

Unit Missions

 **Nursing Mission Statement**

Providing Department: Robert E. Smith School of Nursing

Mission statement

The mission of the Delta State University School of Nursing is to prepare students for professional nursing practice in a multi cultural society as either a generalist at the Baccalaureate level or as an advanced practitioner of nursing at the Masters level. The program will prepare graduates to pursue advanced study.

Related Items

 **Delta State University Mission Statement**


Providing Department: Delta State

Mission statement

As a regional Carnegie Master's L university located in Cleveland, Mississippi, Delta State University serves as an educational and cultural center for the Mississippi Delta, emphasizing service to the Northern Delta counties and its campus centers in Clarksdale and Greenville. The University offers undergraduate, graduate, and continuing education programs of study leading to baccalaureate and master's degrees in the Colleges of Arts and Sciences, Business, Education, and the School of Nursing, as well as a doctorate in education. Emphasis is placed on excellence in instruction, followed by service and research, in the creation of a community of scholars. With special attention to small classes, a friendly environment, and a broad liberal arts foundation, the University encourages significant student-faculty interactions. Delta State provides programs and services that promote intellectual, cultural, ethical, physical, and social development. Students from different cultural, socioeconomic, and ethnic backgrounds will develop the ability to respect and evaluate the thoughts of others; to develop, assess, and express their own thoughts effectively; and to use the techniques of research and performance associated with their disciplines.

Approved by the Board of Trustees of State Institutions of Higher Learning, March 18, 2004.

Learning Outcomes

 **BSN-SON_01: 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 #5.

Data Collection (Evidence)

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

Results of Evaluation

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

Clinical Concepts (Mean)

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

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

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

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

YEAR	2010	2011	2012	2013
	4.05	4.50	4.58	4.42

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

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

Use of Evaluation Results

Student mean clinical concepts exam scores on the HESI exit exam given in NUR 408 had an overall mean score of 930 (which is within the HESI recommended performance score of 900 or above) for 2013 (a minimum 900 score is required for success in NUR 408). Dedicated Education Units (DEUs) are beginning to be implemented into both Adult Health clinical courses (NUR 335 and NUR 336) in conjunction with the Mississippi Office of Nursing Workforce. UG syllabi will be reviewed by course faculty for changes and updates to nursing practice, national trends, and nationally standardized exams (currently Elsevier Evolve HESI exams-specialty exams given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisors and students determine strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas.

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

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

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

Related Items

There are no related items.

BSN-SON_02: 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, #7 & #10

Data Collection (Evidence)

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

Results of Evaluation

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

Nursing Concepts (Mean) – Exam #1

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

Nursing Concepts (Mean) – Exam #2

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

Nursing Concepts (Mean) – Exam #3

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

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

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

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

YEAR	2010	2011	2012	2013
	3.95	4.4	4.64	4.5

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

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

Use of Evaluation Results

The student nursing concepts mean exam scores on the HESI exit exam given in NUR 408 have remained stable or trended upward compared to 2012, with the exception of TC (therapeutic communication) which trended downward from 919 in 2012 to 893 in 2013 (900 or above is the recommended score ; 850-899 is an acceptable score according to HESI). Overall mean scores for 2013 were: CT-935, TC-893, TNI-941, CA-928, NP-943, and SOC-906 during calendar year 2012 (a minimum 900 score is required for success in NUR 408). In 2011, therapeutic communication first demonstrated a downward trend [overall mean score of 862]. However, UG faculty members have continued to emphasize this concept in classroom content and clinical experiences, thus an improvement in overall mean score for years 2012 and 2013. Syllabi continue to be reviewed by course faculty for changes and updates to nursing practice, national trends, and nationally standardized exams (currently Elsevier Evolve HESI exams-specialty exams given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisors and students determine strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas. The ATI online nursing academic enhancement program continues to be encouraged and is available to all students as well as a live HESI NCLEX-RN review for senior students.

End of program surveys of students and satisfaction surveys of alumni and employers on LO 2 remain good with student ratings (on a five point scale) of the BSN program of study LO 2 scoring 5.0 and RNBSN program of study LO2 scoring 4.59 , which for the BSN is improved from previous years ratings and a slight decrease for the RNBSN. For this year, the employer rating on LO 2 increased to 5.0 as compared to 4.16 in 2012. Overall, alumni and employers believe LO2 is being achieved as noted by the "above average" scores.

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

Related Items

There are no related items.

 **BSN-SON_03: Leadership**

Providing Department: Robert E. Smith School of Nursing

Learning Outcome

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

Data Collection (Evidence)

HESI end of program exam scores; BSN end of program evaluations; employer evaluations

Results of Evaluation

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

Leadership (Mean)

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

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

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

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

YEAR	2010	2011	2012	2013
	4.0	4.75	4.63	4.58

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

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

Use of Evaluation Results

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

End of program surveys of students and employers/advisory surveys on LO # 3 remain good with student overall mean scores (on a five point scale) of the BSN program of study 5.0, which is an improvement compared to previous years ratings, and with the RNBSN program of study overall mean score of LO # 3 decreasing to 4.63, as compared to 4.75 in 2012. Employer rating on LO # 3 increased to 4.67 as compared to 4.16 in 2012.

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

Related Items

There are no related items.

BSN-SON 04: 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 #3& #4

Data Collection (Evidence)

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

Results of Evaluation

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

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

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

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

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

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

YEAR	2010	2011	2012	2013
	4.05	4.7	4.73	4.67

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

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

Use of Evaluation Results

The student evidence based practice mean exam scores on the HESI exit exam given in NUR 408 remains comparable to the previous calendar year with an overall mean score of 928 in 2013 as compared to 947 in 2012 (a minimum 900 score is required for success in NUR 408). This score, while within the HESI recommended performance and course requirement for a minimum score of 900, continues the downward trend identified in 2012. Nursing faculty will be notified of this downward trend for monitoring and action as needed. UG syllabi will continue to be reviewed by course faculty for changes and updates to nursing practice, national trends, and nationally standardized exams (The nursing program currently uses Elsevier Evolve HESI exams-specialty exams given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty 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 ATI online nursing academic enhancement program, which is available to all students as is a live HESI NCLEX-RN review for senior students. Research/Evidence Based Practice content is included in this program.

End of program surveys of students and employers/advisory surveys on LO 4 remain above average with student ratings (using a five point scale) of the BSN program of study LO 4 scoring 5.0 and RNBSN program of study LO 4 scoring 4.59, which is a decrease as compared to 4.73 in 2013; the employer/advisory council rating on LO 4 decreased to 4.67 as compared to 5.0 in 2012.

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

Related Items

There are no related items.

BSN-SON_05: 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 [leadership]. GE # 9

Data Collection (Evidence)

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

Results of Evaluation

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

Leadership (Mean)

YEAR	2013
EXAM 1	972
EXAM 2	863
EXAM 3	918

BSN End of program surveys (Mean)

YEAR	2013
	5.0

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

YEAR	2013
	4.5

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

YEAR	2013
	4.67

Use of Evaluation Results

The student professionalism mean exam scores on the HESI exit exam given in NUR 408 had an overall mean score of 918 during calendar year 2013 (a minimum 900 score is required for success in NUR 408); this was the first year for this category as previously LO_5 was combined with LO_3, so there are no comparative scores from past years for professionalism for comparison. Professionalism is threaded throughout the curriculum with greater emphasis in the courses of NUR 314 and NUR 402/442. As part of the Education Redesign efforts by the schools of nursing in Mississippi in 2012, we are continuing to examine the concept of professionalism in a curriculum gap analysis. The information obtained from the gap analysis regarding this concept, as well as other concepts, will be used to revise the curriculum. UG syllabi will be reviewed by course faculty for changes and updates to nursing practice, education redesign, national trends, and nationally standardized exams (currently Elsevier Evolve HESI exams-specialty exams given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisors and students determine individual strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas.

We also continue to utilize ATI for the student learning enhancement plan, which is available to all students as well as a live HESI NCLEX-RN review for senior students.

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

LO # 5 are good with a student overall mean score (using a five point scale) of the BSN program of study 5.0, which is an improvement compared to previous years ratings; the RNBSN program of study overall mean score of LO # 5 decreased to 4.5 from 4.63 in 2012. Employer rating on LO # 5 increased to 4.67 as compared to 4.16 2012. This RNBSN student rating will be shared with the faculty teaching this content (NUR 402/442) for review/improvement of leadership content and RNBSN students surveyed again in 2014 to assess for improvement.

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

Related Items

There are no related items.

BSN-SON_06: Physiological and Psychosocial Integrity

Providing Department: Robert E. Smith School of Nursing

Learning Outcome

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

Data Collection (Evidence)

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

Results of Evaluation

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 #8

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

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

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

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

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

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

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

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

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

YEAR	2010	2011	2012	2013
	3.95	4.3	4.73	4.5

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

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

Use of Evaluation Results

The student physiologic integrity overall mean exam score on the HESI exit exam given in NUR 408 slightly decreased from 948 in 2012 as compared to 928 during 2013. This score remains within the HESI recommended score of 900 or above. The student psychosocial integrity mean scores also had a downward trend with an overall mean score of 898 during calendar year 2012; as compared to 869 in 2013 (a minimum 900 score is required for success in NUR 408; a score range of 850-899 is considered acceptable performance by HESI, but not by the school of nursing). Psychosocial integrity is introduced during the first semester in NUR 302/332 (Fundamentals of Client Care) and threaded throughout the curriculum with emphasis in NUR 307/337 (Psychiatric/Mental Health Nursing). Physiologic Integrity showed an upward trend with the 2012 mean score of 898 as compared to 935 in 2013. This continued downward trend in Physiologic Integrity will be reported to all nursing faculty, particularly those teaching in the course of NUR 307/337 so UG syllabi can be reviewed for changes and updates to nursing practice and national trends. In addition, 25% of the hours in clinical courses will continue to be dedicated to simulation lab hours so students can experience and practice psychosocial integrity (in addition to other nursing care knowledge needs identified). A nationally standardized exam will be utilized to assess for effectiveness (the Elsevier Evolve HESI exams-specialty exams are currently given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisors and students determine strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas. Nursing faculty will also continue to encourage student use of the ATI online nursing academic enhancement program, which is available to all students, as well as a live HESI NCLEX-RN review for senior students.

End of program surveys of students and employer/advisory council surveys on LO 6 remain good with student ratings (using a five point scale) of the BSN program of study LO 6 scoring 5.0, which is an improvement over previous years, and the RNBSN program of study LO 6 scoring 4.5, which is a decrease from 4.73 in 2102. The employer/advisory council rating on LO 6 increased to 4.67 as compared to 4.00 in 2012.

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

Related Items

There are no related items.

BSN-SON_07: Safe Effective Care

Providing Department: Robert E. Smith School of Nursing

Learning Outcome

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

Data Collection (Evidence)

HESI end of program exam scores; BSN end of program evaluations; employer evaluations

Results of Evaluation

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

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

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

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

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

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

YEAR	2010	2011	2012	2013
	4.0	4.6	4.67	4.58

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

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

Use of Evaluation Results

The student mean exam scores for safe, effective care on the HESI exit exam given in NUR 408 have continued to remain stable with an overall mean score of 958 in calendar year 2013 as compared to 960 during calendar year 2012; as compared to 919 in 2011 (a minimum 900 score is required for success in NUR 408). The simulation lab coordinator will continue to increase use of simulations specific to this learning outcome during calendar year 2013. This concept of safe, effective care is taught throughout the curriculum. However, much emphasis has been placed on Quality and Safety Education for Nurses (QSEN) competencies, all UG syllabi will be reviewed by course faculty for changes and updates to nursing practice and national trends specific to patient safety and effective care. A nationally standardized exam (currently Elsevier Evolve HESI exams are used in the nursing program, these are specialty exams given as the final exam for each course in which there is a HESI exam available). The percentage of the grade for each course varies depending on the level of nursing course, with higher level courses having a greater weight for the HESI. In addition to the specialty exams, a midcurricular exam is administered during the 3rd semester of the BSN program to students and consists of all nursing content covered through this semester. The score is used to help faculty advisors and students determine strengths and weaknesses in nursing content. Individualized remediation continues to be required for each student who has a score below 900 on each specialty HESI exam, as well as the midcurricular exam in specific content areas. Faculty will continue to encourage students to utilize the ATI online nursing academic enhancement program, which is available to all students, as well as a live HESI NCLEX-RN review for senior students.

End of program surveys of students and employers/advisory council surveys on LO 7 have trended upward with student ratings (using a five point scale) of the BSN program of study LO 7 scoring 5.0, which is an improvement from previous years, and the RNBSN program of study LO 7 scoring 4.58, which is a decrease from 4.67 in 2012. The employer/advisory council rating on LO 7 also increased to 4.67 as compared to 4.16 in 2012.

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

Related Items

There are no related items.

MSN-SON_01: Cultural Competence

Providing Department: Robert E. Smith School of Nursing

Learning Outcome

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

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

Data Collection (Evidence)

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

committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

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

YEAR	2012	2013
EXAM	779	880

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

YEAR	2012	2013
	4.62	4.65

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

YEAR	2012	2013
	4.25	5.0

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the score of 880 is a recommended performance score (800 or greater by Elsevier and 900 or greater by the Robert E Smith School of Nursing). This is an increase from the mean score of 779 in 2012 after implementing the following changes in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, faculty members also gave the APRN HESI exam twice during the final semester (1st exam to establish a baseline of knowledge and then the 2nd exam to note improvements and for a grade). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Future plans are to use the 2nd APRN HESI as the APRN final exam; students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam.

Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of 4.65 and 5.0 on a 5 point scale, respectively. These mean scores indicated that both students and employers/advisory council believed LO 1 was achieved "above average".

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

Related Items

There are no related items.

MSN-SON_02: 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 RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

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

YEAR	2012	2013
EXAM	962	766

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

YEAR	2012	2013
	4.69	4.59

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

YEAR	2012	2013
	4.25	5.0

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the score of 766 is below the recommended performance score (800 or greater by Elsevier and 900 or greater by the Robert E Smith School of Nursing). This is a decrease from the mean score of 962 in 2012 after implementing the following changes in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638

Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, faculty members also gave the APRN HESI exam twice during the final semester (1st exam to establish a baseline of knowledge and then the 2nd exam to note improvements and for a grade). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Future plans are to use the 2nd APRN HESI as the APRN final exam; students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam.

The following changes were approved and implemented in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, faculty members will consider giving this APRN HESI exam twice during the final semester (initially to establish a baseline of knowledge and then finally to note improvements). An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 900 on the APRN HESI exam and in specific content areas.

Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of 4.59 and 5.0 on a 5 point scale, respectively. These mean scores indicated that both students and employers/advisory council believed LO 2 was achieved “above average”.

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

Related Items

There are no related items.

MSN-SON_03: Monitoring/Ensuring 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 RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

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

YEAR	2012	2013
EXAM	741	778

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

YEAR	2012	2013
	4.88	4.59

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

YEAR	2012	2013
	4.25	5.0

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the score of 778 is below the recommended performance score (800 or greater by Elsevier and 900 or greater by the Robert E Smith School of Nursing). This is an increase from the mean score of 741 in 2012 after implementing the following changes in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, faculty members also gave the APRN HESI exam twice during the final semester (1st exam to establish a baseline of knowledge and then the 2nd exam to note improvements and for a grade). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Future plans are to use the 2nd APRN HESI as the APRN final exam; students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam.

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

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

Related Items

There are no related items.

MSN-SON_04: 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 RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

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

YEAR	2012	2013
EXAM	788	945

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

YEAR	2012	2013
	4.56	4.59

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

YEAR	2012	2013
	4.0	5.0

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the score of 945 is above the recommended performance score (800 or greater by Elsevier and 900 or greater by the Robert E Smith School of Nursing). This is an increase from the mean score of 788 in 2012 after implementing the following changes in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, faculty members also gave the APRN HESI exam twice during the final semester (1st exam to establish a baseline of knowledge and then the 2nd exam to note improvements and for a grade). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Future plans are to use the 2nd APRN HESI as the APRN final exam; students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam.

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

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

Related Items

There are no related items.

MSN-SON_05: Managing/Negotiating Health Care Delivery Systems

Providing Department: Robert E. Smith School of Nursing

Learning Outcome

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

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

Data Collection (Evidence)

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

Results of Evaluation

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

	2012	2013
EXAM	741	789

End of program surveys (Mean for LO #5)

YEAR	2012	2013
	4.75	4.71

advisory council surveys (Mean for LO #5)

YEAR	2012	2013
	4.0	5.0

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the score of 789 is below the recommended performance score (800 or greater by Elsevier and 900 or greater by the Robert E. Smith School of Nursing). This is an increase from the mean score of 741 in 2012 after implementing the following changes in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, faculty members also gave the APRN HESI exam twice during the final semester (1st exam to establish a baseline of knowledge and then the 2nd exam to note improvements and for a grade). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Future plans are to use the 2nd APRN HESI as the APRN final exam; students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam.

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

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

Related Items

There are no related items.

MSN-SON_06: 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 RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

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

YEAR	2012	2013
EXAM	760	669

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

YEAR	2012	2013
	4.62	4.65

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

YEAR	2012	2013
	4.0	5.0

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the score of 669 is well below the recommended performance score (800 or greater by Elsevier and 900 or greater by the Robert E. Smith School of Nursing). This is also a decrease from the mean score of 760 in 2012 after implementing the following changes in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, faculty members also gave the APRN HESI exam twice during the final semester (1st exam to establish a baseline of knowledge and then the 2nd exam to note improvements and for a grade). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Future plans are to use the 2nd APRN HESI as the APRN final exam; students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam.

Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of 4.65 and 5.0 on a 5 point scale, respectively. These mean scores indicated that both students and employers/advisory council believed LO 6 was achieved “above average”.

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

Related Items

There are no related items.

MSN-SON_07: 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 RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

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

YEAR	2012	2013
EXAM	759	773

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

YEAR	2012	2013
	4.62	4.65

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

YEAR	2012	2013
	4.0	5.0

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the score of 773 is acceptable performance, but below the recommended performance score (800 or greater by Elsevier and 900 or greater by the Robert E Smith School of Nursing). This is also a slight increase from the mean score of 759 in 2012 after implementing the following changes in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, faculty members also gave the APRN HESI exam twice during the final semester (1st exam to establish a baseline of knowledge and then the 2nd exam to note improvements and for a grade). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Future plans are to use the 2nd APRN HESI as the APRN final exam; students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam.

Overall mean scores from both the MSN End of Program survey and the Employer/Advisory Council surveys demonstrated scores of 4.65 and 5.0 on a 5 point scale, respectively. These mean scores indicated that both students and employers/advisory council believed LO 7 was achieved “above average”.

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

Related Items

There are no related items.

MSN-SON_08: 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 RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

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

YEAR	2012	2013
EXAM	795	884

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

YEAR	2012	2013
	4.88	4.65

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

YEAR	2012	2013
	4.0	5.0

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the score of 884 is acceptable performance, but below the recommended performance score (800 or greater by Elsevier and 900 or greater by the Robert E Smith School of Nursing). This is an increase from the mean score of 795 in 2012 after implementing the following changes in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, faculty members also gave the APRN HESI exam twice during the final semester (1st exam to establish a baseline of knowledge and then the 2nd exam to note improvements and for a grade). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be

incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Future plans are to use the 2nd APRN HESI as the APRN final exam; students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam.

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

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

Related Items

There are no related items.

MSN-SON_09: 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 RESSON Faculty Organization during monthly meetings as appropriate); Employer/Advisory Council surveys (distributed at the fall RESSON Nurse Career Fair, collected by the RESSON faculty and tabulated by the PEC committee. Aggregate results are reported as compiled to the RESSON Faculty Organization during monthly meetings as appropriate).

Results of Evaluation

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

YEAR	2012	2013
EXAM	756	796

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

YEAR	2012	2013
	4.81	4.65

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

YEAR	2012	2013
	4.0	5.0

Use of Evaluation Results

Based upon the prediction scale of student ANCC/AANP success by Elsevier Evolve HESI Exit Exam, the score of 796 is acceptable performance, but below the recommended performance score (800 or greater by Elsevier and 900 or greater by the Robert E Smith School of Nursing). This is an increase from the mean score of 756 in 2012 after implementing the following changes in the FNP curriculum: 1) change Differential Diagnosis in Primary Care (2 credit hours) from an elective to a specialty course in the FNP program of study; 2) Add an FNP Review Course (2 credit hours) during the final semester of the program of study; 3) Add one credit hour to NUR 602 Advanced Health Assessment (from 2 to 3 credit hours); and 4) Add one credit hour to NUR 638 Family Nurse Practice III (from 1 to 2 credit hours) and delete one credit hour from NUR 639 Family Nurse Practice III Practicum (from 5 to 4 credit hours) beginning in Spring 2013. In addition, faculty members also gave the APRN HESI exam twice during the final semester (1st exam to establish a baseline of knowledge and then the 2nd exam to note improvements and for a grade). Elsevier has established specialty HESI exams in Advanced Pathophysiology, Advanced Health Assessment, and Advanced Pharmacology that will be incorporated into the evaluation portion of the specified courses. An individualized enrichment (remediation) plan will be implemented for each student who has an overall score below 800 on the APRN HESI exam and in specific content areas. Future plans are to use the 2nd APRN HESI as the APRN final exam; students who score at or above the recommended minimum score of 800 will not have to also take the traditional faculty generated comprehensive exam, but students who do not score at or above the minimum score of 800 will take the traditional MSN comprehensive exam.

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

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

Related Items

There are no related items.

Unit Goals

SON 2014_01: Maintain a High Quality Curriculum

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 the multicultural society.

- a. Collect data related to program effectiveness annually
- b. Recruit and retain qualified nursing faculty as needed
- c. Participate in educational consortium agreements
- d. Incorporate innovative technology into the curriculum

- e. Complete GAP analysis of BSN curriculum (both BSN and RN-BSN programs of study)
- f. Review and revise baccalaureate curriculum (both BSN and RN-BSN programs of study) to improve gaps found in the GAP analysis.
- g. Demonstrate placement of AACN essentials in all BSN courses
- h. Review and revise MSN FNP curriculum to reflect inclusion of current FNP competencies
- i. Demonstrate placement of AACN essentials and FNP competencies in all MSN core and FNP specialty courses
- j. Implement DNP program
- k. Explore feasibility of accreditation for the Robert E. Smith SON simulation lab
- l. Explore incorporation of QSEN criteria into the graduate nursing program
- m. Maintain/enhance faculty expertise through continuing education and clinical practice

Evaluation Procedures
Evaluation Procedures:

Utilization of the comprehensive RESSON MPE which includes undergraduate (BSN) HESI Exit mean scores compared to national averages and NCLEX-RN first write pass scores, graduate (MSN) Advanced Practice Registered Nurse (APRN) exam scores (national percentile rank) and certification rates, the *Community of Interest* (COI): students, faculty, agencies, alumni, and the Advisory Council evaluation forms for students: course, course instructor, clinical instructor, preceptor clinical; end of program satisfaction, employer satisfaction, one and three year follow-up for graduates of both programs, survey form for the Advisory Council and the RESSON standing committee annual reports. Individual MPE reports. Results of feasibility of simulation lab accreditation. Results of exploring incorporation of QSEN criteria into the graduate nursing program. Faculty development/continuing education, and practice as reported in the MPE Faculty Benchmarks.

Actual Results of Evaluation

Results of evaluation:

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

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

- BSN NCLEX-RN 1st write pass rates

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

*The National Council of State Boards of Nursing (NCSBN) increased the passing standard of the NCLEX-RN by one logit effective spring 2013. The National 1st write NCLEX-RN pass rate for 2013 was 83% https://www.ncsbn.org/Table_of_Pass_Rates_2013.pdf.

The overall NCLEX-RN pass rate since 2010 (first plus subsequent writes) is 100%.

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

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

- APN Certification Exam pass rate

Graduate APN Certification pass rate

YEAR	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
RATE	88%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

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

Fifteen (15) course syllabi for the BSN (NUR 304, 314, 302, and 332), RNBSN (358, 403, and 443), MSN (680, 687/690, 634 and 635), and DNP (701, 706, and 710) programs were audited during the spring, summer, and fall semesters of 2013. The linking of AACN Essentials process began in the fall of 2013 at the MSN Level. Since some courses scheduled for audit were not offered, there is no data to report, see attached files Standard III: Program Quality and Course Audit 2013.

The undergraduate program was analyzed for incorporation of AACN Essentials/Competencies during 2012 and will be analyzed again fall 2014. Expected individual student learning outcomes are consistent with the roles for which the program is preparing its graduates. Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines which are clearly evident within the curriculum, expected individual student learning.

The graduate curriculum was reviewed for incorporation of the AACN Essentials/Competencies. Each Essential/Competency was incorporate into one or more courses, see attached files Essentials/Competencies review 2013 and Three Year Course Audit.

- Results of BSN GAP analysis

The Undergraduate Program curriculum was assessed with comparison to national trends, national and state accreditation standards/essentials, the licensure exam blueprint (NCLEX-RN), and societal needs. In accordance with the Curriculum Redesign project spearheaded by the MS Office of Nursing Workforce and the Mississippi Council of Deans and Directors of Nursing Programs,

The BSN and RNBSN curriculum was analyzed for eleven (11) nurse of the future competencies Patient Centered Care, Professionalism, Leadership, System Based Practice, Informatics, Communication, Teamwork and Collaboration, Safety, Quality Improvement, Evidence Based Practice and Nursing Knowledge. All competencies were either partially or completely evaluated, with the exception of Nursing Knowledge. Please see attached files GAP analysis BSN and Gap Analysis RNBSN.

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

Student biannual evaluations

Students evaluate faculty, courses, clinical courses, clinical agencies and preceptors each spring and fall semester. All met or exceeded the benchmark of receiving at least a score of 3.0 on student evaluations, see attached file Faculty Benchmarks 2013.

BSN, RNBSN and MSN end of program satisfaction evaluations

The undergraduate and graduate students rated the program outcomes favorably, with BSN scores ranging from 4.57-4.71, RNBSN scores ranging from 4.42-4.67, and MSN scores ranging from 4.59-4.76. Alumni completed one and three year surveys and scored the nursing program learning outcomes BSN-1yr 4.29-4.71, BSN 3yr 4.0-5.0; RNBSN 1yr 4.5 for all outcomes, RNBSN 3yr 3.8 for all outcomes; MSN 1yr 4.0-4.67, MSN 3yr 3.5-3.75, see files titled BSN end of program, one year evaluations and three year evaluations; RNBSN end of program, one

year evaluations and three year evaluations; and MSN end of program, one year evaluations and three year evaluations,

Employer satisfaction evaluations

Employers of nursing graduates (undergraduate and graduate) rated the program a 4.67 out of 5 on all program learning outcomes, see file titled Employer Survey.

Advisory Council survey

No surveys were returned by Advisory Council members for 2013.

- Results of feasibility of simulation lab accreditation

Due to budget constraints, accreditation of the simulation lab will be postponed at this time.

- Feasibility of incorporation of QSEN criteria into graduate nursing program

Initiation of incorporation of QSEN criteria is planned for fall 2014.

- Enhance/maintain Faculty Expertise through continuing education and faculty practice


The Faculty Development Committee continued to offer continuing education opportunities in 2013 for nursing faculty that meets MS IHL requirements of at least 10 contact hours annually. Nine nursing CEU's were offered on campus this year, see attached file Faculty Development Annual Report.

All nursing faculty members attended continuing education programs offered both on and off campus and attained at least 10 CEU's as required by Mississippi IHL accreditation standards. The average number of CEU's attained during 2013 was 28.79, see attached file Faculty Benchmarks 2013, benchmark #1.

Non-doctorally faculty members are encouraged to pursue doctoral degrees, especially in nursing as the advent of the Doctor of Nursing Practice (DNP) programs offers another opportunity for nursing faculty to obtain an additional advanced/terminal degree in their discipline. Two non-doctorally prepared nurse practitioner faculty members have expressed an interest in starting our DNP program within the next two years.

Nine out of 15 faculty members engaged in faculty clinical practice during 2013, see attached file Faculty Benchmarks 2013, benchmark #10.

See also attached file Faculty Benchmarks Aggregated Data 2010-2013.

-  AACN Essentials for MSN and DNP Programs
-  BSN 1 year survey
-  BSN 3 year survey
-  BSN Course Audit
-  BSN end of program survey
-  Course Audit 2013
-  Employer Survey
-  Faculty Benchmarks 2013
-  Faculty Benchmarks Aggregated Data
-  Faculty Development Annual Report
-  GAP Analysis BSN Program
-  GAP Analysis RNBSN
-  MSN 1 year survey
-  MSN 3 year survey
-  MSN end of program survey
-  Program Effectiveness Annual Report
-  RNBSN 1 year survey
-  RNBSN 3 year survey
-  RNBSN end of program survey
-  Standard III; Program Quality
-  Student Affairs Annual Report
-  Three Year Course Audit

Use of Evaluation Results

Use of Evaluation Results

a. Undergraduate and Graduate Program curriculum

1. Continue to modify undergraduate and Graduate Programs based on IHL standards for nursing programs, AACN essentials, NONPF guidelines, student, alumni and employer feedback.
2. Prepare for CCNE accreditation site visit spring 2015 for new RN-DNP program.
3. Continue to work on the GAP analysis with Mississippi Deans and Directors Council of Schools of Nursing and redesign nursing education as needed.
4. Strategize methods that will increase participation of the Nursing Advisory Council in evaluation of the nursing program.
5. Hire additional qualified faculty members as student numbers increase.
6. Continue to integrate nursing, related sciences, and emerging evidence to improve health outcomes and safety for diverse populations.
7. Continue to utilize leadership skills to design and implement strategies that improve care delivery and outcomes.

-  Standard IV: Program Effectiveness

Related Items

SP1.Ind08: Curriculum Development and Revision

Indicators

curriculum review
program review
accreditation

SON 2014_02: : Maintain/Increase Recruitment and Retention of Nursing Students

Progress: Completed

Providing Department: Robert E. Smith School of Nursing

Unit Goal

The School of Nursing will maintain/increase enrollment and graduation rates.

Evaluation Procedures

The School of Nursing will increase enrollment and graduation rates.

- a. Implement DNP program
- b. Revise Recruitment and Marketing Plan to increase enrollment in the RN-BSN and MSN programs
- c. Draft a Student Retention and Remediation (Enrichment) Plan for both the undergraduate and graduate programs
- d. Enhance physical learning environment with a dedicated student study space
- e. Evaluate, maintain and obtain current and new support resources
- f. Monitor retention/graduation rates per MS IHL and CCNE accreditation standards.
- g. Establish a faculty benchmark for student advisement.

Evaluation Procedures

Feedback through the comprehensive SON MPE, in particular: admission, enrollment, advisement, and retention/progression data.

Actual Results of Evaluation

Results of Evaluation:

Implement DNP program

The DNP program was initiated fall 2013 with six students (5 post master's, 1 post baccalaureate) starting the program of study.

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

The revised recruitment and marketing plan for nursing was approved 5/13 and implemented summer/fall of 2013, see attached file Nursing Recruitment and Marketing Plan and Student Affairs Annual Report.

Results of implementation of this plan:

Nursing faculty reported participating in 33 recruitment activities for 2013 that included

recruiting at clinical sites of health care facilities (left brochures, personal communications, etc.).

See attached file Faculty Benchmarks. Nursing faculty and staff made contact and followed up

with 75 family/friends of summer 2013 orientees, and attended and made follow up contact with attendees at 19 fall 2013 recruitment events (included in the 33 activities above) for a total of 757 documented contacts for a total of 932 contacts with follow up, see attached files Student Affairs Annual Report and Summer Recruitment 2013 and Fall Recruitment 2013.

Draft a Student Retention and Remediation (Enrichment) Plan for undergraduate and graduate programs

The nursing faculty members developed Nursing Student Retention Strategies using Four Primary Goals based upon Jeffreys, M. R. (2012), *Nursing student retention: Understanding the process and making a difference* (2nd ed.). New York: Springer Publishing Company, see attached file Nursing Retention Plan.

- Enhance student success
- Improve retention and graduation rates
- Reduce attrition rates (drop out)
- Facilitate academic progression and swift entry into the workforce
- Please see the attached file Student Retention Plan for details.

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

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

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

1. Orientation– offered both on campus and online.

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

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

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

Enrollment and retention of undergraduate and graduate students.

Undergraduate

BSN

- a. 73 students applied to the BSN program, 40 were qualified and sent acceptance letters

and 38 actually started the program of study fall 2013.

- b. Admissions to the pre-licensure BSN nursing program increased by 15% over 2012

admissions (from 33 to 38) for fall 2013.

- c. Nursing boot camp has continued to be well received by nursing students starting the program of study fall 2013.

RNBSN

a. 29 (as compared to 36 in 2102) students applied to the RNBSN program, 19 were qualified and sent acceptance letters and 11 actually started the program of study. Admissions decreased 67% from summer 2012-summer 2013 (from 30 to 11).

b. Students continue to be positive regarding the online course delivery; the combination of extremely limited, optional in-class time & online is a good balance and facilitates academic progress while employed.

c. On-line efforts will continue as appropriate for course learning activities for the RNBSN program. Explore reorganization of RNBSN program to be two semester 12-15 hours instead of 3 semester 9-12 hours.

Graduate

MSN

a. 34 students applied to the MSN program (all NPs), 31 were qualified and sent letters of acceptance and 15 actually started the program of study fall 2013). There were no applicants for either the Nurse Administrator or Nurse Educator options for this year. Admissions decreased by 32% from fall 2012-fall 2013 (from 22 to 15).

- b. On-line efforts will continue as appropriate for course learning activities for the MSN program.

DNP

a. 22 students applied to the DNP program, 10 were qualified and sent letters of acceptance and 6 actually started the program of study fall 2013.

- c. On-line efforts will continue as appropriate for course learning activities for the RNDNP program.

Monitor retention/graduation rates per MS IHL and CCNE accreditation standards.

1. The program completion rate is calculated as the percent of students with a date of graduation that is accomplished \leq 150% of the date they started the program, as per MS IHL and CCNE accreditation standards.

2. The accreditation required standard for average completion rates for all program levels (BSN, RN-BSN, MSN) for the three (3) most recent calendar years is 70% or higher (the DNP program started fall 2013 and the date of completion for the 1st class will be December 2014). The BSN, RNBSN and MSN programs all exceeded this standard.

4. The 2013 BSN completion rate was 75%, RNBSN was 75%, and MSN was 80%. Please see attached files Standard IV: Program Effectiveness and Graduation Rates.

Enhance physical learning environment with a dedicated student study space

A dedicated student study space (room 125) was furnished with a table, four chairs, a mini sofa and four bookcases supplied with learning materials (textbooks, journals, etc).

Evaluate, maintain and obtain current and new support resources

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

A faculty benchmark for student advising was established in 2013, however, the data collection form for faculty members complete did not include this benchmark, therefore no data was reported for 2013. The form has been subsequently corrected and data will be collected on the Faculty Benchmark Data Collection Form and documented on the MPE Faculty Benchmark Form starting fall 2014.


 Faculty Benchmarks

Use of Evaluation Results

1. 2013 Enrollment and graduation rates will guide recruitment activities for 2014


2. Grant and other outside funding will continue to be sought (Delta Health Alliance, HRSA, Hearin Grant, health care facility support, and other entities) to increase student and faculty numbers, student retention, and facility expansion funding. Continue to explore alternate sources of funding for faculty positions to maintain mandated accreditation agency faculty student FNP ratios while maintaining/increasing admissions.


 Fall 2013 Recruitment

 Graduation Rates

 Nursing Recruitment and Marketing Plan

 Nursing Retention Plan

 Standard IV: Program Effectiveness

 Student Affairs Annual Report

 Summer 2013 Recruitment

Related Items

 **SP2.Ind01: Enrollment**

Indicators

 **SP2.Ind02: Retention**

Indicators

 **SP2.Ind03: Graduation Rate**

Indicators

SON 2014_03:: Maintain Community Support

Progress: Completed

Providing Department: Robert E. Smith School of Nursing

Unit Goal

The School of Nursing will continue to maintain community support.

A. Maintain active participation with the community of interest (COI)

B. Maintain relationships with all donors

Evaluation Procedures

Use of the comprehensive SON Master Plan for Evaluation. Faculty participation in recruitment events, Student Affairs Annual Report, receipt of additional scholarships and other outside funding.

Actual Results of Evaluation

Results of Evaluation:

Maintenance/increase in nursing scholarships/outside funding.

The school of nursing received one new scholarship (The Hilpert Nursing Scholarship), the Samuels Scholarship was endowed, and funding for additional Robert E. Smith Nursing Scholarships in the amount of \$750,000 during fall 2013 from the estate of Robert E. Smith.

Scholarships

1. Kennedy Joli Smith Nursing Scholarship

2. Dana Lamar Nursing Scholarship

3. Samuels Nursing Scholarship

4. Branton-Woodall Nursing Award

5. American Legion Auxillary Scholarship

6. Dr Barbara Powell Scholarship

7. North Sunflower Medical Future Nurse Scholarship

8. Arlene Ward Bradshaw Nursing Award

9. Bryan/Hafter March of Dimes

10. James B Stone Scholarship

11. Nursing School Scholarship

12. Ferretti/Karnstedt Nursing Scholarship

13. Dr & Mrs Thomas Clay Schol

14. Hollingsworth Scholarship

15. Kate Kittle Memorial Scholarship

16. Kate Smith Kittle Memorial

17. Eugene Kittle Sr Memorial Nursing Scholarship
18. Blake Nursing Scholarship
19. Ellis Nursing Scholarship
20. Louise Brown Memorial Nursing Scholarship
21. Robert E. Smith Nursing Scholarships
22. Hilpert Family Nursing Scholarship

Event participation by nursing faculty and students to increase/maintain visibility of the School of Nursing.

13/14 faculty members, both staff members, and students participated in a total of 33 recruitment events; see attached file Faculty Benchmarks 2013 and Student Affairs Annual Report, 19 of which were documented recruitment events (with participants turning in contact cards requesting more information), during summer orientations, through tours of the nursing building, at various Mississippi health care facilities, associate degree nursing program career fairs, and in community events (community health fairs and first aid booths at Crosssties, Octoberfest, and at each DSU home football game), see attached files Recruitment Spring and Fall 2013, Recruitment Summer 2013 and Faculty Benchmarks 2013 line 8.1.

Use of Evaluation Results

Use of Evaluation Results:

Continue to seek outside funding partners for nursing program needs, including student scholarships/other types of student financial assistance. Continue on-line strategies as appropriate. Exploration of innovative (and traditional) solutions to expanding faculty numbers and the physical building as needed (expansion of classrooms 129 & 130 were completed summer 2008, expansion/addition of the clinical/simulation lab was completed spring 2009, new 50 station computer lab completed spring 2010, the additional classroom wing with three additional classrooms (completed June 2011) and the new faculty office addition (with 14 faculty offices) was completed April, 2013). Continue to incorporate classrooms without walls. Explore use of streaming video for online delivery of class lecture as server space allows. Prepare faculty to utilize simulation mannequins more fully. Four (4) of the six (6) classrooms are 'smart' classrooms (Rooms 101, 129, 130, 142). Recruitment efforts will image both the budget situation and nontraditional funding sources to support increasing faculty and student numbers and the physical plant (classrooms, labs, etc) as needed.

-  Recruitment Spring and Fall 2013
-  Recruitment Summer 2013
-  Student Affairs Annual Report

Related Items

SP4.Ind03: External resources

Indicators

- Capitol campaign
- Unit fundraising
- Alumni/Foundation reports
- Grants submitted and funded
- Bonds
- Earmarks

SP5.Ind06: Community Outreach

Indicators

- Partnerships
- Centers
- Programs

SP5: Improve the quality of life for all constituents

Improving its image and impact, DSU will increase and enhance outreach, services, and partnership initiatives, in the region and beyond.

SON 2014_04:: Increase University Outreach, Service, and Partnerships and provide the University and community With the Opportunity to Know the Benefits of Healthy Living Through a Wellness Program offered by the Robert E. Smith School of Nursing.

Progress: Completed

Providing Department: Robert E. Smith School of Nursing

Unit Goal

The School of Nursing will increase university outreach, service, and partnership initiatives to benefit the citizens of the region.

- a. Support evidence-based research initiatives to improve healthcare in the Delta region
- b. Maintain/exceed accreditation required faculty development to ensure quality programs
- c. Participate in service-learning activities
- d. Provide continuing education initiatives
- e. Seek funding partnerships
- f. Seek funding and partnerships for a wellness center

Evaluation Procedures

Faculty educational plans, annual evaluations, productivity, professional portfolios, faculty benchmark aggregate data as reported in MPE. Report of service learning activities, RESSON SNA annual report of activities. Report of grant and other outside funding that is obtained.

Actual Results of Evaluation

Results of Evaluation:

The COAP screened applicants for potential new faculty members and the nursing faculty interview committee interviewed applicants summer 2014 with the result of two new faculty members hired starting fall 2013.

Service/volunteer learning hours for spring (16,586) and fall 2013 (16,873) for a total of 30,459. See attached file Service Learning Hours 2013.


All faculty members were evaluated according to DSU policy spring 2013; all were rated "meets expectations" or above.

The Robert E. Smith School of Nursing Student Nursing Association and nursing faculty members participated in 9 community outreach activities (5 first aid booths, assistance with medical/health needs at DSU Move-In Day, health teaching and materials at the DSU Employee Health Fair, Oktoberfest health teaching and display), see attached files Service Learning Hours 2013 and Faculty Recruitment 2013.

Funding was received via a HRSA grant titled Delta Healthy Families in the amount \$1,574,446.00 over three years (PI Dr. Shelby Polk) for a wellness center that will give faculty and students experiences in working with a diverse and disadvantaged population and offer healthy lifestyles options to Delta residents.

 Faculty Benchmarks 2013

 Faculty Recruitment Events 2013

 Service Learning Hours 2013

Use of Evaluation Results

Use of Evaluation Results:

Continued support of nursing faculty as appropriate to accommodate their IHL continuing education requirements and personal professional coursework while maintaining excellence in program provisions for Nursing. Maintained support of RESSON SNA and faculty community outreach activities.

Funding was received for the Delta Healthy Lifestyles Center, space in a commercial building was rented and renovations started; in addition, staff and partner MOAs were signed. Anticipated opening of the Center is summer 2014. The Healthy Lifestyle Center will increase outreach to the community and the Delta Region, offer healthy lifestyle choices to participants, and offer undergraduate and graduate nursing students opportunities to practice and teach healthy behaviors to diverse populations.

Related Items

 **SP1.Ind05: Diversity -- access to diverse ideas/programs**

Indicators

 **SP4.Ind03: External resources**

Indicators

Capitol campaign

Unit fundraising

Alumni/Foundation reports

Grants submitted and funded

Bonds

Earmarks

 **SP5.Ind06: Community Outreach**

Indicators

Partnerships

Centers

Programs

 **SP5: Improve the quality of life for all constituents**

Improving its image and impact, DSU will increase and enhance outreach, services, and partnership initiatives, in the region and beyond.

SWOT analyses



Nursing Swot Analysis

Providing Department: Robert E. Smith School of Nursing

Strengths

Strengths:

1. Diverse, highly qualified and engaged faculty and staff
2. Highly qualified students
3. Physical resources
 - a. Adequate space to accommodate increased admissions of pre-licensure BSN students (the other programs are online).
 - b. identification and furnishing of a dedicated study area.
 - c. Technology resources
 1. Simulation Lab
 2. Computer Lab
 3. SMART Classrooms
4. RNDNP program started fall 2013 with 6 students; all are progressing and on track for fall 2014 graduation.
5. MS IHL approval obtained for a two semester RNBSN program to start fall 2014; growth in this program is anticipated
6. External support
 - a. Total number of grant applications decreased but total grant dollars awarded increased (by approximately 84%).

b. Grant funding received from HRSA for the Healthy Lifestyles Center

c. Additional monies available for Robert E. Smith nursing scholarship

5. Increased faculty recruitment efforts

Weaknesses:

Decreased numbers of RN students accepting admission to the 3 semester RN-BSN program.

Opportunities:

1. Moving to a two semester RNBSN program of study will likely increase admissions to that program

2. Potential for HRSA Traineeship grant funding for graduate students

3. Potential for increase in graduate admissions with RNDNP program initiated

4. Additional monies (total \$750,000) received from the Robert Smith estate for nursing student scholarships may help keep students experiencing financial difficulties.

Threats:

1. BSN graduation rates are trending downward

2. Risk for decreased faculty morale due to financial constraints

Weaknesses

Decreased numbers of RN students accepting admission to the 3 semester RN-BSN program

Opportunities

1. Moving to a two semester RNBSN program of study will likely increase admissions to that program

2. Potential for HRSA Traineeship grant funding for graduate students

3. Potential for increase in graduate admissions with RNDNP program initiated

4. Additional monies (total \$750,000) received from the Robert Smith estate for nursing student scholarships may help keep students experiencing financial difficulties.

Threats

1. BSN graduation rates are trending downward

2. Risk for decreased faculty morale due to financial constraints

Related Items

There are no related items.

Executive Summaries

Nursing Executive Summary

Overview (brief description of scope)

The School of Nursing (SON) is conceptualized as a faculty of the whole with primary assignment to either the graduate or undergraduate programs. This framework fosters maximum utilization of faculty preparation and expertise, and promotes exceptional learning opportunities for all students.

In concurrence with a comprehensive evaluation model that addresses all components of the organization, the School mission statement, philosophy, by-laws, and program outcomes are reviewed annually. The current documents are presented in Tables IIA-D.

Table IIA: Delta State University School of Nursing Mission
The mission of the Delta State University School of Nursing is to prepare students for professional nursing practice in a multicultural society as either a generalist at the Baccalaureate level or in an advanced practice role at the Master's level. The program will prepare graduates to pursue advanced study.
Revised 02/16/09...Reviewed 05/13
Table IIB. Delta State University School of Nursing Philosophy
The philosophy of the faculty of the Delta State University School of Nursing is consistent with the goals and mission of the University. The faculty believes research and theoretical and systematic methods of critical thinking foster the development of the nursing profession. Nursing embodies the art and science of caring, which is the nurturing, skillful act of being with another to promote optimum health and derives its mission from societal needs.
Society is the organizing framework composed of family, group, and community that is governed by morals, ethics and laws. We believe that each person is a unique individual who possesses the right to informed choices in the attainment of health care services.
Health is a dynamic state of being influenced by spiritual, cultural, psychological, physical and societal components, which interact with the environment. State of health is influenced by perceptions of the client and society. Nursing seeks to facilitate the health status of the client through interacting with client systems, assisting in the movement toward an optimum level of functioning or peaceful death.
Revised 5/14/07...Reviewed 05//13

Table IIC: Outcomes for the BSN Program (2013)
1. Apply nursing, natural, and behavioral science concepts to the practice of nursing.
2. Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care to diverse clients in a collaborative environment.
3. Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession.
4. Utilize research in the delivery of health care.
5. Advocate for improvement in healthcare through participation in professional and political processes.
6. Provide individualized nursing care that focuses on health promotion and disease and injury prevention.
7. Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach.

Table IID: Outcomes for the MSN Program (revised May 2011)
1. Integrate nursing, related sciences, and emerging evidence to improve health outcomes and safety for diverse populations.
2. Utilize leadership skills to design and implement strategies that improve care delivery and outcomes.
3. Contribute to the integration of healthcare services to improve quality and safety across the continuum of care.
4. Translate theory and research to provide evidence based nursing practice and improve outcomes.
5. Promote the use of information and communication technologies to provide safe, quality, and cost effective healthcare.
6. Analyze and interpret the effects of healthcare policies, ethics, and regulatory processes to influence practice and outcomes.
7. Employ collaborative leadership strategies to advocate, mentor, and function within inter-professional teams and partnerships.
8. Integrate individual and population based health promotion and prevention strategies to provide equitable, efficient, and effective global healthcare.
9. Apply advanced knowledge, skills, and competencies to design, implement, and evaluate direct and indirect care for individuals, families, and communities.

Accreditation

The School has state, regional, and national accreditation recognition by the Mississippi State Board of Institutions of Higher Learning, the Southern Association of Colleges and Schools, and the Commission on Collegiate Nursing Education (CCNE). CCNE is the only accrediting body devoted exclusively to the evaluation of baccalaureate and graduate degree programs in nursing. Currently more than 750 baccalaureate and master's degree programs in nursing (79%) are accredited by CCNE (<http://www.aacn.nche.edu/about-aacn>, 2013). The last CCNE and IHL accreditation visits for the whole RESSON program (undergraduate and graduate) was October 2010. Both BSN and MSN programs received full accreditation for the maximum of ten years with the next BSN and MSN re-accreditation visit projected for fall of 2020. The new RNDNP program is scheduled for an initial accreditation visit February, 2015.

Comparative data

Comparative data (enrollment, CHP, majors, graduation rates, etc):

ENROLLMENT BY MAJOR						
	Spring 2008		Summer 2008		Fall 2008	
	UG	GR	UG	GR	UG	GR
Nursing	117	79	73	23	194	51

ENROLLMENT BY MAJOR						
	Spring 2009		Summer 2009		Fall 2009	
	UG	GR	UG	GR	UG	GR
Nursing	183	55	14	15	105	46

ENROLLMENT BY MAJOR						
	Spring 2010		Summer 2010		Fall 2010	
	UG	GR	UG	GR	UG	GR
Nursing	99	52	29	6	120	57

ENROLLMENT BY MAJOR						
	Spring 2011		Summer 2011		Fall 2011	
	UG	GR	UG	GR	UG	GR
Nursing	87	77	26	15	128	34

ENROLLMENT BY MAJOR						
	Spring 2012		Summer 2012		Fall 2012	
	UG	GR	UG	GR	UG	GR
Nursing	85	30	18	2	103	37

ENROLLMENT BY MAJOR						
	Spring 2013		Summer 2013		Fall 2013	
	UG	GR	UG	GR	UG	GR
Nursing	63	34	18	7	97	43

CREDIT HOUR PRODUCTION						
	Spring 2008		Summer 2008		Fall 2008	
	UG	GR	UG	GR	UG	G
NUR	887	689	301	72	821	494

CREDIT HOUR PRODUCTION						
	Spring 2009		Summer 2009		Fall 2009	
	UG	GR	UG	GR	UG	G
NUR	835	431	270	98	1175	477

CREDIT HOUR PRODUCTION						
	Spring 2010		Summer 2010		Fall 2010	
	UG	GR	UG	GR	UG	G
NUR	1138	552	217	94	1322	695

CREDIT HOUR PRODUCTION						
	Spring 2011		Summer 2011		Fall 2011	
	UG	GR	UG	GR	UG	G
NUR	956	695	302	100	1,444	326

CREDIT HOUR PRODUCTION						
	Spring 2012		Summer 2012		Fall 2012	
	UG	GR	UG	GR	UG	G
NUR	924	483	146	86	1,134	364

CREDIT HOUR PRODUCTION						
	Spring 2013		Summer 2013		Fall 2013	
	UG	GR	UG	GR	UG	G
NUR	9647	484	121	82	915	602

Graduation Rates All Programs:

GRADUATION YEAR	# ADMITTED	# RETURNING	# GRADUATES Anticipated Date of Graduation upon Admission to Program	%	# GRADUATES to graduate within 150% TIMEFRAME	%	COMMENTS
2010	27	0	19	70.37%	21	77.77%	4 students continuing: 1 with anticipated graduation Fall 2010 [within 150% timeframe); 1 with anticipated graduation Spring 2011 [within 150%] and 2 with anticipated graduation date Summer 2011 [not within 150% timeframe] 4 students withdrew and have not returned to complete program. All 4 students are eligible to return
2011	18	0	14	77.77%	15	83.33%	3 students withdrew and are eligible to return to program 1 student continuing with anticipated graduation in 2012 [within 150%]
2012	30	0	17	56.67%	19	63.33%	2 students continuing with anticipated graduation in Spring [within 150%] 10 students withdrew and are eligible to return 1 student withdrew and is not eligible to return
2013	12	0	9	75%	0	75%	3 students withdrew and are eligible to return
GRADUATION YEAR	# ADMITTED	# RETURNING	# GRADUATES Anticipated Date of Graduation upon Admission to	%	# GRADUATES to graduate within 150% TIMEFRAME	%	COMMENTS

			Program				
2010	18	0	10	55.56%	12	66.67%	2 students continuing with anticipated graduation Spring 2011 [within 150%] 1 student continuing with expected graduation Spring 2012 [not within 150%] 5 students did not complete program
2011	35	0	31	88.57%	32	91.43%	2 withdrew and are eligible to return (1 graduated Spring 2012 [within 150%]) 1 is not eligible to return
2012	20	0	13	65.00%	15	75.00%	2 students continuing with anticipated graduation in Spring 2013 [within 150%] 5 withdrew and are eligible to return to program
2013	15	0	12	80%	0	80%	2 withdrew and are eligible to return to the program 1 student is not eligible to return

Personnel:

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

Table VA: 2012 Full-Time, Part-Time, & Adjunct Faculty Members & Staff Roster

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

Nursing faculty have benchmarks to meet each year. Data is collected and percentages calculated and reported in the MPE. The 2013 faculty benchmarks are as follows:

FACULTY BENCHMARKS - TEACHING

- 1. 100% of nursing faculty will attain at least 10 CE Units annually **MET** (15/15-100%).
- 2. 80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester **MET** (15/15-100%).
- 3. 40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach **MET** (8/15-53.3%).

FACULTY BENCHMARKS – SCHOLARSHIP

- 4. 40% of nursing faculty will present research findings at conferences at the state, regional, or national level **MET** (6/15-40%).
- 5. 10% of nursing faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor **NOT MET** (1/15-6.6%).
- 6. 10% of nursing faculty will submit a grant or serve as a grant reviewer **MET** (3/15-20%).

FACULTY BENCHMARK - SERVICE

- 7. 100% of nursing faculty serve on three or more School of Nursing committees **MET** (15/15-100%).
- 8. 75% of nursing faculty serve on one or more university committees, councils, task forces, or other appointed – elected position **MET** (12/15-80%).
- 8.1. 100% of nursing faculty participate in two or more recruitment activities annually (*new benchmark 2013*) **NOT MET** (14/15-92.85%).
- 8.2. 100% of nursing faculty participate in academic advisement each semester for students enrolled in programs and for students perusing enrollment in a nursing program **NOT MET** (no data reported by faculty).
- 9. 60% of nursing faculty will participate in community services **MET** (13/15-86.6%).

FACULTY BENCHMARKS – PRACTICE

- 10. 60% of nursing faculty will engage in faculty practice to maintain nursing competency **MET** (9/15-60%).

Nursing faculty met eight out of 10 benchmarks in 2013. The benchmarks that were not met were:

SCHOLARSHIP

#4. 10% of nursing faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or an editor. One faculty member (6.6%) met this benchmark.

SERVICE

- #8.1. 100% of nursing faculty will participate in two or more recruitment activities annually. *New benchmark 2013*. Thirteen out of fourteen (92.85%) faculty members met this benchmark.
- #8.2. 100% of nursing faculty participate in academic advisement each semester for students enrolled in programs and for students pursuing enrollment in a nursing program. *New benchmark 2013*.

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

2010 - 2014

YR	FACULTY BENCHMARKS - TEACHING			FACULTY BENCHMARKS - SCHOLARSHIP			FACULTY BENCHMARK - SERVICE					FACULTY BENCHMARK PRACTICE
	#1	#2	#3	#4	#5	#6	#7	#8	8.1	8.2	#9	#10
	100% of nursing faculty will attain at least 10 CE units annually	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	40% of nursing faculty will present research findings at conferences at the state, regional, or national level	10% of nursing faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor	10% of nursing faculty will submit a grant or serve as a grant reviewer	100% of nursing faculty serve on three or more RESSON committees	75% of nursing faculty serve on one or more University committee, council, taskforce, or other appointed - elected positions	100% of nursing faculty participate in two or more recruitment events annually <i>New benchmark 2013</i>	100% of nursing faculty participate in academic advisement each semester for students enrolled in programs and for students pursuing enrollment in a nursing program <i>New benchmark 2013</i>	60% of nursing faculty will participate in community services	60% of faculty will engage in faculty practice to maintain nursing competency
2010	100% Met	71.42% Not Met	71.42% Met	35.71% Not Met	7.14% Not Met	28.57% Met	n/a	n/a			78.57% Met	71.42% Met
2011	92.85% Not Met	92.85% Met	71.42% Met	28.57% Not Met	21.42% Met	35.71% Met	100% Met	71.42% Not Met			85.71% Met	64.28% Met
2012	100% Met	92.85% Met	64.28% Met	57.14% Met	7.14% Not Met	35.71% Met	100% Met	85.71% Met			85.71% Met	57.14% Not Met
2013	100% Met	100% Met	53.3% Met	40.0% Met	6.6% Not Met	20.0% Met	100% Met	80.0% Met	92.85% Not Met		86.6% Met	60.0% Met
2014												

Nursing faculty members have put forth good effort since 2010 to meet each benchmark. However, there is still work to be done. Faculty members struggle each year to meet benchmark #4 (published in a peer reviewed book/journal). As more nursing faculty members work toward tenure, they will be continue to be encouraged to consider publication as the goal for scholarship. 100% of nursing faculty will also continue to be encouraged to increase student recruitment efforts (goal #8.1). Finally, there is documentation on the Nursing Interaction Forms in nursing student files that many, if not all, nursing faculty members did participate in advisement each semester, however, the data collection form used by faculty members to document benchmarks was not updated to include this benchmark (even though #8.1 was). This correction has been made and data will be collected starting fall 2014.

Diversity Compliance Initiatives and Progress

Plan of Compliance

The School of Nursing had a composite of 14 full-time faculty members in spring and fall 2013. Three (3) of the full-time faculty (21%) are African-American. Recruitment efforts continue to target a national pool with specific online advertisements to Minority Nurse, an AACN list serve of deans of school of nursing in liberal arts and small colleges and universities and the National Student Nurses' Association broadcast email for faculty positions. Approximately 24% (n = 12) of the School of Nursing's Advisory Council members (N = 50) are African-American.

2. Describe faculty exchange arrangement between "other race" institutions and indicate the number of faculty members involved.

There were no faculty exchange arrangements during 2013. Describe the special efforts made to assist incumbent "other race" personnel to upgrade credentials for promotions to higher ranked positions. Indicate the number of employees involved. One African American faculty member graduated from Samford University with a DNP May 2013 and is taking advantage of DSUs employee education policy that allows them to take 3 credit hours/week of course work during regular work hours. This faculty member also took advantage of the HRSA Minority Nurse Educator Loan Forgiveness grant to help fund her DNP.

3. Identify distinguished professorships of "other race" personnel brought to the campus in 2012.

No distinguished professorships of "other race" personnel were brought to the campus for the RESSON in 2013.

4. Describe the cooperative programs involving both faculty and students between "other race" institutions and indicate the number of persons involved.

The School of Nursing directs one of the Delta Health Alliance (DHA) Team Sugar Free grants (PI is Dr. Shelby Polk, nursing faculty), which is working to network the multiple agencies existing to serve one of the predominant needs of the Delta (diabetes) experienced by the poor, the indigent, and the minority races. Presentations were made at 6 Delta Region locations (Bolivar, Washington and Grenada Counties). They included the (DSU student health fair, Bolivar County Delta Health and Wellness Day - Teen Zone, DSU employee benefits health fair, a diabetes workshop for health care providers, a church health fair and a Washington County elementary school health event, and at a DSU children's summer camp ("Reach for the Stars Boot Camp" Kids Kollege). In addition, the Dean of the School of Nursing continues to serve on the advisory (CRAFT) board of the Cleveland School District Allied Health Program. The School of Nursing has donated books to the Allied Health Program, assisted with fund raising ideas and the DSU Student Nurse Association has initiated "adopting" the Allied Health Program by partnering members with Allied Health students and coaching them for Health Occupations Students of America (HOSA) State and Regional competitions in our skills/simulation lab. Plans are in progress to bring the HOSA 2015 Northern District Conference to campus in spring 2015.

5. Identify new programs approved in 2012 which will have potential of attracting "other race" students and faculty members.

The School of Nursing strives to increase recruitment of nursing students, which is likely to increase the numbers of nurses in the Delta by being highly visible in the community via first aid booths. The SON is active in regional Health Fairs, at university and local events (Pigpickin', Homecoming, Oktoberfest, Crossies Festival, home football games), and in summer camps (Reach for the Stars Camp with Kids Kollege) combined with recruitment efforts and special events that target youth/new DSU college students for future nursing careers. These efforts have met with good success. The Reach for the Stars Camp Kids Kollege (June 23-27, 2013) had 26 attendees with 73% Caucasian and 27% other races (6 African American, 1 Hispanic).

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

BSN – The BSN classes continue to be predominately Caucasian in spite of efforts to increase minority representation in this group. 38 students were admitted to the BSN program fall 2013; 11% were minorities; 3 (8%) were African

American and 1 (3%) was an Native American (Native Alaskan). 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 will also continue with the SUPPORT project to help prepare nursing students to be successful in nursing school. We will also continue with a part-time admission option for at-risk students. We will also continue with enrichment activities to assist identified nursing students with challenges on national standardized nursing exams. Faculty members will be challenged to identify struggling students early in each course and work with them to increase their knowledge and understanding of the material and to refer them to the Student Support Center as needed.

RNBSN – Eleven students were admitted to the RNBSN program summer 2103; 27% were minorities; 2 (18%) were African American and 1 (9%) was Asian American. 2013 enrollment decreased by 08% in the RN-BSN program (11 compared to 12 last year (2012)). The online classes have 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. The approval in of a two (2) semester plan of study (as opposed to a 3 semester plan of study) that will be initiated in fall 2014 should result in increased admissions to this program for future cohorts with at least 20 RN-BSN students. In addition, the RNDNP program was designed specifically for the non-baccalaureate prepared RN and should also result in increased nursing admissions. In an additional effort to increase minority representation in this cohort, outside funding (grants, private scholarship donors) will also be sought to help assist these students with tuition and other costs of obtaining a baccalaureate degree.

MSN – Fifteen students were admitted to the MSN program in fall 2013; 13% were minorities; both (2) 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 - Six students were admitted to the DNP program fall 2013, 17% were minorities, this one (1) student was African American.

* 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-one (31) students successfully completed the Bachelor of Science in nursing program in 2013. Currently, 87% (27/31) of these students are employed within the state of Mississippi; The remaining 4 graduates employed outside of Mississippi are employed in Memphis, TN. 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 2012 median salary for Registered Nurses was \$65,470/year <http://money.usnews.com/careers/best-jobs/registered-nurse/salary>. This translates to \$2,029,570 in total wages from the health care industry. Approximately 380 undergraduate students at the University have selected a pre-nursing plan of study to prepare for admission into the generic nursing program. Intensive and extensive recruitment efforts have been launched by the University and Nursing School and throughout the nation. Schools of Nursing continue to turn away thousands of qualified nursing applicants. According to AACN's report on <http://www.aacn.nche.edu/news/articles/2012/enrolldata>, U.S. 566 entry level baccalaureate nursing schools turned away 52,212 qualified nursing school applicants, due to an insufficient number of faculty, clinical sites, classroom space, clinical preceptors, and budget constraints. The spring 2012 applicant pool for the DSU School of Nursing pre-licensure BSN program consisted of 67 qualified applicants, 37 were accepted to start the program fall 2012 and 29 students actually started the program. The applicant pool for the 2012 RN-BSN program included 24 qualified applicants, 23 were accepted to start the program in summer 2012 and 12 students actually started the program. This is a dramatic decrease in enrollment from 2011, which consisted of an RN-BSN applicant pool of 36 qualified applicants; all 36 were accepted to start the program of nursing summer 2011 and 30 actually started the program. For the MSN program, 33 qualified students applied, all 33 were accepted, and 23 actually started the program. During fall 2011, 33 students were qualified to start the program of nursing; 32 were accepted, and 15 actually started the program.

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 Master of Science in Nursing (MSN) program had ten (10) students to graduate in May 2013; an additional three (3) students obtained a post-master's certificate. The estimated salary for Master's Prepared Nurses (all options) is approximately \$85,000/year. For the 2013 graduates this would approximate to \$850,000 generated in annual wages.

Total MSN enrollment (all levels) for Fall 2013 was 38 with 32 Nurse Practitioner students and 14 Non-degree seeking students. 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, 2012-June 30, 2013)

The School of Nursing plans to:

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

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

Service Learning:

The School of Nursing had no service learning hours that met a strict definition of the same. However, nursing faculty, staff and students did log 33,459 clinical and volunteer hours for CY 2013. According to the website http://www.independentsector.org/programs/research/volunteer_time.html; volunteer hours during CY 2013 were worth \$22.55/hr. This translates to \$804,474.72 in added value to DSU, Cleveland and the Delta region.

Grants, Contracts, Partnerships

Grants:

The total number of grants written/submitted decreased during 2013 (N=6) as compared to 2012 (N=7), however, the total amount of grant funding increased to \$575,848.67 in 2013 as compared to \$60,848.33 in 2012. This is an increase of \$515,005.34 (around an 84% increase in grant dollars).

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

-Bingham, V (2013) Hearin Foundation grant application for student scholarships in the Doctor of Nursing Practice (DNP) program in the amount of \$500,000.00 to Delta State University for review and consideration – DSU elected to not submit

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

-Grantham, J. (2013). OIT Challenge Grant Award–Using Technology with Community as Client-\$1,000.00

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

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

Partnerships:

The Hilpert Nursing Scholarship was endowed in 2013.

The estate of Robert E. Smith dispersed an additional \$750,000 for Smith Nursing Scholarships.

Committees reporting to unit

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Programs

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Undergraduate*

BSN & RN-BSN

Graduate*

Administrator, Educator & Practitioner**

(*Curriculum, Resource Admissions)

(**FNP Track Director oversees all NP curricular matters)

VI. IV. Degree Program Addition/Deletions and/or Major Curriculum Changes:

Changes made in the past year:

The RNBSN program was changed from a 3 semester program to a two semester program after review of the Program of Study with consideration of the Institute of Medicine (IOM) recommendations, AACN RN/BSN White Paper, and RN-BSN programs of studies at other universities [i.e. MS Universities and University of Memphis]. The following RN-BSN Completion Program of Study was presented for review and consideration. After discussion, the following RN-BSN Completion Program of Study was drafted and approved at the Monday, October 20, 2013 FacOrg meeting.

RN-BSN Completion Program of Study

Semester	Course	Sem. Hrs.
Fall	NUR 311 Comprehensive Health Assessment	1.5
	NUR 331 Comprehensive Health Assessment Practicum	0.5
	NUR 312 Basic Pathophysiology	3.0
	NUR 358 Transition to Professional Nursing	4.0
	NUR 403 Community Health Nursing	2.5
	NUR 443 Community Health Nursing Practicum	1.5
	Total Fall Semester Hours	13.0
Spring	NUR 309 Nursing Research/Evidence Based Practice	3.0
	NUR 314 Health Policy and Ethical Decision Making	3.0
	NUR 402 Management of Client Care	3.0
	NUR 442 Management of Client Care Practicum	3.0
	Total Spring Semester Hours	12.0
	Total Program Hours	25.0

- Validation hours increased from 33 to 39 to reflect the hours in our BSN program that the RN earns in the ADN programs – Reminder that Chemistry is not a required pre requisite
- NUR 309 Nursing Research will be redesigned in both the BSN and RN-BSN to incorporate NUR 409 Evidence Based Practice and will be reflected in the name, NUR 309 Nursing Research/Evidence Based Practice
- NUR 407 Directed Study content will be incorporated into both NUR 402/442 Management of Client Care/Practicum and in the redesigned NUR 309 Nursing Research/Evidence Based Practice course
- Courses will be taught all online with an optional on-campus orientation each semester

We will accept applications year round

Related Items

There are no related items.