

Unit Missions

Nursing Mission Statement

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

There are no related items.

Learning Outcomes

BSN-SON_01: Clinical Concepts

Start: 7/1/2013

End: 6/30/2014

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 mid-curricular 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 mid-curricular 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

Start: 7/1/2013

End: 6/30/2014

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 communication (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

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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 mid-curricular 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 mid-curricular 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/CCNE standards for BSN & RNBSN programs and revise curriculum as needed.

Related Items

There are no related items.

BSN-SON_03: Leadership

Start: 7/1/2013

End: 6/30/2014

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 mid-curricular 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 mid-curricular 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

Start: 7/1/2013

End: 6/30/2014

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
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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 mid-curricular 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 mid-curricular 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

Start: 7/1/2013

End: 6/30/2014

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 mid-curricular 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 mid-curricular 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

Start: 7/1/2013

End: 6/30/2014

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). Psychologic Integrity showed an upward trend with the 2012 mean score of 898 as compared to 935 in 2013. This continued downward trend in Psychologic 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 mid-curricular 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 mid-curricular 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

Start: 7/1/2013

End: 6/30/2014

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 mid-curricular 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 mid-curricular 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

Start: 7/1/2013

End: 6/30/2014

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	5.00

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

Start: 7/1/2013

End: 6/30/2014

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 an 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

Start: 7/1/2013

End: 6/30/2014

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	5.00

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

Start: 7/1/2013

End: 6/30/2014

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

Start: 7/1/2013

End: 6/30/2014

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

Employer/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

Start: 7/1/2013

End: 6/30/2014

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

Start: 7/1/2013

End: 6/30/2014

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

Start: 7/1/2013

End: 6/30/2014

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

Start: 7/1/2013

End: 6/30/2014

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

Start: 7/1/2013

End: 6/30/2014

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:

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.

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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 2104. Expected individual student learning outcomes are consistent with the roles for which the program is preparing its graduates. Curricula are

developed, implemented, and revised to reflect relevant professional nursing standards and guidelines which are clearly evident within the curriculum, expected individual student learning. The graduate curriculum was reviewed for incorporation of the AACN Essentials/Competencies.

Each Essential/Competency was incorporate into one or more courses, see attached files Essentials/Competencies review 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.

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- 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.

- [!\[\]\(4e333a6106fc298d0ae6dff272a736ef_img.jpg\) AACN Essentials for MSN and DNP Programs](#)
- [!\[\]\(97089f8e07e24e31baa67366e358a709_img.jpg\) BSN 1 year survey](#)
- [!\[\]\(9496824b8cff3a19f59b81b37b57d8b6_img.jpg\) BSN 3 year survey](#)
- [!\[\]\(ec8d0f7e486e2280c113cd85015a8548_img.jpg\) BSN Course Audit](#)
- [!\[\]\(fad66fecb73aae330937d501057cafc9_img.jpg\) BSN end of program survey](#)
- [!\[\]\(a94e0943f5ecd6c1adc5223fd7677110_img.jpg\) Course Audit 2013](#)
- [!\[\]\(f14ef06774200ee2342297364295aa0f_img.jpg\) Employer Survey](#)
- [!\[\]\(fc5b69083c6c7efc78abd54fb1c8e530_img.jpg\) Faculty Benchmarks 2013](#)
- [!\[\]\(44329a5be70d7da178c176f4dc400266_img.jpg\) Faculty Benchmarks Aggregated Data](#)
- [!\[\]\(e8acad03efc4e1e51e61f51e08abcfab_img.jpg\) Faculty Development Annual Report](#)
- [!\[\]\(b080594840f2c960d0486e13bbc20b6f_img.jpg\) GAP Analysis BSN Program](#)
- [!\[\]\(23f890d44f916d45bc3635ac2828412b_img.jpg\) GAP Analysis RNBSN](#)
- [!\[\]\(25a1b9995aa5f48f2b3cac0400969a8a_img.jpg\) MSN 1 year survey](#)
- [!\[\]\(a92bd74bec46eea0a44404ed6e5a6ecb_img.jpg\) MSN 3 year survey](#)
- [!\[\]\(36b730dfd060d5363444dc04a89d84c3_img.jpg\) MSN end of program survey](#)
- [!\[\]\(a7ce143ce52c666a4d647282f1b4a080_img.jpg\) Program Effectiveness Annual Report](#)
- [!\[\]\(e4c916cf613ea5d535d677c54a5cc6a9_img.jpg\) RNBSN 1 year survey](#)
- [!\[\]\(5b3ee1d9d63f0c5b0254c24bdfac5622_img.jpg\) RNBSN 3 year survey](#)
- [!\[\]\(78df4f4b3279932fcf3ec7c55cf7ee57_img.jpg\) RNBSN end of program survey](#)
- [!\[\]\(49e614b657c1ddde265415db260b0ab7_img.jpg\) Standard III; Program Quality](#)
- [!\[\]\(7d094a17c00b7e69996babaa3d937b5e_img.jpg\) Student Affairs Annual Report](#)
- [!\[\]\(c5c62c8b11b96eb9c69dfaf5c6ceab5e_img.jpg\) Three Year Course Audit](#)

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](#)

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

Start: 7/1/2013

End: 6/30/2014

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.

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- 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.
- b. 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**
 -  **SP2.Ind02: Retention**
 -  **SP2.Ind03: Graduation Rate**
-

 **SON 2014_03:: Maintain Community Support**

Start: 7/1/2013

End: 6/30/2014

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 Memoral Nursing Scholarship
18. Blake Nursing Scholarship
19. Ellis Nursing Scholarship
20. Louise Brown Memorial Nursing Scholarship
21. Robert E. Smith Nursing Scholarships
22. Hilpert Family Nursing Scholarship

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

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 Crossties, 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:


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](#)

 **SP4.Ind03: External resources**

 **SP5.Ind06: Community Outreach**

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

 **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.**

Start: 7/1/2013

End: 6/30/2014

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, Octoberfest 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:

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.

SWOT analyses



Nursing SWOT Analysis

Start: 7/1/2013

End: 6/30/2014

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

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.

1. 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.
2. 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.
3. 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.

4. 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, Crossties Festival, home football games), and in summer camps (Reach for the Stars Camp with Kids Kollege) combined with recruitment efforts and special events that target youth/new DSU college students for future nursing careers. These efforts have met with good success. The 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).

5. 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 a 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

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- 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

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

BOARD OF TRUSTEES INSTITUTIONS OF HIGHER LEARNING
PRESIDENT of DSU
Provost and Vice President for Academic Affairs to the President
<u>School of Nursing Faculty Organization</u> Dean Faculty Organization Committee
COAP Standing Committees Faculty Development Student Affairs Program Effectiveness Undergraduate Program Graduate Program
Programs COAP <u>Undergraduate*</u> BSN & RN-BSN <u>Graduate*</u> 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

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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.

<p>Table IIA: Delta State University School of Nursing Mission</p> <p>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.</p> <p style="text-align: right;">Revised 02/16/09...Reviewed 05/13</p>
<p>Table IIB. Delta State University School of Nursing Philosophy</p> <p>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.</p> <p>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.</p> <p>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</p>
<p>Table IIC: Outcomes for the BSN Program (2013)</p> <ol style="list-style-type: none"> 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

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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

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Graduation Rates All Programs:

GRADUATION YEAR	# ADMITTED	# RETURNING	# GRADUATES Anticipated Date of Graduation upon Admission to Program	%	# GRADUATES to graduate within 150% TIMEFRAME	%
2010	27	0	19	70.37%	21	77.77%
2011	18	0	14	77.77%	15	83.3%
2012	30	0	17	56.67%	19	63.33%
2013	12	0	9	75%	0	75%
Comments:	2010: 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: 3 students withdrew and are eligible to return to program 1 student continuing with anticipated graduation in 2012 [within 150%] 2012: 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: 3 students withdrew and are eligible to return					

GRADUATION YEAR	# ADMITTED	# RETURNING	# GRADUATES Anticipated Date of Graduation upon Admission to Program	%	# GRADUATES to graduate within 150% TIMEFRAME	%
2010	18	0	10	55.56%	12	66.67%
2011	35	0	31	88.57%	32	91.43%
2012	20	0	13	65.00%	15	75.00%
2013	15	0	12	80%	0	80%

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COMMENTS	2010: 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: 2 withdrew and are eligible to return (1 graduated Spring 2012 [within 150%]); 1 is not eligible to return 2012: 2 students continuing with anticipated graduation in Spring 2013 [within 150%]; 5 withdrew and are eligible to return to program 2013: 2 withdrew and are eligible to return to the program; 1 student is not eligible to return
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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	
Full-Time Faculty	
Lizabeth L. Carlson, DNS, RNC Dean & Professor, Tenured	
Debra F. Allen, MSN, RN Instructor	
Vicki L. Bingham, PhD, RN Chair and Associate Professor, Tenured	
Lacey Blessitt, MSN, RN, BC Instructor	
Catherine Hays, EdD, RN Associate Professor, Tenured	
Addie Herrod, DNP, RN, BC Instructor	
Monica Jones, DNP, RN, BC Instructor	
Donna Koestler, MSN, RN Instructor	
Emily Newman, MSN, MEd, Instructor	
Elizabeth Overstreet, MSN, RN, BC Instructor	
Shelby Polk DNP, RN, BC Assistant Professor	
D. Louise Seals, EdD, RN, CNE Associate Professor, Tenured	
Betty Sylvest, DNS, RN, CNE Associate Professor, Tenured	
Carleen Thompson, DNP, RN, BC. Assistant Professor	
Janye Wilson, MSN, RN	
Part-Time Faculty	
Jean Grantham, MSN, RN, BC Instructor	
Full-Time Staff	
Carla Lewis	Secretary to the Dean
Judy Haney.....	Secretary to the Faculty

Nursing faculty 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**

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.

YEAR	FACULTY BENCHMARKS – TEACHING			FACULTY BENCHMARKS - SCHOLARSHIP		
	#1	#2	#3	#4	#5	#6
	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
2010	100% Met	71.42% Not Met	71.42% Met	35.71% Met	7.14% Not Met	28.57% Met
2011	92.85% Not Met	92.85% Met	71.42% Met	28.57% Not Met	21.42% Met	35.71% Met
2012	100% Met	92.85% Met	64.28% Met	57.14% Met	7.14% Not Met	35.71% Met
2013	100% Met	100% Met	53.30% Met	40.00% Met	6.60% Not Met	20.00% Met

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YEAR	FACULTY BENCHMARKS - SERVICE					FACULTY BENCHMARK - PRACTICE
	#7	#8	#8.1	#8.2	#9	#10
	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	n/a	n/a			78.57% Met	71.42% Met
2011	100% Met	71.42% Not Met			85.71% Met	64.28% Met
2012	100% Met	85.71% Met			85.71% Met	57.14% Not Met
2013	100% Met	80.00% Met	92.85% Not Met		86.60% Met	60.00% Met

Related Items

There are no related items.

**Section IV.a
Brief Description
Judgment**

Meets Standards Does Not Meet Standards Not Applicable

Narrative

**Section IV.b
Comparative data**

Enrollment, CHP, majors, graduation rates, expenditures, trends, etc.

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Credit Hour Production						
	Summer 2013		Fall 2013		Spring 2014	
	UG	GR	UG	GR	UG	GR
Nursing	121	82	1,060	321	915	602

Enrollment by Major						
	Summer 2013		Fall 2013		Spring 2014	
	UG	GR	UG	GR	UG	GR
Nursing	18	7	97	36	72	38
Nursing Practice	0	0	0	7	0	6
Total	18	7	97	43	72	44

2013-14 Graduates	
Nursing	
BSN	33
MSN	16
DNP	0

Trend Data_2010-14_Robert E Smith School of Nursing-RESSON

Sources

 Trend Data_2010-14_Robert E Smith School of Nursing-RESSON

Section IV.c

Diversity Compliance Initiatives and Progress

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Section IV.d

Economic Development Initiatives and Progress

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Section IV.e

Grants, Contracts, Partnerships, Other Accomplishments

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Section IV.f

Service Learning Data

List of projects, number of students involved, total service learning hours, number of classes, faculty involved, accomplishments.

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Section IV.g

Strategic Plan Data

Only use this section if you have strategic plan info to report that is not covered in other areas of your report

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Section IV.h

Committees Reporting To Unit

Each unit includes in the annual plan and report a list of the committees whose work impacts that unit or any other aspect of the university; along with the list will be a notation documenting the repository location of the committee files and records. Committee actions affecting the unit's goals may be noted in other applicable sections of the annual reports. Not required to be included in the unit's annual plan and report, but required to be maintained in the repository location, will be a committee file that includes, for each committee: Mission and by-laws, Membership, Process, Minutes.

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Section V.a

Faculty (Accomplishments)

Noteworthy activities and accomplishments

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Section V.b

Staff (Accomplishments)

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Section V.c

Administrators (accomplishments)

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Lizabeth Carlson, DNS, RN

Robert E. Smith School of Nursing

Dean and Professor

State (Mississippi) Grassroots Liaison of AACN's Government Affairs Committee, August 1, 2007-Present

Vice Chair of Chair of Mississippi Deans and Directors of Schools of Nursing, June 2014-Present

Chair of Chair of Mississippi Deans and Directors of Schools of Nursing Bylaws Committee, June 2014-Present

Chair of Mississippi Deans and Directors of Schools of Nursing
Scholarship Committee, June 2012-June 2014

Section V.d

Position(s) requested/replaced with justification

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Section V.e

Recommended Change(s) of Status

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Section VI.a

Changes Made in the Past Year

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

Section VI.b

Recommended Changes for the Coming Year

Judgment

Meets Standards Does Not Meet Standards Not Applicable

Narrative

2013

Number of Candidates Taking NCLEX Examination and Percent Passing, by Type of Candidate

RN	Jan-Mar 2013 ³		Apr-Jun 2013 ⁵		Jul-Sep 2013		Oct-Dec 2013		Year to Date Total	
	# ¹	% ²	#	%	#	%	#	%	#	%
First Time, US Educated										
<i>Diploma</i>	741	89.74%	478	80.13%	1,354	84.05%	267	68.54%	2,840	83.42%
<i>Baccalaureate Degree</i>	16,565	91.75%	20,248	85.82%	23,712	82.07%	4,881	75.31%	65,406	85.18%
<i>Associate Degree</i>	23,630	89.44%	27,081	80.95%	28,655	79.56%	7,406	64.88%	86,772	81.43%
<i>Invalid or Special Program Codes</i>	43	60.47%	11	63.64%	14	85.71%	12	58.33%	80	65.00%
Total First Time, US Educated	40,979	90.35%	47,818	83.00%	53,735	80.78%	12,566	69.00%	155,098	83.04%
Repeat, US Educated	5,232	48.59%	5,817	29.91%	12,653	57.05%	11,424	45.12%	35,126	47.42%
First Time, Internationally Educated	1,930	35.23%	1,915	29.66%	1,959	28.33%	2,099	29.35%	7,903	30.61%
Repeat, Internationally Educated	2,950	19.29%	3,008	12.17%	3,103	12.67%	3,362	16.36%	12,423	15.12%
All Candidates	51,091	79.89%	58,558	72.34%	71,450	72.18%	29,451	50.90%	210,550	71.12%

PN	Jan-Mar 2013 ⁴		Apr-Jun 2013		Jul-Sep 2013		Oct-Dec 2013		Year to Date Total	
	#	%	#	%	#	%	#	%	#	%
First Time, US Educated	13,650	84.15%	12,208	83.18%	20,696	87.83%	12,020	81.14%	58,574	84.63%
Repeat, US Educated	3,514	36.80%	3,953	34.68%	3,642	34.93%	3,842	36.02%	14,951	35.58%
First Time, Internationally Educated	208	52.40%	252	46.43%	277	43.68%	218	53.21%	955	48.48%
Repeat, Internationally Educated	193	15.54%	199	15.08%	209	15.79%	199	21.11%	800	16.88%
All Candidates	17,565	73.55%	16,612	70.27%	24,824	78.97%	16,279	69.38%	75,280	73.71%

¹ The # symbol denotes the number of candidates who took the exam.

² The % symbol denotes the percentage of candidates that passed the exam.

³ The RN Passing Standard is -0.16 logits.

⁴ The PN Passing Standard was -0.27 logits.

⁵ The RN Passing Standard was 0.00 logits.

NONPF CORE COMPETENCIES for ALL NURSE PRACTITIONERS

CORE: SCIENTIFIC FOUNDATION COMPETENCIES	NUR 601	NUR 602	NUR 603	NUR 604	NUR 605	NUR 606	NUR 620	NUR 624	NUR 625	NUR 630	NUR 631	NUR 634	NUR 635	NUR 638	NUR 639	NUR 680	NUR 687	NUR 701	NUR 704	NUR 706	NUR 708	NUR 710	NUR 720	NUR 722	NUR 724	NUR 787	NUR 790	
1.Critically analyzes data and evidence for improving advanced nursing practice	X	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X		X	X						X	X
2.Integrates knowledge from the humanities and science within the context of nursing science	X	X	X		X	X	X		X	X	X	X	X	X	X	X	X	X		X							X	X
3.Translate research and other forms of knowledge to improve practice processes and outcomes	X		X			X	X			X	X	X	X	X	X	X	X	X		X	X						X	X
4.Develops new practice approaches based on the integration of research, theory, and practice knowledge	X					X				X			X		X	X	X	X		X			X				X	X
CORE: LEADERSHIP COMPETENCIES	NUR 601	NUR 602	NUR 603	NUR 604	NUR 605	NUR 606	NUR 620	NUR 624	NUR 625	NUR 630	NUR 631	NUR 634	NUR 635	NUR 638	NUR 639	NUR 680	NUR 687	NUR 701	NUR 704	NUR 706	NUR 708	NUR 710	NUR 720	NUR 722	NUR 724	NUR 787	NUR 790	
1.Assumes complex and advanced leadership roles to initiate and guide change							X									X							X				X	X
2.Providers leadership to foster collaboration with multiple stakeholders (e.g. patients, community, integrated health care teams, and policy makers) to improve health care							X				X			X		X							X				X	X
3.Demonstrates leadership that uses critical and reflective thinking							X			X	X	X	X	X	X	X							X				X	X
4.Advocates for improved access, quality and cost effective health care							X				X			X		X							X				X	X

CORE: QUALITY COMPETENCIES	NUR 601	NUR 602	NUR 603	NUR 604	NUR 605	NUR 606	NUR 620	NUR 624	NUR 625	NUR 630	NUR 631	NUR 634	NUR 635	NUR 638	NUR 639	NUR 680	NUR 687	NUR 701	NUR 704	NUR 706	NUR 708	NUR 710	NUR 720	NUR 722	NUR 724	NUR 787	NUR 790
1. Uses best available evidence to continuously improve quality of clinical practice							X			X	X	X	X	X	X	X	X			X			X			X	X
2. Evaluates the relationships among access, cost, quality, and safety and their influence on health care							X	X		X			X		X	X							X			X	X
3. Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact the quality of health care							X									X							X			X	X
4. Applies skills in peer review to promote a culture of excellence					X		X	X		X	X	X	X	X	X	X	X			X			X			X	X
5. Anticipates variations in practice and is proactive in implementing interventions to ensure quality					X		X			X			X		X	X							X			X	X
CORE: PRACTICE INQUIRY COMPETENCIES	NUR 601	NUR 602	NUR 603	NUR 604	NUR 605	NUR 606	NUR 620	NUR 624	NUR 625	NUR 630	NUR 631	NUR 634	NUR 635	NUR 638	NUR 639	NUR 680	NUR 687	NUR 701	NUR 704	NUR 706	NUR 708	NUR 710	NUR 720	NUR 722	NUR 724	NUR 787	NUR 790
1. Provides leadership in the translation of new knowledge into practice										X	X	X	X	X	X	X	X			X						X	X
2. Generates knowledge from clinical practice to improve practice and patient outcomes										X	X	X	X	X	X	X	X			X						X	X
3. Applies clinical investigative skills to improve health outcomes					X			X		X	X	X	X	X	X	X	X			X	X					X	X
4. Leads practice inquiry, individually or in partnership with others										X			X		X	X							X			X	X
5. Disseminates evidence from inquiry to diverse audiences using multiple modalities																X	X									X	X
6. Analyzes clinical guidelines for individualized application into practice		X			X				X	X	X	X	X	X	X	X	X			X						X	X

CORE: TECHNOLOGY AND INFORMATION LITERACY COMPETENCIES	NUR 601	NUR 602	NUR 603	NUR 604	NUR 605	NUR 606	NUR 620	NUR 624	NUR 625	NUR 630	NUR 631	NUR 634	NUR 635	NUR 638	NUR 639	NUR 680	NUR 687	NUR 701	NUR 704	NUR 706	NUR 708	NUR 710	NUR 720	NUR 722	NUR 724	NUR 787	NUR 790	
1.Integrates appropriate technologies for knowledge management to improve health care		X							X	X	X	X	X	X	X	X	X			X	X						X	X
2.Translates technical and scientific health information appropriate for various users' needs										X	X	X	X	X	X	X					X						X	X
3.Assesses the patient's and caregiver's educational needs to provide effective, personalized health care					X					X	X	X	X	X	X	X											X	X
4.Coaches the patient and caregiver for positive behavioral change		X							X	X	X	X	X	X	X	X											X	X
5.Demonstrates information literacy skills in complex decision making										X	X	X	X	X	X	X											X	X
6.Contributes to the design of clinical information systems that promote safe, quality and cost effective care																X							X				X	X
7.Uses technology systems that capture data on variables for the evaluation of nursing care		X	X						X	X			X		X	X	X			X	X						X	X
CORE: POLICY COMPETENCIES	NUR 601	NUR 602	NUR 603	NUR 604	NUR 605	NUR 606	NUR 620	NUR 624	NUR 625	NUR 630	NUR 631	NUR 634	NUR 635	NUR 638	NUR 639	NUR 680	NUR 687	NUR 701	NUR 704	NUR 706	NUR 708	NUR 710	NUR 720	NUR 722	NUR 724	NUR 787	NUR 790	
1.Demonstrates an understanding of the interdependence of policy and practice							X				X			X		X			X								X	X
2.Advocates for ethical policies that promote access, equity, quality, and cost																X		X	X								X	X
3.Analyzes ethical, legal, and social factors influencing policy development							X									X		X	X								X	X
4.Contributes in the development of health policy																X			X				X				X	X
5.Analyzes the implications of health policy across disciplines							X				X			X		X			X								X	X
6.Evaluates the impact of globalization on health care policy development							X				X			X		X		X	X								X	X
CORE: HEALTH DELIVERY SYSTEM COMPETENCIES	NUR 601	NUR 602	NUR 603	NUR 604	NUR 605	NUR 606	NUR 620	NUR 624	NUR 625	NUR 630	NUR 631	NUR 634	NUR 635	NUR 638	NUR 639	NUR 680	NUR 687	NUR 701	NUR 704	NUR 706	NUR 708	NUR 710	NUR 720	NUR 722	NUR 724	NUR 787	NUR 790	
1.Applies knowledge of organizational practices and complex systems to improve health care delivery																X							X				X	X
2.Effects health care change																X							X				X	X

- I. 1 Year BSN graduates – Fall 2012: Total number graduated = 27
In December 2012, twenty-seven (27) BSN students graduated.
Electronic surveys were sent to graduates and resulted in a return
of 7 (25.9%) surveys.

II. Demographic Data:

- A. Age range
1. 23-26 = 3 (60%)
 2. 31-35 = 1 (20%)
 3. 36 and over = 1 (20%)
- B. Gender
1. Female = 5 (100%)
 2. Skipped Question = 2
- C. Ethnicity
1. Caucasian = 6 (100%)
 2. Skipped Question = 1
- D. State(s) where licensed
1. MS = 7 (100%)
- E. Employed
1. Registered Nurses = 7 (100%)
- F. Full-Time Employment
1. Yes = 7 (100%)
 2. NO = 0
- G. Place Employed
1. Hospital = 1 (100%)
- H. Primary Nursing Responsibility
1. Staff Nurse = 1 = (100%)
- I. Delta Employment
1. Yes = 5 (71.4%)
 2. No = 2 (28.6%)
- J. Further Education - Currently in school
1. Yes = 0
 2. No = 7 (100%)
- K. If you are not currently in school, do you plan to return to school?
1. Yes = 5 (71.4%)
 2. No = 2 (28.6%)
- L. Future Degree Plans
1. MSN Nurse Educator = 1 (16.7%)
 2. MSN Nurse Practitioner = 4 (66.7%)
 3. DNP = 1 (16.7%)
 4. Other = 1 (16.7%)
 5. Skipped Question = 1
- M. Highest Degree Currently Held
1. Bachelors = 5 (71.4%)
 2. Masters = 2 (28.6%)

III. Achievement of program outcomes

<i>BSN Program Outcomes</i>	<i>Mean</i>
<i>Apply nursing, natural, and behavioral science concepts to the practice of nursing.</i>	4.57
<i>Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care to diverse clients in a collaborative environment.</i>	4.71
<i>Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession.</i>	4.71
<i>Utilize research in the delivery of health care.</i>	4.57
<i>Advocate for improvement in healthcare through participation in professional and political processes.</i>	4.71
<i>Provide individualized nursing care that focuses on health promotion and disease and injury prevention.</i>	4.71
<i>Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach.</i>	4.71

IV. Achievement of BSN Program Purposes

<i>Purposes of the Program</i>	<i>Mean</i>
<i>Prepares nurses to function in the practice role as a BSN prepared registered nurse.</i>	4.43
<i>Prepares for continuous learning and advanced study.</i>	4.29

V. Quality of the BSN Program

<i>Items</i>	<i>Mean</i>
<i>Overall quality of education in the DSU School of Nursing</i>	4.43
<i>Overall quality of general education courses required as a pre-requisite to the program</i>	4.57
<i>Overall quality of web-based or web-enhanced courses</i>	4.43
<i>Overall quality of required clinical practice sites utilized during your attendance at DSU</i>	4.29
<i>Overall quality of your clinical experience during your attendance at DSU</i>	4.57
<i>Overall quality of feedback from clinical preceptors during your attendance at DSU</i>	4.71
<i>Overall quality of advisement while in the nursing program</i>	4.29
<i>Overall BSN faculty accessibility while you were in the DSU program</i>	4.86
<i>Overall helpfulness of faculty while you were in the BSN program</i>	4.57
<i>Overall faculty level of expertise while you were in the BSN program</i>	4.86
<i>Overall rating of classroom facilities/equipment while you were on campus at DSU</i>	4.71
<i>Overall Quality of library services provided while you were attending DSU</i>	4.29
<i>Overall quality of Skills Lab</i>	4.57
<i>Overall quality of Simulation Lab</i>	4.57
<i>Overall quality Computer Lab</i>	4.57
<i>Overall quality of instructional materials, resources, and skills lab</i>	4.57

VI. Would you recommend the Delta State University BSN program to a friend?

- Yes = 5 (83.3%)
- No = 1 (16.7%)
- Skipped Question – 1 (16.7%)

VII. Strengths of the BSN program at DSU in descending order

<i>Strengths</i>	
Teaching expertise	100%
Faculty support	83.3%
Supportive Dean	83.3%
Quality of courses	66.7%
Library support/availability	50%
Quality of program advisement	50%
Web-based or web-enhanced format	50%
Flexibility of faculty	33.3%
Flexible classes	33.3%
Supportive COAP	33.3%
Library holdings	16.7%
No opinion	0%
Other, please specify	0%
Recruitment efforts	0%
Technical support	0%

VIII. Reported greatest needs of improvement in descending order.

<i>Areas with the Greatest Need for Improvement</i>	
Faculty support	16.7%
Flexibility of faculty	16.7%
Flexible classes	16.7%
Library holdings	16.7%
Library support/availability	16.7%
No opinion	16.7%
Recruitment efforts	16.7%
Technical support	16.7%
Web-based or web-enhanced format	16.7%
Other, please specify	0%
Quality of courses	0%
Quality of program advisement	0%
Supportive COAP	0%
Supportive Dean	0%
Teaching expertise	0%

A. Comments: none

IX. General Summary:

The results from the 2010 BSN graduates netted a 25.9% return rate. Three (60%) respondents were 23-26 years old. One (20%) respondent was 31-35 years of age. One (20%) respondent was 36 years of age or older. All seven (100%) respondents were employed full-time in a hospital setting as a staff nurse. None of the respondents are currently in school, but five (71.4%) plan to complete a higher degree in the future. The ratings on each program outcome were 4.57 or better. Mean scores for accomplishment of the purposes of the program were 4.29 or better. Quality of program items all received mean scores of 4.29 or better. Teaching expertise, faculty support, and supportive Dean were identified as strengths of the program. Faculty support, flexibility of faculty, flexible classes, library holdings, library support/availability, no opinion, recruitment efforts, technical support, and web-based or web-enhanced format were identified as the greatest need for improvements scoring only a 16.7% each. Five respondents (83.3%) indicated they would recommend the program to a friend.

Delta State University
School of Nursing
3 Year RN/BSN Alumni Survey 2013

I. RN/BSN Alumni:

- A. 3 year RN/BSN results—graduated May 2010; Total number graduated = 19.

In May 2010, nineteen (19) RN/BSN students graduated. Electronic surveys were sent to all graduates and resulted in a return of 5 (26.1%) surveys.

B. Demographic Data:

1. Age range
 - a. 31 to 35 - 1 (20%)
 - b. 36 & over 4 (80%)
2. Gender:
 - a. Female 4 (80%)
 - b. Male 1 (20%)
3. Ethnicity
 - a. Caucasian 4 (80%)
 - b. African American 1 (20%)
4. State(s) where licensed
 - a. GA – 1 (20%)
 - b. MS – 4 (80%)
 - c. Other – 1(20%)
5. Employed Full-Time:
 - a. No – 0 (0.0%)
 - b. Yes - 5 (100%)
6. Working as a Registered Nurse
 - a. No – 1 (20%)
 - b. Yes - 4 (80%)
7. Place employed
 - a. Hospital – 2 (40%)
 - b. Other – 1 (20%)
 - c. Rural Health Clinic – 2 (40%)
8. Primary nursing responsibility:
 - a. Nurse Manager – 1 (20%)
 - b. Nurse Practitioner – 2 (40%)
 - c. Staff Nurse – 2 (40%)
9. Serve Residents of the Mississippi Delta
 - a. No – 1 (20%)
 - b. Yes – 4 (80%)

C. Further Education

1. Currently Enrolled
 - a. No - 4 (80%)
 - b. Yes - 1 (20%)
2. Highest Degree Currently Held
 - a. Bachelor – 3 (60%)
 - b. Master – 2 (40%)

Delta State University
 School of Nursing
 3 Year RN/BSN Alumni Survey 2013

- c. Doctorate – 0 (0.0%)
- 3. Plan to Return
 - a. No – 1 (20%)
 - b. Yes – 4 (80%)
 - i. MSN – Educator - 1 (25%)
 - ii. MSN – Nurse Practitioner – 3 (75%)
 - iii. DNP – 1 (25%)

D. Achievement of program outcomes:

RN-BSN Program Outcomes	Mean
Apply nursing, natural, and behavioral science concept to the practice of nursing.	3.80
Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care in a collaborative environment	3.80
Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession.	3.80
Utilize research in the delivery of health care	3.80
Advocate for the improvement in healthcare through participation in professional and political processes	3.80
Provide individualized nursing care that focuses on health promotion and disease and injury prevention	3.80
Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach	3.80

E. Achievement of BSN Program Purposes:

<i>Purposes of the Program</i>	<i>Mean</i>
<i>Prepares nurses to function in the practice role as a BSN prepared registered Nurse.</i>	4.8
<i>Prepares for continuous learning and advanced study</i>	4.6

F. Quality of the BSN Program:

<i>Items</i>	<i>Mean</i>
<i>Overall quality of BSN education at DSU SON</i>	3.6
<i>Overall quality of general education courses required as a pre requisite to the program</i>	3.75

Delta State University
 School of Nursing
 3 Year RN/BSN Alumni Survey 2013

<i>Items</i>	<i>Mean</i>
<i>Overall quality of required Clinical practice sites utilized during your attendance at DSU</i>	3.8
<i>Overall BSN faculty accessibility while you were in the DSU program</i>	3.6
<i>Overall helpfulness of faculty while you were in the BSN program</i>	3.6
<i>Overall faculty level of expertise while you were in the BSN program</i>	3.6
<i>Overall rating of Classroom facilities/equipment while you were on campus at DSU</i>	3.8
<i>Overall Quality of library services provided while you were attending DSU</i>	4.5
<i>Overall quality of on-line courses that you took while in the BSN program</i>	3.8
<i>Overall quality of Feedback from clinical preceptors</i>	3.6
<i>Overall quality of clinical experience that you received during your course of study</i>	3.8
<i>Overall rating of advisement while you attended the BSN or RN/BSN program</i>	3.6
<i>Overall Instructional materials</i>	3.6
<i>Overall rating of classroom facilities/equipment</i>	3.8
<i>Overall rating of skills lab</i>	4.67
<i>Overall rating of Simulation lab</i>	3.75
<i>Overall rating of computer lab</i>	4.67

G. Indicated they would recommend RN/BSN Program

1. No – 1 (20%)
2. Yes – 4 (80%)

H. Strengths of the BSN or RN/BSN program at DSU

1. Flexible Classes – 100%
2. Online Format – 80%
3. Faculty Support – 60%
4. Quality of Courses – 60%
5. Teaching Expertise – 60%
6. Dean Support – 40%
7. Flexibility of Faculty – 40%
8. Quality of Program Advisement – 40%

Delta State University
School of Nursing
3 Year RN/BSN Alumni Survey 2013

- 9. Technical Support – 40%
- 10. Chair of Academic Programs (COAP) – 20%

I. Weaknesses/Areas to Improve:

- 1. No Opinion – 40%
- 2. Faculty Support – 20%
- 3. Flexibility of Faculty- 20%
- 4. Library Holdings – 20%
- 5. Library Support/availability – 20%
- 6. Recruitment Efforts – 20%
- 7. Teaching Expertise – 20%
- 8. Other – 20% (No comment)

J. Greatest Need for Improvement

- 1. Attitude of Faculty

II. General Summary:

The results of the 3 Year RN/BSN 2013 Alumni Survey netted a 26.1% return rate. Four respondents were Caucasian; one was African American. Four were female; one was male. All were employed full time with four employed as a registered nurse (RN). Two were employed in a hospital setting, two were employed in a rural health clinic, and one employed as other with no comment for clarification. One of the respondents was currently enrolled in degree seeking program and four respondents plan to complete a higher degree in the future. The ratings on each program outcome were 3.8 or better. Mean scores for accomplishment of the purposes of the program were all 4.6 or better as well. Quality of program items all received mean scores of 3.6 or better. Flexible classes, online format, faculty support, quality of courses, teaching expertise, Dean support, flexibility of faculty, quality of program advisement, technical support, and Chair of Academic Programs (COAP) were identified as strengths of the program. Weaknesses identified included faculty support, flexibility of faculty, library holdings, library support/availability, recruitment efforts, and teaching expertise. Attitude of the faculty was identified as the area of the greatest need of improvement. Four of the five respondents would recommend the RN/BSN program to a friend.

Standard III Course Audit Three Year Schedule

Year 1 = 2013

Year 2 = 2014

Year 3 = 2015

Course Number	Audit Year Cycle	Audit (Semester/Year)	AACN Essentials	ANA Scope & Standards	NOPNF guidelines (NP Specialty Courses ONLY)	Mission	Program Outcomes	Course Outcomes Reflect Program Outcomes	Course Description	Topic Outline	Content Outcomes
NUR 724	Year 3	Fall 2015									
NUR 787	Year 1	Fall 2013									
NUR 790	Year 2	Spring 2014									

Table References: Course Syllabi, RESSON Undergraduate and Graduate Handbooks

Delta State University
 Robert E. School of Nursing
 Program Effectiveness Committee
 2012 Undergraduate BSN Program Satisfaction Survey

Nineteen (19) undergraduate BSN students completed the BSN Program in December 2013. Four (4) students completed the Undergraduate BSN Program Satisfaction Survey electronically for a 21.05% response rate. The results are compiled and summarized.

1. Purpose of the Program

BSN Purpose of the Program	Mean
Prepares for professional nursing practice as a generalist	5.0
Prepares for continuous learning and advanced study	5.0

2. Baccalaureate Program Outcomes

BSN Program Outcomes	Mean
Apply nursing, natural and behavioral science concepts to the practice of nursing	5.0
Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care to diverse clients in a collaborative environment	5.0
Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession	5.0
Utilize research in the delivery of health care	5.0
Advocate for improvement in healthcare through participation in professional and political processes	5.0
Provide individualized nursing care that focuses on health promotion and disease and injury prevention	5.0
Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach	5.0

3. Quality of Instruction

Course	Mean
NUR 302 Fundamentals of Client Care	5.0
NUR 303 Health Assessment	5.0
NUR 304 Pharmacology	5.0
NUR 305 Nursing the Adult Client I	5.0
NUR 306 Nursing the Adult Client II	5.0
NUR 307 Mental Health/Psychiatric Nursing	5.0
NUR 309 Nursing Research	3.5
NUR 312 Basic Pathophysiology	3.75
NUR 314 Health Policy and Ethical Decision Making	5.0
NUR 401 Maternity Nursing	4.75
NUR 402 Management of Client Care	5.0
NUR 403 Community Health Nursing	4.25

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 2012 Undergraduate BSN Program Satisfaction Survey

NUR 405 Pediatric Nursing	4.75
NUR 408 Nursing Synthesis	5.0
NUR 492 EKG Interpretation	5.0

4. Clinical and Practicum Quality

Course	Mean
NUR 332 Fundamental of Client Care Practicum	5.0
NUR 333 Health Assessment Practicum	5.0
NUR 335 Nursing the Adult Client I Practicum	5.0
NUR 336 Nursing the Adult Client II Practicum	5.0
NUR 337 Maternal Health/Psychiatric Nursing Practicum	5.0
NUR 441 Maternity Nursing Practicum	5.0
NUR 442 Management of Client Care Practicum	5.0
NUR 443 Community Health Nursing Practicum	4.75
NUR 445 Pediatric Nursing Practicum	5.0
NUR 406 Nursing Preceptorship	5.0

5. Quality of Physical Resources and Facility

Rate the Quality of the Following	Mean
Audiovisual equipment (TV/VCR, SMART classroom capabilities, video camera, etc.)	4.5
Skills lab equipment and supplies	4.5
Computer lab software and hardware programs	4.75
Simulation equipment and supplies	4.5
Electronic equipment for student use (copier, vending machines, refrigerator, microwave, etc.)	4.75
Academic support lab	5.0
Writing center	4.75
Technology Programs (Turning Point, Typhon, Wimba, Blackboard)	4.75
IT support	4.75
Library support	5.00

Comment(s):

“The SIMS lab and Skills labs are exceptional, but often supplies aren’t available.”

Delta State University
 Robert E. School of Nursing
 Program Effectiveness Committee
 2012 Undergraduate BSN Program Satisfaction Survey

6. Overall satisfaction indicators:

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

4 = Yes (100%)

0 = No

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

4 = Yes (100%)

0 = No

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

Strengths	
Faculty support	100%
Preparation for licensure	100%
Quality of courses	100%
Staff support	100%
Supportive COAP	100%
Supportive dean	100%
Teaching expertise	100%
Flexibility of faculty	66.67%
Quality of program advisement	66.67%
Web-enhanced format	66.67%
Simulation lab equipment & supplies	33.33%
Skills lab equipment & supplies	33.33%
Technical support	33.33%
Flexible classes	0%
Library holdings	0%
Library support/availability	0%
No opinion	0%
Other, please specify	0%
Recruitment efforts	0%

Delta State University
 Robert E. School of Nursing
 Program Effectiveness Committee
 2012 Undergraduate BSN Program Satisfaction Survey

8. Reported greatest needs of improvement in descending order.

Simulation lab equipment & supplies	66.67%
Skills lab equipment & supplies	66.67%
Flexibility of faculty	33.33%
Flexible classes	33.33%
Library holdings	33.33%
Library support/availability	33.33%
Quality of program advisement	33.33%
Recruitment efforts	33.33%
Web-enhanced format	33.33%
Technical support	33.33%
Faculty support	0%
No opinion	0%
Other, please specify	0%
Preparation for licensure	0%
Quality of courses	0%
Staff support	0%
Supportive COAP	0%
Supportive Dean	0%
Teaching expertise	0%

Comment(s)

“Allow supplies to be more available to students, especially since we are paying for them”

9. Summary

The data from the four (21.05%) undergraduate BSN students provided information that demonstrated they generally felt confident about program outcomes and were generally satisfied with courses, instructions, and resources. All (100%) of the respondents would not only recommend the program but also felt the environment was conducive to learning.

Faculty support, preparation for licensure, quality of courses, staff support, supportive COAP, supportive Dean, and teaching expertise are listed among the top strengths of the program. The area(s) with the greatest need of improvement were the simulation lab equipment and supplies and the skills lab equipment and supplies.

**Standard III - Table A, B
2013**

Standard III A: The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program’s mission and goals, and with the roles for which the program is preparing its graduates.

Standard III B: Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

Course Number	Audit (Semester/Year)	AACN Essentials	ANA Scope & Standards	NOPNF guidelines (NP Specialty Courses ONLY)	Mission	Program Outcomes	Course Outcomes Reflect PO. Utilized PO Reference numbers noted	Course Description	Topic Outline	Content Outcomes
BSN										
NUR 304	Spring 2013	N	Y	N/A	Y	Y	Y 1, 2, 3, 4, 6	Y	Y	N
NUR 314	Spring 2013	N	Y	N/A	Y	Y	Y 1, 3, 4, 5,	Y	N	N
NUR 302	Fall 2013	Reference statement in syllabus	Y	N/A	N	Y	Y 1,2,3, 4,5,6,7	Y	N	N
NUR 332	Fall 2013	Reference statement in syllabus	Y	N/A	N	Y	Y 1,2,3,5,6,7	Y	Y	N
RN_ BSN										
NUR 358	Summer 2013	N	Y	N/A	Y	Y	Y 1,3,4,5,7	Y	N	N
NUR 403	Fall 2013	Y	Y	N/A	N	Y	Y 1,2,3,4,5,6,7	Y	Y	N
NUR 443	Fall 2013	Y	Y	N/A	N	Y	Y 1,2,3,4,5,6,7	Y	Y	N
MSN										
NUR 605	Spring 2013	N	Y	N	Y	Y	N	Y	Y	N
NUR 617	Spring 2013	COURSE NOT OFFERED								
NUR	Spring 2013	COURSE NOT OFFERED								

**Standard III - Table A, B
2013**

Standard III A: The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program’s mission and goals, and with the roles for which the program is preparing its graduates.

Standard III B: Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

Course Number	Audit (Semester/Year)	AACN Essentials	ANA Scope & Standards	NOPNF guidelines (NP Specialty Courses ONLY)	Mission	Program Outcomes	Course Outcomes Reflect PO. Utilized PO Reference numbers noted	Course Description	Topic Outline	Content Outcomes
618		COURSE NOT OFFERED								
NUR 622	Spring 2013	COURSE NOT OFFERED								
NUR 652	Spring 2013	COURSE NOT OFFERED								
NUR 680	Spring 2013	N	N	N	Y	N	N	Y	Y	N
NUR 687/690	Spring 2013	N	N	Y	Y	Y	Y 1,3,4,5,7,8	Y	Y	N
NUR 613	Fall 2013	COURSE NOT OFFERED								
NUR 615	Fall 2013	COURSE NOT OFFERED								
NUR 634	Fall 2013	Y	Y	Y	N	Y	Y 1,3,4,5	Y	Y	N
NUR 635	Fall 2013	Y	Y	Y	Y	Y	Y 1,2,3,4,5,9	Y	Y	N
NUR 643	Fall 2013	COURSE NOT OFFERED								
NUR	Fall 2013	COURSE NOT OFFERED								

**Standard III - Table A, B
2013**

Standard III A: The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program’s mission and goals, and with the roles for which the program is preparing its graduates.

Standard III B: Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

Course Number	Audit (Semester/Year)	AACN Essentials	ANA Scope & Standards	NOPNF guidelines (NP Specialty Courses ONLY)	Mission	Program Outcomes	Course Outcomes Reflect PO. Utilized PO Reference numbers noted	Course Description	Topic Outline	Content Outcomes
645										
DNP										
	Spring 2013	DNP courses were not offered during this term.								
	Summer 2013	DNP courses were not offered during this term.								
NUR 701	Fall 2013	Y	Y	Y	N	Y	Y 1,6,7	Y	Y	N
NUR 706	Fall 2013	Y	Y	Y	N	Y	Y 1,2,4,5,7	Y	Y	Y
NUR 710	Fall 2013	Y	Y	Y	N	Y	Y 1,2,4,5,7	Y	Y	N
NUR 722	Fall 2013	COURSE NOT OFFERED								
NUR 787	Fall 2013	COURSE NOT OFFERED								

Table References: Course Syllabi, RESSON Undergraduate and Graduate Handbooks

**Standard III - Table A, B
2013**

Standard III A: The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program’s mission and goals, and with the roles for which the program is preparing its graduates.

Standard III B: Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

SUMMARY STANDARD III – Table A

LEVEL	NUMBER AUDITED	LINKED TO COURSE OUTCOMES	YES	NO	TOTAL PERCENTAGE COMPLIANT
BSN	4	ESSENTIALS	2 <small>(in syllabus but not linked to PO)</small>	2	50%
		PROGRAM OUTCOMES	6	0	100%
RN_BSN	3	ESSENTIALS	2	1	66.6%
		PROGRAM OUTCOMES	3	0	100%
MSN	5/5	ESSENTIALS	3	2	60%
		PROGRAM OUTCOMES	5	0	100%
DNP	3/3	ESSENTIALS	3	0	100%
		PROGRAM OUTCOMES	3	0	100%

Fifteen (15) course syllabi were audited during the spring, summer, and fall semesters of 2013. The linking of 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.

**Standard III - Table A, B
2013**

Standard III A: The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program’s mission and goals, and with the roles for which the program is preparing its graduates.

Standard III B: Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

SUMMARY STANDARD III – Table B

LEVEL	NUMBER AUDITED	PROFESSIONAL STANDARDS & GUIDELINES LINKED TO COURSE ASSIGNMENTS	YES	NO	TOTAL PERCENTAGE COMPLIANT
BSN	4	STANDARDS	0	4	0%
		GUIDELINES	N/A	N/A	N/A
RN_BSN	3	STANDARDS	0	3	0%
		GUIDELINES	N/A	N/A	N/A
MSN	5	STANDARDS	0	5	0%
		GUIDELINES	0	5	0%
DNP	3	STANDARDS	1	2	33%
		GUIDELINES	1	2	33%

A total of **15** course syllabi were audited during the spring and fall semesters of 2013 for professional standards and guidelines utilized in courses. Some courses scheduled for audit were not offered. Therefore, no data is available for those courses.

Delta State University
Robert E. Smith School of Nursing
Program Effectiveness Committee
Advisory Council Employer Survey 2013 Report

Three (3) survey were completed by advisory council and employers in 2013 (n=3).

1. Surveys distribution includes (but not limited to) hospitals, home health care agencies, and other nursing services provided to the community (i.e. AirVac) one hundred percent (100%) of the respondents (n=3) was from hospitals.
2. Each facility provided description of the agency/facility as follows:
 - One facility identified their hospital provide care in the rehabilitation and Geri-psych units, as well as outpatient clinics for primary care, rural health, specialty clinics, and home health care and hospice agencies.
 - One facility identified their hospital provide care in the rehabilitation and Geri-psych units. Outpatient clinics were identified by no indication by category as to area of population served as with previous facility.
 - One facility identified their hospital as an acute care facility with no outpatient clinics or other type facilities/agencies.
3. Titles/positions identified on the survey ranged from CNO to the category of 'other'. Of the respondents, the total percentage (100%) surveyed held the position of nurse recruiter category. One respondent held the position of HR Assistant in addition to the position of nurse recruiter.
4. Assessment of agency size inferred from the number of nurses employed show the following: Each agency (100%) employed 100 or more nurses in their agency/facility.
5. Number of DSU graduates employed by these agencies was varied. The percentage reported from each agency (100%) employed 11–30 of our graduates.
6. Numbers of RN vacancies indicated from the responding agencies 67% had 11-30 vacancies and 33% indicated 31-50 vacancies.
7. Highest vacancy areas, representing 67%, were in the Med/Surgical area, 33% high vacancy areas identified were ICU/CCU, Obstetrics, Ambulatory Care, Surgery, and Emergency Department.

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

ATTRIBUTES	Mean Rating	Response Rating
Dependable	5	100%
Accountable	5	100%
Leadership Skills	5	100%
Knowledge Base	5	100%
Clinical Skills	5	100%
Communication Skills	5	100%
Critical Thinking Skills	5	100%
Caring	5	100%
Cultural Awareness/Diversity	5	100%

9. The respondents offered no recommendations for the DSU RESSON program.

10. There were no recommendations offered or additional comments.

- Mean Ratings of Program Outcomes

A. BSN Program Outcomes (N=3)

Program Outcomes	
To what extent do DSU BSN graduates assist in meeting the needs of your agency/facility related in nursing?	4.67
a. Decrease number of RN vacancies	4.67
b. Functions in leadership roles	4.67
c. Collaborates and partners with inter-professional teams	4.67
d. Mentor for nursing staff	4.67
e. Patient advocate	4.67
f. Other (specify) _____	4.67
(1) Apply nursing, natural, and behavioral science concepts to practice	4.67
(2) Utilize critical thinking, communication, and therapeutic nursing interventions within the nursing process	4.67
(3) Practice leadership as self	4.67

directed professional accountable to self, society, and the evolving nursing profession	
(4) Participate in research/evidence-based practice to enhance health care delivery	4.67
(5) Improve healthcare delivery through interdisciplinary collaboration, coordination, and consultation	4.67
(6) Provide individualized nursing care that focuses on health promotion and prevention	4.67
(7) Apply information and patient care technology to improve healthcare delivery	4.67

B. MSN Program Outcomes (N=1)

Program Outcome	Mean Rating	Response Rating
To what extent do DSU MSN graduates assist in meeting the needs of your agency/facility related in nursing?	5	100%
How do DSU MSN graduates assist in meeting the needs of your agency/facility related to nursing:		
a. Decrease number of RN vacancies	5	100%
b. Functions in leadership roles	5	100%
c. Collaborates and partners with inter-professional teams	5	100%
d. Mentor for nursing staff	5	100%
e. Patient advocate	5	100%
f. Other (specify) _____	No response	
(1) Integrate nursing and related sciences to improve health outcomes	5	100%
(2) Apply leadership skills to improve healthcare delivery and outcomes	5	100%
(3) Improves healthcare delivery	5	100%

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

The survey response is low. Respondents were the employers who attended the Nurse Recruitment Day, 9/12/13.

FACULTY BENCHMARKS 2013

#	DESCRIPTION	MET	NOT MET	COMMENT
1	100% of nursing faculty attain at least 10 contact hours annually	MET 100%		<ul style="list-style-type: none"> 14/14 (100%) faculty met or exceeded 10 contact hours during 2013 Total contact hours = 403.1 Average contact hours per faculty = 28.79
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	MET 100%		<ul style="list-style-type: none"> 15/15 (100%) faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2013
3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	MET 53.3%		<ul style="list-style-type: none"> 8/15 (53.3%) faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level	MET 40.0%		<ul style="list-style-type: none"> 6/15 faculty presented during 2012 <p>Oral Presentations:</p> <ul style="list-style-type: none"> International - 0 National - 0 Regional - 0 State - 2 Local - 3 <p>Poster Presentations:</p> <ul style="list-style-type: none"> International - 0 National - 0 Regional - 0 State - 7 Local - 0
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor		NOT MET 6.6%	<ul style="list-style-type: none"> 1/15 (6.6%) faculty Reviewer for 7 chapters in a book Author of two (2) chapters submitted in 2013 and will be published in 2014
6	10% of nursing faculty will submit a grant or serve as a grant reviewer	MET 20.0%		<ul style="list-style-type: none"> 3/15 (20.0%) faculty submitted or was awarded a grant and/or was a grant reviewer Established Grants continued – 1 – 3rd year \$20,000 New Grants submitted – 3 Grants awarded 1 - \$1,000 – one year grant award 1 - \$1,574,546 – three year grant award
7	100% of RESSON faculty serve on three or more Robert E Smith School of Nursing committees	MET 100%		<ul style="list-style-type: none"> 15/15 (100%) faculty serve on three or more Robert E Smith School of Nursing committees
8	75% of RESSON faculty serve on one or more University committee, council, taskforce or other appointed/elected positions	MET 80.0%		<ul style="list-style-type: none"> 12/15 (80.0%) faculty serve on one or more University committee, council, taskforce, or other appointed/elected position
8.1 New 2013	100% of nursing faculty participate in two or more recruitment events annually		NOT MET 92.85%	<ul style="list-style-type: none"> 13/14 (92.85%) nursing faculty participated in two or more recruitment events in 2013 Faculty participated in a total of

				33 recruitment events during 2013
8.2	100% of nursing faculty participate in academic advisement each semester for students enrolled in programs and for students pursuing enrollment in a nursing program			<ul style="list-style-type: none"> All faculty members participated in spring and fall 2013 early registration and as needed by individual students.
9	60% of faculty will participate in community services	MET 86.6%		<ul style="list-style-type: none"> 13/15 (86.6%) faculty participated in community services Faculty participated in a total of 45 community events
10	60% of faculty will engage in faculty practice to maintain nursing competency	MET 60.0%		<ul style="list-style-type: none"> 9/15 faculty engaged in practice during 2013

FACULTY BENCHMARKS 2010

#	DESCRIPTION	MET	NOT MET	COMMENT	RECOMMENDATION
1	100% of nursing faculty will attain at least 10 CE units annually	X 100%		<ul style="list-style-type: none"> 14/14 faculty met or exceeded 10 contact hours during 2010 Total contact hours = 350.76 Average contact hours per faculty = 25.05 	<ol style="list-style-type: none"> 100% of nursing faculty will attain a minimum of 10 contact hours (IHL standard)
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester		X 71.42%	<ul style="list-style-type: none"> 10/14 faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2010 	<ol style="list-style-type: none"> Clarify whether evaluations are DSU or RESSON <ul style="list-style-type: none"> Recommendation: All faculty report on RESSON evaluations
3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	X 71.42%		<ul style="list-style-type: none"> 10/14 faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach 	<ol style="list-style-type: none"> Clarify: Did faculty conduct the activity or just taught in the course where simulation was incorporated? <ul style="list-style-type: none"> Recommendation: Include on the benchmark only if faculty assisted with/conducted the activity during their assigned section of the course
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level		X 35.71%	<ul style="list-style-type: none"> 5/14 faculty presented <ul style="list-style-type: none"> International 5 National 4 Regional 3 State 	<ol style="list-style-type: none"> Clarify: Presentations type - research findings, peer-reviewed, etc. <ul style="list-style-type: none"> Recommendation: Reword benchmark based on DSU tenure policy Identify type of presentations in benchmark – poster, oral, etc. Clarify: If faculty present at non-peer reviewed events where does this go in the portfolio and annual evaluation?
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor		X 7.14%	<ul style="list-style-type: none"> 1/14 faculty was published in a non-peer reviewed journal 	<ol style="list-style-type: none"> Clarify: Base this benchmark from tenure policy also. Does submitting for publication count as scholarship or does the article have to be published? Clarify: If faculty publish in a non-peer reviewed journal/book/etc where does this go in the portfolio and annual evaluation?
6	10% of nursing faculty will submit a grant or serve as a grant reviewer	X 28.57%		<ul style="list-style-type: none"> 4/14 faculty submitted or was awarded a grant and/or was a grant reviewer 6 grants submitted 5 grants awarded for a total of \$159,551 2 grants reviewed 	<ol style="list-style-type: none"> Clarify: If a grant is submitted but not awarded does this meet the benchmark? Clarify: What is considered a grant review? Does it have to be peer-reviewed?
7	60% of faculty will participate in community services	X 78.57%		<ul style="list-style-type: none"> 11/14 faculty participated in community services Faculty participated in a total of 45 events 	
8	60% of faculty will engage in faculty practice to maintain nursing competency	X 71.42%		<ul style="list-style-type: none"> 10/14 faculty engaged in practice 	<ol style="list-style-type: none"> Clarify: Does faculty have to report total hours practiced during the year? How much practice maintains competency? <ul style="list-style-type: none"> NPs are required to practice a minimum of 1500 hours during the 5 year certification period (minimum 300 hrs/year or 6 hours/week)

FACULTY BENCHMARKS 2011

#	DESCRIPTION	MET	NOT MET	COMMENT
1	100% of RESSON faculty will attain at least 10 contact hours annually		X 92.85%	<ul style="list-style-type: none"> 13/14 faculty met or exceeded 10 contact hours during 2011 Total contact hours = 287 Average contact hours per faculty = 20.5
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	X 92.85%		<ul style="list-style-type: none"> 13/14 faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2011
3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	X 71.42%		<ul style="list-style-type: none"> 10/14 faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level		X 28.57%	<ul style="list-style-type: none"> 4/14 faculty presented during 2012 <p>Oral Presentations:</p> <ul style="list-style-type: none"> International National - Regional State - 1 Local <p>Poster Presentations:</p> <ul style="list-style-type: none"> International National Regional - 1 State - 2 Local -
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor	X 21.42%		<ul style="list-style-type: none"> 3/14 faculty 2 were book reviewers 1 was published
6	10% of nursing faculty will submit a grant or serve as a grant reviewer	X 35.71%		<ul style="list-style-type: none"> 5/14 faculty submitted or was awarded a grant and/or was a grant reviewer grants submitted – 4 grants awarded for a total of 2 of 3 - \$43,572.00
7	100% of RESSON faculty serve on two or more RESSON standing committees	X 100%		<ul style="list-style-type: none"> 14/14 faculty serve on two or more RESSON standing committees
8	75% of RESSON faculty serve on one or more University committee, council, taskforce or other appointed/elected positions		X 71.42%	<ul style="list-style-type: none"> 10/14 faculty serve on one or more University committee, council, taskforce, or other appointed/elected position
9	60% of faculty will participate in community services	X 85.71%		<ul style="list-style-type: none"> 13/14 faculty participated in community services Faculty participated in a total of 44 events
10	60% of faculty will engage in faculty practice to maintain nursing competency	X 64.28%		<ul style="list-style-type: none"> 9/14 faculty engaged in practice

FACULTY BENCHMARKS 2012

#	DESCRIPTION	MET	NOT MET	COMMENT
1	100% of RESSON faculty will attain at least 10 contact hours annually	X 100%		<ul style="list-style-type: none"> 14/14 faculty met or exceeded 10 contact hours during 2012 Total contact hours = 481.71 Average contact hours per faculty = 34.40
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	X 92.85		<ul style="list-style-type: none"> 13/14 faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2012
3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	X 64.28		<ul style="list-style-type: none"> 9/14 faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level	X 57.14%		<ul style="list-style-type: none"> 8/14 faculty presented during 2012 <p>Oral Presentations:</p> <ul style="list-style-type: none"> International National - 3 Regional State - 1 Local <p>Poster Presentations:</p> <ul style="list-style-type: none"> International National Regional - 5 State Local - 1
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor		X 7.14%	<ul style="list-style-type: none"> 1/14 faculty was a peer-reviewer
6	10% of nursing faculty will submit a grant or serve as a grant reviewer	X 35.71%		<ul style="list-style-type: none"> 5/14 faculty submitted or was awarded a grant and/or was a grant reviewer grants submitted – 7 grants awarded for a total of 4 of 5 - \$22,550 1 unknown until summer grants reviewed
7	100% of RESSON faculty serve on two or more RESSON standing committees	X 100%		<ul style="list-style-type: none"> 14/14 faculty serve on two or more RESSON standing committees
8	75% of RESSON faculty serve on one or more University committee, council, taskforce or other appointed/elected positions	X 85.71%		<ul style="list-style-type: none"> 12/14 faculty serve on one or more University committee, council, taskforce, or other appointed/elected position
9	60% of faculty will participate in community services	X 85.71%		<ul style="list-style-type: none"> 12/14 faculty participated in community services during 2012 Faculty participated in a total of 57 events during 2012
10	60% of faculty will engage in faculty practice to maintain nursing competency		X 57.14%	<ul style="list-style-type: none"> 8/14 faculty engaged in practice during 2012

Should we add benchmarks related to advisement and recruitment?

FACULTY BENCHMARKS 2013

#	DESCRIPTION	MET	NOT MET	COMMENT
1	100% of nursing faculty attain at least 10 contact hours annually	MET 100%		<ul style="list-style-type: none"> 14/14 (100%) faculty met or exceeded 10 contact hours during 2013 Total contact hours = 403.1 Average contact hours per faculty = 28.79
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	MET 100%		<ul style="list-style-type: none"> 15/15 (100%) faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2013
3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	MET 53.3%		<ul style="list-style-type: none"> 8/15 (53.3%) faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level	MET 40.0%		<ul style="list-style-type: none"> 6/15 faculty presented during 2012 <p>Oral Presentations:</p> <ul style="list-style-type: none"> International - 0 National - 0 Regional - 0 State - 2 Local - 3 <p>Poster Presentations:</p> <ul style="list-style-type: none"> International - 0 National - 0 Regional - 0 State - 7 Local - 0
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor		NOT MET 6.6%	<ul style="list-style-type: none"> 1/15 (6.6%) faculty Reviewer for 7 chapters in a book Author of two (2) chapters submitted in 2013 and will be published in 2014
6	10% of nursing faculty will submit a grant or serve as a grant reviewer	MET 20.0%		<ul style="list-style-type: none"> 3/15 (20.0%) faculty submitted or was awarded a grant and/or was a grant reviewer Established Grants continued – 1 – 3rd year \$20,000 New Grants submitted – 3 Grants awarded 1 - \$1,000 – one year grant award 1 - \$1,574,546 – three year grant award
7	100% of RESSON faculty serve on three or more Robert E Smith School of Nursing committees	MET 100%		<ul style="list-style-type: none"> 15/15 (100%) faculty serve on three or more Robert E Smith School of Nursing committees
8	75% of RESSON faculty serve on one or more University committee, council, taskforce or other appointed/elected positions	MET 80.0%		<ul style="list-style-type: none"> 12/15 (80.0%) faculty serve on one or more University committee, council, taskforce, or other appointed/elected position
8.1 New 2013	100% of nursing faculty participate in two or more recruitment events annually		NOT MET 92.85%	<ul style="list-style-type: none"> 13/14 (92.85%) nursing faculty participated in two or more recruitment events in 2013 Faculty participated in a total of 33 recruitment events during 2013
8.2	100% of nursing faculty participate in academic advisement each semester for students enrolled in programs and for students pursuing enrollment in a nursing program			<ul style="list-style-type: none">
9	60% of faculty will participate in community services	MET 86.6%		<ul style="list-style-type: none"> 13/15 (86.6%) faculty participated in community services Faculty participated in a total of 45 community events
10	60% of faculty will engage in faculty practice to maintain nursing competency	MET 60.0%		<ul style="list-style-type: none"> 9/15 faculty engaged in practice during 2013

Delta State University
Robert E. Smith School of Nursing
Faculty Development Committee
Annual Report 2013

I. The faculty Development Committee met a total of 7 times during the 2013 calendar year.

II. Chair: CCcsare (Jan – May), LSeals (Aug- Jan)

Members:

L. Seals
L. Blessett
J. Wilson
J. Overstreet

III. Student Members

Mary Hodges,(S1),
Shauna Allen(SRI),
Bobbie Johnson (RN-BSN),
Natasha West (G II),
Jennifer Goss(G IV)

IV. Meeting dates: (See Attached Minutes)

February 13
March 20
April (Online e-mail discussion)
September 3
November 11
December 3

V. Committee Functions

A. Initiate programs to assist faculty in obtaining 10 contact hours required annually by the IHL

1. Actions: Conduct annual faculty survey to ascertain topics of interest for CEU
August survey indicated interest in technology training using Canvas and simulation.

2. Outcomes:

Spring: Elsevier & Hurst Review offerings explored.

1. Education offerings from Elsevier prohibitive and not followed up in fall.
a) Hurst review investigated and contacts with Mid Delta Community College, Phillips Community College, and Northwest Community College continued in Fall 2013. To be continued in 2014 with tentative date of January 21 set.

b) Faculty attending CEU offerings other than those at the report during Faculty Org meeting and include on Faculty Benchmark Form. CEU records are filled in employee's folder in Office of Dean.

3. Review of faculty CEU reports indicate all faculty met IHLCEU requirement for 2013

- B. Serve in an advisory capacity and make recommendations to the dean related to securing adequate funding for faculty development
 - 1 Action: The Chair consulted with the Dean related to resource allocation for faculty development.
 - 2 Outcomes: Each faculty member eligible for equal funding for CEU's within state.
- C. Plan and/or recommend continuing education offerings (CEU) for faculty and the community of interest (COI).
 - 1. Action: Disseminate information related to CEU offerings to the community of interest – 3 nursing programs contacted regarding interest in Hurst Review presentation in Spring 2014
 - 2. Outcomes: Bulletin Board in Faculty Lounge used to display information regarding CEU's
 - a) Programs offered at DSU -DSU Annual Research Day DSU 4 CEU's
 - b) Dr. Nicole House- E-Portfolio using Canvas September 27, 2013 – No CEU's
 - c) Robin Boules – Grant Writing Workshop Series –Not completed. Follow up 2014.
- D. Review the SON Faculty Handbook annually and recommend revisions to the Faculty Organization Committee
 - 1 Action: Faculty Handbook review to be completed Spring 2014.
 - 2 Outcome: Updated Faculty Handbook distributed by Vbingham, Fall 2013.

Respectfully submitted,

L. Seals, Chair May 2014

**Faculty Development Committee
Agenda/Minutes**

MEETING DATE	MARCH 20, 2013: CANCELLED
Meeting Time	0900-1000
Venue	Dr. Bingham's Office
Minutes Recorded by:	cCesare

ITEM 1	ATTENDEES (EXPECTED)	PRESENT	APOLOGIES
	Chair: Carrie Cesare		
	COAP: Dr. Bingham		
	Lacey Blessitt		
	Dr. Seals		
	Students: <ol style="list-style-type: none"> 1. JR 2: Mary Hodges 2. SR1: Shauna Allen 3. RNBSN: Bobbie Johnson 4. Grad2: Natasha West 5. Grad4: Jennifer Goss 		

ITEM 2	MINUTES PREVIOUS MEETING CONFIRMED:	CHANGES:
	(Circle) YES NO	
	Voted/seconded by: VB	

ITEM 3	PREVIOUS BUSINESS (held over from previous meeting)				
	ITEM no.	Description:	PROGRESS:	RESPONSIBLE BY:	Due by:
	(1)	Review tools to help new faculty orient themselves to effective teaching practices	In progress: reviewing tools which can help orient new faculty to effective teaching practices	lSeals: Elsevier	Seals reported via email Elsevier does have courses for faculty and speakers, cost \$3000.00. They work with Contemporary Forums offering "live conferences"

					<p>via webinar. Cost per CEU \$15.00 approximately; however, saves gas, food, and hotel expenses. Access is allowed via web for 2 years for attendee as well as 2 colleagues.</p>
	(2)	<p>Discuss educational offerings Simulation Training</p>	<p>In progress:</p> <ul style="list-style-type: none"> Request input from Simulation Lab Coordinator as to feasibility of this in the spring. Submit request to Continuing Education Department upon acceptance by the Simulation Lab Coordinator 	cCesare	<p>Request forms printed off. Need assistance from committee members in getting forms completed. Requesting input re: timeframe in which this can be offered due to the limited remaining time for this semester.</p>
	(3)	<p>Discuss previous recommendations for:</p> <ul style="list-style-type: none"> Day of Stress Relief: message therapy Faculty Fun Day: possible team building 	<p>In progress:</p> <ul style="list-style-type: none"> Suggested survey to determine what would be fun to each faculty member 	Committee members	<p>No progress made this semester on this issue.</p>

		workshop • Fundraiser: Faculty Development Funds			
	(4)	Discuss HURST review Faculty Workshop	In Progress: • HOST site: set-date? • Who responsible set-up? • What equipment needs to be set-up? • What food/snacks being offered?	cCesare/ISeals	Called and emailed Tara Lay (tara@hurstreview.com). No response or confirmation on date/time given (i.e. Monday, April 22 nd from 0800 to 1200). Requesting feedback from committee members via email re: questions posed here.

ITEM 4	AGENDA/ACTION ITEMS			
	ITEM no.	Description:	Responsible :	PLAN (with due date):
	(1)	Mentoring program: review previous orientation checklist.	Committee members	No progress on this issue at this time. No formal meeting time established in order to

				complete this project. Other than the orientation checklist is there a developed plan (not program)? If not, I need a copy of the orientation checklist so I can get a plan developed over the summer - VB
	(2)	Discuss any further up-coming educational offering	Committee members	ADD any here. Review of Faculty/Staff Handbook for revisions and additions (other than previously mentioned) -VB
	(3)	Discuss any revisions needed to Faculty/Student Handbook	vBingham Add Faculty Development Funds Fact Sheet as appendices to Faculty Handbook	In progress: Due end of April, 2013

Date/Time of Meeting: September 3, 2013/ 1300

Location of Meeting: Conference Room

Members Present: lSeals, Chair

lBlessitt, Secretary

jWilson

Members Apologies: vBingham, ex officio

jOverstreet

Guests: none

Reading and Approval of Minutes: n/a

Agenda Item #1: Goals for 2013

A. Review faculty development goals in Faculty Handbook

B. Set target goals for development 2013-2014.

- Discussion: New handbooks have not been dispersed by vBingham. Unable to review current goals or set targets at this time. Knowing that one goal is to assist faculty in obtaining 10 CEUs as required by IHL, the committee discussed several ways to meet that goal with input provided by faculty on Faculty Development Surveys collected thus far. Committee members to contact Kelly Kirkland to find out what types of training we could have provided to faculty on Canvas; get Dr. Bingham to contact Examssoft to see if some training opportunities may be available in person instead of on modules; See if Dr. Shelby Polk might be willing to discuss electronic portfolio development; and contact HURST review services to set up a workshop on writing test items, etc.
- Action: All members to bring handbooks to next meeting and have reviewed goals listed.

Agenda Item #2: Faculty Handbook Revisions

- Discussion: New handbooks have not been dispersed by vBingham_ lSeals to check with her and see when they will be available.
- Action: none.

Agenda Item #3: Faculty Development Survey findings

A. Monthly CEU offering

B. Plan workshop offering

- Discussion: Faculty Development Survey findings are attached. After discussion of various possibilities for continuing education, the committee settled on trying to key in on 3-4 key educational possibilities for the upcoming year. lSeals would like to survey faculty to see if they would consider pooling their faculty development allotment for the year to bring in a nationally recognized speaker, such as Pam Jeffries, to meet the CEU requirement for all faculty. This could possibly generate more faculty development funding if offered as a regional workshop. Additionally, the possibility of having Robin Broyles come give a series of CEU offerings on Grant Writing was discussed.
- Action: lSeals spoke with Robin Broyles 9/3/13. Robin seemed very interested in the possibility of the workshop. lSeals mentioned the possibility of pooling Faculty Development funds in Faculty Org 9/23/13.

Agenda Item #4: New faculty

A. Faculty recruitment

B. Retention

- Discussion: The faculty mentoring program was discussed. The committee believes that a more structured faculty mentoring program is the way that we should proceed, with input from the new faculty member on the committee. The checklist should be part of the Faculty Handbook, but has detailed items that are not really appropriate for a mentoring program. The program should be a more broad-footed approach to introducing new faculty members to the role of educator. The committee discussed the current GST program for new faculty to the University. We want an agenda of those classes offered by the program. IBlessitt has old mentor program materials that have been reviewed. To bring to next meeting.
- Action: ISeals to contact Dr. Moon and get GST agenda.

Next Meeting: October 1, 2013 @ 1300 in the Conference Room

Minutes Prepared By: IBlessitt

Date/Time of Meeting: November 11 , 2013; 9:35 am

Location of Meeting: Conference Room

Members Present: lSeals, Chair

lBlessitt, Secretary

vBingham, ex officio

jWilson

jOverstreet

Members Apologies: none

Guests: none

Reading and Approval of Minutes: n/a

Agenda Item #1: Contact hours/workshops

- Discussion: The committee discussed all of the workshops that have been in the works since the start of the semester. Dr. Nicole House has agreed to do a workshop on electronic portfolio development in the Canvas system. The committee set the date for this workshop as January 27, 2014 from 11:00-12:00, pending Dr. House's approval. Dates for Robin Boyle's grant-writing workshops proposed as the second and fourth Monday of each month (Feb 10 & 24, March 10 & 24, April 14 & 28) from 11:00-12:00. Hurst Review has agreed to do their series of faculty development workshops on test item writing, etc. We would like to include faculty from Coahoma Community College, Mississippi Delta Community College, and Holmes Community College. Debbie Allen spoke with several faculty from MDCC who recommended Friday as a good day for the workshop as the school MDCC does not have classes on Friday. The RESSON does not have any classes that meet on Friday either. Faculty Development looked at the calendar and found several days when HESI admission exams will not be given for possible workshop dates. The proposed dates are January 17, March 7, and March 21.
- Action: lBlessitt to contact Dr. House. Dr. House Confirmed on 11/11. Dr. Seals to contact Robin Boyles and confirm dates. lBlessitt to Contact Denise Young at MDCC, Martha Catlette at Coahoma, and the chair at Holmes for input. Emailed contacts at MDCC, Coahoma, Holmes CC, and Philips CC 11/11.

Agenda Item #2: Faculty Handbook Revisions

- Discussion: vBingham informed committee that Faculty & Staff Handbook needs to be updated. The committee discussed what updates were necessary. Besides reviewing FacOrg minutes for relevant policy changes, vBingham recommends that handbook be reviewed for outdated policies.
- Action: lBlessitt to review FacOrg minutes for this semester for any changes that should be included in Handbook and bring to FacOrg. Committee to review entire handbook in Spring Semester.

Agenda Item #3: Mentoring Program

- Discussion: Nothing has been done with regard to mentoring program this semester after much discussion during meetings.
- Action: Tabled until Spring semester.

Agenda Item #4: E-portfolios

- Discussion: lSeals would like for Faculty Development to suggest all Faculty applying for tenure and promotion in the RESSON use e-portfolios. However, the new Provost is to

take his position in December, and may establish rules for tenure and promotion for the University.

- Action: The committee decided to table any further discussion of tenure & promotion or portfolio guidelines until the Provost has had time to make any recommendations.

Next Meeting: December 3, 2013 @ 1300 in the Conference Room

Minutes Prepared By: IBlessitt

Date/Time of Meeting: December 3 , 2013; 1:05 pm

Location of Meeting: Conference Room

Members Present: lSeals, Chair

lBlessitt, Secretary

vBingham, ex officio

jWilson

jOverstreet

Members Apologies: none

Guests: none

Reading and Approval of Minutes: n/a

Agenda Item #1: Contact hours/workshops

- Discussion: The committee discussed all of the workshops that have been in the works since the start of the semester. Dr. Nicole House has agreed to do a workshop on electronic portfolio development in the Canvas system. The committee set the date for this workshop as January 27, 2014 from 11:00-12:00, Dr. House agreed. Dates for Robin Boyle's grant-writing workshops proposed as the second and fourth Monday of each month (Feb 10 & 24, March 10 & 24, April 14 & 28) from 11:00-12:00. Dr. Seals is supposed to confirm these dates with Robin. Hurst Review has agreed to do their series of faculty development workshops on test item writing, etc. The proposed date at this time is January 17. lBlessitt emailed contacts at MDCC, Coahoma, Holmes CC, and Phillips CC 11/11/13. The only response was from Phillips. They are very interested. The committee has obtained phone number contacts for the other colleges, and jOverstreet will contact Northwest and MDCC, lSeals will contact Coahoma, lBlessitt will contact Holmes CC. lSeals would like to investigate the possibility of having inservices on some of the various platforms we use such as Exam Soft.
- Action: jOverstreet contacted Northwest CC (they would be more interested if it was March 21st) and MDCC (would be interested in January 10th but good luck getting their participation since they don't work on Fridays).

Agenda Item #2: Faculty Handbook Revisions

- Discussion: lBlessitt reviewed FacOrg minutes through November. None of the items voted on in FacOrg dealt with Faculty & Staff Handbook materials.

Agenda Item #3: Mentoring Program

- Discussion: Faculty Development discussed the lack of any sort of mentoring program again. The idea of possibly putting some Faculty Orientation Modules on the RESSON Home page was discussed.
- Action: Tabled until Spring semester.

Next Meeting: January 14, 2014 @ 1300 in the Conference Room

Minutes Prepared By: lBlessitt

Nurse of the Future Nursing Core Competencies®

GAP ANALYSIS

Nursing Program: Robert E. Smith School of Nursing BSN Program

Contact Person: Vicki Bingham Phone: 662-846-4257 Email: vbingham@deltastate.edu

GAP ANALYSIS Participants

Primary completion responsibility: Vicki Bingham

Faculty Contributing to Gap Analysis: Undergraduate Faculty Members

Practice Partner(s): Delta Regional Medical Center, Bolivar Medical Center, North Sunflower Medical Center, Northwest Mississippi Medical Center

The limitation of this tool is that this is a self-assessment, the rating scores are based on the perception of the rater.

GAP ANALYSIS

The purpose of the Gap Analysis is to identify the gaps between what is currently being taught and what nursing programs and their clinical partners believe should be taught in order for RN students to learn the eleven Nurse of the Future Nursing Core Competencies® by graduation.

The analysis is best coordinated by one faculty member in consultation with other faculty and representative(s) from your practice partner(s). Your practice partner's feedback and comments are an essential component of the gap analysis. Your completed gap analysis is confidential and will only be reviewed by the Nurse of the Future Competency Committee. All the gap analyses will be aggregated to create a picture of nursing education in Massachusetts in relation to the eleven competencies.

Directions: Refer to the Description of the Eleven Nurse of the Future Nursing Core Competencies[®] and their associated Knowledge, Attitudes and Skills areas. Keep the descriptions with you as you complete this form. Review the definition and the K/A/Ss for the competency described considering all the competency knowledge areas together, all the attitude areas together and all the skills together.

For each competency:

- In column 1: Use the response scale (1 to 4) described below to assess how many overall opportunities **are currently available** within your nursing curriculum for your students to learn the knowledge, attitudes and skills (K/A/Ss) for each of the Nurse of the Future Nursing Core Competencies[®] by graduation. For overall score provide an average of the total for each K/A/S area. Use the worksheet provided to display individual scores for each K/A/S.
- In column 2: Provide specific evidence to support the score provided in column 1. Please indicate the learning opportunities and assessment measures that demonstrate the opportunities to learn the K/A/Ss for each competency by graduation. Please consider students' behaviors and skills in evaluating and scoring attitude areas. **Please link to evidence on the worksheet provided.**
- In column 3: Use the response scale (1-4) to indicate how many overall opportunities you believe **should be available** for your students to learn the knowledge, attitudes and skills (K/A/Ss) for each competency by graduation.
- In column 4: Use the response scale (1-4) for your practice partners to indicate how many learning opportunities they believe **should be available** for your students to learn to the K/A/Ss associated with each competency by graduation. This response should be developed after discussion with your practice partner(s) about each of your expectations about what learning opportunities should be available for your students throughout the program. Please consider students' behaviors and skills in evaluating and scoring attitude areas.
- In column 5: Provide the numerical difference (including + or -) between your response in column 3 (**the opportunities you believe should be available** for your students to learn the K/A/Ss for each competency by graduation) and your answer in column 1 (**the current opportunities that are available** for your students to learn the K/A/Ss for each competency by graduation) to identify the gap.
- In column 6: Provide the numerical difference (including + or -) between the response in column 4 (what **opportunities your practice partner(s) believe should be available** for your students to learn the K/A/Ss by graduation) and your response to column 3 (**what opportunities you believe should be available** for your students to learn the K/A/Ss by graduation) to identify the gap.

- For the question: “To what extent **should** this competency as defined by these K/A/Ss be integrated into an overall future curriculum”, please indicate overall faculty response in score provided for each competency.
- Comment section: Use this section to provide any additional comments, ideas or questions regarding each competency including but not limited to the K/A/Ss. Please indicate comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.
- General Comments: Use this section for more detailed discussion of questions or comments about the Nurse of the Future Nursing Core Competencies[®]. Please indicate comments by nursing program, practice partner or both.

Response scale (1– 4):

- 1 No opportunities to learn these Knowledge areas, Attitudes or Skills (K/A/Ss) in our program.
- 2 Only a few opportunities to learn these K/A/Ss by graduation. (1-3 opportunities)
- 3 Several opportunities to learn these K/A/Ss by graduation. (4-7opportunities)
- 4 Many opportunities to learn these K/A/Ss by graduation.(7 or more opportunities)

<u>Patient Centered Care:</u> The Nurse of the Future will provide individualized care that recognizes patient’s preferences, values and needs and respects the patient or designee as a full partner in providing compassionate, coordinated, appropriate, safe and effective care.						
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Column	1	2	3	4	5	6
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Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes-Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Patient – Centered Care Knowledge areas	4					
Patient Centered Care Attitudes	4					

Patient Centered Care Skills	4					
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To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

	Not Integrated		Fully Integrated	
	1	2	3	4
			4	5

Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Professionalism: The Nurse of the Future will demonstrate accountability for practicing nursing within established moral, legal, ethical, regulatory and humanistic principles.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Professionalism Knowledge areas	4					

Professionalism Attitudes	4					
Professionalism Skills	4					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

1

2

3

4

5

Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Leadership: The Nurse of the Future will influence the behavior of individuals or groups of individuals in a way that will facilitate the establishment and acquisition of shared goals.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4 Identified Weaknesses according to PP perception	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Leadership Knowledge areas	4		4	2	0	2

Leadership Attitudes	4		4			
Leadership Skills	4		4			

To what extent should this competency as defined by these K/A/Ss be integrated into an overall **future** curriculum?

Not Integrated

Fully Integrated

1

2

3

4

5

Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

- It appears that RESSON effectively threads leadership concepts throughout the curriculum but the practice partner does not believe that the new graduate is effectively transferring these skills to the work environment. Specifically mentioned by the practice partner:
- New graduates
 - Have poor organizational skills
 - Are easily overwhelmed with workload and do not cope well with stress
 - Do not understand the importance of knowing that all RN'S are leaders

- Tend to think leadership only applies to management
- Poor communication techniques with others
- Lack assertiveness and confrontation skills
- Expects charge nurse or nurse manager to solve all difficult issues
- Need more hands on experience to improve
- Teamwork collaboration skills
- Are easily stressed by daily workload and easily discouraged when faced with several clinical challenges
- Lack insight into the importance of
 - Accountability for decisions
 - for the need to reduce costs to patients and the organization
 - patient satisfaction
 - Working effectively with other nurses from differing age groups
- Also it is this author’s perception that the practice partners excel in:
 - Offering preceptorship to apply skills at the novice level
 - Offering an average of six weeks of orientation to introduce new graduate to the new role
- Furthermore it is this author’s perception that areas for practice partners improvement include:
 - Expecting the new graduate to learn leadership skills by trial and error with on the job training
 - Delta PP do not have formal ladder to teach leadership skills from novice to expert
 - Expect transformational leadership skills in the framework of transactional work environment

- Do not offer residency for new graduates to become comfortable in role of the leader
- Also, it is this author’s perception that existing “gaps” between the teaching-learning experiences that occur at RESSON and transition to the new RN role in the clinical setting are present. Possible gaps include:
 - Lack of “vision” at RESSON specifically regarding a unified perception of what constitutes an ideal RN
 - Students do not have “buy-in” into some of the pertinent concepts of an effective leader because they perceive these assignments as “busy work”
- **Competency 4b adapts to stressful situations:** RESSON does not have an integrative way that focuses on meaningful ways to effectively deal with stress and distress. Students are overwhelmed and there has been a trend in recent years towards seeking out prescription medications to cope with the challenges of nursing school and personal life.
- **Competency A4E: values courage** as a leadership skill has not been threaded throughout the curriculum. This might be investigated further as a means to enhance the coping skills of the student body
- **Competency 4e demonstrates ability to stand up for beliefs & does not avoid challenges:** Practice partners have identified this as a weakness and desire new RN graduates that can proactively resolve conflicts. Also, according to the practice partners, new graduates are easily overwhelmed with their nursing duties and have difficulty coping with complex patient situations. One faculty member identified that the issue may relate to the inability for the student to self-advocate and may be underprepared to cope with complex environments due to an “extended adolescent persona”.
- **Competency 4c seeks appropriate mentors:** Practice partners assign preceptors to new graduates in unconventional ways such as the RN works another shift. Willing preceptors are difficult to locate for the “Nursing Preceptor” course due to high staff turnover and RN burnout in the clinical sites. Another issue is the lack of BSN prepared preceptors to mentor RESSON students at the practice sites.

Validation of current status

Where are these learning opportunities in your **curriculum** and how are they taught? Summarize from worksheet.

Provide documentation on worksheet of **specific learning activities** and **assessment measures** that demonstrate how you arrived at your score in column 1.

Assessment measures:

	Formative	Summative
Local –classroom & clinical assessments	<ul style="list-style-type: none">• Blackboard quizzes• APA style scholarly papers• Projects• Clinical observation• Pre and post conference with feedback sessions	<ul style="list-style-type: none">• End of Chapter tests• Final papers including group work preparation• Presentations
Large scale assessments	<ul style="list-style-type: none">• Midcurriculum assessment HESI to determine strengths and weaknesses of the student	<ul style="list-style-type: none">• Specialty HESI exams utilized as a final exam in most courses• Exit HESI examination prior to graduation
Traditional methods of assessment	<ul style="list-style-type: none">• NCLEX style questions• Structured observation in skills checkoff laboratory• Seminars	
Alternative methods of assessment	<ul style="list-style-type: none">• Student self assessment<ul style="list-style-type: none">○ reflection• Peer assessment• Authentic assessments<ul style="list-style-type: none">○ Simulation	

	<ul style="list-style-type: none"> ○ Case studies ○ Participating in an out of state disaster training exercise ○ Virtual clinical excursion ○ Onsite clinical performance ○ Return demonstration in skills laboratory ○ Community assessments and evaluation ○ Development and implementation of data driven action plans ● Performance assessments ● Portfolio assessments <ul style="list-style-type: none"> ○ Writing portfolio ○ Best work portfolio ○ Documentation portfolio located on Typhon 	
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Competency	Course in the Curriculum	Specific Learning Activities	Assessment measures
Leadership Knowledge areas	Fundamentals of client care & practicum Health assessment & practicum Pharmacology Basic pathophysiology Nursing the adult client I & practicum Nursing the adult client II & practicum Mental health/psychiatric nursing & practicum Nursing research Healthcare Policy	<ul style="list-style-type: none"> ● All courses except for patho & pharm examine theoretical concepts and principles of nursing to assess the health of at least one of the following: individual, family, aggregate, society & community ● All courses teach concepts about the RN as leader. Curriculum moves from simple to complex relative to the sequencing of courses. ● All courses utilize learning activities that promote clinical reasoning skills and critical thinking skills of the nursing students ● All courses incorporate group work to facilitate the learning of theoretical content applicable to 	<ul style="list-style-type: none"> ● Formative ● Summative ● Classroom & clinical assessments ● Large scale assessments ● Traditional assessments ● Alternative assessments

	<p>Maternity nursing & practicum Pediatric nursing & practicum Management of client care & practicum Nursing preceptorship Nursing synthesis</p>	<p>group performance</p> <ul style="list-style-type: none"> • All courses facilitate learning regarding the need to assess personal values, attitudes, beliefs and customs of the client • All courses demonstrate acceptance and respect for cultural diversity, cultural awareness and human diversity • All courses directly or indirectly recognize the role of change in the nurse-client relationship • All courses expect students and instructors alike to uphold the principles of professional accountability • Delegation principles are taught using theory that moves from simple to complex • Specific leadership theoretical concepts are addressed in management of client care & healthcare policy. These include <ul style="list-style-type: none"> ○ Prioritizing nursing care in complex situations ○ Delegating nursing care ○ Collaborating with the multidisciplinary team to coordinate care ○ Examine impact of socioeconomic factors that are positively and negatively effecting healthcare policy ○ Applying change theory to practice ○ Using research and evidence based practice to improve patient outcomes ○ Analyzing ethical dilemmas in healthcare ○ Analyzing legal dilemmas in healthcare ○ Analyzing how political and professional nursing organizations impact patient care and work environment • Synthesis: 	
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		<ul style="list-style-type: none"> ○ Utilize three Exit HESI's to determine 95% of final grade. This exam is predictive of NCLEX first write pass and effectively tests for comprehension of leadership and management core principles. 	
Leadership Attitudes	Fundamentals of client care & practicum Health assessment & practicum Pharmacology Basic pathophysiology Nursing the adult client I & practicum Nursing the adult client II & practicum Mental health/psychiatric nursing & practicum Nursing research Healthcare Policy Maternity nursing & practicum Pediatric nursing & practicum Management of client care & practicum Nursing preceptorship Nursing synthesis	<ul style="list-style-type: none"> • Authentic Learning experiences are used extensively throughout the curriculum <ul style="list-style-type: none"> • management of client care <ul style="list-style-type: none"> • Team nursing approach where each student is assigned the charge nurse role • Affective attributes are reflected upon using learning exercises such as “who moved my cheese”, “Fish” • Project that designs a nursing unit • QI project that meets the needs of the practice partner • Pediatrics: <ul style="list-style-type: none"> – Out of state disaster training exercise that demonstrates RN triage role and pertinent coordination efforts – Student nurse as leader in wellness centers who incorporate and integrate the nursing process in patient care – Requiring students to have PALS,ACLS • Health care policy <ul style="list-style-type: none"> • Final exam where the student “is elected to the state senate” and must synthesize a complex 	<ul style="list-style-type: none"> • Formative • Summative • Classroom & clinical assessments • Large scale assessments • Traditional assessments • Alternative assessments

		<p>scenario investigating all aspects of a platform issue.</p> <ul style="list-style-type: none"> • Legislative day where the student is exposed to leaders of the community who impact state and federal healthcare policies • Self governance group activity which is an inclass assignment that encourages students to negotiate roles and effectively meet guidelines-outcomes-deadlines. <ul style="list-style-type: none"> • Nursing preceptorship <ul style="list-style-type: none"> • Is a semester long course where the student chooses a practice site and under the guidance of a preceptor applies learned nursing theory to practice • Empowers the student by teaching them to be self directed, solidifies nursing concepts through authentic learning and introduces the nursing student to an actual work environment • All courses (except pharm & patho) teach the student he/she is a leader of client care • All courses expect the student to: <ul style="list-style-type: none"> – Clearly and precisely develop crucial questions that in turn facilitate excellent critical thinking and clinical reasoning abilities – Appropriately gather information in order to assess-dx-plan-implement- 	
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		<p>evaluate patient care concept maps</p> <ul style="list-style-type: none"> – Assist the student to accurately interpret data to derive solutions to patient problems – Expect the student to utilize EBP and apply these principles in all patient care encounters – Collaborate with other healthcare professionals to find solutions to complex patient problems – To be open minded so that all alternatives can be viewed – Multiple authentic experiences are utilized <ul style="list-style-type: none"> • Clinical, reflections, community assessment, screening, case studies <ul style="list-style-type: none"> • All courses include team work within each course <ul style="list-style-type: none"> – Clinical courses emphasize the need to value the perspectives of other professionals <ul style="list-style-type: none"> • Understand roles and boundaries • Awareness of politics and power dynamics • Shared vision and valuing others contributions • Differing views are valued must know own philosophy • Assist with conflict resolution and conflict management • Discuss in <i>theory only</i> roles of 	
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		<p style="text-align: center;">multidisciplinary team</p> <ul style="list-style-type: none"> • Most courses include reflective exercises <ul style="list-style-type: none"> • Encourages valuing & taking responsibility for their own learning • Assists in adaptation to change by analyzing and responding to challenges in innovative ways • Enhances critical thinking and clinical reasoning abilities • All courses utilize authentic activities to enhance creative thinking abilities • Indepth theoretical concepts of change are taught in management and healthcare policy <ul style="list-style-type: none"> – Authentic learning experiences such as <ul style="list-style-type: none"> • self-governance activity • legislative day • comprehensive interactive scenario where the student develops a platform, discusses a key issue, identifies stakeholders and anticipates funding 	
Leadership Skills	Fundamentals of client care & practicum Health assessment & practicum Pharmacology Basic pathophysiology Nursing the adult client I & practicum Nursing the adult client II & practicum Mental health/psychiatric nursing & practicum	<ul style="list-style-type: none"> • RESSON facilitates concepts of patient advocacy and utilizing therapeutic communication techniques when meeting patient care needs • Problem solving skills <ul style="list-style-type: none"> – Teaching these skills core value at RESSON – Done by: <ul style="list-style-type: none"> • Utilizing technologies such as virtual clinical excursions, high-fidelity/low-fidelity case scenarios, videos 	<ul style="list-style-type: none"> • Formative • Summative • Classroom & clinical assessments • Large scale assessments • Traditional assessments • Alternative assessments

	<p>Nursing research Healthcare Policy Maternity nursing & practicum Pediatric nursing & practicum Management of client care & practicum Nursing preceptorship Nursing synthesis</p>	<ul style="list-style-type: none"> • Instructor-student mentorship • Concept maps & patient care plans • Utilizing & applying nursing process • Application of nursing theory to practice • Integration of concepts between and within courses throughout the curriculum • Having group work exercises in the majority of courses • Assisting students to resolve conflict with effective communication and assertiveness skills • Acceptance and tolerance of others a core value at RESSON <p>–</p> <p>– Utilizes teacher-student interactions to assist the student to look beyond the “task” and anticipate possible outcomes as the result of nursing actions</p>	
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Systems-based Practice: The Nurse of the Future will demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal quality and value.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Systems-based Practice Knowledge areas	4					

Systems-based Practice Attitudes	4					
Systems-based Practice Skills	4					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Informatics: The Nurse of the Future will use information and technology to communicate, manage knowledge, mitigate error and support decision-making.

Column	1	2	3	4	5	6
Competency KAS How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Informatics Knowledge areas	3 (weak area)					

Informatics Attitudes	4					
Informatics Skills	4 (weak in various aspects of this area)					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Communication: The Nurse of the Future will interact effectively with patients, families, and colleagues, fostering mutual respect and shared decision-making, to enhance patient satisfaction and health outcomes.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Communication Knowledge area	4					

Communication Attitudes	4					
Communication Skills	4					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Teamwork & Collaboration: The Nurse of the Future will function effectively within nursing and interdisciplinary teams, fostering open communication, mutual respect, shared decision-making, team learning and development.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Teamwork and Collaboration Knowledge areas	4 (weak area)					

Teamwork and Collaboration Attitudes	4 (weak area)					
Teamwork and Collaboration Skills	4 (weak area)					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Safety: The Nurse of the Future will minimize risk of harm to patients and providers through both individual performance and system effectiveness.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Safety Knowledge areas	4 (weak area)					

Safety Attitudes	4 (weak area)					
Safety Skills	4 (weak area)					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Quality Improvement: The Nurse of the Future will use data to monitor outcomes and care processes, and use improvement methods to design and test changes to continuously improve the quality and safety of healthcare.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Quality Improvement Knowledge areas	4 (weak area)					

Quality Improvement Attitudes	4 (weak area)					
Quality Improvement Skills	4 (weak area)					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated			Fully Integrated		
1	2	3	4	5	

Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Evidence Based Practice (EBP): The Nurse of the Future will identify, evaluate and use the best current evidence coupled with clinical expertise and consideration of patients’ preferences, experience and values to make practice decisions.

Column	1	2	3	4	5	6
Competency KAS	<p>Assessment of current status</p> <p>How many opportunities are currently available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>Validation of current status</p> <p>Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet.</p> <p>Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.</p>	<p>Desired outcomes Nursing Program</p> <p>How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>Desired outcomes- Practice Partner(s)</p> <p>How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>GAP between Nursing Program Desired outcomes and Current Status</p> <p>Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.</p>	<p>GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes</p> <p>Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.</p>
Evidenced-Based Practice Knowledge areas	3 (weak area)					

Evidenced-Based Practice Attitudes	3 (weak area)					
Evidenced-Based Practice Skills	3 (weak area)					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

1

2

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Nursing Knowledge: The Nurse of the Future will recognize the *science and practice* of nursing as the profession's two major dimensions.

The *science* of nursing is a discrete body of knowledge that incorporates:

- Knowledge of relationships among nurses, patients and their environments within the context of health
- Nursing concepts and theories
- Concepts and theories derived from the basic sciences, humanities and other disciplines

The *practice* of nursing utilizes scientific inquiry evidenced in the nursing process.

Column	1	2	3	4	5	6
Competency KAS	<p>Assessment of current status</p> <p>How many opportunities are currently available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>Validation of current status</p> <p>Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet.</p> <p>Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.</p>	<p>Desired outcomes Nursing Program</p> <p>How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>Desired outcomes- Practice Partner(s)</p> <p>How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>GAP between Nursing Program Desired outcomes and Current Status</p> <p>Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.</p>	<p>GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes</p> <p>Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.</p>
Nursing Knowledge Knowledge areas						
Nursing Knowledge						

General Comments (from school and practice partner)

Nurse of the Future Nursing Core Competencies®

GAP ANALYSIS

Nursing Program: Robert E. Smith School of Nursing – RNBSN Program

Contact Person: Vicki Bingham Phone: 662-846-4257 Email: vbingham@deltastate.edu

GAP ANALYSIS Participants

Primary completion responsibility: Vicki Bingham

Faculty Contributing to Gap Analysis: Undergraduate Faculty Members

Practice Partner(s): Delta Regional Medical Center, Bolivar Medical Center, North Sunflower Medical Center, Northwest Mississippi Medical Center

The limitation of this tool is that this is a self-assessment, the rating scores are based on the perception of the rater.

GAP ANALYSIS

The purpose of the Gap Analysis is to identify the gaps between what is currently being taught and what nursing programs and their clinical partners believe should be taught in order for RN students to learn the eleven Nurse of the Future Nursing Core Competencies® by graduation.

The analysis is best coordinated by one faculty member in consultation with other faculty and representative(s) from your practice partner(s). Your practice partner's feedback and comments are an essential component of the gap analysis. Your completed gap analysis is confidential and will only be reviewed by the Nurse of the Future Competency Committee. All the gap analyses will be aggregated to create a picture of nursing education in Massachusetts in relation to the eleven competencies.

Directions: Refer to the Description of the Eleven Nurse of the Future Nursing Core Competencies[®] and their associated Knowledge, Attitudes and Skills areas. Keep the descriptions with you as you complete this form. Review the definition and the K/A/Ss for the competency described considering all the competency knowledge areas together, all the attitude areas together and all the skills together.

For each competency:

- In column 1: Use the response scale (1 to 4) described below to assess how many overall opportunities **are currently available** within your nursing curriculum for your students to learn the knowledge, attitudes and skills (K/A/Ss) for each of the Nurse of the Future Nursing Core Competencies[®] by graduation. For overall score provide an average of the total for each K/A/S area. Use the worksheet provided to display individual scores for each K/A/S.
- In column 2: Provide specific evidence to support the score provided in column 1. Please indicate the learning opportunities and assessment measures that demonstrate the opportunities to learn the K/A/Ss for each competency by graduation. Please consider students' behaviors and skills in evaluating and scoring attitude areas. **Please link to evidence on the worksheet provided.**
- In column 3: Use the response scale (1-4) to indicate how many overall opportunities you believe **should be available** for your students to learn the knowledge, attitudes and skills (K/A/Ss) for each competency by graduation.
- In column 4: Use the response scale (1-4) for your practice partners to indicate how many learning opportunities they believe **should be available** for your students to learn to the K/A/Ss associated with each competency by graduation. This response should be developed after discussion with your practice partner(s) about each of your expectations about what learning opportunities should be available for your students throughout the program. Please consider students' behaviors and skills in evaluating and scoring attitude areas.
- In column 5: Provide the numerical difference (including + or -) between your response in column 3 (**the opportunities you believe should be available** for your students to learn the K/A/Ss for each competency by graduation) and your answer in column 1 (**the current opportunities that are available** for your students to learn the K/A/Ss for each competency by graduation) to identify the gap.
- In column 6: Provide the numerical difference (including + or -) between the response in column 4 (what **opportunities your practice partner(s) believe should be available** for your students to learn the K/A/Ss by graduation) and your response to column 3 (**what opportunities you believe should be available** for your students to learn the K/A/Ss by graduation) to identify the gap.

- For the question: “To what extent **should** this competency as defined by these K/A/Ss be integrated into an overall future curriculum”, please indicate overall faculty response in score provided for each competency.
- Comment section: Use this section to provide any additional comments, ideas or questions regarding each competency including but not limited to the K/A/Ss. Please indicate comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.
- General Comments: Use this section for more detailed discussion of questions or comments about the Nurse of the Future Nursing Core Competencies[®]. Please indicate comments by nursing program, practice partner or both.

Response scale (1– 4):

- 1 No opportunities to learn these Knowledge areas, Attitudes or Skills (K/A/Ss) in our program.
- 2 Only a few opportunities to learn these K/A/Ss by graduation. (1-3 opportunities)
- 3 Several opportunities to learn these K/A/Ss by graduation. (4-7opportunities)
- 4 Many opportunities to learn these K/A/Ss by graduation.(7 or more opportunities)

Patient Centered Care: The Nurse of the Future will provide individualized care that recognizes patient’s preferences, values and needs and respects the patient or designee as a full partner in providing compassionate, coordinated, appropriate, safe and effective care.

Column	1	2	3	4	5	6
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Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes-Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Patient – Centered Care Knowledge areas	4					
Patient Centered Care Attitudes	4					

Patient Centered Care Skills	4					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

1

2

3

4

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Professionalism: The Nurse of the Future will demonstrate accountability for practicing nursing within established moral, legal, ethical, regulatory and humanistic principles.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Professionalism Knowledge areas	4					

Professionalism Attitudes	4					
Professionalism Skills	4					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Leadership: The Nurse of the Future will influence the behavior of individuals or groups of individuals in a way that will facilitate the establishment and acquisition of shared goals.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4 Identified Weaknesses according to PP perception	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Leadership Knowledge areas	4		4	2	0	2

Leadership Attitudes	4		4			
Leadership Skills	4		4			

To what extent should this competency as defined by these K/A/Ss be integrated into an overall **future** curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

- It appears that RESSON effectively threads leadership concepts throughout the curriculum but the practice partner does not believe that the new graduate is effectively transferring these skills to the work environment. Specifically mentioned by the practice partner:
- New graduates
 - Have poor organizational skills
 - Are easily overwhelmed with workload and do not cope well with stress
 - Do not understand the importance of knowing that all RN'S are leaders

- Tend to think leadership only applies to management
- Poor communication techniques with others
- Lack assertiveness and confrontation skills
- Expects charge nurse or nurse manager to solve all difficult issues
- Need more hands on experience to improve
- Teamwork collaboration skills
- Are easily stressed by daily workload and easily discouraged when faced with several clinical challenges
- Lack insight into the importance of
 - Accountability for decisions
 - for the need to reduce costs to patients and the organization
 - patient satisfaction
 - Working effectively with other nurses from differing age groups
- Also it is this author’s perception that the practice partners excel in:
 - Offering preceptorship to apply skills at the novice level
 - Offering an average of six weeks of orientation to introduce new graduate to the new role
- Furthermore it is this author’s perception that areas for practice partners improvement include:
 - Expecting the new graduate to learn leadership skills by trial and error with on the job training
 - Delta PP do not have formal ladder to teach leadership skills from novice to expert
 - Expect transformational leadership skills in the framework of transactional work environment

- Do not offer residency for new graduates to become comfortable in role of the leader
- Also, it is this author’s perception that existing “gaps” between the teaching-learning experiences that occur at RESSON and transition to the new RN role in the clinical setting are present. Possible gaps include:
 - Lack of “vision” at RESSON specifically regarding a unified perception of what constitutes an ideal RN
 - Students do not have “buy-in” into some of the pertinent concepts of an effective leader because they perceive these assignments as “busy work”
- **Competency 4b adapts to stressful situations:** RESSON does not have an integrative way that focuses on meaningful ways to effectively deal with stress and distress. Students are overwhelmed and there has been a trend in recent years towards seeking out prescription medications to cope with the challenges of nursing school and personal life.
- **Competency A4E: values courage** as a leadership skill has not been threaded throughout the curriculum. This might be investigated further as a means to enhance the coping skills of the student body
- **Competency 4e demonstrates ability to stand up for beliefs & does not avoid challenges:** Practice partners have identified this as a weakness and desire new RN graduates that can proactively resolve conflicts. Also, according to the practice partners, new graduates are easily overwhelmed with their nursing duties and have difficulty coping with complex patient situations. One faculty member identified that the issue may relate to the inability for the student to self-advocate and may be underprepared to cope with complex environments due to an “extended adolescent persona”.
- **Competency 4c seeks appropriate mentors:** Practice partners assign preceptors to new graduates in unconventional ways such as the RN works another shift. Willing preceptors are difficult to locate for the “Nursing Preceptor” course due to high staff turnover and RN burnout in the clinical sites. Another issue is the lack of BSN prepared preceptors to mentor RESSON students at the practice sites.

Validation of current status

Where are these learning opportunities in your **curriculum** and how are they taught? Summarize from worksheet.

Provide documentation on worksheet of **specific learning activities** and **assessment measures** that demonstrate how you arrived at your score in column 1.

Assessment measures:

	Formative	Summative
Local –classroom & clinical assessments	<ul style="list-style-type: none">• Blackboard quizzes• APA style scholarly papers• Projects• Clinical observation• Pre and post conference with feedback sessions	<ul style="list-style-type: none">• End of Chapter tests• Final papers including group work preparation• Presentations
Large scale assessments	<ul style="list-style-type: none">• Midcurriculum assessment HESI to determine strengths and weaknesses of the student	<ul style="list-style-type: none">• Specialty HESI exams utilized as a final exam in most courses• Exit HESI examination prior to graduation
Traditional methods of assessment	<ul style="list-style-type: none">• NCLEX style questions• Structured observation in skills checkoff laboratory• Seminars	
Alternative methods of assessment	<ul style="list-style-type: none">• Student self assessment<ul style="list-style-type: none">○ reflection• Peer assessment• Authentic assessments<ul style="list-style-type: none">○ Simulation	

	<ul style="list-style-type: none"> ○ Case studies ○ Participating in an out of state disaster training exercise ○ Virtual clinical excursion ○ Onsite clinical performance ○ Return demonstration in skills laboratory ○ Community assessments and evaluation ○ Development and implementation of data driven action plans ● Performance assessments ● Portfolio assessments <ul style="list-style-type: none"> ○ Writing portfolio ○ Best work portfolio ○ Documentation portfolio located on Typhon 	
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Competency	Course in the Curriculum	Specific Learning Activities	Assessment measures
Leadership Knowledge areas	Fundamentals of client care & practicum Health assessment & practicum Pharmacology Basic pathophysiology Nursing the adult client I & practicum Nursing the adult client II & practicum Mental health/psychiatric nursing & practicum Nursing research Healthcare Policy	<ul style="list-style-type: none"> ● All courses except for patho & pharm examine theoretical concepts and principles of nursing to assess the health of at least one of the following: individual, family, aggregate, society & community ● All courses teach concepts about the RN as leader. Curriculum moves from simple to complex relative to the sequencing of courses. ● All courses utilize learning activities that promote clinical reasoning skills and critical thinking skills of the nursing students ● All courses incorporate group work to facilitate the learning of theoretical content applicable to 	<ul style="list-style-type: none"> ● Formative ● Summative ● Classroom & clinical assessments ● Large scale assessments ● Traditional assessments ● Alternative assessments

	<p>Maternity nursing & practicum Pediatric nursing & practicum Management of client care & practicum Nursing preceptorship Nursing synthesis</p>	<p>group performance</p> <ul style="list-style-type: none"> • All courses facilitate learning regarding the need to assess personal values, attitudes, beliefs and customs of the client • All courses demonstrate acceptance and respect for cultural diversity, cultural awareness and human diversity • All courses directly or indirectly recognize the role of change in the nurse-client relationship • All courses expect students and instructors alike to uphold the principles of professional accountability • Delegation principles are taught using theory that moves from simple to complex • Specific leadership theoretical concepts are addressed in management of client care & healthcare policy. These include <ul style="list-style-type: none"> ○ Prioritizing nursing care in complex situations ○ Delegating nursing care ○ Collaborating with the multidisciplinary team to coordinate care ○ Examine impact of socioeconomic factors that are positively and negatively effecting healthcare policy ○ Applying change theory to practice ○ Using research and evidence based practice to improve patient outcomes ○ Analyzing ethical dilemmas in healthcare ○ Analyzing legal dilemmas in healthcare ○ Analyzing how political and professional nursing organizations impact patient care and work environment • Synthesis: 	
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		<ul style="list-style-type: none"> ○ Utilize three Exit HESI's to determine 95% of final grade. This exam is predictive of NCLEX first write pass and effectively tests for comprehension of leadership and management core principles. 	
Leadership Attitudes	Fundamentals of client care & practicum Health assessment & practicum Pharmacology Basic pathophysiology Nursing the adult client I & practicum Nursing the adult client II & practicum Mental health/psychiatric nursing & practicum Nursing research Healthcare Policy Maternity nursing & practicum Pediatric nursing & practicum Management of client care & practicum Nursing preceptorship Nursing synthesis	<ul style="list-style-type: none"> • Authentic Learning experiences are used extensively throughout the curriculum <ul style="list-style-type: none"> • management of client care <ul style="list-style-type: none"> • Team nursing approach where each student is assigned the charge nurse role • Affective attributes are reflected upon using learning exercises such as “who moved my cheese”, “Fish” • Project that designs a nursing unit • QI project that meets the needs of the practice partner • Pediatrics: <ul style="list-style-type: none"> – Out of state disaster training exercise that demonstrates RN triage role and pertinent coordination efforts – Student nurse as leader in wellness centers who incorporate and integrate the nursing process in patient care – Requiring students to have PALS,ACLS • Health care policy <ul style="list-style-type: none"> • Final exam where the student “is elected to the state senate” and must synthesize a complex 	<ul style="list-style-type: none"> • Formative • Summative • Classroom & clinical assessments • Large scale assessments • Traditional assessments • Alternative assessments

		<p>scenario investigating all aspects of a platform issue.</p> <ul style="list-style-type: none"> • Legislative day where the student is exposed to leaders of the community who impact state and federal healthcare policies • Self governance group activity which is an inclass assignment that encourages students to negotiate roles and effectively meet guidelines-outcomes-deadlines. <ul style="list-style-type: none"> • Nursing preceptorship <ul style="list-style-type: none"> • Is a semester long course where the student chooses a practice site and under the guidance of a preceptor applies learned nursing theory to practice • Empowers the student by teaching them to be self directed, solidifies nursing concepts through authentic learning and introduces the nursing student to an actual work environment • All courses (except pharm & patho) teach the student he/she is a leader of client care • All courses expect the student to: <ul style="list-style-type: none"> – Clearly and precisely develop crucial questions that in turn facilitate excellent critical thinking and clinical reasoning abilities – Appropriately gather information in order to assess-dx-plan-implement- 	
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		<p>evaluate patient care concept maps</p> <ul style="list-style-type: none"> – Assist the student to accurately interpret data to derive solutions to patient problems – Expect the student to utilize EBP and apply these principles in all patient care encounters – Collaborate with other healthcare professionals to find solutions to complex patient problems – To be open minded so that all alternatives can be viewed – Multiple authentic experiences are utilized <ul style="list-style-type: none"> • Clinical, reflections, community assessment, screening, case studies <ul style="list-style-type: none"> • All courses include team work within each course <ul style="list-style-type: none"> – Clinical courses emphasize the need to value the perspectives of other professionals <ul style="list-style-type: none"> • Understand roles and boundaries • Awareness of politics and power dynamics • Shared vision and valuing others contributions • Differing views are valued must know own philosophy • Assist with conflict resolution and conflict management • Discuss in <i>theory only</i> roles of 	
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		<p style="text-align: center;">multidisciplinary team</p> <ul style="list-style-type: none"> • Most courses include reflective exercises <ul style="list-style-type: none"> • Encourages valuing & taking responsibility for their own learning • Assists in adaptation to change by analyzing and responding to challenges in innovative ways • Enhances critical thinking and clinical reasoning abilities • All courses utilize authentic activities to enhance creative thinking abilities • Indepth theoretical concepts of change are taught in management and healthcare policy <ul style="list-style-type: none"> – Authentic learning experiences such as <ul style="list-style-type: none"> • self-governance activity • legislative day • comprehensive interactive scenario where the student develops a platform, discusses a key issue, identifies stakeholders and anticipates funding 	
Leadership Skills	Fundamentals of client care & practicum Health assessment & practicum Pharmacology Basic pathophysiology Nursing the adult client I & practicum Nursing the adult client II & practicum Mental health/psychiatric nursing & practicum	<ul style="list-style-type: none"> • RESSON facilitates concepts of patient advocacy and utilizing therapeutic communication techniques when meeting patient care needs • Problem solving skills <ul style="list-style-type: none"> – Teaching these skills core value at RESSON – Done by: <ul style="list-style-type: none"> • Utilizing technologies such as virtual clinical excursions, high-fidelity/low-fidelity case scenarios, videos 	<ul style="list-style-type: none"> • Formative • Summative • Classroom & clinical assessments • Large scale assessments • Traditional assessments • Alternative assessments

	<p>Nursing research Healthcare Policy Maternity nursing & practicum Pediatric nursing & practicum Management of client care & practicum Nursing preceptorship Nursing synthesis</p>	<ul style="list-style-type: none"> • Instructor-student mentorship • Concept maps & patient care plans • Utilizing & applying nursing process • Application of nursing theory to practice • Integration of concepts between and within courses throughout the curriculum • Having group work exercises in the majority of courses • Assisting students to resolve conflict with effective communication and assertiveness skills • Acceptance and tolerance of others a core value at RESSON <p>–</p> <p>– Utilizes teacher-student interactions to assist the student to look beyond the “task” and anticipate possible outcomes as the result of nursing actions</p>	
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Systems-based Practice: The Nurse of the Future will demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal quality and value.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Systems-based Practice Knowledge areas	4					

Systems-based Practice Attitudes	4					
Systems-based Practice Skills	4 (weak area)					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Informatics: The Nurse of the Future will use information and technology to communicate, manage knowledge, mitigate error and support decision-making.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Informatics Knowledge areas	3 (weak area)					

Informatics Attitudes	3 (weak area)					
Informatics Skills	4					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Communication: The Nurse of the Future will interact effectively with patients, families, and colleagues, fostering mutual respect and shared decision-making, to enhance patient satisfaction and health outcomes.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Communication Knowledge area	4					

Communication Attitudes	4					
Communication Skills	4					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Teamwork & Collaboration: The Nurse of the Future will function effectively within nursing and interdisciplinary teams, fostering open communication, mutual respect, shared decision-making, team learning and development.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Teamwork and Collaboration Knowledge areas	4 (weak area)					

Teamwork and Collaboration Attitudes	4 (weak area)					
Teamwork and Collaboration Skills	4 (weak area)					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Safety: The Nurse of the Future will minimize risk of harm to patients and providers through both individual performance and system effectiveness.

Column	1	2	3	4	5	6
Competency KAS	<p>Assessment of current status</p> <p>How many opportunities are currently available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>Validation of current status</p> <p>Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet.</p> <p>Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.</p>	<p>Desired outcomes Nursing Program</p> <p>How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>Desired outcomes- Practice Partner(s)</p> <p>How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>GAP between Nursing Program Desired outcomes and Current Status</p> <p>Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.</p>	<p>GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes</p> <p>Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.</p>
Safety Knowledge areas	Unable to appropriately evaluate due to lack of courses					

Safety Attitudes	Unable to appropriately evaluate due to lack of courses					
Safety Skills	Unable to appropriately evaluate due to lack of courses					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Quality Improvement: The Nurse of the Future will use data to monitor outcomes and care processes, and use improvement methods to design and test changes to continuously improve the quality and safety of healthcare.

Column	1	2	3	4	5	6
Competency KAS	Assessment of current status How many opportunities are currently available for your students to learn the K/A/S by graduation? Scale of 1-4	Validation of current status Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet. Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.	Desired outcomes Nursing Program How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	Desired outcomes- Practice Partner(s) How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation? Scale of 1-4	GAP between Nursing Program Desired outcomes and Current Status Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.	GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.
Quality Improvement Knowledge areas	3 (weak area)					

Quality Improvement Attitudes	3 (weak area)					
Quality Improvement Skills	3 (weak area)					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Evidence Based Practice (EBP): The Nurse of the Future will identify, evaluate and use the best current evidence coupled with clinical expertise and consideration of patients’ preferences, experience and values to make practice decisions.

Column	1	2	3	4	5	6
Competency KAS	<p>Assessment of current status</p> <p>How many opportunities are currently available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>Validation of current status</p> <p>Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet.</p> <p>Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.</p>	<p>Desired outcomes Nursing Program</p> <p>How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>Desired outcomes- Practice Partner(s)</p> <p>How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>GAP between Nursing Program Desired outcomes and Current Status</p> <p>Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.</p>	<p>GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes</p> <p>Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.</p>
Evidenced-Based Practice Knowledge areas	Unable to appropriately evaluate due to lack of courses					

Evidenced-Based Practice Attitudes	Unable to appropriately evaluate due to lack of courses					
Evidenced-Based Practice Skills	Unable to appropriately evaluate due to lack of courses					

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

Not Integrated

Fully Integrated

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

Nursing Knowledge: The Nurse of the Future will recognize the *science and practice* of nursing as the profession's two major dimensions.

The *science* of nursing is a discrete body of knowledge that incorporates:

- Knowledge of relationships among nurses, patients and their environments within the context of health
- Nursing concepts and theories
- Concepts and theories derived from the basic sciences, humanities and other disciplines

The *practice* of nursing utilizes scientific inquiry evidenced in the nursing process.

Column	1	2	3	4	5	6
Competency KAS	<p>Assessment of current status</p> <p>How many opportunities are currently available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>Validation of current status</p> <p>Where are these learning opportunities in your curriculum and how are they taught? Summarize from worksheet.</p> <p>Provide documentation on worksheet of specific learning activities and assessment measures that demonstrate how you arrived at your score in column 1.</p>	<p>Desired outcomes Nursing Program</p> <p>How many opportunities do you (the faculty) believe should be available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>Desired outcomes- Practice Partner(s)</p> <p>How many opportunities does your practice partner believe should be available for your students to learn the K/A/S by graduation?</p> <p>Scale of 1-4</p>	<p>GAP between Nursing Program Desired outcomes and Current Status</p> <p>Subtract your score in column 1 from your score in column 3 to arrive at the difference between your desired outcomes and the current status.</p>	<p>GAP between Practice Partners Desired outcomes and Nursing Program Desired outcomes</p> <p>Subtract the score in column in 3 from the score in column 4 to arrive at the difference between the practice partner(s) desired outcomes and nursing program desired outcomes.</p>

Nursing Knowledge Knowledge areas						
Nursing Knowledge Attitudes						
Nursing Knowledge Skills						

To what extent should this competency as defined by these K/A/Ss be integrated into an overall future curriculum?

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Comments: Please indicate your comments by nursing program, practice partner or both. In addition to any general comments, please specifically comment on or explain any K/A/S with a score of 2 or below.

General Comments (from school and practice partner)

Delta State University
 Robert E. Smith School of Nursing
 1 Year MSN Alumni Survey 2013

I. MSN Alumni

A. One (1) year Graduate Results—Graduated 2012; Total number graduated= 16
 In May of 2013, sixteen (16) MSN (Family Nurse Practitioner) students graduated. Electronic surveys were sent to graduates and resulted in 6 (37.5%) surveys being returned.

B. Demographic Data

1. Age range: 3 (50%) from 27-30; 1 (16.7) from 31-35; 2 (33.3%) from 36 and over.
2. Gender: 5 (83.35) females; 1 (16.7%) male.
3. Ethnicity: 5 (83.3%) Caucasian; 1 (16.7%) African American
4. Role Concentration: 1 (16.7%) Nurse Administrator; 0 (0%) Nurse Educator; and 5 (83.3%) Family Nurse Practitioner
5. Certification: 5 (83.3%) reported being certified as Family Nurse Practitioner; 1 (16.6%) reported being certified as Nurse Administrator
6. Employed: 5 (83.3%) are employed full time in the role they were prepared for in their MSN program at DSU; 1 (16.6%) is not employed in the role for which the MSN program preparation was provided
7. Provide care to MS Delta Residents: 3 (50%) practice nursing for residents of the Mississippi Delta Region; 3 (50%) respondents replied no.
8. Place Employed: 1 (16.7%) are employed in a Rural Health Clinic; 2 (33.3%) are employed in a hospital; 1 (16.7%) is employed in an Urban Clinic and 2 (33.3%) is employed at another type facility.
9. Further education: 5 (83.3%) of the respondents denied currently being in school.
10. 6 (100%) reported plans to obtain a doctorate. 4 (66.7%) plan to pursue a DNP; 1 (16.7%) plan to pursue a post master FPMHNP; 1 (16.7%) plan to pursue another degree/certificate.

C. Achievement of Program Outcomes

<i>MSN Program Outcomes</i>	<i>Mean</i>
<i>Integrate nursing, related sciences, and emerging evidence to improve health outcomes and safety for diverse populations.</i>	4.33
<i>Utilize leadership skills to design</i>	4.67

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<i>and implement strategies that improve care delivery and outcomes</i>	
<i>Contribute to the integration of healthcare services to improve quality and safety across the continuum of care.</i>	4.00
<i>Employ collaborative leadership strategies to advocate, mentor, and function within inter-professional teams and partnerships.</i>	4.67
<i>Translate theory and research to provide evidence based nursing practice and improve outcomes.</i>	4.67
<i>Analyze and interpret the effects of healthcare policies, ethics, and regulatory processes to influence practice and outcomes.</i>	4.33
<i>Integrate individual and population based health promotion and prevention strategies to provide equitable, efficient, and effective global healthcare.</i>	4.50
<i>Promote the use of information and communication technologies to provide safe, quality, and cost effective healthcare.</i>	4.50
<i>Apply advanced knowledge, skills, and competencies to design, implement, and evaluate direct and indirect care for individuals, families, and communities.</i>	4.33

D. Achievement of Graduate Program Purposes

<i>Purposes of the Program</i>	<i>Mean</i>
<i>Prepares for functioning in the advanced practice role as a family nurse practitioner, nurse administrator, and/or nurse educator.</i>	4.17
<i>Prepares for continuous learning and doctoral study.</i>	4.33

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 1 Year MSN Alumni Survey 2013
 E. Level of satisfaction with the MSN Program

<i>Survey Items</i>	<i>Mean</i>
<i>Overall quality of MSN education</i>	4.17
<i>Overall quality of core courses taken</i>	4.17
<i>Overall quality of required clinical practice courses</i>	4.17
<i>Overall quality of specialty course</i>	4.17
<i>Clinical practice sites</i>	4.00
<i>Clinical experience</i>	4.17
<i>Feedback from clinical preceptors</i>	4.50
<i>Advisement</i>	3.50
<i>Online format</i>	4.17
<i>Overall graduate faculty accessibility</i>	3.83
<i>Overall helpfulness of graduate faculty</i>	3.50
<i>MSN Faculty level of expertise</i>	4.00
<i>Overall rating of classroom facilities/equipment</i>	4.67
<i>Overall quality of DSU library services</i>	4.60
<i>Overall quality of technology support services</i>	4.20
<i>Skills Lab</i>	4.33
<i>Computer Lab</i>	4.25
<i>Overall quality of computer software/programs</i>	4.25
<i>Instructional materials/resources</i>	4.00

F. Five (5) of the six participants (83.3%) indicated they would recommend the program.

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G. Strengths of the MSN program at DSU?

- 100% On-line format
- 66.7% Flexible classes
- 66.7% Preparation for certification
- 66.7% Supportive Nurse Practitioner Director
- 50% Quality of Courses
- 50% Faculty Support
- 33.3% Flexibility of faculty
- 33.3% Teaching expertise
- 33.3% Recruitment Efforts
- 16.7% Quality of Program Advisement
- 25% Administrative Support
- 16.7% Supportive Dean
- 16.7% Technical Support
- 16.7% Supportive COAP
- 16.7% Other, please specify
 - Price
- 0% Library Support/availability
- 0% No Opinion
- 0% Library holdings

H. Weaknesses/Areas to Improve

- 66.7% Flexibility of Faculty
- 33.3% Quality of Program Advisement
- 33.3% Online format
- 33.3% Faculty Support
- 16.7% Flexible classes
- 16.7% Quality of Courses
- 16.7% Preparation for Certification
- 16.7% Recruitment Efforts
- 16.7% Supportive Nurse Practitioner Director
- 0% No opinion
- 0% Teaching Expertise
- 0% Library Support/availability
- 0% Supportive COAP
- 0% Library holdings
- 0% Supportive Dean
- 0% Technical support
- 0% Administrative Support
- 0% Other, please specify

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1 Year MSN Alumni Survey 2013

II. General Summary:

The results of this survey of 2012 graduates netted a 37.5% return rate of 5 females, 1 male. All were graduates of the Family Nurse Practitioner Program. All (83.3%) were employed full-time. Three (50%) were practicing in the Mississippi Delta. Two (33.3%) worked in a hospital, one (16.7%) in a rural health clinic, one (16.7%) in an urban clinic, and one (8%) at another type facility. The ratings for the program outcome ranged from 4.00 to 4.67. Fifty percent (50%) of the respondents reported the program prepared nurses to function in the advanced practice role as well as for advanced study. The level of satisfaction with the program rated between 3.50 and 4.67. The greatest strengths of the program were identified as the online format (100%), flexible classes, preparation for certification, and NP director support which all ranked 66.7%. Area of Weaknesses/Areas to Improve was identified as flexibility of faculty (66.7%). Five (83.3%) respondents stated that they would recommend the MSN program to a friend.

Delta State University Robert E. Smith School of Nursing
3 Year MSN Alumni Survey 2013

I. MSN Alumni

A. 3 year Graduate Results—Graduated 2010; Total number graduated = 10
In May of 2010, Ten (10) MSN (Family Nurse Practitioner) students graduated. Electronic surveys were sent to graduates and resulted in 4 (40%) surveys returned.

B. Demographic Data

1. Age range: 1 (25%) from 31-35; 3 (75%) from 36 and over.
2. Gender 4 (100%) females.
3. Ethnicity: 3 (75%) Caucasian; 1 (25%) African American
4. Role Concentration: 4 (100%) Family Nurse Practitioner
5. Certification: 3 (75%) reported being certified as Family Nurse Practitioner. 1 (25%) reported being certified as a Nurse Administrator.
6. Employed: 2 (50%) are employed full time in the role they were prepared for in their MSN program at DSU.
7. Provide care to MS Delta Residents: 3 (75%) practice nursing for residents of the Mississippi Delta Region; 1 (25%) respondents replied no.
8. Place Employed: 2 (50%) are employed in a School of Nursing; 1 (25%) are employed in a hospital; 1 (25%) is employed in a Physician's Office.
9. Further education: 3 (75%) of the respondents denied currently being in school; 1 (25%) reported being currently in school.
10. 3 (75%) reported plans to obtain a doctorate; 1 (25%) denied plans to obtain a doctorate outside of nursing.

C. Achievement of Program Outcomes

<i>Graduate Program Objectives</i>	<i>Mean</i>
<i>Integrate nursing, related sciences, and emerging evidence to improve health outcomes and safety for diverse populations.</i>	3.75
<i>Utilize leadership skills to design and implement strategies that improve care delivery and outcomes</i>	3.75
<i>Contribute to the integration of healthcare services to improve quality and safety across the continuum of care.</i>	3.50

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<i>Employ collaborative leadership strategies to advocate, mentor, and function within inter-professional teams and partnerships.</i>	3.50
<i>Translate theory and research to provide evidence based nursing practice and improve outcomes.</i>	3.75
<i>Analyze and interpret the effects of healthcare policies, ethics, and regulatory processes to influence practice and outcomes.</i>	3.50
<i>Integrate individual and population based health promotion and prevention strategies to provide equitable, efficient, and effective global healthcare.</i>	3.50
<i>Promote the use of information and communication technologies to provide safe, quality, and cost effective healthcare.</i>	3.50
<i>Apply advanced knowledge, skills, and competencies to design, implement, and evaluate direct and indirect care for individuals, families, and communities.</i>	3.75

D. Achievement of Graduate Program Purposes

<i>Purposes of the Program</i>	<i>Mean</i>
<i>Prepares for functioning in the advanced practice role as a family nurse practitioner, nurse administrator, and/or nurse educator.</i>	3.25
<i>Prepares for continuous learning and doctoral study.</i>	3.75

Delta State University Robert E. Smith School of Nursing
3 Year MSN Alumni Survey 2013

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

<i>Survey Items</i>	<i>Mean</i>
<i>Education in the DSU School of Nursing</i>	4.00
<i>Core courses</i>	3.50
<i>Clinical courses</i>	3.75
<i>Specialty courses</i>	3.33
<i>Clinical practice sites</i>	4.25
<i>Clinical experience</i>	4.25
<i>Feedback from clinical preceptors</i>	4.00
<i>Advisement</i>	2.75
<i>On-line course format</i>	3.50
<i>Graduate faculty accessibility</i>	3.00
<i>Helpfulness of graduate faculty</i>	2.75
<i>MSN Faculty level of expertise</i>	3.25
<i>Classroom facilities/equipment</i>	3.00
<i>DSU library services</i>	2.67
<i>Technology support services</i>	2.67
<i>Skills lab</i>	3.33
<i>Computer lab</i>	3.00
<i>Computer software/programs</i>	2.67
<i>Instructional materials/resources</i>	3.00

F. 2 (50%) indicated they would recommend the program.

G. Strengths of the MSN program at DSU?

- 50% Flexible classes
- 50% Flexibility Faculty
- 50% Preparation for Certification
- 50% Faculty Support
- 50% Online Format
- 50% Supportive Dean

Delta State University Robert E. Smith School of Nursing
3 Year MSN Alumni Survey 2013

50% Supportive Chair of Academic Programs
25% Quality of courses
25% Supportive Nurse Practitioner Director
25% Quality of Program Advisement
25% Recruitment Efforts
25% Teaching Expertise
25% Other – Nothing-would not go to this school again
0% Library Support/Availability
0% Technical Support
0% Library Holdings
0% No Opinion

H. Weaknesses/Areas to Improve

75% Supportive Nurse Practitioner Director
50% Quality of Courses
50% Preparation for Certification
50% Quality of Program Advisement
50% Faculty Support
25% Flexibility of Faculty
25% Teaching Expertise
25% Recruitment Efforts
25% Online Format
25% No opinion
0% Flexible Classes
0% Library Holdings
0% Technical Support
0% Library Support/Availability
0% Supportive Dean
0% Supportive Chair of Academic Programs
0% Other

II. General Summary:

The results of this survey of 2010 graduates netted a 40% return rate from 10 females. All ten were graduates of the Family Nurse Practitioner Program. Four (100%) were employed full-time. Two (50%) were practicing in the Mississippi Delta. One worked in a hospital, one in a physician's office, and two in a school of nursing. The ratings on each program outcomes ranged from 3.50 to 3.75. The general evaluation of program quality items netted mean scores of 2.67 to 4.25. Level of satisfaction areas that fell below 3.00 were advisement, helpfulness of faculty, library services, technical support services, and computer software/programs. Some of the greatest strengths of the program were flexible classes, flexibility of faculty, online format, support of the dean and COAP, and preparation for certification. Nurse Practitioner director support was reported as the top weaknesses/areas to improve. Two (50%) respondents stated they would recommend the MSN program to a friend.

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

2013 Graduate MSN Program Satisfaction Survey

Seventeen electronic surveys were completed by the thirteen (100%) MSN students who graduated in May 2013. Results are compiled and summarized.

Purpose of the Program

MSN Purpose of the Program	Mean
Prepares for functioning in an advanced practice role	4.76
Prepares for continuous study and doctoral study	4.76

MSN Program Outcomes

MSN Program Outcomes	Mean
Integrate nursing, related sciences, and emerging evidence to improve health outcomes and safety for diverse populations	4.65
Utilize leadership skills to design and implement strategies that improve care delivery and outcomes	4.59
Contribute to the integration of healthcare services to improve quality and safety across the continuum of care	4.59
Translate theory and research to provide evidence based nursing practice and improve outcomes	4.59
Promote the use of information and communication technologies to provide safe, quality, and cost effective healthcare	4.71
Analyze and interpret the effects of healthcare policies, ethics, and regulatory processes to influence practice and outcomes	4.65
Employ collaborative leadership strategies to advocate, mentor, and function within inter-professional teams and partnerships	4.65
Integrate individual and populations based health promotion and prevention strategies to provide equitable, efficient, and effective global healthcare	4.65
Apply advanced knowledge, skills, and competencies to design, implement, and evaluate direct and indirect care for individuals, families, and communities	4.65

COMMENTS:

- Proud to have been a student at DSU's RESSON!
- I though the program itself was excellent. There are a few things that should be addressed in the future. There needs to more application of the information that we are asked to read and then be tested on. So much information that we have no idea what the instructors want us to focus on. My courses were online and I feel that there should be online lecture time to cover the information that they wish us to learn. Basically we are teaching ourselves, hardly seems fair that we pay for that. Pharmacology

needs more time for teaching, possibly incorporate into all 4 semesters in order to cover all the needed information.

- Dr. Polk is a great instructor! She expects a lot, gives great encouragement and feedback and has done a great job inspiring me to study harder and to be a better practitioner!

Quality of Instruction

Core Courses	Mean
NUR 601 Advanced Theoretical Issues in Nursing and Ethics	4.53
NUR 604 Advanced Health care Policy and Politics	4.40
NUR 606 Advanced Nursing Research and Evidenced Based Strategies	4.50
NUR 607 Instructional Methodologies	4.27
NUR 687/690 Research Project/Thesis	4.43

Nurse Administration Specific Courses	Mean
NUR 615 Administrative Concepts	4.20
NUR 616 Nursing Administration I	4.20
NUR 619 Nursing Administration II	4.20
NUR 622 Nursing Administration III – Role Synthesis	4.20
MGT 600 Management Problems	4.20
MBA 505 Productivity Software for Executives	4.20
MGT 605 Human Resource Management	4.20
MGT 620 Recruitment, Selection, and Performance Appraisal	4.20

Nurse Educator Specific Courses	Mean
NUR 602 Advanced Health Assessment	4.60
NUR 605 Advanced Pharmacology	3.70
NUR 612 Adult Education I	4.67
NUR 613 Adult Education II	4.67
NUR 614 Adult Education III	4.67
NUR 617 Curriculum Design and Evaluation	4.67
NUR 621 Role Synthesis (Nurse Educators)	4.67
NUR 623 Teaching and Learning Theory	4.67

FNP Specific Courses	Mean
NUR 602 Advanced Health Assessment	4.53
NUR 605 Advanced Pharmacology	3.35
NUR 624 Differential Diagnosis	4.82
NUR 630 Family Nurse Practice I	4.35
NUR 634 Family Nurse Practice II	4.65
NUR 638 Family Nurse Practice III	4.82
NUR 620 Role Synthesis (Nurse Practitioner)	3.65
NUR 680 FNP Review Course	4.76

Nursing Elective Courses	Mean
NUR 686 (EKG Interpretation)	4.80

Clinical and Practicum Quality

Nurse Administrator Specific Practicum Courses:	Mean
NUR 645 Administrative concepts Practicum	4.67
NUR 646 Nursing Administration I Practicum	4.67
NUR 649 Nursing Administration II Practicum	4.67
NUR 622 Nursing Administration III – Role Synthesis Practicum	4.67

Nurse Educator Specific Practicum Courses:	Mean
NUR 618 Nurse Educator Practicum	4.67
NUR 625 Advanced Health Assessment Practicum	4.67
NUR 642 Adult Education I Practicum	4.67
NUR 643 Adult Education II Practicum	4.67
NUR 644 Adult Education III Practicum	4.67

Family Nurse Practitioner specific Practicum Courses:	Mean
NUR 625 Advanced Health Assessment Practicum	4.53
NUR 631 Family Nurse Practice I Practicum	4.41
NUR 635 Family Nurse Practice II Practicum	4.76
NUR 639 Family Nurse Practice III Practicum	4.76

Quality of Resources and Facility

Rate the Quality of the Following	Mean
Audiovisual equipment (TV/VCR, SMART classroom capabilities, video camera, etc.)	4.38
Skills lab equipment and supplies	4.59
Computer lab software and hardware programs	4.53
Simulation equipment and supplies	4.50
Electronic equipment for student use (copier, vending machines, refrigerator, microwave, etc.)	4.43
Academic support lab	4.46
Writing center	4.55
Technology Programs (Turning Point, Typhon, WIMBA, Blackboard)	4.35
IT support	4.46
Library support	4.43

Overall Satisfaction Indicators:

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

16 students (94.1%) responded Yes

0 student (0%) responded No

1 student (5.9%) did not respond to the question but gave additional comments.

COMMENTS:

- Yes, because of Dr Shelby Polk.

Reported strengths of the MSN program in descending order:

1. Supportive Nurse Practitioner Director – 93.8%
2. Preparation for Certification – 68.8%
3. Flexible Classes – 62.5%
4. Online format – 50%
5. Flexibility of Faculty – 43.8%
6. Teaching Expertise – 37.5%
7. Quality of Courses – 37.5%
8. Faculty Support – 31.3%
9. Supportive Chair of Academic Programs – 31.3%
10. Skills lab equipment & supplies – 25%
11. Administrative Support – 25%
12. Supportive Dean – 18.8%
13. Other, please specify – 6.3%
14. Library support/availability – 6.3%
15. Recruitment Efforts – 6.3%
16. Quality of Program Advisement – 0%
17. Library holdings – 0%
18. No Opinion – 0%
19. Technical Support – 0%

COMMENTS:

- Dr Polk is an awesome instructor/teacher!!!!

The greatest reported need for improvement reported in descending order.

1. Flexibility of Faculty – 31.3%
2. Quality of Courses – 25%
3. No Opinion – 25%
4. Recruitment Efforts – 18.8%
5. Technical Support – 18.8%
6. Teaching Expertise – 18.8%
7. Other, please specify – 12.5%
8. Flexible Classes – 12.5%
9. Faculty Support – 12.5%
10. Online format – 6.3%
11. Library holdings – 6.3%
12. Skills Lab equipment and supplies – 6.3%
13. Preparation for certification – 0%
14. Supportive Nurse Practitioner Director – 0%
15. Administrative Support – 0%
16. Library support/availability – 0%
17. Quality of Program Advisement – 0%
18. Supportive Dean – 0%
19. Supportive COAP – 0%

COMMENTS:

- first and second semester courses and instructors need to allow more flexibility
- Need improvement to the Pharmacology course and roles class

ADDITIONAL COMMENTS:

- Dr. Polk is an excellent instructor!
- It is an extremely rigorous program! Proud to say that I completed it :-). We appreciated every attempt that professors made to role model situations, giving us examples of the best--not just telling us "just figure it out". I know that it is hard to balance "just let them figure it out" with "do not spoon feed". Please never neglect out of fear that you will spoon feed--please continue to show your students the way.
- Pharmacology FNP needs help--I felt as though I still had entirely too much to learn upon completion of the course. I do not feel as though it was a productive course. More learning activities, assignments needed.
- Dr Shelby Polk is an excellent instructor/teacher. She truly goes above and beyond for each and every one of her students. Dr Polk provides guidance for each student while urging independence. This program would be unbearable with Dr Polk.

- Need more pharmacology. Maybe they could spread the pharmacology class out over two semesters and focus on the major classes on medication to allow for more time to learn these major medications. Pharmacology is a major part of healthcare and when you have to try and learn 37 chapters in two weeks, it just takes away from what is important. Maybe the classes can be more focused on the major classifications such as HTN medications, then diabetes medications, just those alone are a whole semester in themselves. I just think more emphasis should be placed on this class, because how many times does a patient come to a clinic and does not receive a prescription, or they have a bag full of medications to review. Take the policy and politics class out and replace it with another pharmacology class or something.
- Overall I loved my 3 years at Delta State, do think that the online courses need some improvement to help the students. Some of the faculty needs to be more supportive and understanding because most students have a life outside of school and families. Emergencies do come up and they should try to work with the students more. Dr. Polk always went above and beyond and we really appreciated her efforts.

Summary

The data from 17 MSN [FNP] students provided information that supported they were generally pleased with the program and confident about their preparation for functioning in an advanced practice role. Ninety four (94) percent of the students would recommend the program to a friend or colleague. Support of the NP Director, online format, flexible classes, and preparation for certification were among the top overall strengths reported for this program. The greatest need for improvement indicated by the students was flexibility of the faculty. This is somewhat ironic, because this same area was identified as a strength of the program. Several things should be taken into account concerning these survey results:

- 1). Only 13 students graduated from this program in 2013 yet 17 surveys were completed.
- 2). Only FNP MSN students graduated from this program, questions specific to the nurse educator and nurse administrator programs were answered by some of the participants.

**Delta State University
Robert E. Smith School of Nursing
Program Effectiveness Committee Annual Report 2013**

Committee Composition

Faculty

NAME	2013 SPRING SEMESTER	2013 FALL SEMESTER
Shelby Polk, Chair	X	
Carrie Cesare	X	
Addie Herrod	X	X
Monica Jones	X	X
Louise Seals	X	
Emily Newman		X
Betty Sylvest		X
Vicki Bingham, Ex Officio	X	X

Student Representatives

LEVEL	NAME	2013 SPRING SEMESTER	2013 FALL SEMESTER
Junior II	Chris Williams	X	
Senior I	Lindsey McPherson	X	
RN/BSN	Kristen Locke	X	
Graduate II	Carla Wilbourn	X	
Graduate IV	Shonna Dickard	X	
Junior I		Anna Clark	X
Junior III		Chris Williams	X
Senior II		Hunter Calvet	X
RN/BSN		Meredith James	X
Graduate I		Courtney Johnson	X
Graduate III		Carla Wilbourn	X

Standards Sub-Committee – Fall 2013

STANDARD I	STANDARD II	STANDARD III	STANDARD IV
Vicki Bingham MPE Chair	Shelby Polk MPE Chair	Vicki Bingham MPE Chair	Shelby Polk PEC Chair
Debbie Allen PEC Member Standard IV Chair	Louise Seals PEC Member Standard II Chair	Emily Newman PEC Member Standard III Chair	Carleen Thompson PEC Member Standard I Chair
Jan Wilson	Lacey Blessett	Donna Koestler	Monica Jones
Julyn Overstreet		Catherine Hayes	Betty Sylvest
		Addie Herrod	Jean Grantham
13 benchmarks	12 benchmarks	16 benchmarks	24 benchmarks

PEC Functions

1. Collect and analyze alumni evaluations at one (1) and three (3) year intervals.
2. Collect and analyze end of program evaluations for graduates.
3. Collect and analyze employer and advisory representative evaluations.
4. Recommend and/or revise evaluation tools.
5. Review and/or revise RESSON Rank Descriptions.
6. Review the RESSON Three Year Plan for congruency with the University's strategic plan and revise accordingly.
7. Review bylaws for consistency, currency, and relevancy and make recommendations for change.
8. Oversee the review, revision, and reporting of findings in the Master Plan for Evaluation (MPE).

2013 PEC Meetings

Members of the Program Effectiveness Committee (PEC) held nine (9) meetings in 2013 on the following dates/time. *The minutes for each meeting are attached.*

DATE	TIME
January 14, 2013	10:00 am – 12:00 noon
February 18, 2013	10:00 am – 12:00 noon
March 18, 2013	10:00 am – 12:00 noon
April 15, 2013	10:00 am – 12:00 noon
April 29, 2013	10:00 am – 12:00 noon
September 16, 2013	10:00 am – 12:00 noon
October 21, 2013	10:00 am – 12:00 noon
November 11, 2013	1:30 pm – 3:30 pm
December 2, 2013	10:00 am – 12:00 noon

2013 Goals

2013 Outcomes

1. Report findings from 1 and 3 year alumni evaluations and make recommendations to FacOrg.	MET	1 & 3 Year Alumni evaluations were completed in May/June 2013. An online format was utilized during the data collection process. A Report of Findings for the BSN, RN-BSN, and MSN 1 & 3 Year Alumni Surveys is attached to the 2013 PEC Annual Report.
2. Report findings from End of Program Satisfaction Surveys and make recommendations to Fac Org.	MET	2013 End of Program Satisfaction Surveys for BSN, RN-BSN, and MSN were completed and outcomes reported to FacOrg members. A Report of Findings for the BSN, RN-BSN, and MSN End of Program Satisfaction Surveys is attached to the 2013 PEC Annual Report.

<p>3. Report findings from Employer and Advisory Representative Surveys and make recommendations to Fac Org to improve response rates and scores.</p>	<p>MET</p>	<p>The 2013 Report of Findings from the Employer and Advisory Representative Survey is attached to the 2013 PEC Annual Report. Recommendations were to work with Career Services to increase employer's attendance and survey response rate.</p>
<p>4. Review didactic and clinical evaluations and make recommendations to Fac Org for revisions, as appropriate, to increase overall response rates and scores.</p>	<p>MET</p>	<p>All didactic courses taught in RESSON utilize the DSU Course/Faculty evaluations only.</p> <p>RESSON clinical courses utilize the DSU Course/Faculty and the RESSON Course and RESSON Clinical Faculty Evaluations.</p>
<p>5. Review and/or revise, RESSON Rank Descriptions.</p>	<p>MET</p>	<p>All RESSON Position Description were reviewed and revised as appropriate.</p>
<p>6. Review the RESSON Three Year Plan for congruency with the University's strategic plan and revise accordingly.</p>	<p>MET</p>	<p>The RESSON Three Year Plan Plan was reviewed in 2013. The RESSON Three Year Plan is congruent with DSU's Strategic Plan.</p> <p>The committee plan to review and prepare for a revised strategic plan to mirror the University's in language and formatting. This task will be completed in 2014.</p>
<p>7. Review bylaws for consistency, currency, and relevancy and make recommendations for change.</p>	<p>MET</p>	<p>Bylaws were reviewed and recommendations for revisions were approved by Fac Org in 2013.</p>
<p>8. Oversee the review, revision, and reporting of findings in the Master Plan for Evaluation (MPE).</p>	<p>MET</p>	<p>Presentation of outcomes for Standards I, II, III, & IV were presented at Fac Org meetings in Spring 2014. Some revisions were required before final submission, summer 2014.</p> <p>Effective Fall 2013 MPE Standard Subcommittees chairs and members changed as reflected in the table above.</p>

Submitted by: aHerrod, PEC Chair
6.25.14

Attachments included with Annual Report:

- 2013 PEC meeting minutes (9 meetings were held in 2013)
- 2013 BSN 1-Year Alumni Survey
- 2013 BSN 3-Year Alumni Survey
- 2013 RN-BSN 1-Year Alumni Survey
- 2013 RN-BSN 3-Year Alumni Survey
- 2013 MSN 1-Year Alumni Survey
- 2013 MSN 3-Year Alumni Survey
- 2013 BSN End of Program Satisfaction Survey
- 2013 RN-BSN End of Program Satisfaction Survey
- 2013 MSN End of Program Satisfaction Survey
- 2013 Employer and Advisory Council Survey
- 2012 – 2014 Strategic Plan
- 2013 MPE (Standards I – IV)

Delta State University Robert E. Smith School of Nursing Action/Decision Tracking Form

Date	Group	Action/Decision	Date	Group	Outcome(s)
1/21/13	PEC	<ul style="list-style-type: none"> • Dr. Bingham plan to schedule time for she and Dr. Polk to meet with Rhonda Loper in IRP regarding evaluation analysis and reporting issues. • Standard I-IV Sub-Committee Chairs and members are in the process of data collection for all benchmarks in 2012 Standards I-IV. MPE data collection for Standards I-IV is not complete at this time. Standard I findings will be presented at FacOrg meeting on 1/28/13 • Sub-Committee Chairs indicated being on track to present the findings as scheduled 	1/28/13	FacOrg	<ul style="list-style-type: none"> • MPE 2012 Standard I finding reported during FacOrg meeting with updates as needed when information becomes available. • Online evaluation analysis and reporting are to be followed up by Dr. Bingham with IRP.
2/18/13	PEC	<ul style="list-style-type: none"> • mJones and cThompson presented 2012 Standard I findings at 1/28/13 FacOrg meeting. Additional revisions are needed at this time and the sub-committee will complete and submit revisions as soon as possible. • aHerrod & dKoestler will present 2012 Standard II findings at the 3/25/13 Fac Org meeting. 	2/25/13	FacOrg	<ul style="list-style-type: none"> • MPE 2012 Standard II were presented with updates to be made as needed information becomes available • Revised Faculty Benchmarking Reporting Form was distributed
3/18/13	PEC	<ul style="list-style-type: none"> • Strategies to increase response rate on evaluations were 	3/25/13	FacOrg	<ul style="list-style-type: none"> • Evaluation Matrix for spring 2013 – vBingham distributed table of

Delta State University Robert E. Smith School of Nursing Action/Decision Tracking Form

Date	Group	Action/Decision	Date	Group	Outcome(s)
		<p>discussed. A suggestion was for class time to be devoted for students to go to computer lab while in class on campus and complete evaluations for that course. Some faculty awarded points if 75% of class completes evaluation.</p> <ul style="list-style-type: none"> • Combined evaluation of Clinical Faculty, Agency, Skill/Simulation Lab and Coordinator – Dr. Bingham has a deadline of April 1 to have this combined evaluation form to Institutional Research. 			<p>online evaluations to faculty. Faculty were asked to review for corrections and/or revisions needed. Faculty was ask to provide list of clinical agencies utilized for Spring Semester 2013.</p> <ul style="list-style-type: none"> • Strategies to increase response rate on evaluations were discussed. A suggestion was for class time to be devoted for students to go to computer lab while in class on campus and complete evaluations for that course. Some faculty awarded points if 75% of class completes evaluation. • Combined evaluation of Clinical Faculty, Agency, Skill/Simulation Lab and Coordinator – Dr. Bingham has a deadline of April 1 to have this combined evaluation form to Institutional Research.
4/22/13	PEC	<ul style="list-style-type: none"> • The mission statement was reviewed and revisions will be presented to Fac Org Committee for approval to include language regarding the DNP program. • sPolk will present 2012 Standard IV at the next Fac Org 	4/29/13	FacOrg	<ul style="list-style-type: none"> • Evaluation Response rate – Faculty were asked to encourage student participation in completing evaluations. There has been a very a poor response rate on evaluations. sPolk reported problems with faculty being able to view number of

Delta State University Robert E. Smith School of Nursing Action/Decision Tracking Form

Date	Group	Action/Decision	Date	Group	Outcome(s)
		<p>meeting.</p> <ul style="list-style-type: none"> • Sub-committee chairs for Standards I & II Sub-Committees are working to complete and submit revisions. • Standard III is not complete at this time. 	5/2/13	FacOrg	<p>responses/percentages of responses.</p> <ul style="list-style-type: none"> • MPE – sPolk reported she and committee must continue to work on Standard III during summer. 2012 Standard III will be presented at Fac Org Meeting in August, but committee will have data needed for RESSON Annual report. • Standard IV will be presented at Fac Org on Thursday, May 2. • MPE 2012 Standard IV was presented by sPolk. The following was needed to be added to the Faculty Benchmark Reporting Form: Recruitment (service), Advisement (teaching), and Professional Activities (Service). • vBingham & sPolk presented the proposal of the two of them being responsible to keep up with MPE, with all faculty being responsible for collecting data; MPE would come out of PEC function, but a faculty responsibility/document. sPolk would come off PEC to manage MPE. The motion was made by sPolk and seconded by bSylvest, cCesare abstained; approved.

Delta State University Robert E. Smith School of Nursing Action/Decision Tracking Form

Date	Group	Action/Decision	Date	Group	Outcome(s)
					<ul style="list-style-type: none"> Discussion and motion was made for a change in the RESSON Mission statement to reflect offering of DNP Program. RESSON faculty will consider further changes to Mission statement when they return in the Fall. It was also discussed the need of Faculty Handbook and Student Handbook revisions to reflect offering of DNP Program. The motion was made by bSylvest and seconded by mJones; approved.
Summer 2013	PEC Chair & Ex-Officio	<ul style="list-style-type: none"> Review of 1 & 3 year evaluation forms for BSN, RN-BSN, & MSN levels were evaluated and revised over 2013 summer 			
8/2013	PEC	<ul style="list-style-type: none"> No PEC Meeting 	8/16/13	FacOrg	<ul style="list-style-type: none"> Dates and times set for PEC Committee monthly meetings for the 2013-2014 academic year. PEC will meet 3rd Mondays of each month during the Fall 2013 semester.
9/16/13	PEC	<ul style="list-style-type: none"> Assign committee members for analysis 	9/23/13	FacOrg	<ul style="list-style-type: none"> Alumni 1 & 3 Year Surveys have been

Delta State University Robert E. Smith School of Nursing Action/Decision Tracking Form

Date	Group	Action/Decision	Date	Group	Outcome(s)
9/12/13	PEC	of BSN, RN-BSN and MSN 1 & 3 Year Alumni and End of Program Satisfaction Surveys for the BSN graduates <ul style="list-style-type: none"> • Employer Surveys were distributed during the Nurse Recruitment Day. 			revised. DSU Institutional Research distributed MSN & RN-BSN surveys electronically in August/September. BSN will be distributed electronically in December.
10/21/13	PEC	<ul style="list-style-type: none"> • Dr. Bingham to complete the Course Evaluation Table for Rhonda Loper, the contact person in IRP for RESSON evaluations. • Request sent to standing committee chairs for any recommendation for changes in Bylaws recommendation. • Update provided on the analysis of raw data of 1 & 3 Year Alumni Surveys and End of Program Evaluations • PEC meeting was dedicated to the development of the Faculty Environmental Satisfaction Survey. This survey will address Standard II F. 	10/29/12	FacOrg	<ul style="list-style-type: none"> • No PEC Updates
11/11/13	PEC	<ul style="list-style-type: none"> • Standing Committees By-Laws recommendations for revisions were compiled to be presented to faculty during the FaxOrg 	11/18/13	FacOrg	<ul style="list-style-type: none"> • Recommendation for Bylaws revisions were distributed and approved for the recommended changes. • Faculty Environmental Satisfaction Survey draft

Delta State University Robert E. Smith School of Nursing Action/Decision Tracking Form

Date	Group	Action/Decision	Date	Group	Outcome(s)
		<p>meeting. Faculty Development and PEC recommendation for change are ready. Yet to hear from Student Affairs regarding revisions/changes.</p> <ul style="list-style-type: none"> • Finalize the Faculty Environmental Survey and this must go to FacOrg for approval and distribution pending any needed revisions. This is to be completed before the end of the semester. The information will be reported in Spring 2014. • The Evaluation table is being completed by Dr. Bingham as Rhonda Loper from Institutional Research has called for them. Plan to assist/train PEC member to this task for the spring semester. • Written summaries of 1 & 3 Years surveys and program, satisfaction reports for the RN-BSN (Emily), and MSN (Monica), Employer/Advisory Satisfaction Surveys will be presented at FacOrg meeting. 			<p>was distributed and also placed in the cBook for faculty feedback. Feedback is due by November 22. The survey will be revised as needed and distributed to faculty members for approval and completion with a report of findings to FacOrg on Friday, 12/13.</p> <ul style="list-style-type: none"> • End of Semester Evaluation Process- Dr. Bingham has worked with Rhonda Loper, DSU Institutional Research, to improve evaluation process. Decision was made that DSU Campus Lab cannot offer services RESSON needs. DSU course evaluations and DSU faculty evaluation will be used by RESSIN students; each evaluation will be in a separate link. RESSON students will complete the following RESSON evaluations: BSN Satisfaction Survey, Simulation/Skills Lab Coordination Evaluation, Simulation/Skills Lab Evaluation, Clinical Faculty Evaluation, and Clinical Agency Evaluation. Each evaluation will have a separate link. Kelly Kirkland, OIT, said

Delta State University Robert E. Smith School of Nursing Action/Decision Tracking Form

Date	Group	Action/Decision	Date	Group	Outcome(s)
					evaluation links could be added to course homepage. <ul style="list-style-type: none"> Summary Reports for 1 & 3 Year Alumni Surveys and Employer/Advisory Surveys were deferred.
12/2/13	PEC	<ul style="list-style-type: none"> Update to the Bylaw revisions made and approved in faculty org meeting Faculty Environmental Survey distributed to faculty Update on reports from 1 & 3 year Alumni surveys for the MSN, RN-BSN from each committee member to report to FacOrg on 12/13. BSN information distributed and the analyses will be reported in spring 2014. Revisited strategies for improving Employer Satisfaction Survey rates. To report findings at December FacOrg Meeting Revisited responsibilities of the committee and provided an update of what's been done and/or addressed. Items includes: Faculty Environment Satisfaction Survey, Employer Satisfaction Survey, MSN, RN- 	12/13/13	FacOrg	<ul style="list-style-type: none"> Bylaw update: Student Affairs Committee had no revisions or recommendation for their committee's functions in the Bylaws. Summary report for the Faculty Environment Satisfaction Survey reports 100% participation from RESSON faculty. Results will be available next month. Summary Reports for 1 & 3 Year Alumni Surveys & Program Satisfaction Surveys reports satisfactory results Employer participation and survey response rate was low. Total of 3 surveys were complete (1 onsite and 2 via email). Results were reviewed by PEC. The committee plan to develop a method of improving response rate and attendance of Nurse Recruitment Day. Will be working with Career Placement Services for the fall 2014 event. Save the Date" for the

Delta State University Robert E. Smith School of Nursing Action/Decision Tracking Form					
Date	Group	Action/Decision	Date	Group	Outcome(s)
		BSN 1 & 3 Year Alumni/Program Satisfaction Survey (BSN will be analyzed and reported in 2014), Bylaws revisions made and approved in Fac Org. Items to carry forward as committee work in Spring 2014 includes: Continuation of revisions to all evaluations, three year plan, review Mission/Philosophy statements, complete evaluation table for IRP, and Employer Satisfaction Survey Strategy to distribute.			Fall 2014 recruitment date (September 11, 2014). Work to compile a data base of employers of DSU students (will utilize recruitment events to assist in building the data base of employer contacts)

Narrative Summary

During 2013 PEC maintained Sub-Committees for each Standard (I-IV) and all RESSON faculty members are assigned to a specific standard. The chair for each standard then assigned faculty members with specific benchmarks to assist with the data collection and report of findings/outcomes. The intent was to demonstrate faculty involvement in program governance. Members of PEC will continue to work with RESSON faculty members to engage them in the process. During 2013, the goal is to facilitate a timely completion of the MPE annually.

All of the 2013 PEC Goals were met. In the May 2, 2013 Fac Org meeting, vBingham & sPolk presented the proposal of the two of them being responsible to keep up with MPE, with all faculty being responsible for collecting data; MPE would come out of PEC function, but a faculty responsibility/document. The review, revision, and report of findings in the Master Plan for Evaluation was complete and reported with minor revisions in Spring 2014.

Delta State University
 School of Nursing
 1 Year RN/BSN Alumni Survey 2013

I. RN/BSN Alumni:

A. 1 year RN/BSN results—graduated May 2012; Total number graduated = 17.

In May 2012, seventeen (17) RN/BSN students graduated. Electronic surveys were sent to all graduates and resulted in a return of 2 (11.7%) surveys.

B. Demographic Data:

1. Age range
 - a. 31 to 35 - 1 (50%)
 - b. 36 & over 1 (50%)
2. Gender: Female 2 (100%)
3. Ethnicity
 - a. Caucasian 1 (50%)
 - b. African American 1 (50%)
4. State(s) where licensed: MS – 2 (100%)
5. Employed Full-Time: 2 (100%)
6. Working as a Registered Nurse: 2 (100%)
7. Place employed: Hospital - 2 (100%)
8. Primary nursing responsibility:
 - a. Staff Nurse – 1 (50%)
 - b. Nurse Administrator – 1 (50%)
9. Serve Residents of the Mississippi Delta
 - a. Yes – 2 (100%)
 - b. No - 0

C. Further Education

1. Currently Enrolled
 - a. Yes – 0
 - b. No - 2 (100%)
2. Highest Degree Currently Held
 - a. Bachelor – 2 (100%)
 - b. Master – 0 (0.0%)
 - c. Doctorate – 0 (0.0%)
3. Plan to Return
 - a. Yes – 2 (100%)
 - i. MSN – Administrator 1 (50%)
 - ii. MSN – Educator 2 (100%)
 - b. No – 0

D. Achievement of Program Outcomes:

<i>RN-BSN Program Outcomes</i>	<i>Mean</i>
Apply nursing, natural, and behavioral science concept to the practice of nursing.	4.50
Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care in a collaborative environment	4.50

Delta State University
 School of Nursing
 1 Year RN/BSN Alumni Survey 2013

<i>RN-BSN Program Outcomes</i>	<i>Mean</i>
Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession.	4.50
Utilize research in the delivery of health care	4.50
Advocate for the improvement in healthcare through participation in professional and political processes	4.50
Provide individualized nursing care that focuses on health promotion and disease and injury prevention	4.50
Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach	4.50

E. Achievement of BSN Program Purposes:

<i>Purposes of the Program</i>	<i>Mean</i>
<i>Prepares nurses to function in the practice role as a BSN prepared registered Nurse.</i>	4.5
<i>Prepares for continuous learning and advanced study</i>	5.0

F. Quality of the BSN Program:

<i>Items</i>	<i>Mean</i>
<i>Overall quality of BSN education at DSU SON</i>	4.5
<i>Overall quality of general education courses required as a pre requisite to the program</i>	4.5
<i>Overall quality of required Clinical practice sites utilized during your attendance at DSU</i>	4.5
<i>Overall BSN faculty accessibility while you were in the DSU program</i>	4.5
<i>Overall helpfulness of faculty while you were in the BSN program</i>	4.5
<i>Overall faculty level of expertise while you were in the BSN program</i>	4.5
<i>Overall rating of Classroom facilities/equipment while you were on campus at DSU</i>	4.5
<i>Overall Quality of library services provided while you were attending DSU</i>	4.5
<i>Overall quality of on-line courses that you took while in the BSN program</i>	5.0

Delta State University
 School of Nursing
 1 Year RN/BSN Alumni Survey 2013

<i>Items</i>	<i>Mean</i>
<i>Overall quality of Feedback from clinical preceptors</i>	4.5
<i>Overall quality of clinical experience that you received during your course of study</i>	4.0
<i>Overall rating of advisement while you attended the BSN or RN/BSN program</i>	4.5
<i>Overall Instructional materials</i>	4.5
<i>Overall rating of classroom facilities/equipment</i>	4.5
<i>Overall rating of skills lab</i>	4.5
<i>Overall rating of Simulation lab</i>	5.0
<i>Overall rating of computer lab</i>	4.5

G. Indicated they would recommend RN/BSN Program

1. Yes – 2 (100%)
2. No – 0 (0.0%)

H. Strengths of the BSN or RN/BSN program at DSU

1. Quality of Courses – 100%
2. Faculty Support – 50%
3. Flexible Classes – 50%
4. Flexibility of Faculty – 50%
5. Online Format - 50%
6. Quality of Program Advisement – 50%

I. Weaknesses/Areas to Improve:

1. Online Format – 50%
2. Other – 50% (No comment)

J. Greatest Need for Improvement

1. Clinical hours requirement

II. General Summary:

The results of this survey of the 1 Year RN/BSN 2013 Alumni Survey netted an 11.7% return rate. One respondent was Caucasian; one was African American; two were female. All are employed full time as a registered nurse (RN) with both respondents employed in a hospital setting. None of the respondents was currently enrolled in degree seeking program but plan to complete a higher degree in the future.

Delta State University
School of Nursing
1 Year RN/BSN Alumni Survey 2013

The ratings on each program outcome were 4.5 or better. Mean scores for accomplishment of the purposes of the program were all 4.0 or better as well. Quality of program items all received mean scores of 4.0 or better. Quality of courses, faculty support, flexible classes, flexibility of faculty, online format and quality of program advisement were identified as strengths of the program. Weaknesses identified included online format and other with no clarifying comment included on the survey. Clinical hours requirement was identified as the area of the greatest need of improvement. All respondents indicated they would recommend the program to a friend.

Delta State University
School of Nursing
3 Year RN/BSN Alumni Survey 2013

I. RN/BSN Alumni:

- A. 3 year RN/BSN results—graduated May 2010; Total number graduated = 19.

In May 2010, nineteen (19) RN/BSN students graduated. Electronic surveys were sent to all graduates and resulted in a return of 5 (26.1%) surveys.

B. Demographic Data:

1. Age range
 - a. 31 to 35 - 1 (20%)
 - b. 36 & over 4 (80%)
2. Gender:
 - a. Female 4 (80%)
 - b. Male 1 (20%)
3. Ethnicity
 - a. Caucasian 4 (80%)
 - b. African American 1 (20%)
4. State(s) where licensed
 - a. GA – 1 (20%)
 - b. MS – 4 (80%)
 - c. Other – 1(20%)
5. Employed Full-Time:
 - a. No – 0 (0.0%)
 - b. Yes - 5 (100%)
6. Working as a Registered Nurse
 - a. No – 1 (20%)
 - b. Yes - 4 (80%)
7. Place employed
 - a. Hospital – 2 (40%)
 - b. Other – 1 (20%)
 - c. Rural Health Clinic – 2 (40%)
8. Primary nursing responsibility:
 - a. Nurse Manager – 1 (20%)
 - b. Nurse Practitioner – 2 (40%)
 - c. Staff Nurse – 2 (40%)
9. Serve Residents of the Mississippi Delta
 - a. No – 1 (20%)
 - b. Yes – 4 (80%)

C. Further Education

1. Currently Enrolled
 - a. No - 4 (80%)
 - b. Yes - 1 (20%)
2. Highest Degree Currently Held
 - a. Bachelor – 3 (60%)
 - b. Master – 2 (40%)

Delta State University
 School of Nursing
 3 Year RN/BSN Alumni Survey 2013

- c. Doctorate – 0 (0.0%)
- 3. Plan to Return
 - a. No – 1 (20%)
 - b. Yes – 4 (80%)
 - i. MSN – Educator - 1 (25%)
 - ii. MSN – Nurse Practitioner – 3 (75%)
 - iii. DNP – 1 (25%)

D. Achievement of program outcomes:

RN-BSN Program Outcomes	Mean
Apply nursing, natural, and behavioral science concept to the practice of nursing.	3.80
Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care in a collaborative environment	3.80
Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession.	3.80
Utilize research in the delivery of health care	3.80
Advocate for the improvement in healthcare through participation in professional and political processes	3.80
Provide individualized nursing care that focuses on health promotion and disease and injury prevention	3.80
Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach	3.80

E. Achievement of BSN Program Purposes:

<i>Purposes of the Program</i>	<i>Mean</i>
<i>Prepares nurses to function in the practice role as a BSN prepared registered Nurse.</i>	4.8
<i>Prepares for continuous learning and advanced study</i>	4.6

F. Quality of the BSN Program:

<i>Items</i>	<i>Mean</i>
<i>Overall quality of BSN education at DSU SON</i>	3.6
<i>Overall quality of general education courses required as a pre requisite to the program</i>	3.75

Delta State University
 School of Nursing
 3 Year RN/BSN Alumni Survey 2013

<i>Items</i>	<i>Mean</i>
<i>Overall quality of required Clinical practice sites utilized during your attendance at DSU</i>	3.8
<i>Overall BSN faculty accessibility while you were in the DSU program</i>	3.6
<i>Overall helpfulness of faculty while you were in the BSN program</i>	3.6
<i>Overall faculty level of expertise while you were in the BSN program</i>	3.6
<i>Overall rating of Classroom facilities/equipment while you were on campus at DSU</i>	3.8
<i>Overall Quality of library services provided while you were attending DSU</i>	4.5
<i>Overall quality of on-line courses that you took while in the BSN program</i>	3.8
<i>Overall quality of Feedback from clinical preceptors</i>	3.6
<i>Overall quality of clinical experience that you received during your course of study</i>	3.8
<i>Overall rating of advisement while you attended the BSN or RN/BSN program</i>	3.6
<i>Overall Instructional materials</i>	3.6
<i>Overall rating of classroom facilities/equipment</i>	3.8
<i>Overall rating of skills lab</i>	4.67
<i>Overall rating of Simulation lab</i>	3.75
<i>Overall rating of computer lab</i>	4.67

G. Indicated they would recommend RN/BSN Program

1. No – 1 (20%)
2. Yes – 4 (80%)

H. Strengths of the BSN or RN/BSN program at DSU

1. Flexible Classes – 100%
2. Online Format – 80%
3. Faculty Support – 60%
4. Quality of Courses – 60%
5. Teaching Expertise – 60%
6. Dean Support – 40%
7. Flexibility of Faculty – 40%
8. Quality of Program Advisement – 40%

Delta State University
School of Nursing
3 Year RN/BSN Alumni Survey 2013

- 9. Technical Support – 40%
- 10. Chair of Academic Programs (COAP) – 20%

I. Weaknesses/Areas to Improve:

- 1. No Opinion – 40%
- 2. Faculty Support – 20%
- 3. Flexibility of Faculty- 20%
- 4. Library Holdings – 20%
- 5. Library Support/availability – 20%
- 6. Recruitment Efforts – 20%
- 7. Teaching Expertise – 20%
- 8. Other – 20% (No comment)

J. Greatest Need for Improvement

- 1. Attitude of Faculty

II. General Summary:

The results of the 3 Year RN/BSN 2013 Alumni Survey netted a 26.1% return rate. Four respondents were Caucasian; one was African American. Four were female; one was male. All were employed full time with four employed as a registered nurse (RN). Two were employed in a hospital setting, two were employed in a rural health clinic, and one employed as other with no comment for clarification. One of the respondents was currently enrolled in degree seeking program and four respondents plan to complete a higher degree in the future. The ratings on each program outcome were 3.8 or better. Mean scores for accomplishment of the purposes of the program were all 4.6 or better as well. Quality of program items all received mean scores of 3.6 or better. Flexible classes, online format, faculty support, quality of courses, teaching expertise, Dean support, flexibility of faculty, quality of program advisement, technical support, and Chair of Academic Programs (COAP) were identified as strengths of the program. Weaknesses identified included faculty support, flexibility of faculty, library holdings, library support/availability, recruitment efforts, and teaching expertise. Attitude of the faculty was identified as the area of the greatest need of improvement. Four of the five respondents would recommend the RN/BSN program to a friend.

Delta State University
 School of Nursing
 Program Effectiveness Committee
 2013 Undergraduate RN-BSN Program Satisfaction Survey

Fourteen of the fourteen (100%) RN-BSN students submitted electronic surveys. Results are compiled and summarized.

1. Purpose of the Program

RN-BSN Purpose of the Program	Mean
Prepares for professional nursing practice as a generalist	4.5
Prepares for continuous learning and advanced study	4.5

2. RN-BSN Program Outcomes

RN-BSN Program Outcomes	Mean
Apply nursing, natural, and behavioral science concept to the practice of nursing.	4.42
Utilize the nursing process and standards of care to deliver safe, comprehensive nursing care in a collaborative environment	4.50
Practice as a self-directed nursing leader who is accountable to self, society, and the evolving nursing profession.	4.58
Utilize research in the delivery of health care	4.67
Advocate for the improvement in healthcare through participation in professional and political processes	4.50
Provide individualized nursing care that focuses on health promotion and disease and injury prevention	4.50
Apply information and patient care technology to improve healthcare delivery from an interdisciplinary approach	4.58

Comment

- The RNBSN program here at DSU has definitely given me a new sense of confidence within myself as a nurse and provided me the tools to further my education.

3. Quality of Instruction

Course	Mean
NUR 311 Comprehensive Health Assessment	4.83
NUR 312 Basic Pathophysiology	4.73
NUR 358 Transition to Professional Nursing	4.5
NUR 309 Nursing Research	4.83
NUR 314 Health Policy and Ethical Decision Making	4.75
NUR 403 Community Health Nursing	4.58
NUR 402 Management of Client Care	4.33
NUR 409 Evidence Based Practice	4.42

COMMENTS:

- Management of Client Care seemed to be graded on Instructor preference for writing style, as opposed to knowledge, skill, or application of the student

4. Clinical and Practicum Quality

Course	Mean
NUR 331 Comprehensive Health Assessment	4.58
NUR 407 Directed Study	4.58
NUR 442 Management of Client Care	4.33
NUR 443 Community Health Nursing	4.42

COMMENTS:

- I really enjoyed my experience in Community Health and am even considering taking my career in that direction

5. Quality of Physical Resources and Facility

Rate the Quality of the Following	Mean
Audiovisual equipment (TV/VCR, SMART classroom capabilities, video camera, etc.)	4.2
Skills lab equipment and supplies	4.00
Computer lab software and hardware programs	4.45
Electronic equipment for student use (copier, vending machines, refrigerator, microwave, etc.)	3.83
Academic support lab	3.71
Writing center	3.83
Technology Programs (Turning Point, Typhon, WIMBA, Blackboard)	4.36
IT support	4.0
Library support	4.09

COMMENTS:

- Neutral answers are based on a lack of use/knowledge of the given subject area

6. Overall satisfaction indicators:

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

Nine (75%) responded Yes

Two (16.7%) responded No

One (8.3%) with Additional Comments

NOTE: Two skipped the question

Comment

- If someone is interested in continuing their education to obtain a master's degree in nursing, I would recommend this school of nursing.

7. Reported strengths of the RN-BSN program are reported as follows in descending order.

1. Faculty Support – 66.7%
2. Online format – 58.3%
3. Flexible Classes – 50%
4. Flexibility of Faculty – 41.7%
5. Administrative Support – 33.3%
6. Library support/availability – 33.3%
7. Quality of courses – 33.3%
8. Supportive Dean – 25.0%
9. Teaching Expertise – 25.0%
10. Library holdings – 16.7%
11. No opinion – 16.7%
12. Recruitment efforts – 16.7%
13. Supportive Chair of Academic Programs (COAP) – 8.3%
14. Quality of program advisement – 8.3%
15. Technical support – 8.3%
16. Skills lab equipment and supplies – 8.3%
17. Other, please specify – 0%

Comments

- I would like to see online lectures presented as some of us are visual learners and benefit from the classroom setting but are unable to be in the classroom.
- Replying within a timely manner for student help

8. The greatest needs for improvement in the RN-BSN program were reported as follows in descending order.

1. Flexibility of Faculty – 50%
2. Flexible Classes – 33.3%
3. Quality of program advisement – 33.3%
4. Teaching Expertise – 25%
5. No Opinion – 16.7%
6. Online format – 16.7%
7. Other, please specify – 16.7%
8. Quality of Courses – 16.7%
9. Administrative Support – 8.3%
10. Faculty Support – 8.3%
11. Recruitment efforts – 8.3%
12. Technical support – 8.3%
13. Library support/availability – 0%
14. Library holdings – 0%

- 15. Skills lab equipment and supplies – 0%
- 16. Supportive COAP – 0%
- 17. Supportive Dean – 0%

Comments:

- I would suggest course expectations be more defined at the beginning of the course
- More teaching to be done as oppose to 'here are your assignments for the semester...good luck'
- The program is not for the working nurse by any means. There is no flexibility, and the zero tolerance policy is unnecessary. The clinical requirements should be removed as it does not fit the 2013 model of a RN-BSN student.

9. Summary

The data from 14 RN-BSN students provided information that demonstrated they felt confident about their preparation for professional nursing practice as a generalist as well as for continuous learning and advanced study. Seventy-five percent (75%) of the students would recommend the program to a friend or colleague. Faculty support, online format, and flexible classes were among the top overall strengths reported for this program. Some greatest needs of improvement were reported as flexibility of faculty, flexible classes, and quality of program advisement.

III. C The Curriculum is *logically structured* to achieve *expected student outcomes*

Current Benchmarks

1. The BSN and RN_BSN curriculum schema is logically organized with approximately 50% prerequisite and 50% nursing courses.
2. The MSN curriculum schema is organized in a general to specific format beginning at a baccalaureate nurse prepared knowledge level.
3. The DNP (RN_DNP, BSN-DNP, MSN (non-FNP), MSN (FNP) curriculum schema is organized in a general to specific format beginning at the student's appropriate level of entry.
4. Post-master's (MSN, DNP [non-FNP], DNP [FNP]) curriculum schema is organized in a general to specific format beginning at a graduate nurse prepared knowledge level.

Elaboration:

- Baccalaureate program *faculty and students articulate how knowledge* from courses in the arts, sciences, and humanities is *incorporated into nursing practice*.
- Post-baccalaureate entry programs in nursing *incorporate the generalist knowledge* common to baccalaureate nursing education as delineated in *The Essentials* of Baccalaureate Education for Professional Nursing Practice (AACN, 1998) as well as advanced course work. Graduate curricula are clearly based on a foundation comparable to a baccalaureate degree in nursing.
- Graduate programs delineate how students who *do not have a baccalaureate degree* in nursing acquire the knowledge and competencies comparable to baccalaureate education in nursing as a foundation for advanced nursing education.
- Accelerated programs that move students from basic nursing preparation (e.g., associate degree or diploma education) to a graduate degree demonstrate how these students acquire baccalaureate level knowledge and competencies delineated in *The Essentials* of Baccalaureate Education for Professional Nursing Practice (AACN, 1998), even if they do not award a baccalaureate degree in nursing in addition to the graduate degree.
- The program *provides a rationale* for the sequence of the curriculum for each program.

**Standard III – Table C
2013**

**Standard III – Table C.1
BSN Curriculum Educational Requirements**

Benchmark	GENERIC BSN PROGRAM SEQUENCING	RN_BSN PROGRAM SEQUENCING
<p>Element III-C BSN Curriculum Organized The curriculum schema is logically organized with approximately 50% prerequisite and 50% nursing courses YES NO</p> <p>The curriculum schema is logically organized YES NO</p> <p>Note any changes made to curriculum schema in the "comments" section</p> <p>Nursing Hours 64 • Core - 17 • Program - 45 *General Education 39 *Special Degree Req. 21 TOTAL 124 hours</p>	First Semester Junior (Fall) NUR 302 Fundamentals of Client Care (3 hrs) NUR 332 Fundamentals of Client Care (3 hrs) NUR 303 Health Assessment (2.5 hrs) NUR 333 Health Assessment (.5 hrs) NUR 312 Basic Pathophysiology (3 hrs) TOTAL HOURS = 12	First Semester (Summer) NUR 311 Comprehensive Health Assessment (1.5 hrs) NUR 331 Comprehensive Health Assessment Practicum (0.5 hrs) NUR 312 Basic Pathophysiology (3 hrs) NUR 358 Transition to Professional Nursing (4 hrs) TOTAL HOURS = 9* *Upon successful completion of NUR 311, NUR 312, NUR 331, and NUR 358, the student will receive 33 hours of DSU credit for courses completed in an accredited associate degree nursing program
	Second Semester Junior (Spring) NUR 305 Nursing the Adult Client I (4 hrs) NUR 335 Nursing the Adult Client I Practicum (3 hrs) NUR 314 Health Policy and Ethical Decision making (3 hrs) NUR 304 Pharmacology (3 hrs) TOTAL HOURS = 13	Second Semester (Fall) NUR 309 Nursing Research (3 hrs) NUR 314 Health Policy/Ethical Decision making (3 hrs) NUR 403 Community Health Nursing (2.5 hrs) NUR 443 Community Health Nursing Practicum (1.5 hrs) TOTAL HOURS = 9
	Third Semester Junior (Fall) NUR 306 Nursing the Adult Client Care II (4 hrs) NUR 336 Nursing the Adult Client Care II Practicum (3 hrs) NUR 307 Mental Health/Psychiatric Nursing (3 hrs) NUR 337 Mental Health/Psychiatric Nursing Practicum (1 hr) NUR 309 Nursing Research (3 hrs) TOTAL HOURS = 14	Third Semester (Spring) NUR 402 Management of Client Care (3 hrs) NUR 442 Management of Client Care Practicum (3 hrs) NUR 407 Directed Study (4 hrs) NUR 409 Evidence Based Practice (2 hrs) TOTAL HOURS = 12
	First Semester Senior (Spring) NUR 401 Maternity Nursing (2.5 hrs) NUR 441 Maternity Nursing Practicum (1.5 hrs) NUR 403 Community Health Nursing (2.5 hrs) NUR 443 Community Health Nursing Practicum (1.5 hrs) NUR 405 Pediatric Nursing (2.5 hrs) NUR 445 Pediatric Nursing Practicum (1.5 hrs) TOTAL HOURS = 12	
	Second Semester Senior (Fall) NUR 402 Management of Client Care (3 hrs) NUR 442 Management of Client Care Practicum (3 hrs) NUR 406 Nursing Preceptorship (4 hrs) NUR 408 Nursing Synthesis (3 hrs) TOTAL HOURS = 13	
Comments: The current RN_BSN curriculum is currently being revised to become a one-year program of study due to the lack of RN applicants into the RN_BSN program.		

The current BSN program builds upon the foundational knowledge of humanities, liberal arts and sciences that are completed in approximately two years at the sophomore-freshman level. These general education courses are vital in preparing the nursing student to scaffold knowledge from a range of disciplines with the end goal of applying the nursing process to patient care. Sequencing of prerequisite courses is described in Table 2. Moreover, knowledge learned in the general education courses is threaded and integrated throughout the BSN program. For example the prerequisite courses of psychology, sociology and anatomy-physiology prepare the beginning nursing student in caring for the whole person by developing careplans that meet the bio-psycho-social needs of the person-family unit. Additionally, table 3 provides examples of the integration of prior knowledge into the BSN program.

The BSN curriculum is logically organized and this is evident in the sequencing of sciences and liberal studies. For instance, prerequisite science courses move from general to specific building upon prerequisite criterion. The freshman nursing student starts with the Principles of Biology (BIO 100) before entering into the other sciences courses such as Microbiology. In the fall of 2012, Robert E. Smith School of Nursing (RESSON) no longer required Chemistry as a prerequisite to admittance into the nursing program. However, Chemistry still remains a required prerequisite for Anatomy & Physiology (A&P) courses at Delta State University (DSU) creating a situation whereby the student must choose whether to complete A&P at DSU or elsewhere.

Additionally, the liberal studies courses widen the worldview of the student by becoming well-versed in complexities of the human person in a multicultural society. Most definitely, these courses build upon one another and this is noted when the student must complete English Composition I & II prior to completing the Literature courses. In addition to the aforementioned, the student must complete a statistics course to prepare for NUR 309: Nursing Research. The ultimate purpose of this research course is to foster understanding of the need to implement evidence-based interventions and to generate an empirical knowledge base to guide nursing practice.

**Standard III – Table C
2013**

**Standard III – Table C.2
Sequencing of Prerequisite Courses Prior to Entering Into the BSN Program**

English Composition (6 hours)	ENG 101 English Composition (3 hrs) ENG 102 English Composition (3 hrs) ENG 103 Honors English Composition (3 hrs)
Communication Studies (3 hours)	COM 101 Public Speaking (3 hrs) COM 202 Interpersonal Communications
Literature and Fine Arts (9 hours)	Select two literature courses (6 hours) Select one art, music, or theater appreciation, history, or introduction course (3 hours) <ul style="list-style-type: none"> • ART 101 Introduction to Art (3 hrs) • ART 212 Art Appreciation (3 hrs) • ART 401 Art History Survey I (3 hrs) • ART 402 Art History Survey II (3 hrs) • MUS 114 Music in American Culture (3 hrs) • MUS 115 Experiencing Music (3 hrs) • THE 225 Introduction to Theater (3 hrs)
History (6 hours)	Select two of the following courses (6 hours) <ul style="list-style-type: none"> • HIS 101 History of Civilization (3 hrs) • HIS 102 History of Civilization (3 hrs) • HIS 201 United States History (3 hrs) • HIS 202 United States History (3 hrs) • HIS 203 History of the Americas (3 hrs) • HIS 204 History of the Americas (3 hrs)
Mathematics (3 hours)	Select one course MAT 103 Quantitative Reasoning (3hrs) MAT 104 College Algebra (3 hrs) MAT 106 Precalculus (3 hrs)
Laboratory Science (6 hrs minimum)	*Incorporated in Special Degree Requirements (12 hours): <ul style="list-style-type: none"> • CHE 101 General Chemistry I (3 hrs) • CHE 103 General Chemistry Laboratory I (2 hrs) • BIO 217 Introduction to Microbiology (4 hrs)*

**Standard III – Table C
2013**

	<ul style="list-style-type: none"> • BIO 230 Anatomy and Physiology I (4 hrs)* • BIO 231 Anatomy and Physiology II (4 hrs)* <p>*BIO 100 Principles of Biology I (4 hrs) is a prerequisite if these courses (BIO 217, 230, 231) are taken at DSU CHE 101 and 101 (5 hrs) are prerequisites for these courses (BIO 230, BIO 231, and BIO 217) are taken at DSU</p>
Perspectives on Society (9 hours)	<p>PSY 101 General Psychology (3 hrs) SOC 101 Principles of Sociology (3 hrs) Select one of the following courses (3 hours):</p> <ul style="list-style-type: none"> • ANT 101 Introduction to Anthropology (3 hrs) • ECO 210 Principles of Macroeconomics (3 hrs) • ECO 211 Principles of Microeconomics (3 hrs) • GEO 201 Introduction to Human Geography (3 hrs) • GEO 303 World Regional Geography (3 hrs) • PHI 201 Introduction to Philosophy (3 hrs) • PSC 103 Introduction to Political Science (3 hrs) • PSC 201 American National Government (3 hrs)
Personal Development (2 hrs minimum)	CIS 205 Microcomputer Applications (3 hrs)
Special Degree Requirements (26 hours)	<p>FCS 345 General Nutrition (3 hrs) MAT 300 Applied Probability and Statistical Methods (3 hrs) Human Development/Behavioral Science - select one of the following (3 hours):</p> <ul style="list-style-type: none"> • PSY 307 Development Psychology (3 hrs) • PSY 313 Psychology of Adolescence (3 hrs) • PSY 403 Theories of Personality (3 hrs) • FCS 326 Child Development (3 hrs) • CEL 300 Human Growth and Development (3 hrs)
TOTAL HOURS - 65 hours	Science (12 hours) – see above in Laboratory Science section
Comments	The required number of prerequisite hours are being reviewed and will most likely be reduced according to IHL standards in the coming year.

**Standard III – Table C
2013**

**Standard III – Table C.3
Examples of Integration of Prior Knowledge in the BSN Program**

Prerequisite Course	Application of Knowledge
Communication studies, English Composition	The nursing student must be able to interact and communicate effectively with peers and other professionals in the healthcare setting. These prerequisite courses prepare the student to complete written assignments, effectively speak during presentations and oral reports, and apply therapeutic communication techniques to patient care.
Laboratory Sciences	Scientific knowledge base is required to apply the nursing process to the patient with alterations in health status such as Diabetes, infectious diseases and other morbidities.
Literature and Fine Arts	Nursing is described as an art & a science. These courses address the “Art of Nursing”, and can be seen when the student’s develop poster presentations, powerpoint presentations, library presentations, and community engagement. It must also be mentioned that the ability to find solutions to adaptive challenges and to effectively engage in critical thinking-clinical reasoning the student must use abstract thought.
Mathematics	Correct dosage calculation and medication administration requires a strong mathematical foundation. Statistics is applied in the nursing research course.
History	Historical concepts are reinforced in Healthcare Policy and Ethical Decision Making when the “Great Influenza”. Also, historical concepts create a global awareness of current nursing issues.
Perspectives on Society	Nursing occurs in a multicultural context and courses such as anthropology, macroeconomics, human geography, political science broaden the student’s awareness of differences that exist.
Personal Development	Technology is utilized extensively at RESSON and the course of Microcomputer Applications, prepares the student to effectively adapt to the technology-rich environment.
Special Degree Requirements	The nurse cares for the patient throughout the lifespan and courses such as: Child Development, Human Growth and Development, Psychology of Adolescence prepares the student to apply the nursing process developmentally in a bio-psycho-social-spiritual context.

**Standard III – Table C
2013**

The Robert E. Smith School of Nursing (RESSON) recognizes that student success is greatly enhanced when a solid foundation of skills and knowledge have been acquired. With this in mind, RESSON employs three strategies to communicate this to the student body. The first is to schedule an orientation session with newly admitted BSN students in the summer I session to provide preparatory materials and discuss the importance of reviewing previous learned knowledge prior to the Fall semester. Emphasis is placed on reviewing Anatomy and Physiology concepts during the summer months to prepare for Pathophysiology. See Table 4 to view an example of an orientation session. The second strategy is to schedule regular student–advisor meetings with nursing faculty to ensure that the student stays on track with the planned academic pathway. The third strategy is to invite the BSN student to participate in a “Boot-Camp” two weeks prior to entering the first semester of nursing school with the purpose of examining general education concepts and to introduce the student to program requirements.

Standard III - Table C.4

BSN Orientation Schedule

Delta State University	
Robert E. Smith School of Nursing	
BSN Orientation Agenda	
Friday, May 31, 2013	
Rooms 141 & 142	
9:00 – 9:05 am	Welcome and Introductions: Dr. Lizabeth Carlson, Dean, School of Nursing
9:05 – 10:00am	Overview of Student Handbook and Forms: Dr. Vicki Bingham, Chair of Academic Programs
10:00 – 11:30am	Required Documentation, Pictures, Registration, and Boot Camp: Judy Haney, Carla Lewis, Emily Newman, Other Faculty
11:00am – 11:15am	Barnes and Noble Bookstore: Tina Gladden
11:30am – 12Noon	Course Descriptions and Required Textbook: Lacey Blessitt
12:00 – 12:30pm	Tour of School of Nursing (optional)
12:30 – 1:30pm	Lunch
1:30 – 2:00pm	Supplies/Equipment/Uniforms/Name Tags; Current Nursing Students and SNA:Debbie Allen, Junior III & Senior Students
2:00 – 3:00pm	Course Descriptions and Required Textbooks:Donna Koestler
3:00 – 3:30pm	Wrap-Up and Questions
3:30pm	Adjournment

To conclude, upper level progression in the nursing program is dependent upon successful completion of prerequisite nursing course in the lower levels. Each nursing course builds upon a prerequisite with course sequencing moving from simple to complex. This sequencing starts with providing care to the individual and then progresses to families-communities. Furthermore, in the generic BSN program, the acquisition of basic nursing skills and clinical reasoning abilities progress from novice to advanced beginner according to Benner's framework. Likewise, the RN_BSN program course sequencing moves from simple to complex fostering skill development from competent to expert.

Overall, the baccalaureate program is designed to promote competency as a generalist nurse that focuses on the health-wellness continuum for individuals-groups-families and communities across the developmental lifespan. The course curriculum starts with Fundamentals of Client Care with practicum, Health Assessment with practicum, and Basic Pathophysiology to teach core principles needed for subsequent upper level nursing courses. The BSN curriculum then culminates with courses that prepare the senior student for RN licensure: Nursing Preceptorship, Management of Client Care & Practicum, and Nursing Synthesis.

The Graduate Curriculum

Master of Science in Nursing Program

At the graduate level students are required to take core courses along with others that provide specialized information according to chosen areas of concentration. The master's level courses build on baccalaureate level competencies that align with the guidelines set forth in the "Essentials for a graduate Education". Two examples are : NUR 606: Advanced Nursing Research and Evidence Based Practice that builds on NUR 309: Nursing research and NUR 605: Advance Pharmacology that builds on NUR 304 in the undergraduate curriculum. Essentially, an undergraduate foundation prepares the graduate student for higher level nursing practices. Expected student outcomes for the MSN program are to:

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.

**Standard III – Table C
2013**

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.

Additionally, the graduate course curriculum is logically sequenced and moves from general to specific. As previously mentioned, RESSON recognizes that student success is greatly enhanced when a solid foundation of skills and knowledge have been acquired. With this in mind, RESSON schedules an orientation session (Table 5) with newly admitted MSN students in the Fall semester to provide preparatory materials and discuss the sequencing of the program of study. In addition, regularly scheduled graduate student–advisor meetings with nursing faculty ensure that the student stays on track with the planned academic pathway.

**Standard III – Table C
2013**

**Standard III - Table C.5
Sample Graduate Orientation Schedule**

**1st Semester Nurse Practitioner Students
AND
Returning Part-Time FNP Students (enrolled in NUR 602/NUR 625) ONLY**

DATE	TIME	COURSE	TRACK(s)	FACULTY	ROOM #
Thursday, August 22, 2013 (Students enrolled in NUR 602 and NUR 625)	8:00 am – 5:00 pm	NUR 625 – Advanced Health Assessment Practicum Pre-Clinical Check-off (2 hours clinical)	1st Semester Nurse Practitioner Track	A. Herrod J. Adams S. Polk/J.Overstreet	141 & NP Clinic Rooms
<p>3RD Semester Nurse Practitioner Students <u>ONLY</u> Family Nurse Practitioner Track</p> <p>****Lamb’s Photography will be here on 8/22/2013 @ 9:00 – 10:00 am for individual/composite photos Bring a white lab coat, completed order form, and payment</p>					
Thursday, August 22, 2013 (Students enrolled in NUR 634 and NUR 635)	9:00 am - 5:00 pm	NUR 634 – Family Nurse Practice II NUR 635 – Family Nurse Practice II Practicum (4 hours clinical)	3rd Semester Nurse Practitioner Track	M. Jones S. Polk	142 143

1st Semester Full Time/Part Time Students AND Non-Degree Students

DATE	TIME	COURSE	TRACK(s)	FACULTY	ROOM #
Friday, August 23, 2013	8:00 am – 9:00 am	NUR 624 Differential Diagnosis in Primary Care	<ul style="list-style-type: none"> • Nurse Practitioner 	S. Polk	129
Friday, August 23, 2013	9:00 am - 10:00	NUR 601 - Advanced Theoretical Issues in Nursing and Ethics	<ul style="list-style-type: none"> • Nurse Practitioner 	B. Sylvest	129

**Standard III – Table C
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	am		<ul style="list-style-type: none"> • Non Degree 		
<u>Friday, August 23, 2013</u>	10:00 am - 12:00 noon	<u>NUR 606</u> – Advanced Nursing Research and Evidence Based Practice	<ul style="list-style-type: none"> • Nurse Practitioner 	A.Herrod Vicki Bingham	129
	LUNCH				
<u>Friday, August 23, 2013</u>	1:00 pm – 5:00 pm	<u>NUR 602</u> Advanced Health Assessment <u>NUR 625</u> Advanced Health Assessment Practicum	<ul style="list-style-type: none"> • Nurse Practitioner 	A. Herrod J. Adams S. Polk & J. Overstreet	129

3rd Semester Full Time/Part Time Students

DATE	TIME	COURSE	TRACK(s)	FACULTY	ROOM #
<u>Friday, August 23, 2013</u>	9:00 am – 10:00 am	<u>NUR 687/690</u> Research Project/Thesis	<ul style="list-style-type: none"> • Nurse Practitioner 	V. Bingham	130
<u>Friday, August 23, 2013</u>	10:00 am – 11:00 am	<u>NUR 620</u> Role Synthesis (Nurse Practitioner)	<ul style="list-style-type: none"> • Nurse Practitioner 	M. Jones	130
<u>Friday, August 23, 2013</u>	11:00 am – 12:00 noon	<u>NUR 634</u> Family Nurse Practice II	<ul style="list-style-type: none"> • Nurse Practitioner 	M. Jones S. Polk	130
	LUNCH				
<u>Friday, August 23, 2013</u>	1:00 pm – 4:00 pm	<u>NUR 634</u> Family Nurse Practice II <u>NUR 635</u> Family Nurse Practice II Practicum	<ul style="list-style-type: none"> • Nurse Practitioner 	M. Jones S. Polk	130

DNP STUDENTS ENROLLED IN 700 LEVEL COURSES

DATE	TIME	COURSE	TRACK(s)	FACULTY	ROOM #
<u>Friday, August 23, 2013</u>	8:30 am – 9:00 am	Welcome, Introductions, Overview of Program	<ul style="list-style-type: none"> • DNP 	Carlson, Bingham, All Graduate and/or DNP Faculty	101
<u>Friday, August 23, 2013</u>	9:00 am – 11:00 am	NUR 787 Scholarly Project Development	<ul style="list-style-type: none"> • DNP 	S. Polk	101
<u>Friday, August 23, 2013</u>	11:00 am – 12:00 noon	NUR 701 Advanced Theory and Ethical Issues in Advanced Nursing Practice	<ul style="list-style-type: none"> • DNP 	B. Sylvest	101
	LUNCH				
<u>Friday, August 23, 2013</u>	1:00 pm – 2:00 pm	NUR 706 Evidence Based Nursing Practice: Theory, Design, & Methods	<ul style="list-style-type: none"> • DNP 	V. Bingham	101

**Standard III – Table C
2013**

Friday, August 23, 2013	2:00 pm – 3:00 pm	NUR 710 Epidemiology/Population Health	• DNP	S. Polk	101
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ADDITIONAL ON-CAMPUS DATES

1ST SEMESTER FNP STUDENTS

DATE	TIME	COURSE	TRACK(s)	FACULTY	ROOM #
October 7, 2013	TBA	NUR 625 – Midterm Check Offs (2 hours clinical)	Nurse Practitioner	Herrod Adams Polk & Overstreet	TBA
October 14, 2013	TBA	NUR 625 – Repeat Check-offs (if needed)			
December October 8, 2013	9:00 am – 11:00 am	Final Exam	Nurse Practitioner	Herrod Adams Polk & Overstreet	Computer Lab
	1:00 pm – 4:00 pm	HESI 2-P's – Advanced Patho and Physical Assessment			

OTHER EVENTS/DATES

1ST SEMESTER FNP STUDENTS

DATE	TIME	COURSE	TRACK(s)	FACULTY	ROOM #
September 2 nd	All Day	Labor Day – DSU Closed – No Clinical Scheduled			
October 25 th	All Day	MNA Convention – NP Day (8 clinical hours [Conference] for attendance) – must provide CEUs for student file at RESSON			
October 17 th & 18 th	All Day	Fall Break			
November 25 th – 29 th	All Day	Thanksgiving Holidays – DSU Closed 28 th – 29 th – No Clinical Scheduled			
November 4 th – 27 th	TBD	NUR 625 On-site Clinical Visit/Check-offs	Nurse Practitioner	Herrod Adams Polk & Overstreet	N/A
December 2 nd – 6 th	TBS	NUR 625 Repeat Check-offs (if needed) May be scheduled at clinical site, DSU campus, or faculty clinical practice site at faculty discretion.			

ADDITIONAL ON-CAMPUS DATES

3RD SEMESTER FNP STUDENTS

DATE	TIME	COURSE	TRACK(s)	FACULTY	ROOM #
Wednesday, October 2, 2013	10:00 am – 12:00 noon	Mid-Term Exam	Nurse Practitioner	Jones Polk	Computer Lab

**Standard III – Table C
2013**

	1:00 pm - 5:00 pm	OB/GYN/Women's Health Check-off (4 clinical hours)			NP Clinic Rooms & Room 141
Thursday, October 3, 2013	7 am – 3pm	NUR 635 – Delta Health & Wellness Day @ DSU (8 clinical hours)	Nurse Practitioner	Jones Polk	H. L. Nowell Student Union

OTHER EVENTS/DATES
3rd SEMESTER FNP STUDENTS

DATE	TIME	COURSE	TRACK(s)	FACULTY	ROOM #
September 2, 2013	All Day	Labor Day – DSU Closed – No Clinical Scheduled	Nurse Practitioner		N/A
October 25, 2013	All Day	MNA Convention – NP Day (8 clinical hours [Conference] for attendance) – must provide CEUs for student file at RESSON	Nurse Practitioner		N/A
October 17 – 18, 2013	All Day	Fall Break	Nurse Practitioner		N/A
November 25 - 29	All Day	Thanksgiving Holidays – DSU Closed 28 th – 29 th - No Clinical Scheduled	Nurse Practitioner		N/A
November 4 th – November 27 th	TBD	NUR 635 On-site Clinical Visit/Check-offs	Nurse Practitioner	Jones Polk	N/A

Master Science of Nursing Program:

The MSN program is designed to incorporate the essential concepts and skills needed for the student to function in an advanced practice role. The master's program is logically structured to achieve expected learning outcomes and builds upon baccalaureate concepts as outlined in the Essentials of Baccalaureate Education for Professional Nursing Practice . Table 6 shows examples of integration of prior knowledge into the MSN program and shows the logical articulation of BSN and MSN courses in the MSN program of study. All of the students who apply to the MSN program hold a current registered nurse license and a Bachelor of Science degree in nursing or a health-related field.

**Standard III – Table C
2013**

Standard III - Table C.6

Examples of Integration of Prior Knowledge in the MSN Program

Prerequisite Course	Application of Knowledge
NUR 303-333 Health Assessment	NUR 602 Advanced health assessment techniques: The master's level nurse becomes highly skilled in performing health assessment techniques to the well client or client with alterations in health status.
NUR 403-443 Community Health Nursing NUR 302-332 Fundamentals of Client Care and NUR 306-336 Medical-Surgical NUR 405-445 Pediatric Nursing NUR 401-441 Obstetrics Nursing NUR 402-442 Management of Client Care NUR 307-337 Mental Health/Psychiatric Nursing	NUR 630-NUR 631, NUR 634-635, NUR 638-639 Family Nurse Practice I,II,III: The advanced practice nurse builds on courses that focus on the client at all developmental levels (antepartum-elderly). As a midlevel provider the advanced practice nurse must be able to tailor care based upon the unique needs of the individual. Also, the advanced nurse practitioner builds on management-leadership concepts when assuming a leadership role when delegating tasks to other team members
NUR 312 Basic Pathophysiology	NUR 624 Differential Diagnosis in Primary Care: The advanced nurse practitioner builds on basic pathophysiology and learns to care for the client comprehensively by exploring all possible avenues of the disease process
NUR 309 Nursing Research	NUR 687/690 research Project/thesis, NUR 606 Advanced Nursing Research and Evidence Based Practice : The master's level nurse builds on prior knowledge by engaging in scholarly work and investigating a research problem.
NUR 314 Health Policy & Ethical Decision Making	NUR 604 Advanced Healthcare Policy and Politics: The master's level nurse participates in the political arena by becoming a member of Mississippi Nurses Association and engaging in policy change at the state and federal level.
NUR 304 Pharmacology	NUR 605 Advanced Pharmacology: The advanced nurse practitioner builds on previous knowledge and applies this expertise when prescribing medications to clients with alterations in health status.

**Standard III – Table C
2013**

The master’s program is sequenced to include a general core and specialty courses that align with the student’s area of specialization. Three MSN tracks are offered by RESSON (Table 7) and these are Nursing Administration, Nurse Practitioner and Nurse Educator. The Nurse Practitioner tract is further delineated as Gerontological Health, Family, or Psychiatric mental health specialties. In addition the subspecialties can be completed as a post master’s certificate.

Standard III - Table C.7

MSN Curriculum Educational Requirements

Master of Science in Nursing Degree **Role** Program Curriculum

Benchmark	Nurse Administrator	Nurse Educator	Family Nurse Practitioner
<p>MSN Curriculum Organized The MSN curriculum schema is organized in a general to specific format with 50% core courses and 50% specialty courses. YES NO</p> <p>*denotes Core Courses</p> <p>The curriculum schema is logically organized YES NO</p> <p>Note any changes made to curriculum schema in the “comments” section</p> <p>*NUR 603 Advanced Pathophysiology pre-requisite for Nurse Educator and Nurse Practitioner ONLY (3hrs)</p> <p>Program Hours: <ul style="list-style-type: none"> • Core 9 hrs • Roles Administrator 29 hrs • Educator 32 hrs </p>	<p align="center">First Semester (Fall)</p> <p>*NUR 601 Advanced Theoretical Issues in Nursing and Ethics (2 hrs) *NUR 606 Advanced Nursing Research and Evidence Based Practice (3 hrs) NUR 615 Administrative Concepts (2 hrs) NUR 645 Administrative Concepts Practicum (1 hr) MGT 600 Management Problems (3 hrs) TOTAL HOURS = 11</p>	<p align="center">First Semester (Fall)</p> <p>*NUR 601 Advanced Theoretical Issues in Nursing and Ethics (2 hrs) *NUR 606 Advanced Nursing Research and Evidence Based Practice (3 hrs) NUR 602 Advanced Health Assessment (3 hrs) NUR 625 Advanced Health Assessment (2 hrs) NUR 623 Teaching and Learning Theory (3 hrs) TOTAL HOURS = 13</p>	<p align="center">First Semester (Fall)</p> <p>*NUR 601 Advanced Theoretical Issues in Nursing and Ethics (2 hrs) *NUR 606 Advanced Nursing Research and Evidence Based Practice (3 hrs) NUR 602 Advanced Health Assessment (3 hrs) NUR 625 Advanced Health Assessment (2 hrs) NUR 624 Differential Diagnosis in Primary Care (2 hrs) TOTAL HOURS = 12</p>
	<p align="center">Second Semester (Spring)</p> <p>*NUR 604 Advanced Healthcare Policy and Politics (2 hrs) NUR 616 Nursing Administration I (1 hr) NUR 646 Nursing Administration I Practicum (3 hrs) MBA 505 Productivity Software for Execs. (3 hrs) NUR 687/690 Research Project/Thesis (1/2 hrs) TOTAL HOURS = 10/11</p>	<p align="center">Second Semester (Spring)</p> <p>*NUR 604 Advanced Healthcare Policy and Politics (2 hrs) NUR 605 Advanced Pharmacology (3 hrs) NUR 612 Adult Education I (3 hrs) NUR 642 Adult Education I Practicum (2 hrs) NUR 617 Curriculum Design & Evaluation (3 hrs) NUR 687/690 Research Project/Thesis (1/1 hr) TOTAL HOURS = 14</p>	<p align="center">Second Semester (Spring)</p> <p>*NUR 604 Advanced Healthcare Policy and Politics (2 hrs) NUR 605 Advanced Pharmacology (3 hrs) NUR 630 Family Nurse Practice I (3hrs) NUR 631 Family Nurse Practice I Practicum (3 hrs) NUR 687/690 Research Project/Thesis (1/1 hr) TOTAL HOURS = 12/12</p>
	<p align="center">Third Semester (Fall)</p> <p>NUR 607 Instructional Methodologies (2 hrs) NUR 619 Nursing Administration II (1 hr) NUR 649 Nursing Administration II Practicum (3 hrs) MGT 605 Human Resource Management (3 hrs) NUR 687/690 Research Project/Thesis (1/2 hrs)</p>	<p align="center">Third Semester (Fall)</p> <p>NUR 607 Instructional Methodologies (2 hrs) NUR 613 Adult Education II (2 hrs) NUR 643 Adult Education II Practicum (2 hrs) NUR 621 Role Synthesis (Nurse Educators) (2 hrs) NUR 687/690 Research Project/Thesis (1/3 hrs)</p>	<p align="center">Third Semester (Fall)</p> <p>NUR 634 Family Nurse Practice II (3 hrs) NUR 635 Family Nurse Practice II Practicum (3 hrs) NUR 620 Role Synthesis (Nurse Practitioners) (2 hrs) NUR 687/690 Research Project/Thesis (1/3 hrs) TOTAL HOURS = 9/11</p>

**Standard III – Table C
2013**

Benchmark	Nurse Administrator	Nurse Educator	Family Nurse Practitioner
Practitioner 26 hrs • Research 3-6 hrs • Electives <u>0-6 hrs</u> TOTAL 44-47 hrs	TOTAL HOURS = 10/11 Fourth Semester (Spring) NUR 622 Nursing Administration III – Role Synthesis (2 hrs) NUR 652 Nursing Administration III – Role Synthesis Practicum (4 hrs) MGT 620 Recruitment, Selection, & Performance Appraisal (3 hrs) NUR 686 – Elective (non-thesis option) (3 hrs) NUR 687/690 Research Project /Thesis (1/2 hrs) TOTAL HOURS = 13/14	TOTAL HOURS = 9/11 Fourth Semester (Spring) NUR 614 Adult Education III (2 hrs) NUR 644 Adult Education III Practicum (2 hrs) NUR 618 Nurse Educator Practicum (4 hrs) NUR 687/690 Research Project/Thesis (1/2 hrs) TOTAL HOURS = 9/10	Fourth Semester (Spring) NUR 638 Family Nurse Practice III (2 hrs) NUR 639 Family Nurse Practice III Practicum (4 hrs) NUR 680 Family Nurse Practitioner Review Course (2 hrs) NUR 687/690 Research Project/Thesis (1/2 hrs) TOTAL HOURS = 9/10
Comments:			

Post Master Certificate Role Program Curriculum

Benchmark	Nurse Administrator	Nurse Educator	Family Nurse Practitioner
MSN Curriculum Organized The MSN curriculum schema is organized in a general to specific format with 50% core courses and 50% specialty courses. YES NO	*NUR 607 Instructional Methodologies (2 hrs) NUR 615 Administrative Concepts (2 hrs) NUR 645 Administrative Concepts Practicum (1 hr) MGT 600 Management Problems (3 hrs) TOTAL HOURS = 8	*NUR 607 Instruction Methodologies (2 hrs) NUR 621 Role Synthesis (Nurse Educators) (2 hrs) TOTAL HOURS = 4	NUR 602 Advanced Health Assessment (3 hrs) NUR 625 Advanced Health Assessment Practicum (2 hrs) NUR 620 Role Synthesis (Nurse Practitioners) (2 hrs) NUR 624 Differential Diagnosis in Primary Care (2 hrs) TOTAL HOURS = 7
*denotes Core Courses The curriculum schema is logically organized YES NO Note any changes made to curriculum schema in the “comments” section	Second Semester (Spring) *NUR 604 Advanced Healthcare Policy and Politics (2 hrs) NUR 616 Nursing Administration I (1 hr) NUR 646 Nursing Administration I Practicum (3 hrs) MBA 505 Productivity Software for Executives (3 hrs) TOTAL HOURS = 9	Second Semester (Spring) NUR 617 Curriculum Design and Evaluation (3 hrs) NUR 618 Nurse Educator Practicum (4 hrs) TOTAL HOURS = 7	Second Semester (Spring) *NUR 604 Advanced Healthcare Policy & Politics (2 hrs) NUR 605 Advanced Pharmacology (3 hrs) NUR 630 Family Nurse Practice I (3 hrs) NUR 631 Family Nurse Practice I Practicum (3 hrs) TOTAL HOURS = 11
*NUR 603 Advanced Pathophysiology pre-requisite for	Third Semester (Fall) NUR 619 Nursing Administration II (1 hr) NUR 649 Nursing Administration II Practicum (3 hrs) MGT 605 Human Resource Management (3 hrs) TOTAL HOURS = 7		Third Semester (Fall) NUR 634 Family Nurse Practice II (2 hrs) NUR 635 Family Nurse Practice II Practicum (3 hrs) TOTAL HOURS = 7

**Standard III – Table C
2013**

Benchmark	Nurse Administrator	Nurse Educator	Family Nurse Practitioner
Nurse Educator and Nurse Practitioner ONLY (3hrs) Program Hours: <ul style="list-style-type: none"> • Core 9 hrs • Role s Administrator 29 hrs • Educator 32 hrs • Practitioner 26 hrs • Research 3-6 hrs • Electives 0-6 hrs TOTAL 44-47 hrs 	Fourth Semester (Spring) NUR 622 Nursing Administration III – Role Synthesis (2 hrs) NUR 652 Nursing Administration III – Role Synthesis Practicum (4 hrs) MGT 620 Recruitment, Selection & Performance Appraisal (3 hrs) TOTAL HOURS = 9		Fourth Semester (Spring) NUR 638 Family Nurse Practice III (2 hr) NUR 639 Family Nurse Practice III Practicum (4 hrs) NUR 680 Family Nurse Practitioner Review Course (2 hrs) TOTAL HOURS = 7
Comments:			

Master of Science in Nursing Degree Role Program Curriculum
Mississippi Education Consortium for Specialized Advanced Practice Nursing (MECSAPN)

Benchmark	Gerontological Nurse Practitioner (GNP)	Psychiatric/Mental Health Nurse Practitioner (PHMNP) - Adult	Psychiatric/Mental Health Nurse Practitioner (PHMNP) - Family
MSN Curriculum The MSN curriculum schema is organized in a general to specific format with 50% core courses and 50% specialty courses. YES NO *denotes Core Courses The curriculum schema is logically organized YES NO Note any changes made to curriculum schema in the “comments” section	First Semester (Fall) *NUR 601 Advanced Theoretical Issues in Nursing and Ethics (2 hrs) *NUR 606 Advanced Nursing Research and Evidence Based Practice (3 hrs) NUR 602 Advanced Health Assessment (2 hrs) NUR 625 Advanced Health Assessment (2 hrs) TOTAL HOURS = 9	First Semester (Fall) *NUR 601 Advanced Theoretical Issues in Nursing and Ethics (2 hrs) *NUR 606 Advanced Nursing Research and Evidence Based Practice (3 hrs) NUR 602 Advanced Health Assessment (2 hrs) NUR 625 Advanced Health Assessment (2 hrs) TOTAL HOURS = 9	First Semester (Fall) *NUR 601 Advanced Theoretical Issues in Nursing and Ethics (2 hrs) *NUR 606 Advanced Nursing Research and Evidence Based Practice (3 hrs) NUR 602 Advanced Health Assessment (2 hrs) NUR 625 Advanced Health Assessment (2 hrs) TOTAL HOURS = 9
	Second Semester (Spring) *NUR 604 Advanced Healthcare Policy and Politics (2 hrs) NUR 605 Advanced Pharmacology (3 hrs) NUR 686 Elective (nonthesis) (3/0 hrs) NUR 687/690 Research Project/Thesis (1/1 hr) TOTAL HOURS = 9/6	Second Semester d(Spring) *NUR 604 Advanced Healthcare Policy and Politics (2 hrs) NUR 605 Advanced Pharmacology (3 hrs) NUR 686 Elective (nonthesis) (3/0 hrs) NUR 687/690 Research Project/Thesis (1/1 hr) TOTAL HOURS = 9/6	Second Semester (Spring) *NUR 604 Advanced Healthcare Policy and Politics (2 hrs) NUR 605 Advanced Pharmacology (3 hrs) NUR 686 Elective (nonthesis) (3/0 hrs) NUR 687/690 Research Project/Thesis (1/1 hr) TOTAL HOURS = 9/6
	Third Semester (Summer) NUR 6271 Clinical Management of Older Adults, I (2 hrs)	Third Semester (Summer) NUR 6871 Clinical Assessment of Persons with Mental Health Problems, I – Adult & Family (2 hrs)	Third Semester (Summer) NUR 6871 Clinical Assessment of Persons with Mental Health Problems, I – Adult & Family (2 hrs)

**Standard III – Table C
2013**

Benchmark	Gerontological Nurse Practitioner (GNP)	Psychiatric/Mental Health Nurse Practitioner (PHMNP) - Adult	Psychiatric/Mental Health Nurse Practitioner (PHMNP) - Family
*NUR 603 Advanced Pathophysiology pre-requisite for Nurse Educator and Nurse Practitioner ONLY (3hrs)	NUR 6281 Practicum in Clinical Management of Older Adults, I (3 hrs) TOTAL HOURS = 5	NUR 6864 Practicum in Clinical Assessment of Persons with Mental Health Problems, I – Adult (3 hrs) TOTAL HOURS = 5	NUR 6861 Practicum in Clinical Assessment of Persons with Mental Health Problems, I – Family (3 hrs) TOTAL HOURS = 5
Program Hours: <ul style="list-style-type: none"> • Core 9 hrs • Role s Practitioner 26 hrs • Research 3-6 hrs • Electives 0-6 hrs TOTAL 44-47 hrs	Fourth Semester (Fall) *NUR 607 Instructional Methodologies (2 hrs) NUR 620 Role Synthesis (Nurse Practitioners) (2 hrs) NUR 687/690 Research Project/Thesis (1/3 hrs) NUR 6272 Clinical Management of Older Adults, II (3 hrs) NUR 6282 Practicum in Clinical Management of Older Adults, II (3 hrs) TOTAL HOURS = 11/13	Fourth Semester (Fall) *NUR 607 Instructional Methodologies (2 hrs) NUR 620 Role Synthesis (Nurse Practitioners) (2 hrs) NUR 687/690 Research Project/Thesis (1/3 hrs) NUR 6872 Clinical Management of Individuals with Mental Health Problems, II – Adult & Family (3 hrs) NUR 6865 Practicum in Clinical Management of Individuals with Mental Health Problems, II – Adult (3 hrs) TOTAL HOURS = 11/13	Fourth Semester (Fall) *NUR 607 Instructional Methodologies (2 hrs) NUR 620 Role Synthesis (Nurse Practitioners) (2 hrs) NUR 687/690 Research Project/Thesis (1/3 hrs) NUR 6872 Clinical Management of Individuals with Mental Health Problems, II – Adult & Family (3 hrs) NUR 6862 Practicum in Clinical Management of Individuals with Mental Health Problems, II – Family (3 hrs) TOTAL HOURS = 11/13
	Fifth Semester (Spring) NUR 686 Elective (3hrs) NUR 687/690 Research Project/Thesis (1/2 hrs) NUR 6273 Clinical Management of Older Adults, III (2 hrs) NUR 6283 Practicum in Clinical Management of Older Adults, III (4 hrs) TOTAL HOURS = 10/11	Fifth Semester (Spring) NUR 686 Elective (3hrs) NUR 687/690 Research Project/Thesis (1/2 hrs) NUR 6873 Clinical Management of Families and Groups with Mental Health Problems, III – Adult & Family (2 hrs) NUR 6863 Practicum in Clinical Management of Families and Groups with Mental Health Problems, III – Adult & Family (4 hrs) TOTAL HOURS = 10/11	Fifth Semester (Spring) NUR 686 Elective (3hrs) NUR 687/690 Research Project/Thesis (1/2 hrs) NUR 6873 Clinical Management of Families and Groups with Mental Health Problems, III – Adult & Family (2 hrs) NUR 6863 Practicum in Clinical Management of Families and Groups with Mental Health Problems, III – Adult & Family (4 hrs) TOTAL HOURS = 10/11

**Standard III – Table C
2013**

DNP Program: Many pathways are available at RESSON for the student who seeks a doctoral degree in nursing. Students may opt for RN_DNP, BSN-DNP, MSN-non-FNP to DNP, MSN-FNP to DNP, Post-master's MSN-DNP non-FNP, and Post-master's MSN-DNP FNP. Courses are sequenced dependent upon what level the student enters into and the total number of hours vary according to the entry-point chosen (Table 7). The goal of the DNP program is to prepare nurse leaders and expectant student outcomes by the end of the program are to:

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

The DNP program is logically structured and sequenced regardless of the entry point chosen by the student. Evidence that the DNP program builds upon the master's program is shown when the entering student will either have an earned master's degree or have completed master's level courses to ensure appropriate curriculum progression. It must be noted that in this program of study, a total of 420 doctoral level clinical hours and a scholarly project are required regardless of the number of clinical hours completed in the Master's program.

The DNP program prepares the nurse leader to make advanced evidence-based decisions using data, and other analytical methodologies and becomes a transformational leader by implementing the most up-to-date theoretical and clinical innovations. Also, the DNP student engages in clinical prevention and health promotion practices in a multicultural society assuming the role of a midlevel provider. At RESSON, the student enters into the DNP program with a baccalaureate or Master's degree and furthers their education by becoming immersed in a program built upon the DNP Essentials.

The RN_DNP Program can be completed in ten semesters of full time study requiring approximately 95 semester hours. The first year course work includes comprehensive health assessment, basic pathophysiology, research methods, community health nursing and transition to professional nursing. The second year course work builds upon these foundational courses and includes clinical

**Standard III – Table C
2013**

hours. The third year includes advanced coursework that build upon the previous courses preparing the graduate student to assume responsibilities as a midlevel provider with prescriptive authority . These courses include: advanced Family Nurse Practice I, II, III, Information Management-Business management, and advanced pharmacology.

The Master’s (Non-FNP) to DNP student who is seeking an advanced specialty can complete the program in approximately three years of full time study. This option is also available as part-time study for those students who cannot commit to full time study. A total of 53-64 credit hours are required depending on transferred hours. Typically, the first year begins with advanced Pathophysiology, Advanced theory and Ethical Issues, Evidence Based Nursing practice, Statistics and Healthcare Policy. The second year builds on foundational concepts and includes Advanced Health Assessment, Differential Diagnosis in Primary Care and Advanced Pharmacology. The third year introduces the knowledge needed to function as an advanced practice nurse. Overall the program of study requires the student to complete 1140 clinical hours.

The post-master’s FNP-DNP program of study can be completed as a full time or part time study. The full time study can be completed in 6 semesters with 31 credit hours. The first year coursework includes Advanced theory, Epidemiology/Population Health, Healthcare Policy and Leadership and Role Development. The second year courses include Evidence Based Nursing Practice , Scholarly Project development and Advanced statistics. The last year builds on previous concepts and introduces the FNP student to Business Management and Information Management principles to develop essential business skills such as effective billing practices.

**Standard III - Table C.8
DNP Curriculum Educational Requirements**

Benchmark	RN_DNP Full Time	BSN/POST-MASTER’S (Non-FNP)-DNP Full Time	Post-Master’s FNP-DNP Full Time
<p>DNP Curriculum The DNP (RN_DNP, BSN-DNP, MSN (non-FNP), MSN (FNP) curriculum schema is organized in a general to specific format beginning at the student’s appropriate level of entry</p> <p align="center">Yes No</p> <p>Note any changes made to curriculum schema in the “comments” section</p>	<p align="center">First Semester (Summer I)</p> <p>*NUR 311 comprehensive health assessment (1.5) *NUR 331 Comprehensive health assessment practicum (0.5) *NUR 312 Basic Pathophysiology (3) *NUR 358 Transition to Professional Nursing (4) TOTAL HOURS: 9</p>	<p align="center">First Semester (Summer I)</p> <p>*NUR 603 Advanced pathophysiology (3)</p>	<p align="center">First Semester (Fall I)</p> <p>*NUR 7XX Advanced Theory and Ethical Issues in Advanced Nursing Practice (3) * NUR 7XX Epidemiology/Population Health (3) * NUR 7XX Evidence Based Nursing Practice: Theory, Design & Methods (3) * NUR 7XX Scholarly Project Development (120 doctoral clinical hours)-2 TOTAL HOURS: 11</p>
	<p align="center">Second Semester (Fall I)</p> <p>*NUR 309 Nursing Research (3) *NUR 314 Health Policy and Ethical Decision Making (3) *NUR 403 Community Health Nursing (2.5)</p>	<p align="center">Second Semester (Fall I)</p> <p>*Advanced theory and ethical issues in advanced nursing practice (3) *NUR 7XX Epidemiology/population health (3) *NUR 7XX Evidence based nursing practice:</p>	<p align="center">Second Semester (Spring I)</p> <p>* NUR 7XX Advanced Statistics for Clinical Practice (3) * NUR 7XX Health Care Policy and Economics in Clinical Practice (3)</p>

**Standard III – Table C
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Benchmark	RN_DNP Full Time	BSN/POST-MASTER'S (Non-FNP)-DNP Full Time	Post-Master's FNP-DNP Full Time
<p><u>RN DNP Program Hours:</u></p> <ul style="list-style-type: none"> • 31 undergraduate hours • 64 graduate hours • total clinical hours 1140 <p>Total semester hours: 95</p> <p><u>BSN/POST-MASTER'S (Non-FNP)-DNP Program Hours:</u></p> <ul style="list-style-type: none"> • Total clinical hours 1140 • May transfer the following courses: advanced pathophysiology, advanced health assessment, advanced pharmacology <p>Total semester hours: 53-64 hours</p> <p><u>Post-Master's FNP-DNP Program Hours</u></p> <ul style="list-style-type: none"> • 420 total clinical hours at doctoral level <p>Total semester hours: 31 hours</p>	<p>*NUR 443 Community Health Nursing Practicum (1.5) TOTAL HOURS: 10</p>	<p>theory, design and methods (3) TOTAL HOURS: 9</p>	<p>* NUR 7XX Leadership and Role Development in Advanced Nursing Practice (3) * NUR 7XX Scholarly Project (60/180 doctoral level clinical hours)-1/3 credits TOTAL HOURS: 10-12</p>
	<p align="center">Third Semester (Spring I)</p> <p>*NUR 402 Management of Client Care (3) *NUR 442 Management of Client Care Practicum (3) *Directed Study (4) *NUR 409 Evidence Based Practice (2) *NUR 603 Advanced Pathophysiology) 0-3 TOTAL HOURS = 12-15</p>	<p align="center">Third Semester (Spring I)</p> <p>*NUR 7XX Advanced statistics for clinical practice (3) *NUR 7XX Health care policy and economics in clinical practice (3) *NUR 7XX Leadership and role development in advanced nursing practice (3) TOTAL HOURS: 9</p>	<p align="center">Third Semester (Fall II)</p> <p>* NUR 7XX Information Management and Decision Support in Clinical Practice (3) * NUR 7XX Business Management and Quality Care in Clinical Practice (3) * NUR 7XX Scholarly Project (60/180 doctoral level clinical hours)-1/3 TOTAL HOURS: 7-9</p>
	<p align="center">Fourth Semester (Summer II)</p> <p>* NUR 603 Advanced Pathophysiology TOTAL HOURS = 3</p>	<p align="center">Fourth Semester (Fall II)</p> <p>*NUR 602 Advanced health assessment (3) *NUR 625 Advanced health assessment practicum (120 clinical hours)-2 credits *NUR 624 Differential diagnosis in primary care (2) *NUR 7XX Scholarly project development (120 doctoral clinical hours)-2 credits TOTAL HOURS: 9</p>	
	<p align="center">Fifth Semester (Fall II)</p> <p>*NUR 7XX Advanced theory and ethical issues in advanced nursing practice (3) *NUR 7XX Epidemiology/population health (3) *NUR 7XX Evidence Based Nursing Practice: Theory,design & methods (3) TOTAL HOURS=9</p>	<p align="center">Fifth Semester (Spring II)</p> <p>*NUR 630 Family Practice I (3) *NUR 631 Family Practice I practicum (180 clinical hours)-3 credits *NUR 605 Advanced pharmacology (3) NUR 7XX Scholarly project (60 doctoral clinical hours) -1 credit TOTAL HOURS: 10</p>	
	<p align="center">Sixth Semester (Spring II)</p> <p>*NUR 7XX Advanced statistics for clinical practice (3) *NUR 7XX Health Care policy and economics in clinical practice (3) *NUR 7XX Leadership and Role Development in Advanced Nursing Practice (3) TOTAL HOURS: 9</p>	<p align="center">Sixth Semester (Fall III)</p> <p>*NUR 634 Family nurse practice II (3) *NUR 635 Family nurse practice II practicum (180 clinical hours)-3 credits *NUR 7XX Information management and decision support in clinical practice (3) *NUR 7XX Scholarly project (120 doctoral</p>	

**Standard III – Table C
2013**

Benchmark	RN_DNP Full Time	BSN/POST-MASTER’S (Non-FNP)-DNP Full Time	Post-Master’s FNP-DNP Full Time
	<p align="center">Seventh Semester (Fall III)</p> <p>*NUR 602 Advanced health assessment (3) *NUR 625 Advanced health assessment Practicum (120 clinical hours)-2 credits *NUR 624 Differential diagnosis in primary care (2) *NUR 7XX scholarly project development (120 doctoral-level clinical hours)-2 credits TOTAL HOURS: 9</p>	<p align="center">Seventh Semester (Spring III)</p> <p>*NUR 638 Family nurse practice III (2) *NUR 638 Family nurse practice III practicum (300 clinical hours)-4 credits *NUR 680 Family nurse practitioner review course (2 credits) *NUR 7XX Scholarly project (120 doctoral clinical hours)-2 credits TOTAL HOURS: 10</p>	
	<p align="center">Eighth Semester (Spring III)</p> <p>*NUR 630 Family Nurse Practice I (3) *NUR 631 Family Nurse Practice I practicum (180 clinical hours)-3 credits *NUR 605 Advanced Pharmacology (3) *NUR 7XX scholarly project (60 doctoral-level clinical hours)-1 credit TOTAL HOURS: 10</p>		
	<p align="center">Ninth Semester Fall IV</p> <p>*NUR 634 Family Nurse Practice II (3) *NUR 635 Family Nurse Practice II practicum (180 clinical hours)-3credits *NUR 7XX Information management and decision support in clinical practice (3) *NUR 7XX business management and quality care in clinical practice (3) *NUR 7XX scholarly project (120 doctoral-level clinical hours)-2 credits TOTAL HOURS: 14</p>		
	<p align="center">Tenth Semester Spring IV</p> <p>*NUR 638 Family Nurse practice III (2) *NUR 639 Family nurse practice III practicum (240 clinical hours)-4credits *NUR 680 Family nurse practitioner review course (2) *NUR 7XX scholarly project (120 doctoral-level clinical hours)-2 credits TOTAL HOURS: 10</p>		

2013 Student Affairs Annual Report

- I. Annual Summary The Student Affairs Committee met a total of 7 times during the 2013 academic year.
- II. Members: Debra Allen (Chair), Catherine Hayes, Jean Grantham, Donna Koestler, and Carlene Thompson
Student Representatives:
 SPRING 2013
 - Junior II Kim Patterson
 - Senior I Hunter Calvert
 - RN/BSN Lindsey Miesel
 - Graduate II Ashley Cocilova
 - Graduate IV Sarah Beasley FALL 2013
 - Junior I Madison Greenlee
 - Junior III Kim Patterson
 - Senior II Hunter Calvert
 - RN/BSN Brandi Perry
 - Graduate III Ashley Cocilova
 - Graduate I Vacant
- IV. Meeting dates: (See Attached Minutes)
 - January 14
 - February 18
 - March 18
 - April 22
 - September 16
 - October 21
 - November 11
 - December 5
- III. Committee Functions
 - I. Annually review and make recommendations for changes in the RESSON Undergraduate and Graduate Student Handbooks.
 - Annually review and revise the Robert E. Smith School of Nursing (RESSON) Undergraduate, Graduate Student Handbooks and Code of Ethical and Professional Conduct during the Spring semester.
 - 2 Facilitate Student participation in RESSON, university, professional, and community functions
 - The committee provide names of students selected by their peers to serve on the RESSON standing committees.
 - The SNA advisor provides a monthly report of student activities at the RESSON, university, professional, and community levels to both student affairs and to faculty organization and approve any t-shirt designs, flyers, or fundraising efforts of the student classes and student organizations within the Robert E. Smith School of Nursing.
 - Students representatives participate in DSU Student government, Greek Organizations and on other committees as requested; i.e. student hall of fame committee, etc.
 - 3 Facilitate development of criteria for awards and honors designated for nursing students.

- Disseminate information related to honors and awards to faculty and students as available.
 - Develops ballots and names students for various RESSON nursing awards
4. Recommend to DSU Foundation possibly community donors for RESSON support.
 5. Provides information on scholarships and other financial assistance at the national, state and local levels.
 - Ensures broad dissemination of scholarship opportunities for RESSON students by posting available scholarships, applications and information each semester
 6. Annually evaluate and make recommendations to RESSON Recruitment Plan.
 - Annually review and revise the recruitment plan to ensure the needs of Delta State University, Robert E. Smith School of Nursing, community and the students are being met.
 - Annually review program recruitment information (brochures, handouts, and website to ensure accurate and current information is being disseminated.

V.

Function	Goal	Action/Decision	Date	Outcomes	Implementation	Actions/Recommendations
<p>1. Annually review and make recommendations for changes in the RESSON Undergraduate and Graduate Student Handbooks.</p>	<p>Conduct a monthly review of Faculty Org meetings for any approved changes required for the handbooks.</p> <p>Conduct an annual review of both handbooks in the spring Semester for any needed revisions.</p>			<p>Following Faculty Org for any needed changes Faculty Senate resolution for Honor Pledge reviewed and we will look at if approved – resolution was returned to committee by Faculty Senate on 1-8-13 and then tabled.</p> <p>– several editorial changes noted and changes will be submitted in relation to the DNP program.</p> <p>In both Graduate and UG handbooks – approved to take to next FacOrg:</p> <p>Pregnancy – Students enrolled in the</p>	<p>2/18/13</p> <p>2/18/13</p> <p>4/22/13</p>	<p>Continue annual review and make changes as needed.</p> <p>If any changes are made other than annually, Copies on the website shall be updated immediately. And if they are of a substantive nature that the current students need to be aware of, they will be notified of those ASAP.</p>

Function	Goal	Action/Decision	Date	Outcomes	Implementation	Actions/Recommendations
				<p>Robert E. Smith School of Nursing must immediately report any pregnancy, as potential hazards to the pregnant woman or fetus may exist in clinical settings. The Pregnancy Form must be completed and signed by the nursing student and physician as soon as the pregnancy is confirmed. Before returning to the class/clinical at the end of the pregnancy, the student must submit the completed Robert E. Smith School of Nursing Medical Release Form which specifies that the student may return, on what date, and with what restrictions, if any.</p>		

Function	Goal	Action/Decision	Date	Outcomes	Implementation	Actions/Recommendations
				<p>Forms are available in the Robert E. Smith School of Nursing faculty secretary's office.</p> <p>Major Medical Events</p> <p>Students enrolled in the Robert E. Smith School of Nursing must immediately report any major medical event which will cause absence from class, clinical or other course requirement as soon as the major medical event is known.</p> <p>Before returning to the program, the nursing student must submit a completed Robert E. Smith School of Nursing Medical Release Form (Appendix H) which specifies that</p>	4/22/13	

Function	Goal	Action/Decision	Date	Outcomes	Implementation	Actions/Recommendations
				<p>the student may return, on what date, and with what restrictions, if any. Forms are available in the Robert E. Smith School of Nursing faculty secretary's office. – several editorial changes noted and changes will be submitted in relation to the DNP program.</p>		
<p>2. Facilitate Student participation in RESSON, university, professional, and community functions</p>	<p>The committee facilitates the appointment of student representatives for the faculty standing committees, distributes and posts the appointments each semester.</p> <p>The SNA advisor provides a monthly report</p>	<p>Student representative elected be their peers and names distributed to the standing committee chairs</p>	<p>2/15/13 and 9/11/13</p>	<p>Only one possible contributor sent to K Fulcher</p>	<p><i>New scholarships forthcoming from Mr. Smith's Estate.</i></p>	<p>Continue to encourage donors.</p>

Function	Goal	Action/Decision	Date	Outcomes	Implementation	Actions/Recommendations
	of student activities at the RESSON, university, professional, and community levels to both student affairs and to faculty organization.					
3. Facilitate development of criteria for awards and honors designated for nursing students.	Disseminate information related to honors and awards to faculty and students as available	Honor and award distributed to the nursing faculty for nomination with criteria for each award.	Dec & April	Students honored accordingly	Faculty awards as follows: Junior 1 – Camry Campbell Junior 3 – Chris Williams Senior – Chelsea Burnett Nightingale award – Lauren Signa Faculty award – Stephanie Bennett	Continue

Function	Goal	Action/Decision	Date	Outcomes	Implementation	Actions/Recommendations
	Develops ballots and names students for various RESSON nursing awards	Ballots are then distributed and counted.			Highest GPA - TBA	
4. Recommend to DSU Foundation possibly community donors for RESSON support.	To continue to grow and maintain our scholarship pool/donors.	Send any possible donors to the foundation for ways to donate monies for nursing scholarships .	Ongoing	Several new possible donors are being looked at	N/A	Continue to look for scholarship donors.
5. Provides information on scholarships and other financial assistance at the national, state and local levels	Annually select students for Robert E. Smith School of Nursing scholarships, awards, and honors according to designated criteria. Post or email any outside	Post or email any DSU or outside scholarship opportunities as they arise	DSU scholarships are awarded in November for the Spring and in March for the Fall.	See Attached Scholarship Reception list	<i>Scholarships awarded for those available.</i>	Email scholarship application and list of available scholarship to all eligible students.

Function	Goal	Action/Decision	Date	Outcomes	Implementation	Actions/Recommendations
	scholarship opportunities as they arise.					
6. Annually evaluate and make recommendations to RESSON Recruitment Plan.	Annually review program recruitment information (brochures, handouts, and website to ensure accurate and current information is being disseminated. A. Brochures: B. Website: C. Handouts: Brochures need to be updated and put on website.	Recruitment plan will be reviewed Annually and revised as needed 100% of faculty will attend 2 recruitment events per year was added as a faculty benchmark		Need Volunteers for Recruitment at the following: 1. Career Fair, January 15, 2013, 7:30am – 5:00pm, Mississippi Medical Center, Tupelo, MS 2. Jackson Metro College Fair on 2/21 2. Health Science Job Fair, Wednesday, February 20, 2013, 9:00am-12Noon, Stafford Greet Allied Health Building - MDCC 3. Education Advancement Expo at MS Baptist Health Systems, Jackson, MS, February 28, 9:00am-4:00pm, Hospital Atrium	No volunteers for 1-15-13 – regrets sent! Attended by AHerrod and mJones VBingham MDCC on 2/20 <i>Education Advancement Expo at MS Baptist Health Systems, Jackson, MS, February 28 - VBingham attended.</i>	Recruitment events that have the ability to collect information on interested individuals are asked to complete an information card which we are now putting in a data base and using to contact possible students.

Function	Goal	Action/Decision	Date	Outcomes	Implementation	Actions/Recommendations
	<p>Website needs to be updated with most current information.</p> <p>A single page quick reference for distribution at recruitment events to generate interest</p>			<p><i>March 6th is DSU day at the Capitol – requested to have reps.</i></p> <p>MOADN March 20-21- DAllen, AHerrod and DKoestler</p> <p>Bolivar Co. Schools – Career Day @ Vo-Tech. 4/16/13 – cHayes, dAllen, L.Seals and V. Bingham</p> <p>Crossties – First Aid Booth -4/20/13 - 9-3 – dAllen to go with SNA Students.</p> <p>Cleveland Chamber of Commerce Area Senior College Fair. 9-12; DSU Wyatt Gym – jWilson, dAllen, and</p>	<p><i>March 6th is DSU day at the Capitol – requested to have reps.</i></p> <p>MOADN March 20-21- DAllen, AHerrod and DKoestler attended with 500+ students</p> <p><i>Bolivar Co. Schools – Career Day @ Vo-Tech. 4/16/13 – cHayes, dAllen, L.Seals and V. Bingham attended and students received pencils and did 02 sats.</i></p> <p><i>Crossties – First Aid Booth - 4/20/13 – had 2 small injuries and 12 SNA Students – dAllen.</i></p> <p><i>Cleveland Chamber of Commerce Area Senior College Fair. 9-12; DSU Wyatt Gym – jSeals, dAllen, and cThompson</i></p>	

Function	Goal	Action/Decision	Date	Outcomes	Implementation	Actions/Recommendations
				<p>cThompson to attend</p> <p>DSU Move-in Day set for August 18, 2013</p> <p>DSU Major Fair on 2nd floor of Union – 9/25 cThompson & jWilson</p> <p>DSU Day on 9-28-2013 was attended by eNewman and cHayes</p> <p>Memphis Area College Night, Monday, September 30, 2013. NWCC Career Day in Senatobia on 10-23-2013 9:30-11:30 to be attended by jGrantham and lSeals</p> <p>Holmes CC Career Fair in Richland – 9-24-2013 attended by aHerrod and mJones</p> <p>Pig Pickin and</p>	<p><i>attended</i></p> <p><i>Attended by eNewman, lBlessitt and vBingham</i></p> <p>cThompson & jWilson</p> <p>DSU Day on 9-28-2013 was attended by eNewman and cHayes</p> <p><i>cThompson</i></p> <p>NWCC Career Day in Senatobia on 10-23-2013 9:30-11:30 attended by jGrantham and lSeals</p> <p>Holmes CC Career Fair in Richland – 9-24-2013 attended by aHerrod and mJones</p>	

Function	Goal	Action/Decision	Date	Outcomes	Implementation	Actions/Recommendations
				<p>Football Game on 9-28-2013 was attended by lSeals, vBingham and sPolk</p> <p>Hinds CC on 10-3-2013 was attended by bSylvest</p> <p>Bennie Thompson Career Fair in Greenville attend on 10-4-2013 by mJones and aHerrod</p> <p>Wesley Medical Center</p> <p>Octoberfest on 10-19-2013 was attended by lSeals, vBingham and IBlessitt and 12 SNA students.</p> <p>MASN Convention – Jackson 10-17</p>	<p>Pig Pickin and Football Game on 9-28-2013 was attended by lSeals, vBingham and sPolk</p> <p>Hinds CC on 10-3-2013 was attended by bSylvest</p> <p>Bennie Thompson Career Fair in Greenville attend on 10-4-2013 by mJones and aHerrod</p> <p>Wesley Medical Center was cancelled by the agency.</p> <p>Octoberfest on 10-19-2013 was attended by lSeals, vBingham and IBlessitt and 12 SNA students.</p> <p>MASN Convention 10-17-18, 2013 was attended by dAllen</p>	

Function	Goal	Action/Decision	Date	Outcomes	Implementation	Actions/Recommendations
				<p>MNA Convention Expo and MNA APRN Convention 10-24 & 10-25 to be covered by eNewman, sPolk, mJones and dAllen</p> <p>DSU Home Football Game on 10-19-2013 DSU Home Football Games on 11-2 & 11-9 TBD</p> <p>DSU @ Bayou Academy on 11-21 - TBD</p>	<p>eNewman, sPolk, mJones and dAllen</p> <p>DSU Home Football Game on 10-19-2013 was attended by lSeals and dAllen with 8 SNA Students; 11-2 vBingham, IBlessitt and Dallen & 7 SNA Students; 11-9 by lseals & 6 SNA students DSU @ Bayou Academy on 11-21 – vBingham and dAllen attended.</p>	

Standard III Course Audit Three Year Schedule

Year 1 = 2013

Year 2 = 2014

Year 3 = 2015

Course Number	Audit Year Cycle	Audit (Semester/Year)	AACN Essentials	ANA Scope & Standards	NOPNF guidelines (NP Specialty Courses ONLY)	Mission	Program Outcomes	Course Outcomes Reflect Program Outcomes	Course Description	Topic Outline	Content Outcomes
NUR 724	Year 3	Fall 2015									
NUR 787	Year 1	Fall 2013									
NUR 790	Year 2	Spring 2014									

Table References: Course Syllabi, RESSON Undergraduate and Graduate Handbooks

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STANDARD IV PROGRAM EFFECTIVENESS: Assessment and Achievement of Program Outcomes							
<ul style="list-style-type: none"> • The program is effective in fulfilling its mission and goals as evidenced by achieving expected program outcomes. • Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. • Data on program effectiveness are used to foster ongoing program improvement. 							
#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAME FOR DATA COLLECTION & ANALYSIS	PERSON OR COMMITTEE RESPONSIBLE FOR DATA COLLECTION & ANALYSIS	LOCATION OF EVIDENCE AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	REPORT OF FINDINGS	BENCHMARK
						<p>If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met</p> <p>If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year</p>	<p>MET</p> <p>NOT MET</p>
IV. A	A systematic process is used to determine program effectiveness.	<p>1. A written, comprehensive, ongoing, systematic process is used to determine program effectiveness and includes:</p> <ul style="list-style-type: none"> • Completion rates • Licensure, certification, employment rates • Admission rates • Data collected to assess 	Fall and Spring	<p>mJones</p> <p>Secretary to the Dean</p> <p>Secretary to the Faculty</p> <p>Director of</p>	<p>Location: Secretary to the Dean's Office</p> <p>Documents: BSN Admit List Fall 2013</p>	<p>BSN With the acceptance of each BSN class, an excel table of student names admitted to the program is started. This list</p>	<p>MET All of this information is collected via a systematic, ongoing process.</p>

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		<p>achievement of program outcomes</p> <ul style="list-style-type: none"> • Timelines for <ol style="list-style-type: none"> a. data collection b. review of expected and actual outcomes c. analysis • Periodic review and/or revision of systematic process 		<p>the NP Programs</p> <p>COAP</p> <p>Dean</p>	<p>BSN Graduation List Fall 2013</p> <p>RN-BSN Admit List Fall 2013</p> <p>RN-BSN Graduation List Fall 2013</p> <p>MSN Admit List Fall 2013</p> <p>MSN Graduation List Fall 2013</p> <p>Table E-VIII. Evaluation Calendar for Programs</p>	<p>is very detailed and includes the following information:</p> <ul style="list-style-type: none"> -ID number -Delta/non-Delta resident -Demographic information -Full or part time study -Previous degree(s) earned <p>After graduation additional data is collected for this table:</p> <ul style="list-style-type: none"> -NCLEX passage (1st or 2nd attempt) -Delta employment -MS employment -Specific names of employers -Graduate school status <p>Additional information listed on this table:</p>	
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						-total number of completed student applications -number of acceptance letters sent initially sent -number of alternate letters sent -declined alternate status -alternates not offered admission -total number of students enrolled -number of students accepted but declined admission -number of students not qualified/not accepted Another excel table is done (annually) for each BSN graduating class	
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						<p>that has the same information</p> <p><u>RN-BSN</u> With the acceptance of each RN-BSN class, an excel table of student names admitted to the program is started. This list is very detailed and includes the following information: -ID number -Delta/non-Delta resident -Demographic information -Full or part time study -Previous degree(s) earned with name of degree</p> <p>After program completion additional data is collected for</p>	
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						<p>this table: -Completion of the program -Eligibility to return -Entered MSN program</p> <p>Additional information listed on this table: -number of applications -number of acceptance letters sent -number of students enrolled -number of students sent acceptance letters but declined admission -number provisionally admitted, denied full admission due to being unsuccessful on State Boards or unsuccessful on</p>	
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						<p>pre-requisites -number qualified, not accepted -number of students not qualified/not accepted</p> <p>Another excel table is done (annually) for each RN-BSN graduating class that has the following information: -ID number -Delta/non- Delta resident -Demographic information -Full or part time study -Previous degree(s) earned with name of degree -semester entered the program -students entering the MSN program</p>	
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						<p><u>MSN</u> With the acceptance of each MSN class, an excel table of student names admitted to the program is started. This list is very detailed and includes the following information: -ID number -Delta/non-Delta resident -Demographic information -Full or part time study -Previous degree(s) earned with name of degree -number of hours (if part time) -MSN track entering -post master's degree student</p>	
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						<p>-previous master's or bachelor's degree in another area -any current (APN) certifications</p> <p>Another excel table is done (annually) for each MSN graduating class that has the following information: -ID number -Delta/non-Delta resident -Demographic information -Full or part time study -MSN track completed - post master's degree student -previous master's or bachelor's degree in another area</p>	
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						<ul style="list-style-type: none"> -Certification passage (1st or 2nd attempt) -Delta employment -MS employment with agency, type of setting, & position -Specific names of employers -Graduate school status <p>Information confirming NCLEX or Certification passage status is collected on a frequent basis after graduation from the program. Some students will call the school of nursing to report their status.</p> <p>The graduate BSN student status is checked</p>	
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						<p>(via the BON (MS, AR, etc.) website) weekly after graduation until all licensure statuses is confirmed. BON reports are sent to the school later with results in writing. For the FNP students, BON websites are also checked on a monthly basis until all graduate results are confirmed. AANP & AACN also provide a written copy of certification results annually. All findings related to licensure and certification is communicated to faculty & staff via campus email. And</p>	
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						<p>discussion of these results continues during Faculty Org.</p> <p>Student Program Satisfaction Surveys are completed during the last semester of study which is as follows: BSN- fall RN-BSN- Spring MSN- Spring</p> <p>Community of Interest Surveys are done in the Spring as follows: Alumni (1 & 3 year graduate-all programs) Employers Advisory Council (done in the fall also) Survey data is analyzed by PEC and</p>	
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						<p>Summary reports are presented submitted to PEC chair and presented to faculty & Staff during FacOrg in the Spring.</p> <p>Surveys are reviewed by PEC. Any recommendations for revisions are done within this committee and presented to faculty for further or a vote approval.</p>	
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#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAME FOR DATA COLLECTION & ANALYSIS	PERSON OR COMMITTEE RESPONSIBLE FOR DATA COLLECTION & ANALYSIS	LOCATION OF EVIDENCE AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	REPORT OF FINDINGS If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year	BENCHMARK MET NOT MET
IV.B	Program completion rates demonstrate program effectiveness.	1. The completion rate time period is defined at all entry points across all program levels.					
		2. The program completion rate formula is available.					
		3. The					

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		<p>completion rate across all program levels (BSN, RN-BSN, MSN, DNP) for the most recent calendar year is 70% or higher.</p>					
		<p>4. The average completion rates for all program levels (BSN, RN-BSN, MSN, DNP) for the three (3) most</p>					

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		recent calendar years is 70% or higher.					
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#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAME FOR DATA COLLECTION & ANALYSIS	PERSON OR COMMITTEE RESPONSIBLE FOR DATA COLLECTION & ANALYSIS	LOCATION OF EVIDENCE AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	REPORT OF FINDINGS If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year	BENCHMARK MET NOT MET
IV.C	Licensure and certification pass rates demonstrate program effectiveness.	1. The NCLEX-RN pass rate is 80% or higher for first-time takers for the most recent calendar year					
		2. The average NCLEX-RN pass rate for the three most recent calendar years is 80% or higher for first-time takers					
		3. Certification pass rates for ANCC and AANP for the most recent calendar year is 80% or higher				Will need to include # of graduates and # of graduates taking each certification examination	

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		4. The average certification pass rates for ANCC and AANP for the three most recent calendar years are 80% or higher					

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#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAME FOR DATA COLLECTION & ANALYSIS	PERSON OR COMMITTEE RESPONSIBLE FOR DATA COLLECTION & ANALYSIS	LOCATION OF EVIDENCE AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	REPORT OF FINDINGS If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year	BENCHMARK MET NOT MET
IV.D	Employment rates demonstrate program effectiveness	1. Employment rates are collected separately for each degree program (BSN, MSN, DNP and post-graduate APRN certificate) within 12 months of program completion					
		2. Employment rates are 70% or higher					

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#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAME FOR DATA COLLECTION & ANALYSIS	PERSON OR COMMITTEE RESPONSIBLE FOR DATA COLLECTION & ANALYSIS	LOCATION OF EVIDENCE AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	REPORT OF FINDINGS If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year	BENCHMARK MET NOT MET
IV.E	Program outcomes demonstrate program effectiveness.	1. Students across all program levels (BSN, RN-BSN, MSN, DNP) are satisfied with the program as evidenced by a benchmark score of 3.0 or better on the End of Program Satisfaction Survey questions	<u>BSN</u> Fall Semester <u>RN-BSN</u> Spring Semester <u>MSN</u> Spring Semester	mJones PEC Chair COAP	BSN, RN-BSN, AND MSN Program Satisfaction Surveys A copy of the 2013 BSN, RN-BSN, and MSN Summary of End of Program Satisfaction Surveys	<u>BSN 2013 PROGRAM SATISFACTION SURVEY RESULTS</u> A mean score of 3.0 or better was received on each of the End of Program Satisfaction Survey questions 4/19 (21.05%) response rate No responses < 3.0 <u>RN-BSN 2013 PROGRAM SATISFACTION SURVEY RESULTS</u> A mean score of 3.0 or better was received on each of the End of Program Satisfaction Survey questions 14/14 (100%) response rate No responses < 3.0 <u>MSN 2013 PROGRAM SATISFACTION SURVEY</u>	MET <i>Change Benchmark to:</i> <i>Students Who complete the End of Program Satisfaction Survey across all program levels (BSN, RN-BSN, MSN, DNP) are satisfied with the program as evidenced by a benchmark score of 3.0</i>

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						<p><u>RESULTS</u> A mean score of 3.0 or better was received on each of the End of Program Satisfaction Survey questions 4/10 (40%) response rate No responses < 3.0</p>	<p>or better on the End of Program Satisfaction Survey questions</p>
		<p>2. Alumni across all program levels (BSN, RN-BSN, MSN, DNP) are satisfied with the program as evidenced by a benchmark score of 3.0 or better on the One (1) and Three (3) Year Alumni Surveys</p>	<p>Spring Semester</p>	<p>mJones PEC Chair COAP</p>	<p>1 Year BSN Survey Summary 3 Year BSN Survey Summary 1 Year RN-BSN Survey Summary 3 Year RN-BSN Survey Summary 1 Year MSN Survey Summary 3 Year MSN Survey Summary</p>	<p><u>1 year BSN Survey results</u> 7/27 responses – 25.9% response rate Mean scores on each question on the survey is 3.0 or greater No responses < 3.0</p> <p><u>3 year BSN Survey results</u> 4/28 responses – 14.2% response rate Mean scores on each question on the survey is 3.0 or greater No responses < 3.0</p> <p><u>1 year RN-BSN Survey results</u> 2/17 responses – 11.7% response rate Mean scores on each question on the survey is 3.0 or greater No responses < 3.0</p> <p><u>3 year RN-BSN Survey results</u> 5/19 responses – 26.1% response rate Mean scores on each question</p>	<p>Not MET</p> <p>Change Benchmark:</p> <p>Alumni who completed the 1 and 3 year surveys across all program levels (BSN, RN-BSN, MSN, DNP) are satisfied with the program as evidenced by 90% of the questions received a benchmark score of 3.0 or better</p>

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						<p>on the survey is 3.0 or greater No responses < 3.0</p> <p><u>1 year MSN Survey results</u> 6/16 responses – 37.5% response rate Mean scores on each question on the survey is 3.0 or greater</p> <p><u>3 year MSN Survey results</u> 4/10 responses – 40% response rate Mean scores on each question on the survey is 3.0 or greater with the following exception of: Advisement 2.75 Helpfulness of graduate faculty 2.75 DSU Library Services 2.67 Technology support services 2.67 Computer software/programs 2.67</p> <p>Overall 3 year MSN Survey mean score:4.60—Does this change the benchmark results to Met?</p>	
		3. 80% of alumni across all program levels	Spring Semester	mJones PEC Chair COAP	1 Year BSN Survey Summary 3 Year BSN	<p><u>BSN Alumni:</u> <u>1 year BSN results</u> Further Education - Currently in school Yes = 0</p>	<p>NOT MET No way to clearly determine the answer to</p>

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		(BSN, RN-BSN, MSN, DNP) indicate advanced degrees and/or certifications have been obtained since graduation			<p>Survey Summary</p> <p>No = 7 (100%)</p> <p>If you are not currently in school, do you plan to return to school?</p> <p>Yes = 5 (71.4%) No = 2 (28.6%)</p> <p>Future Degree Plans</p> <p>MSN Nurse Educator = 1 (16.7%) MSN Nurse Practitioner = 4 (66.7%) DNP = 1 (16.7%) Other = 1 (16.7%) Skipped Question = 1</p> <p>1 Year RN-BSN Survey Summary</p> <p>3 Year RN-BSN Survey Summary</p> <p>1 Year MSN Survey Summary</p> <p>3 Year MSN Survey Summary</p> <p>Highest Degree Currently Held</p> <p>Bachelors = 5 (71.4%) Masters = 2 (28.6%)</p> <p><u>3 year BSN results</u></p> <p>Further Education - Currently in school</p> <p>Yes = 3 (75%) No = 1 (25%)</p> <p>If you are not currently in school, do you plan to return to school?</p> <p>Yes = 3 (75%) No = 1 (25%)</p> <p>Future Degree Plans</p> <p>MSN Nurse Practitioner = 3 (100%)</p> <p>Highest Degree Currently Held</p> <p>Bachelors = 2 (50%)</p>	<p>benchmark according to questions on alumni surveys. Survey or benchmark needs rewording.</p> <p>1. Survey asks what is the highest degree you currently hold. Some students already had degrees prior to coming into our program.</p> <p>2. Survey asks what type of certification do you hold? They could have had a certification prior to coming to our program. So this does not provide</p>
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						<p>Masters = 2 (50%)</p> <p><u>RN/BSN Alumni:</u> <u>1 year RN/BSN results:</u> Further Education Currently Enrolled Yes – 0 No - 2 (100%) Highest Degree Currently Held Bachelor – 2 (100%) Master – 0 (0.0%) Doctorate – 0 (0.0%) Plan to Return Yes – 2 (100%) MSN – Administrator 1 (50%) MSN – Educator 2 (100%) No – 0</p> <p><u>3 year RN/BSN results:</u> Further Education Currently Enrolled No - 4 (80%) Yes - 1 (20%) Highest Degree Currently Held Bachelor – 3</p>	<p>us with the information we need to answer benchmark.</p>
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						<p>(60%) Master – 2 (40%) Doctorate – 0 (0.0%)</p> <p>Plan to Return No – 1 (20%) Yes – 4 (80%)</p> <p>MSN – Educator - 1 (25%) MSN – Nurse Practitioner – 3 (75%) DNP – 1 (25%)</p> <p><u>MSN Alumni:</u> <u>1 year MSN results:</u> Further education: 5 (83.3%) of the respondents denied currently being in school. 6 (100%) reported plans to obtain a doctorate. 4 (66.7%) plan to pursue a DNP 1 (16.7%) plan to pursue a post master FPMHNP 1 (16.7%) plan to pursue another degree/certificate.</p> <p><u>1 year MSN results:</u> Further education: 3 (75%) of the respondents denied currently being in school</p>	
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						1 (25%) reported being currently in school. 3 (75%) reported plans to obtain a doctorate 1 (25%) denied plans to obtain a doctorate outside of nursing.	
		4. 80% employers express satisfaction with the program as evidenced by a benchmark score of 3.0 or better on Employer /Advisory Council Surveys	Spring and Fall	mJones PEC Chair COAP	Program Effectiveness Committee Advisory Council Employer Survey 2013 Report	A score of 3.0 or better was received on all questions included in the Employer Survey. 3 surveys were received from employers during 2013	MET 100% (3/3) expressed satisfaction with the program. Need to change wording of benchmark: 90% employers who complete the Employer Survey indicate satisfaction with student performance in the workplace and satisfaction with the program as

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							evidenced by a benchmark score of 3.0 or better on Employer Surveys
		5. Student retention rates across all program levels (BSN, RN-BSN, MSN, DNP) are 80% or better.	Fall and Spring	mJones Secretary to the Dean COAP	Location: Secretary to the Dean's Office	BSN students (admitted Fall 2011 – graduated Dec. 2013) 32 admitted 18 graduated on schedule 06 continuing, to graduate Dec. 2014 05 withdrew, but eligible to return 03 not eligible to return RN-BSN students (admitted Summer 2012 –graduated Spring 2013) 12 admitted 09 graduated on schedule 03 withdrew, but eligible to return MSN students (admitted Fall 2011 – graduated Spring 2013) 15 admitted 12 graduated on schedule 02 withdrew, but eligible to return 01 not eligible to return	NOT MET BSN Retention Rate - 75% RN-BSN Retention Rate – 75% MSN Retention Rate – 80%

#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAME	PERSON OR COMMITTEE	LOCATION OF EVIDENCE	REPORT OF FINDINGS	BENCHMARK
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			FOR DATA COLLECTI ON & ANALYSIS	E RESPONSIB LE FOR DATA COLLECTIO N & ANALYSIS	AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year	MET NOT MET
IV. F	Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness. <i>Expected faculty outcomes are:</i> <ul style="list-style-type: none"> • <i>Are identified for the faculty as a group</i> • <i>Incorpora te expected levels of achievem ent</i> • <i>Reflect expectatio ns of faculty in their roles and</i> 	1. 100% of RESSO N faculty attain at least 10 CEUs annuall y					

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	<p><i>evaluation of faculty performance</i></p> <ul style="list-style-type: none"> • <i>Are consistent with and contribute to achievement of the program's mission and goals; and</i> • <i>Are congruent with institution and program expectations</i> <p><i>Actual faculty outcomes are presented in the aggregate for the faculty as a group, analyzed, and compared to expected outcomes</i></p>						
		2. 80% of RESSO					

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		N faculty attain mean scores of 3.0 or better on all faculty, course, clinical evaluati on each semeste r					
		3. 40% of RESSO N faculty incorpo rate simulati on activitie s into the Clinical Practic um courses in which they					

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		teach					
		4. 40% of RESSO N faculty present researc h finding s at confere nces at the state, regiona l, national , or internat ional level					
		5. 10% of RESSO N faculty submit for publicat ion or are publish ed in a peer reviewe					

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		d journal, book, etc as an author, reviewe r, or editor					
		6. 10% of RESSO N faculty submit a grant proposa l or are awarde d grant funding , or serve as a grant reviewe r					
		7. 100% of RESSO N faculty serve on two or more RESSO					

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		standin g commit tees					
		8. 75% of RESSO N faculty serve on one or more Univers ity commit tee, council, taskforc e, or other appoint ed or elected position s					
		9. 75% of RESSO N faculty hold membe rship in professi onal					

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		organizations at state, national, or international levels					
		10. 40% of RESSON faculty hold leadership positions in professional organizations at state, national, or international levels					
		11. 60% of RESSON faculty participate in commu					

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		nity services					
		12. 100% of RESSO N faculty particip ate in 2 or more recruit ment events annuall y					
		13. 60% of RESSO N faculty engage in clinical practice					

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#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAM E FOR DATA COLLECTI ON & ANALYSIS	PERSON OR COMMITTE E RESPONSIB LE FOR DATA COLLECTIO N & ANALYSIS	LOCATION OF EVIDENCE AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	REPORT OF FINDINGS If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year	BENCHMA RK MET NOT MET
IV. G	The program defines and reviews formal complaints according to established policies.	1. A formal complaint is defined and made available to RESSON student s, faculty, and staff					
		2. 100% of all formal complaints are reviewed and					

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		maintained according to policy.					
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#	CCNE KEY ELEMENT	BENCHMARK(s)	TIMEFRAM E FOR DATA COLLECTI ON & ANALYSIS	PERSON OR COMMITTE E RESPONSIB LE FOR DATA COLLECTIO N & ANALYSIS	LOCATION OF EVIDENCE AND/OR DOCUMENTS REVIEWED AND/OR UTILIZED DURING THE DATA COLLECTION PROCESS (Include dates if applicable)	REPORT OF FINDINGS If benchmark was MET, provide data and a summary in a narrative format to demonstrate how benchmark was met If benchmark was NOT MET, provide data along with an explanation for reason benchmark was NOT MET and/or Recommendations to enable benchmark to be MET next year	BENCHMA RK MET NOT MET
IV. H	Data analysis is used to foster ongoing program improvement.	1. Actual outcomes are compared to expected outcomes regarding: a. Completion rates b. Licensure and certification pass rates c. End of Program					

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		<p>Satisfaction Survey across all program levels (BSN, RN-BSN, MSN, DNP)</p> <p>d. One (1) and Three (3) Year Alumni Surveys</p> <p>e. Employer Satisfaction Surveys</p> <p>f. Formal Complaints</p> <p><i>Discrepancies between actual and expected outcomes inform areas</i></p>					
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		<i>for improvement</i>					
		2. RESSON faculty are engaged in the program improvement process			Fac Org minutes UG & G Program minutes Participation in MPE data collection, analysis, and Report of Findings		

FACULTY BENCHMARKS 2010

#	DESCRIPTION	MET	NOT MET	COMMENT	RECOMMENDATION
1	100% of nursing faculty will attain at least 10 CE units annually	X 100%		<ul style="list-style-type: none"> 14/14 faculty met or exceeded 10 contact hours during 2010 Total contact hours = 350.76 Average contact hours per faculty = 25.05 	<ol style="list-style-type: none"> 100% of nursing faculty will attain a minimum of 10 contact hours (IHL standard)
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester		X 71.42%	<ul style="list-style-type: none"> 10/14 faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2010 	<ol style="list-style-type: none"> Clarify whether evaluations are DSU or RESSON <ul style="list-style-type: none"> Recommendation: All faculty report on RESSON evaluations
3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	X 71.42%		<ul style="list-style-type: none"> 10/14 faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach 	<ol style="list-style-type: none"> Clarify: Did faculty conduct the activity or just taught in the course where simulation was incorporated? <ul style="list-style-type: none"> Recommendation: Include on the benchmark only if faculty assisted with/conducted the activity during their assigned section of the course
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level		X 35.71%	<ul style="list-style-type: none"> 5/14 faculty presented <ul style="list-style-type: none"> International 5 National 4 Regional 3 State 	<ol style="list-style-type: none"> Clarify: Presentations type - research findings, peer-reviewed, etc. <ul style="list-style-type: none"> Recommendation: Reword benchmark based on DSU tenure policy Identify type of presentations in benchmark – poster, oral, etc. Clarify: If faculty present at non-peer reviewed events where does this go in the portfolio and annual evaluation?
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor		X 7.14%	<ul style="list-style-type: none"> 1/14 faculty was published in a non-peer reviewed journal 	<ol style="list-style-type: none"> Clarify: Base this benchmark from tenure policy also. Does submitting for publication count as scholarship or does the article have to be published? Clarify: If faculty publish in a non-peer reviewed journal/book/etc where does this go in the portfolio and annual evaluation?
6	10% of nursing faculty will submit a grant or serve as a grant reviewer	X 28.57%		<ul style="list-style-type: none"> 4/14 faculty submitted or was awarded a grant and/or was a grant reviewer 6 grants submitted 5 grants awarded for a total of \$159,551 2 grants reviewed 	<ol style="list-style-type: none"> Clarify: If a grant is submitted but not awarded does this meet the benchmark? Clarify: What is considered a grant review? Does it have to be peer-reviewed?
7	60% of faculty will participate in community services	X 78.57%		<ul style="list-style-type: none"> 11/14 faculty participated in community services Faculty participated in a total of 45 events 	
8	60% of faculty will engage in faculty practice to maintain nursing competency	X 71.42%		<ul style="list-style-type: none"> 10/14 faculty engaged in practice 	<ol style="list-style-type: none"> Clarify: Does faculty have to report total hours practiced during the year? How much practice maintains competency? <ul style="list-style-type: none"> NPs are required to practice a minimum of 1500 hours during the 5 year certification period (minimum 300 hrs/year or 6 hours/week)

FACULTY BENCHMARKS 2011

#	DESCRIPTION	MET	NOT MET	COMMENT
1	100% of RESSON faculty will attain at least 10 contact hours annually		X 92.85%	<ul style="list-style-type: none"> 13/14 faculty met or exceeded 10 contact hours during 2011 Total contact hours = 287 Average contact hours per faculty = 20.5
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	X 92.85%		<ul style="list-style-type: none"> 13/14 faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2011
3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	X 71.42%		<ul style="list-style-type: none"> 10/14 faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level		X 28.57%	<ul style="list-style-type: none"> 4/14 faculty presented during 2012 <p>Oral Presentations:</p> <ul style="list-style-type: none"> International National - Regional State - 1 Local <p>Poster Presentations:</p> <ul style="list-style-type: none"> International National Regional - 1 State - 2 Local -
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor	X 21.42%		<ul style="list-style-type: none"> 3/14 faculty 2 were book reviewers 1 was published
6	10% of nursing faculty will submit a grant or serve as a grant reviewer	X 35.71%		<ul style="list-style-type: none"> 5/14 faculty submitted or was awarded a grant and/or was a grant reviewer grants submitted – 4 grants awarded for a total of 2 of 3 - \$43,572.00
7	100% of RESSON faculty serve on two or more RESSON standing committees	X 100%		<ul style="list-style-type: none"> 14/14 faculty serve on two or more RESSON standing committees
8	75% of RESSON faculty serve on one or more University committee, council, taskforce or other appointed/elected positions		X 71.42%	<ul style="list-style-type: none"> 10/14 faculty serve on one or more University committee, council, taskforce, or other appointed/elected position
9	60% of faculty will participate in community services	X 85.71%		<ul style="list-style-type: none"> 13/14 faculty participated in community services Faculty participated in a total of 44 events
10	60% of faculty will engage in faculty practice to maintain nursing competency	X 64.28%		<ul style="list-style-type: none"> 9/14 faculty engaged in practice

FACULTY BENCHMARKS 2012

#	DESCRIPTION	MET	NOT MET	COMMENT
1	100% of RESSON faculty will attain at least 10 contact hours annually	X 100%		<ul style="list-style-type: none"> 14/14 faculty met or exceeded 10 contact hours during 2012 Total contact hours = 481.71 Average contact hours per faculty = 34.40
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	X 92.85		<ul style="list-style-type: none"> 13/14 faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2012
3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	X 64.28		<ul style="list-style-type: none"> 9/14 faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level	X 57.14%		<ul style="list-style-type: none"> 8/14 faculty presented during 2012 <p>Oral Presentations:</p> <ul style="list-style-type: none"> International National - 3 Regional State - 1 Local <p>Poster Presentations:</p> <ul style="list-style-type: none"> International National Regional - 5 State Local - 1
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor		X 7.14%	<ul style="list-style-type: none"> 1/14 faculty was a peer-reviewer
6	10% of nursing faculty will submit a grant or serve as a grant reviewer	X 35.71%		<ul style="list-style-type: none"> 5/14 faculty submitted or was awarded a grant and/or was a grant reviewer grants submitted – 7 grants awarded for a total of 4 of 5 - \$22,550 1 unknown until summer grants reviewed
7	100% of RESSON faculty serve on two or more RESSON standing committees	X 100%		<ul style="list-style-type: none"> 14/14 faculty serve on two or more RESSON standing committees
8	75% of RESSON faculty serve on one or more University committee, council, taskforce or other appointed/elected positions	X 85.71%		<ul style="list-style-type: none"> 12/14 faculty serve on one or more University committee, council, taskforce, or other appointed/elected position
9	60% of faculty will participate in community services	X 85.71%		<ul style="list-style-type: none"> 12/14 faculty participated in community services during 2012 Faculty participated in a total of 57 events during 2012
10	60% of faculty will engage in faculty practice to maintain nursing competency		X 57.14%	<ul style="list-style-type: none"> 8/14 faculty engaged in practice during 2012

Should we add benchmarks related to advisement and recruitment?

FACULTY BENCHMARKS 2013

#	DESCRIPTION	MET	NOT MET	COMMENT
1	100% of nursing faculty attain at least 10 contact hours annually	MET 100%		<ul style="list-style-type: none"> 14/14 (100%) faculty met or exceeded 10 contact hours during 2013 Total contact hours = 403.1 Average contact hours per faculty = 28.79
2	80% of nursing faculty will attain a mean score of 3.0 or above on all faculty/course/clinical evaluations each semester	MET 100%		<ul style="list-style-type: none"> 15/15 (100%) faculty met or exceeded 3.0 on all faculty/course/clinical evaluations during spring, summer, fall semesters in 2013
3	40% of nursing faculty will incorporate simulation activities into the Clinical/Practicum courses in which they teach	MET 53.3%		<ul style="list-style-type: none"> 8/15 (53.3%) faculty incorporated simulation activities into one or more clinical/practicum courses in which they teach
4	40% of nursing faculty will present research findings at conferences at the state, regional, or national level	MET 40.0%		<ul style="list-style-type: none"> 6/15 faculty presented during 2012 <p>Oral Presentations:</p> <ul style="list-style-type: none"> International - 0 National - 0 Regional - 0 State - 2 Local - 3 <p>Poster Presentations:</p> <ul style="list-style-type: none"> International - 0 National - 0 Regional - 0 State - 7 Local - 0
5	10% of faculty will submit or be published in a peer reviewed journal/book as an author, reviewer, or editor		NOT MET 6.6%	<ul style="list-style-type: none"> 1/15 (6.6%) faculty Reviewer for 7 chapters in a book Author of two (2) chapters submitted in 2013 and will be published in 2014
6	10% of nursing faculty will submit a grant or serve as a grant reviewer	MET 20.0%		<ul style="list-style-type: none"> 3/15 (20.0%) faculty submitted or was awarded a grant and/or was a grant reviewer Established Grants continued – 1 – 3rd year \$20,000 New Grants submitted – 3 Grants awarded 1 - \$1,000 – one year grant award 1 - \$1,574,546 – three year grant award
7	100% of RESSON faculty serve on three or more Robert E Smith School of Nursing committees	MET 100%		<ul style="list-style-type: none"> 15/15 (100%) faculty serve on three or more Robert E Smith School of Nursing committees
8	75% of RESSON faculty serve on one or more University committee, council, taskforce or other appointed/elected positions	MET 80.0%		<ul style="list-style-type: none"> 12/15 (80.0%) faculty serve on one or more University committee, council, taskforce, or other appointed/elected position
8.1 New 2013	100% of nursing faculty participate in two or more recruitment events annually		NOT MET 92.85%	<ul style="list-style-type: none"> 13/14 (92.85%) nursing faculty participated in two or more recruitment events in 2013 Faculty participated in a total of 33 recruitment events during 2013
8.2	100% of nursing faculty participate in academic advisement each semester for students enrolled in programs and for students pursuing enrollment in a nursing program			<ul style="list-style-type: none">
9	60% of faculty will participate in community services	MET 86.6%		<ul style="list-style-type: none"> 13/15 (86.6%) faculty participated in community services Faculty participated in a total of 45 community events
10	60% of faculty will engage in faculty practice to maintain nursing competency	MET 60.0%		<ul style="list-style-type: none"> 9/15 faculty engaged in practice during 2013

Delta State University Robert E. Smith School of Nursing
Fall 2013 Recruitment

Date	Event	Number
9/30/13	College Fair Memphis Agri Center	164
10/24/13	Northwest Community College ADN Career Fair	86
10/24/13	DSU Career Fair	62
10/25/13	College Fair Coahoma County High	107
11/05/13	DSU SNA event	16
	Miscellaneous Cards	69
2013 Tours	Individual and Group Tours in	253
2013 Undocumented	-DSU Move in Day -Employee Health Fair -PigPickin 1 st Aid Booth -DSU Home Football 1 st Aid Booth Games -Octoberfest -MADN Convention -MNA Convention -MOADN -Crossties	Many contacts made during these events but no contact cards were returned to faculty representative(s)
TOTAL	Fall 2013 documented Recruitment Events	757

TOTAL 504

I know there were many other events but I do not have cards on them...

**STANDARD IV.A.3
GRADUATION RATES
2010 – 2013**

PROGRAM	GRADUATION YEAR	# ADMITTED	# RETURNING	# GRADUATES Anticipated Date of Graduation upon Admission to Program	%	# GRADUATES to graduate within 150% TIMEFRAME	%	COMMENTS
BSN	2010	35	2	27	72.97%	32	86.48%	<ul style="list-style-type: none"> • 5 students continuing with expected graduation December 2011 • 6 students will not complete program and graduate
	2011	46	0	29	63.04%	37	80.43%	<p>12 students did not graduate on the anticipated date of graduation</p> <ul style="list-style-type: none"> • 8 students eligible to return to program • 4 students are not eligible to return to program
	2012	32	0	24	75.00%	25	78.12%	<p>3 students withdrew and are eligible to return</p> <p>1 student continuing with anticipated graduation in May 2013</p> <p>4 students dismissed and are not eligible to return</p>

**STANDARD IV.A.3
GRADUATION RATES
2010 – 2013**

	2013	32	0	18	56%	6	75%	<p>5 students withdrew and are eligible to return</p> <p>6 student continuing with anticipated graduation in May 2014</p> <p>3 students dismissed and are not eligible to return</p>
PROGRAM	GRADUATION YEAR	# ADMITTED	# RETURNING	# GRADUATES Anticipated Date of Graduation upon Admission to Program	%	# GRADUATES to graduate within 150% TIMEFRAME	%	COMMENTS
RN-BSN	2010	27	0	19	70.37%	21	77.77%	<ul style="list-style-type: none"> • 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	83.3%	<ul style="list-style-type: none"> • 3 students withdrew and are eligible to return to program

**STANDARD IV.A.3
GRADUATION RATES
2010 – 2013**

								<ul style="list-style-type: none"> 1 student continuing with anticipated graduation in 2012 [within 150%]
	2012	30	0	17	56.67%	19	63.33%	<ul style="list-style-type: none"> 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%	<ul style="list-style-type: none"> 3 students withdrew and are eligible to return
PROGRAM	GRADUATION YEAR	# ADMITTED	# RETURNING	# GRADUATES Anticipated Date of Graduation upon Admission to Program	%	# GRADUATES to graduate within 150% TIMEFRAME	%	COMMENTS
MSN	2010	18	0	10	55.56%	12	66.67%	<ul style="list-style-type: none"> 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

**STANDARD IV.A.3
GRADUATION RATES
2010 – 2013**

								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

Delta State University
Robert E. Smith School of Nursing
Recruitment and Marketing Plan

The Robert E. Smith School of Nursing (RESSON) recruiting and marketing efforts assist in enrollment growth of high quality and diverse applicants for all programs. Unique recruitment and marketing techniques continue to be explored to recruit and support the university goal of becoming the best regional university in the nation. All Faculty and Staff of the RESSON actively participate in recruitment and marketing efforts in various ways.

RESSON Website

An active internet domain (nursing.deltastate.edu) is maintained for access by any interested individual. This website provides: information on the programs of study and organizations; access to handbooks and resources; and ability for potential students to make application. In accordance with the Office of Information Technology (OIT) and Communications and Marketing, the RESSON website will be updated and maintained as appropriate.

Recruitment

Brochures

Recruitment flyers/brochures with the most current information on the programs of study (BSN, RN-BSN, MSN) are available during recruitment efforts, on the website, and in various locations throughout the RESSON. Full program flyers are distributed to a variety of healthcare facilities.

Newsletter

A newsletter is published electronically and as a hard copy once during the fall and spring for dissemination to donors, advisory council members, alumni, current and potential students, and community members. The newsletter highlights accomplishments of the RESSON faculty, students, and alumni, as well as events.

Events/Efforts

Participation at recruitment events occurs at the community, state, regional, and national levels. Some of these recruitment and marketing activities include sponsorship, exhibit and participation in health fairs, nursing conferences, counseling and educational conventions, workshops, alumni events, career fairs and campus visits for K-12 schools, community colleges, and universities, festivals, healthcare agencies, campus and community events, camps, and programs.

Recruitment and marketing efforts extend to potential students and family members in areas not specified above through opportunities such as:

- Educational seminars by students within local K-12 schools (safety, hygiene, nutrition, exercise, diabetes, risky behaviors, etc.)

- Advertisement in convention programs, nursing publications [i.e. Mississippi RN, Board of Nursing] and local newspapers.
- Community involvement by faculty and students through health presentations and fairs.
- Provide program information to healthcare agencies and preceptors by RESSON faculty members.
- Collaborate with the Office of Graduate and Continuing Studies to offer Kids College during the summer for children interested in the healthcare field.

- **Programs of Study**

- BSN Generic

- Participate in high school and college career days through direct participation and by providing DSU Recruiters with brochures and recruitment materials.
 - Sponsor and attend/exhibit at annual conventions [i.e. Mississippi Counselors Association Convention and Mississippi Science Teachers Convention] to target audiences that have direct contact/influence in student career choices.
 - Sponsor and attend alumni events to provide program information and distribute program materials to DSU Alumni working in healthcare agencies or education/school settings.
 - Arrange and provide tours of the RESSON building for prospective generic nursing students and/or parents.
 - Participate in health fairs and other community based events such as Delta Health and Wellness Day, Campus Health Screenings, Annual Rice Luncheon, Oktoberfest and Crosstie Festival – provide health screenings and program information to community members.

- RN-BSN Completion

- Participate in community college career days through direct participation and by providing DSU Recruiters with brochures and recruitment materials.
 - Program information and applications are distributed to ADN schools and at healthcare agencies.
 - Program information is provided by RESSON faculty members to healthcare agencies and preceptors.
 - Sponsor and attend/exhibit at annual conventions [Mississippi Organization of Associate Degree Nurses (M-OADN) Convention, MNA Convention, and Nursing Summit].
 - Sponsor and attend alumni events to provide program information and distribute program materials to DSU Alumni who are associate degree nurses and/or who work in healthcare agencies or education/school settings.
 - Arrange and provide tours of the RESSON building for prospective RN-BSN nursing students.

- MSN Program

- Participate in community college and healthcare career fairs – providing MSN program information and applications to nursing faculty and employees.

- Program information and applications are distributed to ADN schools and at healthcare agencies.
- Sponsor and attend/exhibit at annual conventions [MNA Convention, Nursing Summit, M-OADN Convention, and NP Conferences].
- Sponsor and attend alumni events to provide program information and distribute program materials to DSU Alumni who are prospective MSN students and/or who work in healthcare agencies or education/school settings.
- Arrange and provide tours of the RESSON building for prospective MSN students.
- Develop, coordinate and implement joint recruiting efforts with the DSU Graduate and Continuing Office.

Data Collection

To monitor recruitment and marketing efforts, data will be collected of the following:

- Potential students advised during recruitment events
- Potential students advised from website, emails, phone calls, and face-to face
- Distribution of recruitment materials to healthcare agencies and/or preceptors
- Distribution of recruitment materials to high schools and community colleges

Revised: 08/2012
Approved: 5/2013

DELTA STATE UNIVERSITY
ROBERT E. SMITH SCHOOL OF NURSING

NURSING STUDENT RETENTION & SUCCESS PLAN

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.

- Enhance student success
- Improve retention and graduation rates
- Reduce attrition rates (drop out)
- Facilitate academic progression and swift entry into the workforce

BSN Strategies:

1. HESI Admission Assessment Exam – provides an understanding of basic knowledge foundation in various subject content [i.e. English, Math, and Science], as well as identification of critical thinking skills, learning styles, and personality characteristics. This examination helps to identify “at-risk” students.

2. Orientation – required for nursing students prior to beginning the nursing program - one full day on-campus to meet faculty and peers; gain information related to nursing program requirements; become acclimated to the learning management system; and receive specific course information and materials in preparation for first semester.

3. SUPPORT Program (Support, Understanding Provided by Parents/Others Reality Training) – a 2-3 hour program offered during Orientation to parents and significant others of first semester nursing students – designed to prepare parents/significant others for the workload and stress accompanied with nursing school.

4. Boot Camp – optional for nursing students prior to first semester – a 2-3 day on-campus workshop that focuses on topics such as, math, anatomy & physiology, study skills, test taking, and time management.

5. Advisement – each nursing student is assigned an advisor (faculty member) to assist with academic concerns, establishing a program of study, and meeting graduation requirements. The student and advisor should meet at least once each semester to discuss and review progression, but more often as necessary for academic and personal issues.

6. Course Advisement – the Instructor of Record (IOR) of each nursing course will provide guidance, through both written and verbal communication, to each student who has been unsuccessful on individual course assignments, as well as overall course progression/retention.

7. Academic Support Lab – the Instructor of Record (IOR) and/or advisor may refer individual students to the staff in the academic support lab for assistance in specific content [i.e. Math, A&P, APA].

8. Writing Center – the Instructor of Record (IOR) and/or advisor may refer individual students to the staff in the writing center for assistance with writing style, proofing, and APA issues.

9. Testing and Counseling Center – the Instructor of Record (IOR), advisor, and/or Chair of Academic Programs (COAP) may refer individual students to the Testing and Counseling Center for assistance with personal issues and/or screening for learner disabilities [as part of the American Disabilities Act].

10. Math Seminar – a workshop provided by the faculty member(s) in the NUR 302 Fundamentals of Nursing course in preparation for the dosage calculation exam.

11. ATI Modules – an interactive software that provides a series of modules on student success, faculty development, specific nursing content, and test taking. Modules are integrated into individual courses based upon content and used as an evaluation component.

12. HESI Examinations – standardized testing is used throughout the program of study to determine the strengths and weaknesses of individual students in specific content areas. Based upon student scores, an enrichment contract/plan is established by the student with the guidance and approval of the advisor. Final HESI examination (HESI Exit Exam) is given during the last semester of the nursing program with a score of 900 required for graduation.

13. NUR 408 Nursing Synthesis – a didactic course taught during the last semester of the program of study to prepare students for success on the National Council of Licensure Examination for Registered Nurses (NCLEX-RN).

RNBSN Strategies:

1. Orientation – strongly encouraged for registered nurse students prior at the beginning of each semester - one full day on-campus to meet faculty and peers; gain information related to nursing program requirements; become acclimated to the learning management system; and receive specific course information and materials.

2. Advisement – each registered nurse student is assigned an advisor (faculty member) to assist with academic concerns, establishing a program of study, and meeting graduation requirements. The student and advisor should meet at least once each semester to discuss and review progression, but more often as necessary for academic and personal issues.

3. Course Advisement – the Instructor of Record (IOR) of each nursing course will provide guidance, through both written and verbal communication, to each student who has been unsuccessful on individual course assignments, as well as overall course progression/retention.

4. Critical Thinking Examination – a standardized test that is given at the beginning and end of the nursing program to measure critical thinking skills.

5. Academic Support Lab – the Instructor of Record (IOR) and/or advisor may refer individual students to the staff in the academic support lab for assistance in specific content [i.e. Math, A&P, APA].

6. Writing Center – the Instructor of Record (IOR) and/or advisor may refer individual students to the staff in the writing center for assistance with writing style, proofing, and APA issues.

7. Testing and Counseling Center – the Instructor of Record (IOR), advisor, and/or Chair of Academic Programs (COAP) may refer individual students to the Testing and Counseling Center

for assistance with personal issues and/or screening for learner disabilities [as part of the American Disabilities Act].

MSN Strategies:

1. Orientation - strongly encouraged for graduate nurse students prior at the beginning of each semester - one full day on-campus to meet faculty and peers; gain information related to nursing program requirements; become acclimated to the learning management system; and receive specific course information and materials.
2. Advisement – each graduate nurse student is assigned an advisor (faculty member) to assist with academic concerns, establishing a program of study, and meeting graduation requirements. The student and advisor should meet at least once each semester to discuss and review progression, but more often as necessary for academic and personal issues.
3. Course Advisement – the Instructor of Record (IOR) of each nursing course will provide guidance, through both written and verbal communication, to each student who has been unsuccessful on individual course assignments, as well as overall course progression/retention.
4. Academic Support Lab – the Instructor of Record (IOR) and/or advisor may refer individual students to the staff in the academic support lab for assistance in specific content [i.e. Math, A&P, APA].
5. Writing Center – the Instructor of Record (IOR) and/or advisor may refer individual students to the staff in the writing center for assistance with writing style, proofing, and APA issues.
6. Testing and Counseling Center – the Instructor of Record (IOR), advisor, and/or Chair of Academic Programs (COAP) may refer individual students to the Testing and Counseling Center for assistance with personal issues and/or screening for learner disabilities [as part of the American Disabilities Act].
7. HESI Examinations – standardized testing is used throughout the program of study to determine the strengths and weaknesses of individual students in specific content areas. Based upon student scores, an enrichment contract/plan is established by the student with the guidance and approval of the advisor.
8. NUR 680 Family Nurse Practitioner Review Course - a didactic course taught during the last semester of the program of study to prepare students for success on the national certification exam for family nurse practitioners.

Recruitment
Summer 2013

Date		Number	Break down
May 31, 2013	BSN Orientation	52	
June 3, 2013	RN/BSN Orientation	13	Friends/Family (2) Former Student (2) Coworker (2) Internet (7)
June 14, 2013	Freshman Orientation I	22	Friends/Family (11) Job Fair/Recruitment (1) Internet (1) No Answer (9)
June 18, 2013	Transfer Orientation I	8	Internet (2) Job Fair/Recruitment (6)
June 21, 2013	Freshman Orientation II	17	Friends/Family (9) Recruitment (8)
July 12, 2013	Freshman Orientation III	16	Internet (4) Family (2) Coach (0) Friend (6) Job Fair/Recruitment (4)
July 16, 2013	Transfer Orientation II	20	Family (5) Recruitment (8) Friend (2) Internet (1) College Fair (4)
August 19, 2013	Late Registration – Fall	27	Family (5) Friend (2) Website (1) Recruiter (2) Alumni (2) High School (2) No Answer (13)
Total # of follow up contacts			175

Delta State University
Robert E. Smith School of Nursing
Recruitment Events & First Aid Booths
2013-2104

Event/Location	Date/Time	Faculty Member(s)
DSU Move-In Day DSU Campus (beside Student Health Center)	Sunday, August 18, 2013 12:30-1:00pm – setup 1:00-5:00pm – event	Emily Newman Vicki Bingham ✓
Employee Health Fair – State Room, H.L. Nowell Student Union	Thursday, August 22, 2013 8:30-9:00am – setup 9:00am-3:00pm – event	Vicki Bingham Debbie Allen ✓
DSU Day – 2 nd Floor West Lobby, H.L. Nowell Student Union	Saturday, September 28, 2013 11:00-11:15am – setup 11:30-12:30pm - event 1:00-2:30pm – building Tour	Emily Newman (SNA Student) Catherine Hayes
Pig Pickin First Aid Booth Stamen's Park Parker Field – 1 st Football Game	Saturday, September 28, 2013 1:00-6:00pm – booth 6:00-10:00pm – booth	Emily Newman (SNA Students) Louise Seals 1:00-4:00pm Vicki Bingham 4:00-10:00pm Shelby 4p-?
Hinds CC Nursing/Allied Health Center Job Fair – Anderson Hall	Thursday, October 03, 2013 10:15am - setup 11:00am – 1:00pm - event	Betty
Mississippi School of Mathematics & Science MUW Pohl Gym Columbus, MS	Tuesday, October 08, 2013 4:30 – 6:30pm	
Wesley Medical Center Hattiesburg, MS	Tuesday, October 08, 2013 4:30-5:00pm – setup 6:00-8:00pm – event 6:00-8:00am - event	Shelby Polk Cancelled by facility
Octoberfest Green Strip, Downtown Cleveland	Saturday, October 12, 2103 8:00am – 2:00pm	Louise Seals 8-? Vicki Bingham 10:00am-2:00pm Lacey Blessett 9-12
MASN Convention Jackson Convention Complex	Thursday, October 17, 2013 & Friday, October 18, 2013	Debbie Allen
DSU Home Football Game First Aid Booth Parker Field – McCool Stadium	Saturday, October 19, 2013 5:30pm – setup 6:00-10:00pm - booth	L. Seals / D. Allen
Northwest Community College Annual Nursing Student "Career Day" Senatobia, MS	Wednesday, October 23, 2013 9:00-11:30am	J. Seals Shelby Carlson
MNA Convention Biloxi Convention Center	Thursday, October 24, 2013 – Expo Day – 8:00am – 4:00pm Friday, October 25, 2013 – APRN Day – 8:00am – 3:00pm	Shelby - E. Newman Shelby - Thurs (8-12) ✓ Shelby - Fri (8-12) M Jones, Thursday (time pending)

Event/Location	Date/Time	Faculty Member(s)
DSU Home Football Game First Aid Booth Homecoming Parker Field - McCool Stadium	Saturday, November 02, 2013 3:30pm - setup 4:00-8:00pm - booth	Lacey 4-6 Allen
DSU Home Football Game First Aid Booth Parker Field - McCool Stadium	Saturday, November 09, 2013 1:30pm - setup 2:00-6:00pm - booth	J. Seak
Mississippi Organization of Associate Degree Nurses (M-OADN) Vicksburg Convention Center	Thursday, March 27 - Friday, March 28, 2014	Shelby Ernst Debbie
Desoto County Fair Southaven, MS	Thursday, September 12 4:30 - 7:00pm	Judy Honey ✓
Memphis Area - Center	Monday, September 30 6:00 - 8:00pm	Betty Sylvest Done
Bennie Thompson Fair Greenville, MS	Friday, October 04 9:00am - 4:00pm	Monica Jones Addie Herrod
Major Fair 2nd Floor West Lobby DSU Student Union	Thursday, October 24 th 2:00 - 4:00pm	Carleen Thompson Janice White
Holmes C.C. Ridgeland	Tues Sept 24 10:30 - 12:30	Addie Herrod Monica Jones
DSU at Bayou November 9 th - 12 th Nov 9-12 Nov	→	Y. Bughan
Desoto Baptist Southaven, MS	Tuesday, May 06, 2014	Yehi Bughan Debbie Allen

****Note - Recruitment Events & First Aid Booths will be added as known and/or requested**

Crosstree
Cleveland, MS

SJA

Recruitment
Summer 2013

Date		Number	Break down
May 31, 2013	BSN Orientation	52	
June 3, 2013	RN/BSN Orientation	13	Friends/Family (2) Former Student (2) Coworker (2) Internet (7)
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Total # of follow up contacts			175

5/2/13 X.H.

Delta State University
Service Learning Hours

Semester: **Spring** Year: **2013**

Department: **School of Nursing**

Compiled by: C.Hayes E-mail: chayesrn@deltastate.edu

Agency/Community Organization Partner(s): various community activities, hospitals, clinics, wellness fairs, and other community settings

Course Name/Number	# of students completing service-learning hours	# of hours completed
NUR 335, Medical-Surgical Nursing I.	25 x 135	3375
NUR 441, Maternity Nursing	19 x 67.5	1282
NUR 442, RNBSN Management of Client Care	13 x 135	1755
NUR 443, Community Health Nursing	19 x 67.5	1282
NUR 445, Peds	19 x 67.5	1282
NUR 407, RNBSN	18 x 60	1080
Student Nurses Association		350
NUR 631, Family Practice I.	17 x 180	3060
NUR 639 Family Nurse Practice III	13 x 240	3120
		GRAND TOTAL 16,586

* Please return form to Patsy Burchfield, Office Provost

Delta State University
Service Learning Hours

Semester: **Fall** Year: **2013**

Department: **Robert E. School of Nursing**

Compiled by: C.Hayes E-mail: chayesrn@deltastate.edu

Agency/Community Organization Partner(s): various community activities, hospitals, clinics, wellness fairs, and other community settings

Course Name/Number	# of students completing service-learning hours	# of hours completed
NUR 335, Nursing the Adult Client	21 x 135	2625
NUR 337, Psych	19 x 40	1084
NUR 402, Nursing Management	19 x 135	2565
NUR 443, RNBSN Community Health	11 x 67.5	742
NUR 406, Nursing Preceptorship	19 x 164	3116
NUR 625, Adv. Health Assessment	15 x 120	1800
NUR 332, Fundamentals	37 x 60	1776
NUR 635	16 x 180	2880
Student Nurses Association	45	285
		GRAND TOTAL 16,873

* Please return form to The Office of Provost, Patsy Burchfield

Credit Hour Production							
	Summer		Fall		Spring		Total
	UG	GR	UG	GR	UG	GR	
NUR							
AY 2014	121	82	1060	321	915	602	3,101
AY 2013	146	86	1,134	364	647	484	2,861
AY 2012	302	100	1,444	326	924	483	3,579
AY 2011	217	94	1,322	544	956	695	3,828
AY 2010	270	98	1,175	477	1,138	552	3,710
AY Totals							
AY 2014	121	82	1,060	321	915	602	3,101
AY 2013	146	86	1,134	364	647	484	2,861
AY 2012	302	100	1,444	326	924	483	3,579
AY 2011	217	94	1,322	544	956	695	3,828
AY 2010	270	98	1,175	477	1,138	552	3,710

Graduates			
	Nursing		Total
	BSN	MSN	
AY 2014	33	16	0
AY 2013	40	10	50
AY 2012	53	13	66
AY 2011	42	30	72
AY 2010	19	9	28

Enrollment by Major						
	Summer		Fall		Spring	
	UG	GR	UG	GR	UG	GR
Nursing						
AY 2014	18	7	97	36	72	38
AY 2013	18	2	103	37	63	34
AY 2012	26	15	128	34	85	30
AY 2011	29	6	120	57	87	77
AY 2010	14	15	105	46	99	52
Nursing Practice						
AY 2014	0	0	0	7	0	6
AY 2013	0	0	0	0	0	0
AY 2012	0	0	0	0	0	0
AY 2011	0	0	0	0	0	0
AY 2010	0	0	0	0	0	0
AY Totals						
AY 2014	18	7	97	43	72	44
AY 2013	18	2	103	37	63	34
AY 2012	26	15	128	34	85	30
AY 2011	29	6	120	57	87	77
AY 2010	14	15	105	46	99	52