students participated in 26/50 of these community events. These Student Nurses Association (SNA) projects accounted for approximately 681 service learning hours (see attached Student Affairs Annual Report).
- Continuing Education to Nursing and Medical Communities
Dr. Shelby Polk with the assistance of other faculty members has offered 2 Diabetes Prevention Workshops in the Delta region to update healthcare professions on the current diabetes prevention clinical guidelines. To provide more trained facilitators to offer the CDC Diabetes Prevention program, Dr. Shelby Polk became a Facilitator Trainer through Emory University and has offered several training workshops throughout the Delta region.
- Another HRSA grant proposal was submitted, but unfortunately was not funded. The current HRSA grant will end in July 2017. Therefore, we have been seeking other funding opportunities and means to sustain this vital service/practice project. The Delta Healthy Families project has helped to improve the health of 400+ community members, educate the healthcare community (i.e. nursing students at all levels and current practicing healthcare personnel), and establish partnerships with other entities in the MS Delta.

 FACULTY BENCHMARKS 2016

 StdAffairs2016annualreport

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.

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 be considered and implemented when feasible.

Communication will continue to be facilitated through the use of the Website, Blog, FaceBook, Alumni e-news, and campus e-mail. Graduates working in the Delta will continue to serve as a recruitment avenue for future classes.

Related Items

SP3.Ind09: Professional development

Indicators

Funding available

Funding accessed

Dollars per FTE

Professional development offered (new faculty, etc.)

SP4.Ind03: External resources

Indicators

Capitol campaign

Unit fundraising

Alumni/Foundation reports

Grants submitted and funded

Bonds

Earmarks

SP4.Ind07: Website

Indicators

Review (committee)

Use

Improvements/maintenance schedule

Personnel assigned

SP4.Ind14: Marketing, Publicity, Advertising

Indicators

marketing, publicity efforts, advertising, budgets, diversity efforts

SP5.Ind02: Continuing Education

Indicators

Intersession offerings (number)

Non-traditional (workshops, CEU's)

SP5.Ind06: Community Outreach

Indicators

Partnerships

Centers

Programs

SP5.Ind07: Economic Development

Indicators

Initiatives

Impact

SWOT analyses



SWOT Analysis_SON_2017

Providing Department: Robert E. Smith School of Nursing

Strengths

1. Highly qualified and engaged faculty (full-time and part-time) and staff
2. Highly qualified students and graduates
3. Continued increase in applicants for BSN program and enrollment growth for RNBSN and DNP programs
4. Technology Resources
 - a. Skills/Simulation Lab
 - b. Computer Lab
 - c. SMART Classrooms
 - d. Camera Surveillance in throughout building (i.e. computer labs and simulation/skills lab)
5. External Support
 - a. Scholarship monies from the MS Board of Nursing/Office of Nursing Workforce for distribution to students in the BSN, RN-BSN Completion, MSN, and DNP programs of study
 - b. Grant funding continued through no cost extension from HRSA for Delta Healthy Families project - Healthy Lifestyle Center
 - c. Additional monies from the Robert E. Smith nursing scholarships
 - d. Simulation Scholarship Agreement between MS Institutions of Higher Learning and Schools of Nursing to reimburse expenses to three faculty members for simulation training

Weaknesses

1. Aging technology (simulation mannequins)
2. Limited funding for IHL mandated nursing faculty development
3. Two open nursing faculty positions (both Assistant Professors of Nursing)
4. Additional stable funds needed to hire faculty members to accommodate increased nursing student admissions
5. Limited Physical space for increased enrollment

Opportunities

1. Changing to a two semester program of study and a reduction in the total program credit hours for the RNBSN could increase applicants and enrollment.
2. Potential for increase in graduate applicants and enrollment in the MSN & DNP programs of study since clinical hours will satisfy MS Board of Nursing required supervised clinical hours upon graduation.
3. Additional monies from partnerships with local hospitals to assist with annual healthcare staff competencies through tele-simulation

Threats

1. Constant "turnover" of faculty members
2. New faculty members with limited knowledge in nursing education
3. Technology "overload" or "exhaustion" for faculty members

Related Items

There are no related items.

Executive Summaries



Executive Summary_SON_CY_2016

Overview (brief description of scope)

The Robert E. Smith School of Nursing provides a very rigorous and robust nursing curriculum for the following: a) pre-licensure students (Bachelor of Science in Nursing - BSN) b) RN students (Bachelor of Science in Nursing - RNBSN) c) Post BSN students seeking a specific role concentration (Master of Science in Nursing - MSN; Role Concentration: Nurse Administrator, Nurse Educator, Family Nurse Practitioner) d) Post RN, Post BSN, Post Master [non-FNP], Post Master [FNP] (Doctor of Nursing Practice - DNP; Role Concentration: Family Nurse Practitioner) The BSN [pre-licensure] program is delivered face-to-face with courses being web-enhanced. The other programs are delivered totally online. **Vision** Robert E. Smith School of Nursing...Transforming Healthcare in the Mississippi Delta and beyond....one exceptional nurse at a time! **Mission** 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, inter-professional practice, and multidimensional partnerships in a diverse society.

Comparative data

The comparative data (see attached documents) indicates the following results:

- a slight decrease in total enrollment (UG & Graduate) between Fall 2015 (204) and Fall 2016 (194). The decrease in enrollment is noted in the Graduate program from both the MSN and DNP programs of study.
- a slight increase in the total number of graduates between 2016-2017AY (81) and 2015-2016AY (76)
- a decrease in total credit hour production between 2016-2017AY and 2015-2016AY with a difference of: UG - 95 credit hours and Graduate - 75 credit hours
- SN Mean HESI scores (national percentile rank)

YEAR 2010 2011 2012 2013 2014 2015 2016

EXAM 1967(83)939(73)972(81)951(74)910(65)874(67)876(79.76)

EXAM 2888(64)972(81)939(73)932(69)901(62)894(74)872(78.91)

EXAM 3900(67)943(74)946(74)928(68)887(58)885(71)917(82.05)

For the past two years (2015 & 2016), the HESI Mean Scores have been less than the required 900 that is recommended. Strategies have been implemented to emphasize 900s on specialty exams too and to strongly encourage students to complete enrichment contracts and faculty to carefully examine the summary analysis of the

exams for identification of content that needs to be reviewed.

- BSN NCLEX-RN (1st write pass rates)

YEAR	2012	2013	2014	2015	2016
SON %	96%	84%	90%	80%	87%

National %90.34(91)%83.04(83)%81.78(82)%84.53(85)%85%

*The National Council of State Boards of Nursing (NCSBN) increased the passing standard of the NCLEX-RN effective spring 2013. As noted in the table above, the national percentage of first write pass rates decreased tremendously from 2012 (91%) to 2013 (83%), thus the SON first write pass rates dropped. We have remained, except for the 2015 CY, above the national pass rates for first write. During the spring 2016, faculty members met for a UG curriculum retreat in which all course content was reviewed and revised based upon recommendations from students, faculty, alumni, and advisory council/employer evaluations. Faculty will continue to monitor exam scores, review test blueprints, and explore new strategies to present and remediate content for success on 1st write of NCLEX-RN.

- BSN NCLEX-RN (1st write and repeaters)

YEAR	2012	2013	2014	2015	2016
SON %	100%	95%	100%	100%	97%

National %55.63(56)%47.42(47)%46.36(46)%44.52(45)%70%

As noted from the above table, the overall NCLEX-RN pass rate (1st writes and repeaters) have been 100% since 2010, except for 2013 when one student did not retake the exam (and has not to this date) and during this 2016-2017AY there is one student who has taken the exam twice and not been successful. Efforts are being made to reach-out and provide resources to help.

- Graduate APRN Mean HESI scores (national mean score – no percentile rank)

YEAR	2012	2013	2014	2015	2016
EXAM 1	747	795	859	864 ↑	741 ↓
EXAM 2	826	859	830	755 ↓	812 ↑
National Mean			817	747	

The recommended score on the APRN exit exam is 800. The mean scores on these exams have been above or around this recommendation AND at least one exam has been above the national average. Strategies have been implemented to identify and remediate these students at the beginning of the program, instead of during their final semester in the review course.

- APRN Certification Exam (1st write pass rate) for Degree and Certificate Seeking Graduate Students

YEAR	2014	2015	2016
AANP-FNP (degree)	9/10 (90%)	9/11 (82%)	12/13 (92%)
ANCC-FNP (degree)	6/6 (100%)	1/1 (100%)	1/1 (100%)
AANP-FNP** (Post Master)	*	*	2/2 (100%)
ANCC-FNP** (Post Master)	*	*	*
ANCC-PMHNP*		2/2 (0%)	2/2 (100%)
Overall	95%	61%	98%

*denotes no students taking certification exam

**requirement from national accreditation to report Postmaster APRN separately

- APRN Overall Certification Exam Pass Rate for Degree and Certificate Seeking Graduate

Students

YEAR	2012	2013	2014	2015	2016
AANP – FNP (degree)	11/12 (91.7%)	8/8 (100%)	11/11 (100%)	11/11 (100%)	13/13 (100%)
ANCC – FNP (degree)	4/5 (80%)	5/5 (100%)	5/5 (100%)	2/2 (100%)	1/1 (100%)
AANP-FNP ** (Post Master)			*	*	2/2 (100%)
ANCC-FNP ** (Post-Master)			*	*	*
ANCC – PMHNP (degree)	1/1 (100%)	*	*	2/2 (100%)	2/2 (100%)
Overall	88.9%	100%	100%	100%	100%

*denotes no students taking certification exam

**requirement from national accreditation to report Postmaster APRN separately

Diversity Compliance Initiatives and Progress

The School of Nursing had a complement of 12 full-time faculty members and 1 part-time in spring 2016 and 14 full-time and 1 part-time faculty members in fall 2016. Two (2) of the full-time faculty (15%) were African-American during the spring 2016 and one (1) of the full-time faculty (8%) was African-American during the fall 2016. Of the four adjunct faculty members, three (3) [67%] were African American.

Recruitment efforts continue to target a national pool with specific online advertisements to Chronicles of Higher Learning, AACN Faculty Job Opportunities website, and the MS Institutions of Higher Learning (IHL) Job Opportunities website.

The two (2) African-American full-time faculty members during the 2016 CY graduated from nursing doctoral programs with financial assistance from the School of Nursing. Both faculty members are in tenure track positions.

The School of Nursing is the sponsor of a HRSA Delta Healthy Families grant (PI is Dr. Shelby Polk, Chair of Nursing), 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 Lifestyle 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. Various programs and services are offered to each group of people. Diabetes workshops and Lifestyle Coach Training for the CDC Diabetes Prevention Program have been held for health care providers in the MS Delta. The School of Nursing continues to offer a children's summer camp "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 and supplies/equipment to the Allied Health Program and the DSU Student Nurses Association (SNA) has continued "adopting" the Allied Health Program by partnering members with Allied Health students and coaching them for Health Occupations Students of American (HOSA) State and Regional competitions in our skills/simulation lab. The HOSA 2017 Northern District Conference was held on our campus February 2017 with approximately 500 students, faculty, and staff in attendance. Plans are to hold the HOSA 2018 Northern District Conference on our campus in February 2018.

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 and screening booths. The SON is active in regional health fairs at university and local events/festivals (PigPickin, Homecoming, Octoberfest, and Crossties) and in summer camps (Kids Kollege) combined with recruitment efforts and special events that target youth/new DSU college students for future nursing careers. The SON hosted the first Girl Scouts: Heart of the South "More Than Scrubs" to help area girls scouts earn their health badge. These efforts have met with good success.

BSN - The classes continue to be predominately Caucasian in spite of efforts to increase minority representation in this group. 35 students were admitted to the BSN program fall 2016; 14% (n=4) were minorities [3 African American and 1 Asian]. As compared to enrollment for Fall 2015, this was an increase in minorities being admitted [Fall 2015 - 3/38= 13% minorities]. 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 program 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 also have continued with enrichment activities to assist identified nursing students with challenges on national standardized nursing exams. Faculty members will continue 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 Academic Support Center as needed.

RNBSN - 25 students were admitted to the RNBSN program Fall 2016; 32% (n=8) were minorities; six (6) were African American and 2 Asian. Compared to the Fall 2015 enrollment the percentage of minorities was consistent.

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. Additional efforts to increase minority representation in this cohort, outside funding (grants, private scholarship donors) will also be sought to assist these students with tuition and other costs of obtaining a baccalaureate degree. This program received national ranking in 2015, 2016, and 2017.

MSN - 12 students were admitted to the MSN program in Fall 2016; 17% (n=2) (as compared to 29% in Fall 2015) were minorities; both were African American. 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 - 6 students were admitted to the DNP program Fall 2016, none were minorities (compared to 11% (n=1) in 2015).

*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

Thirty-nine (39) prelicensure BSN and twenty-one (21) RN-BSN students successfully completed the Bachelor of Science in nursing program in 2016. Currently, 33 BSN graduates (33/39) of these students are employed within the state of Mississippi; Five of the remaining graduates are employed at Oshner's Clinic in New Orleans, LA., Baptist Medical Center, Little Rock, AR, Emory University, Atlanta, GA; LANKENAU Medical Center, Philadelphia, PA; and an acute care facility in AR. The other remaining graduate has not passed NCLEX-RN boards. For the RN-BSN graduates (20/21) of these students are employed within the state of Mississippi. The one remaining is employed in AR. 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 2015 median salary for Registered Nurses

was \$67,490/year <http://money.usnews.com/careers/best-jobs/registered-nurse/salary>. This translates to \$4,049,400 in total BSN wages paid to these graduates from the health care industry. Approximately 103 undergraduate students at the University have selected the BSIS degree with a pre-nursing concentration 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.

Nineteen MSN (NP track) students graduated Spring 2016. Seventeen 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 2015 median salary for Nurse Practitioners was \$98,190/year <http://money.usnews.com/careers/best-jobs/nurse-practitioner/salary>. This translates into \$1,865,610 in total NP wages paid to these graduates from the health care industry.

Four DNP (FNP track) students graduated between spring and fall 2016. Two of these graduates are currently working within the state of Mississippi and were employed immediately upon graduation. The other two graduates are employed in Texas. The 2015 median salary for Nurse Practitioners (including those with a DNP) was \$98,190/year <http://money.usnews.com/careers/best-jobs/nurse-practitioner/salary>. This translates into \$392,760 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, 2017-June 30, 2018)

The Robert E. Smith 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 all programs in the DNP.

- Seek additional external funding to assist in easing budget constraints.

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 14,427 clinical and volunteer hours for CY 2016. According to the website <http://independentsector.org/resource/the-value-of-volunteer-time/>; volunteer hours during CY 2016 were worth \$24.14/hr. This translates to \$348,267.78 in added value to DSU, the community and State of Mississippi.

Grants, Contracts, Partnerships

During the 2016 CY, one new grant was received, two grants continued, and one new grant was submitted. Bingham, V. (2016). HRSA Advanced Education Nurse Traineeship (AENT) Grant. Submitted application for the HRSA Advanced Education Nursing Traineeship (AENT) grant for scholarship monies to graduate students. Funded for \$178,952.00 for one year (July 01, 2016-June 30, 2017).

Polk, S. (2014) HRSA Office of Rural Health Policy - *Delta States Rural Development Network Grant Program*, 3 year HRSA Grant. Funded for \$1,574,546.00 over 3 years.

Bingham, V. (2015). Second year of the Mississippi Doctorate of Nursing Practice (DNP) Consortium Grant (\$60,000 over 3 years).

Polk, S. (2016) HRSA Office of Rural Health Policy - *Delta States Rural Development Network Grant Program* - not funded.

Committees reporting to unit

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

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Related Items

There are no related items.