**CENTRAL METHODIST UNIVERSITY**

**DEPARTMENT OF NURSING**

**SYSTEMATIC PROGRAM EVALUATION PLAN**

**PROGRAMS: MSN-Clinical Nurse Leader (MSN-CNL), and MSN-Nurse Educator (MSN-NE)**

**Fall Meeting: Annual summary MSN-CNL/NE (Aug 1 – July 31)**

**Report for AY17-18**

**CCNE Standard I: Program Quality: Mission and Governance**

The mission, goals, and expected program outcomes are congruent with those of the parent institution, reflect professional nursing standards and guidelines, and consider the needs and expectations of the community of interest. Policies of the parent institution and nursing program clearly support the program’s mission, goals, and expected outcomes. The faculty and students of the program are involved in the governance of the program and in the ongoing efforts to improve quality.

Key Element I-A: The mission, goals, and expected program outcomes of the program are:

* congruent with those of the parent institution; and
* consistent with the relevant professional nursing standards and guidelines for the preparation of nursing professionals.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| University Mission Statement, University Values, Nursing Department Philosophy, and Program Outcomes | University website, University CGES catalog; Student Handbook for MSN; Department of Nursing syllabi | Program Administrator, Nursing Program Coordinators, Clinical Coordinator, and Nursing Programs Assessment Committee | Annual Review | Review website, catalogs, handbooks, syllabi | Congruency between all documents; professional standards evident in documents | Fall | Met | No |
| *Essentials of Baccalaureate Education for Professional Nursing Practice*  (AACN, 2008),  *Essentials of Master’s Education in Nursing* (AACN, 2011) | Nursing Program Outcomes for:  Masters level   * CNL * NE | Program Administrator, Nursing Program Coordinators, Clinical Coordinator, and Nursing Programs Assessment Committee | Annual Review | Review of Program Outcomes, syllabi | Consistency between documents; professional standards evident in documents | Fall | Met | No |

Key Element I-B: The mission, goals, and expected student outcomes are reviewed and periodically revised, as appropriate, to reflect:

* professional nursing standards and guidelines; and
* the needs and expectations of the community of interest.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Mission, goals and expected student outcomes compared with professional standards | Professional accreditation reports (HLC, CCNE, MOSBN); certification rates; graduation rates; job placement rates; achievement of student outcomes/course objectives, and program outcomes; student rating of self and program for achievement of program outcomes | Program Administrator, Nursing Program Coordinators, Clinical Coordinator, and Nursing Programs Assessment Committee | Annual Review | Review actual achievement rate for identified criteria with established thresholds | HLC: full accreditation  CCNE: Full accreditation  Certification pass rates: 80%  Number of Graduates: MSN  MSN students report they are in a job utilizing knowledge/ skills gained in program:  90% at time of report of post-graduate survey (sent in December for all graduates). | Fall  Fall  Fall  Fall  Reported in Fall for previous year | Met  Met  Met-CNL  Dec. 2017 Grads= 9 NE; 6 CNL  August 2018 Grads=11 NE; 8 CNL; 1 NE and 1 CNL student Incomplete and will be December 2018 grads  Not met: 3 responses: 1 said yes, 1 said no, 1 did not label. So, basically, of the two who answered yes/no, the percentage was 50%. | No  No  No  No  Yes |
| Mission, goals, and expected outcomes compared with expectations of the community of interest | Professional accreditation reports (HLC, CCNE); certification pass rates; graduation rates; job placement rates | Advisory Board chairperson; Program Administrator, Nursing Program Coordinators, Clinical Coordinator, and Nursing Programs Assessment Committee | Annual Review | Documented discussion of thresholds and achievement rates with Advisory Board; Graduate/alumni/Employer surveys | Advisory board reviews and approves mission, goals, and expected outcomes.  Alumni, and employer surveys indicate mission, goals, and program outcomes are congruent with expectations in practice environment: 80% rate extremely well or well. (All surveys sent out in Dec. of each year.) | Fall  Reported in fall from previous Dec.’s survey. | Not met: Advisory Board has not been meeting; regrouping planned for October 2018.  Not met; no results to report from employer surveys. No employer surveys returned. 5/6 (83%) alumni surveys rated “well” or “extremely well,” which meets benchmark of 80% . | Yes  Yes |

Key Element I-C: Expected faculty outcomes are clearly identified by the nursing unit, are written and communicated to the faculty, and are congruent with institutional expectations.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Faculty outcomes in teaching, scholarship, service, and practice compared to mission, goals, and expected outcomes | Faculty handbook, Scholarly activities specific to nursing faculty; NLN Core Competencies of Nurse Educators, Faculty files, SEIs, surveys, faculty job descriptions | Program Administrator, Nursing Program Coordinators, Clinical Coordinator, Dean of University | Annual Review | Review job descriptions  Annual faculty evaluation (includes self-evaluation, Department Chair evaluation of faculty, and response from Dean’s office)  Student evaluations of instruction (SEI)  surveys from alumni | 80% of full time faculty will be rated positively on teaching, scholarship, service, and practice in annual faculty evaluation  Mean SEI score for faculty will 4.0 or greater | Fall  Fall | Met  100%  Met  4.63 | No  No |

Key Element I-D: Faculty and students participate in program governance.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Faculty participation in program and program governance | Faculty Handbook, Meeting minutes from Program Faculty meetings | Program Administrator, Nursing Program Coordinators | Annual Review | Review of meeting minutes | Faculty will participate in program and university –wide governance | Fall | Met  Angie Cornelius serves on the IRB | No |
| Student participation in program governance | MSN Student Handbook, Meeting Minutes from Program Faculty meetings | Program Administrator, Nursing Program Coordinators | Annual Review | Review of meeting minutes | Students will have the opportunity to participate in program governance, mainly through comments on SEIs or through student evaluation of program effectiveness. | Fall | Met | No |

Key Element I-E: Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| University and program documents and publications | University catalogs(CGES and CLAS), university website, Nursing Student Handbooks, marketing brochures | Program Administrator, Nursing Program Coordinators Director of Admissions, Director of Marketing | Annual Review | Review of documents and publications | Information in all documents and publications is accurate. | Fall | Met \*NOTE: Students and faculty report that MSN program information on university website is not easy to find, but information there is accurate. | No \*\*Angie has met with Scott Queen to discuss web pages |

Key Element I-F: Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected student outcomes. These policies are:

* fair, equitable;
* published and accessible; and
* reviewed and revised as necessary to foster program improvement.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Academic policies: admission, transfer, academic conduct, scholastic standards, (retention and progression) | University catalogs (CLAS and CGES), Nursing Department Student Handbook, University website, individual course syllabi | Program Administrator, Nursing Program Coordinators Nursing Programs Assessment Committee | Annual Review | Review policies for congruency; Review Nursing Department-specific academic policies for fairness and equitability and ability to improve programs | Academic policies of the University and the Department of Nursing are congruent.  Nursing Department-specific academic policies are fair, equitable, and reflective of ongoing attempts at program improvement and increasing professional standards. | Fall  Fall | Met  Met | No  No |

**CCNE Standard II: Program Quality: Institutional Commitment and Resources**

The parent institution demonstrates ongoing commitment to and support for the nursing program. The institution makes resources available to enable the program to achieve its mission, goals, and expected outcomes. The faculty, as a resource of the program, enable the achievement of the mission, goals, and expected program outcomes.

Key Element II-A: Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of resources is reviewed periodically and resources are modified as needed.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Fiscal and physical resources including: personnel resources, fiscal/budget resources, physical plant resources, clinical resources | Personnel resources: Faculty load assignment grid  Fiscal/budget resources: University budget (CLAS and CGES), Graduate Budget  Physical plant resources: any existing building blueprints, classroom space availability grids  Surveys | Program Administrator, Nursing Program Coordinators, Nursing Programs Assessment Committee, Provost of the University, VP of Finance/CFO, Nursing Department Clinical Coordinator | Annual Review | Review resources to determine if there are any deficiencies in personnel or fiscal resources.  Review graduate survey results to determine student perceptions of adequacy of these resources. | Full time faculty teaching load averages 12 hours per semester; faculty may elect, with Chair approval, to teach overload for pay  Student-to-faculty ratios in NU courses do not exceed 30:1 in the classroom (online or on ground)  Fiscal resources are adequate to support and maintain functioning of all nursing programs, including provisions for growth.  Physical plant resources are adequate to accommodate any planned or actual meeting for each nursing program.  Mean SEI scores of 4.0 or higher indicate students feel that faculty provide appropriate support and services  Graduate surveys will indicate that 80% or more of students are “satisfied” or better with University-level support services, Program-level services, and Program effectiveness. | Fall  Fall  Fall  Fall  Fall  Fall | Met  Met:  Largest MSN course for AY17-18 was 22  Met  Met  Met  4.63  Met:  U = 93.9%  Prog = 89.74%  Prog Eff = 82.84% | No  No  No  No  No  No |

Key Element II-B: Academic support services are sufficient to ensure quality and are evaluated on a regular basis to meet program and student needs.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Academic support services: Library, Center for Learning and Teaching, Technology Services | Description of services: Library, Center for Learning and Teaching, Technology Services  Description of resources: Library, Center for Learning and Teaching, Technology Services  Surveys | Director of Information Resources, Director of Center for Learning and Teaching, VP for Information Services, Program Administrator, Nursing Program Coordinators | Annual Review | Review resources to determine if there are any deficiencies in academic support services.  Review alumni survey results to determine alumni perceptions of adequacy of academic support services. | Academic support services are adequate to facilitate student learning and success in the online learning environments.  Academic support services are solvent enough to support planned growth in programs.  Graduate surveys will indicate that 80% or more of graduates are “satisfied” or better with overall performance of support services. | Fall  Fall  Fall | Met  Met  Met: 91.59% | No  No  No |

Key Element II-C: The chief nurse administrator:

* is a registered nurse (RN);
* holds a graduate degree in nursing;
* holds a doctoral degree if the nursing unit offers a graduate program in nursing;
* is academically and experientially qualified to accomplish the mission, goals, and expected program outcomes;
* is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Academic, experiential, and leadership qualifications of chief nurse administrator | CV of chief nurse administrator, Guidelines from MOSBN and CCNE, Faculty handbook, surveys | Provost of the University | Annual Review | Review of CV of chief nurse administrator  Review guidelines from MOSBN and CCNE to determine if chief nurse administrator meets qualifications set out by those bodies.  Annual evaluation of chief nurse administrator  (includes self-evaluation and response from Dean’s office)  Faculty evaluation of chief nurse administrator (nursing faculty evaluates performance of Division Chair)  Review student evaluations of instruction (SEI) (if pertinent)  Review graduate surveys | Chief nurse administrator meets qualifications as required by MSBN and CCNE.  Chief nurse administrator is reappointed to his/her position.  80% of graduates will report chief nursing administrator was responsive to student concerns. | Fall  Fall  Fall | Met  Met  Met:  83.33% | No  No |

Key Element II-D: Faculty members are:

* sufficient in numbers to accomplish the mission, goals, and expected program outcomes;
* academically prepared for the areas in which they teach; and
* experientially prepared for the areas in which they teach.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Faculty academic and experiential preparation | CV of faculty, Guidelines from CCNE, Faculty handbook | Program Administrator, Nursing Program Coordinators, Provost of the University | Ongoing | Review of updated faculty CVs  Annual faculty evaluation (includes self-evaluation, Department Chair evaluation of faculty, and response from Dean’s office) | Faculty academic and experiential preparation for all nursing programs meets requirements of the university and CCNE  80% of faculty in the MSN programs will attend or participate in at least one continuing education activity, pertinent to their courses taught, per year. | Fall  Fall | Met  Met: ALL faculty participated | No  No |
| Numbers of qualified faculty and adequacy of those numbers | Faculty load assignment grid | Program Administrator, Nursing Program Coordinators, Provost of the University | Ongoing | Review numbers of faculty (and load assignments) to determine if there are any deficiencies in ability to effectively deliver education to students  Review SEIs to determine student perceptions of adequacy of numbers of faculty  Review graduate survey results to determine student perceptions of adequacy of numbers of faculty. | Full time faculty teaching load in all nursing programs averages 12 hours per semester; faculty may, with Chair approval, teach overload for additional pay  Student-to-faculty ratios do not exceed 30:1 in NU courses in the online classroom  Mean SEI score for faculty will be 4.0 or greaterin the areas of “professor was available outside of class for help” and “professor provided results of graded assignments in a timely fashion.” | Fall  Fall  Fall | Met  Met  Largest MSN course was 22:1  Met  4.74 and 4.64 | No  No  No |

Key Element II-E: Preceptors, when used by the program as an extension of the faculty, are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Academic and experiential qualifications of preceptors | MSN Preceptor Handbook | Program Administrator, Nursing Program Coordinators*,* Clinical Coordinator | Annual Review | Review academic and experiential qualifications of preceptors | *N/A* | Fall | NU500 now uses ShadowHealth, an online program that requires students to assess model patients and allows for consistency in the types and extensiveness of required assessments; NU522 now uses mentors and facility resources instead of preceptors. | No |

Key Element II-F: The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Institutional and program support for faculty teaching, scholarship, service, and practice | Faculty handbook, budgets for CGES and Graduate Programs budget. | Provost of the University, Program Administrator, Nursing Program Coordinators | Annual Review | Review policies regarding faculty teaching, scholarship, service, and practice.  Review faculty utilization of resources for development. | Policies regarding faculty teaching, scholarship, service, and practice are in place, current, and readily available to faculty.    80% of faculty utilize development resources for scholarly endeavor/support. | Fall  Fall | Met  Not met: only 33% of full-time MSN faculty utilized funds. | No  Yes |

**CCNE Standard III: Program Quality: Curriculum and Teaching-Learning Practices**

The curriculum is developed in accordance with the program’s mission, goals, and expected student outcomes. The curriculum reflects professional nursing standards and guidelines and the needs and expectations of the community of interest. Teaching-learning practices are congruent with the expected student outcomes. The environment for teaching-learning fosters achievement of expected student outcomes.

Key Element 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.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| MSN level-curriculum and learning outcomes | University catalog (CGES), MSN Student Handbook, MSN syllabi | Program Administrator, Nursing Program Coordinators*,*  MSN-level Curriculum Committee | Ongoing | Review MSN curriculum and learning outcome statements to ensure congruency with program’s mission, goals and expected aggregate student outcomes | MSN curricula clearly reflect expected learning outcomes (in the form of course objectives and program outcomes) that are congruent with the program’s mission, goals, and aggregate student outcomes. | Fall | Met | No |

Key Element 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).

* Baccalaureate program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008).
* Master’s program curricula incorporate professional standards and guidelines as appropriate.
  1. All master’s degree programs incorporate *The Essentials of Master’s Education in Nursing* (AACN, 2011) and additional relevant professional standards and guidelines as identified by the program.
  2. All master’s degree programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| MSN-CNL & NE curriculum, learning outcomes, and professional nursing standards and guidelines | University catalog (CGES), MSN Student Handbook, MSN-CNL & NE syllabi, *The Essentials of Master’s Education for Advanced Practice Nursing* | Program Administrator, Nursing Program Coordinators*,*  MSN-level Curriculum Committee | Ongoing | Review MSN-level curriculum and learning outcome statements to ensure congruency with *The Essentials of Master’s Education for Advanced Practice Nursing*(See Standard Alignment Grids) | MSN curricula clearly reflect expected learning outcomes (in the form of course objectives and program outcomes) that are congruent with *The Essentials of Master’s Education for Advanced Practice Nursing* | Fall | Met | No |

Key Element III-C: The curriculum is logically structured to achieve expected student outcomes.

* Baccalaureate curricula build upon a foundations of the arts, sciences, and humanities.
* Master’s curricula build on a foundation comparable to baccalaureate level nursing knowledge.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| MSN-CNL & NE curricular structure | University catalog (CGES), MSN Student Handbook | Program Administrator, Nursing Program Coordinators*,*  MSN-level Curriculum Committee | Annual Review | Review course sequencing and curricular structure | The MSN curricula build on a foundation comparable to baccalaureate level nursing knowledge.  Students will complete baccalaureate requirements prior to admission into the MSN program (a BSN portfolio may be used to demonstrate the completion of baccalaureate requirements). | Fall  Fall | Met  Met | No  No |

Key Element III-D: Teaching-learning practices and environments support the achievement of expected student outcomes.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| MSN teaching-learning practices/  environments and student outcomes | SEI reports for each course, survey reports, course summaries (exemplars), course assessment reports, CNL certification exam reports; CNE Practice Exam, Department of Nursing Administrative Database (attrition rates, graduation rates, surveys reports) | Program Administrator, Nursing Program Coordinators, MSN-level Curriculum Committee | Ongoing (Minimum of Annually) | Review data from:SEI reports, survey reports, course summaries (exemplars), Course Objective Achievement Reports , Alumni surveys, CNL certification exam reports, and NE practice test reports | Mean SEI scores (all categories) will exceed 4.0 for all nursing courses and nursing professors in MSN program.  80% or more of students will report that the program prepared them to meet the designated program outcomes.  80% or more of students will meet or exceed the 80% threshold for individual course learning assessments  80% of the MSN-CNL students who take this exam will pass the CNL Certification exam at or above 80% on the first attempt.  The MSN-NE students will score 80% or higher on the CNE Self Assessment Exam.  The annual academic attrition rate in program will be at or less than 15%.  The graduation rate from the program will be 80% or higher. | MSN Fall  MSN Fall  MSN Fall  MSN Fall  Fall  Fall  Fall | Not met; 2 courses had mean SEI scores less than 4.0; individual faculty are aware.  Met  Met, with 2 exceptions  CORE:  NU500 – 56.25%  NU502 – 91.1%  NU504 – 90.3%  NU514 – 100%  CNL:  NU508 – 100%  NU510 – 53.8%  NU512 – 100%  NU516 – 80%  NU518 – 95%  NU522 – 93.3%  NE:  NU509 – 94.4%  NU511 – 90.6%  NU513 – 93.1%  NU515 – 100%  NU517 – 100%  NU519 – 80.5%  NU523 – 95%  Met: From August17-Spring 18 (official CNL reporting period), pass rate is 12/14 or 85%. However, Winter 18: 1/1; Spring 18: 1/1; Summer 18: 5/5; from January-August 2018=100%.  Not met: GRFA17: 8/12  GRSU18: 2/8; Total=10/20=50%  Not Met. Cohort 18: 20 students began the program; 2 have withdrawn for personal; 1 was unsuccessful. 17/20=15% attrition. Cohort 19: 14 students began; 3 have withdrawn for personal. 11/14=22% attrition.  For those who started in 2014, using the 150% rule (graduation in 3 years): graduation rate for **2014** is 6/7 (NE) and 16/22 (CNL), for a 2014 overall rate of **22/29=75.8%**  For those who started in 2015, using the 150% rule (graduation in 3 years): graduation rate for **2015** is 14/15 (NE) and 11/13 (CNL), for a 2015 overall rate of **25/28=89.2%** | Yes  Yes  No  Yes  Yes  Yes |

Key Element III-E: The curriculum includes planned clinical practice experiences that:

* Enable students to integrate new knowledge and demonstrate attainment of program outcomes; and
* Are evaluated by faculty.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| MSN-level students have the opportunity to develop professional competencies in practice settings. The design, implementation, and evaluation of clinical practice experiences are aligned to student and program outcomes. | Faculty evaluation of student achievement of clinical outcomes, student self-evaluation of achievement of program outcomes. | Program Administrator, Nursing Program Coordinators,  Clinical Coordinator, MSN-level Curriculum Committee | Ongoing (Minimum of Annually) | Review data from student logs of professional roles of the CNL.  Review data from the | 100% of students who earned a passing grade in a course with a clinical/project component passed the clinical/project component with a ‘satisfactory’ or higher rating | MSN Fall | Met | No |

Key Element III-F: The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Curriculum and teaching-learning practices compared with needs and expectations of the community of interest | Advisory board meeting minutes, Employer Satisfaction Surveys, Accreditation reports CCNE, preceptor evaluations of students | Program Administrator, Nursing Program Coordinators,  Clinical Coordinator, MSN-level Curriculum Committees | Annual Review | Review Advisory board meeting minutes, Employer Satisfaction Surveys, and Accreditation reports from CCNE, preceptor evaluations of students from NU500 | The curriculum and teaching-learning practices will meet the needs and expectations of the identified community of interest.  (1) Advisory Board  (2) Employer/ Providers  (3) Graduates  (4) Alumni  (~~5) Evaluation of students by Preceptors~~  (6) CCNE | Fall | Mostly Met  Met  Met  Met  Met  Criteria no longer applies  Met: CNL exam pass rate Sum. 17 to Sp. 18 is 85%; currently 100% from January-August 2018 |  |

Key Element III-G: Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Faculty evaluation of and communication of individual student performance | University CGES catalog, MSN Student Handbook, Course syllabi, SEI reports, survey reports, Student assignments, Curriculum Alignment Grids | Program Administrator, Nursing Program Coordinators,  Clinical Coordinator, MSN-level Assessment Committee | Ongoing (Minimum of Annually) | Review Curricular Alignment Grids to determine evaluation criteria for each course  Review archived assignments or portfolios for examples of feedback provided to students  Review SEI and graduate survey reports to determine student perceptions of evaluative feedback provided by faculty | Mean SEI scores of 4.0 or higher reflect student satisfaction that faculty evaluates expected individual student learning outcomes and communicates that evaluation in a timely fashion.  Portfolios or archived assignments will demonstrate examples of evaluative feedback provided to students.  Mean SEI scores of 4.0 or higher reflect student satisfaction that “course assignments and exams fairly evaluated knowledge”.  Mean SEI scores of 4.0 or higher reflect student satisfaction that faculty attributes support knowledge acquisition | Fall  Fall  Fall  Fall | Met  4.53; 4.60  Met  Archived in myCMU & Foliotek  Met  4.53  Met: 4.65 | No  No  No  No |
| Evaluation (grading) policies and procedures for classroom and clinical/project performance defined | University CGES catalog, MSN Student Handbook, Course syllabi | Program Administrator, Nursing Program Coordinators,  Clinical Coordinator, MSN-level Assessment Committee | Ongoing (Minimum of Annually) | Review all documents to determine clarity of evaluation policies and procedures | Evaluation policies and procedures will be clearly defined in relevant documentation (catalogs, handbooks, and syllabi).  Clinical evaluation policies (including grading rubrics and clinical evaluation tools) will be as clearly defined as classroom evaluation policies.  Evaluation policies are defined and consistently applied within each track (CNL and NE) | Fall  Fall  Fall | Met  Met  Met | No  No  No |

Key Element III-H: Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Reports** | **Results** | **Action**  **Plan (Y/N)** |
| Evaluation schedules of curriculum and teaching-learning practices | Minutes from MSN faculty meetings (these meetings may be held virtually), Guidelines as defined by Program Evaluation Plan (this document) | Program Administrator, Nursing Program Coordinators,  Clinical Coordinator, MSN-level Assessment and Curriculum Committees | Ongoing (Minimum of Annually) | Review meeting minutes | Curriculum and teaching-learning practices will be evaluated at regularly scheduled intervals, as defined by the Program Evaluation plan, to foster ongoing improvement. | Fall | Met | No |

**CCNE Standard IV: Program Effectiveness: Aggregate Student and Faculty Outcomes**

The program is effective in fulfilling its mission and goals as evidenced by achieving expected program outcomes. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. Data on program effectiveness are used to foster ongoing improvement.

Key Element IV-A: A systematic process is used to determine program effectiveness.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| MSN surveys and data sources are used to determine program effectiveness | Student Surveys: SEIs for each course, Course summaries, Clinical evaluation surveys for each clinical course  Graduate surveys  Alumni Surveys  Employer surveys  Standardized Exam Data: CNL Certification exam reports & scores from the CNE Practice Exam  Direct Data Sources: Grading rubrics for individual course assignments and archived examples of students’ completed assignments, Clinical Evaluation Tools | Program Administrator, Nursing Program Coordinators,  Clinical Coordinator, and MSN-level Assessment Committee | Annual Review | Review surveys and data sources | Surveys and other data are used to collect information about student, graduate, alumni, and employer satisfaction and demonstrated achievements of graduates.  Surveys and other data sources will provide appropriate information for analysis    100% of graduates will receive (be sent) surveys and 50% of 3rd year alumni will be sent surveys to complete.  Employer surveys will be sent to facilities where graduates are employed  (Graduate, Alumni, and Employer surveys are sent annually in December. Alumni are surveyed in their 3rd year following graduation. The grad survey for MSN graduates who complete the program later in the year than Term 5 is delayed 1 year to allow them time to find jobs that require their new skill-set and knowledge base.) | Fall  Fall  Fall  Fall  Fall | Met  Met  Met  Met  Met | No  No  No  No  No |

Key Element IV-B: Program completion rates demonstrate program effectiveness.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| The program demonstrates achievement of required program outcomes regarding completion. | Program database section that tracks attrition and graduation rates. | Program Administrator, Nursing Program Coordinators | Ongoing (Minimum of Annually) | The completion rate for each of the three most recent calendar years is provided.  The program specifies the point of entry and defines the time period for completion.  The program describes the formula is uses to calculate the completion rate.  The completion for the most recent calendar year is 70% or higher. However, if the completion rate for the most recent calendar year is less than 70% (1) the completion rate is 70% or higher when the annual completion rates for the three most recent calendar years are averaged or (2) the completion rate is 70% or higher when excluding student who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or transfer to another institution of higher education.  A program with a completion rate of less than 70% for the most recent calendar year provides a written explanation/ analysis with documentation for the variance. | MSN: Cohort academic attrition rate will be less than 15%.  Graduation rate will be 80% or higher. | Fall  Fall | Not met: Cohort 18: 20 students began the program; 2 have withdrawn for personal; 1 was unsuccessful. 17/20=15% attrition. Cohort 19: 14 students began; 3 have withdrawn for personal reasons. 11/14=22% attrition.  For those who started in 2014, using the 150% rule (graduation in 3 years): graduation rate for **2014** is 6/7 (NE) and 16/22 (CNL), for a 2014 overall rate of **22/29=75.8%**  For those who started in 2015, using the 150% rule (graduation in 3 years): graduation rate for **2015** is 14/15 (NE) and 11/13 (CNL), for a 2015 overall rate of **25/28=89.2%** | Yes  Yes |

Key Element IV-C: Licensure and certification pass rates demonstrate program effectiveness.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| The graduate program demonstrates achievement of required program outcomes regarding certification. | Reports of pass rate for CNL certification and score reports for the NE practice exam results. | Program Administrator, Nursing Program Coordinators | Ongoing (Minimum of Annually) | Review of CNL certification pass rate reports and reported scores from the CNE Practice Exam  Certification results are obtained and reported in the aggregate for those graduates taking each examination, even when national certification is not required to practice in a particular state.  Data are provided regarding the number of graduates and the number of graduates taking each certification examination.  The certification pass rate for each examination is 80% or higher for first-time takers for the most recent calendar year. However if the pass rate for any certification examination is less than 80% for first-time takers for the most recent calendar year, (1) the pass rate for that certification examination is 80% or higher for all takers (first-time and repeat) for the most recent calendar year, (2) the pass rate for that certification examination is 80% or higher for first-time takers when the annual pass rates for the three most recent calendar years are averaged, or (3) the pass rate for that certification examination is 80% or higher for all takers (first-time and repeat) when the annual pass rate for the three most recent calendar years are averaged.  A program with a pass rate of less than 80% for any certification examination for the most recent calendar year provides a written explanation/ analysis with documentation for the variance and a plan to meet the 80% certification pass rate for first-time takers. The explanation may include trend data, information about numbers of test takers, and data on repeat takers. | 80% or higher CNL certification pass rate  80% or higher NE practice test score | Fall  Fall | Met: From August17-Spring 18 (official CNL reporting period), pass rate is 12/14 or 85%. However, Winter 18: 1/1; Spring 18: 1/1; Summer 18: 5/5; from January-August 2018=100%.  Not met: GRFA17: 8/12  GRSU18: 2/8; Total=10/20=50% | Yes  Yes |

Key Element IV-D: Employment rates demonstrate program effectiveness.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| The program demonstrates achievement of required outcomes regarding employment rates. | Student reports of employment from Graduate surveys. | Program Administrator, Nursing Program Coordinators | Ongoing (Minimum of Annually) | Review of student-reported employment post program completion.  The employment rate is collected separately for each degree program.  Data are collected within 12 months of program completion.  The employment rate is 70% or higher. However, if the employment rate is less than 70%, the employment rate is 70% or higher when excluding graduates who have elected not to be employed.  Any program that has an employment rate of less than 70% provides a written explanation/analysis with documentation for the variance. | 90% of MSN graduates report employment as an RN that utilizes their advanced degree at time of graduate survey (6-12 months). | Fall (reported for previous year) | Not met: 3 responses: 1 said yes, 1 said no, 1 did not label. So, basically, of the two who answered yes/no, the percentage was 50%. | Yes |

Key Element IV-E: Program outcomes demonstrate program effectiveness.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | | **Action**  **Plan (Y/N)** |
| Analysis of actual and expected student outcomes demonstrate program effectiveness. | Minutes from MSN faculty meetings (these meetings may be held virtually), Guidelines as defined by Program Evaluation Plan (this document), Results and Action columns of Program Evaluation Plan (this document), Any tables or graphs created to provide visual representation of analyzed data | Program Administrator, Nursing Program Coordinators,  Clinical Coordinator, and BSN-level and MSN-level Assessment Committees | Ongoing (Minimum of Annually) | Compare actual student outcomes to expected student outcomes (benchmarks set in this Program Evaluation Plan) and analyze differences  Discuss analysis in “Results/Action” sections (or attached Action Plans) of the Program Evaluation Plan | Aggregate student outcome data will be analyzed and compared with expected student outcomes. Analysis will be shown in “Results” section of Program Evaluation Plan.  Major benchmarks for analysis are as follows:  MSN:  80% or more of students will report that the course prepared them to meet the designated program outcomes.  80% of MSN-CNL graduates who attempt will pass the CNL certification exam on their first attempt.  80% of MSN-NE graduates who attempt will score 80% or higher the CNE practice exam on their first attempt.  Annual academic attrition rate will be less than 15%.  Graduation rate will be 80% or higher. | Fall  Fall  Fall  Fall  Fall | | Met  Met: CNL exam pass rate Sum. 17 to Sp. 18 is 85%; currently 100% from January-August 2018  Not met: GRFA17: 8/12  GRSU18: 2/8; Total=10/20=50%  Not met: Cohort 18: 20 students began the program; 2 have withdrawn for personal; 1 was unsuccessful. 17/20=15% attrition. Cohort 19: 14 students began; 3 have withdrawn for personal. 11/14=22% attrition.  For those who started in 2014, using the 150% rule (graduation in 3 years): graduation rate for **2014** is 6/7 (NE) and 16/22 (CNL), for a 2014 overall rate of **22/29=75.8%**  For those who started in 2015, using the 150% rule (graduation in 3 years): graduation rate for **2015** is 14/15 (NE) and 11/13 (CNL), for a 2015 overall rate of **25/28=89.2%** | No  No  Yes  Yes  Yes |

Key Element IV-F: Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness. | CV of faculty, Faculty handbook, Faculty transcripts and/or CEU certificates, SEI reports, Annual faculty evaluations | Program Administrator, Program Coordinators, and Dean of the University | Annual Review | Review of and aggregation of data regarding faculty outcomes in teaching, scholarship, service, and practice.  Review faculty role descriptions and responsibilities | Evaluation of faculty outcomes is consistent with the institution’s and program’s definition of faculty role expectations.  There is congruence between expectations of the faculty in their roles and evaluation of faculty performance. | Fall  Fall | Met  Met | No  No |

Key Element IV-G: The program defines and reviews formal complaints according to established policies.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Formal complaints (grievances) and program quality and effectiveness | University CGES catalog, MSN Student Handbook | Program Administrator, Program Coordinators, and Dean of the University | Ongoing | Review of grievance policy and all formal grievances received | Grievance policies and procedures present and used to foster program quality and effectiveness.  All grievances will be reviewed and used, as appropriate, to foster program quality and effectiveness.  Nursing programs will demonstrate 100% compliance with CMU grievance policies. | Fall  Fall  Fall | Met  Met  Met | No  No  No |

Key Element IV-H: Data analysis is used to foster ongoing program improvement.

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| **Evaluation Component** | **Documentation** | **Responsible Person/People** | **Frequency of Assessment** | **Assessment Method** | **Benchmark** | **Report** | **Results** | **Action**  **Plan (Y/N)** |
| Aggregate outcome data is analyzed and used to foster ongoing program improvement | Faculty meeting minutes and “Action” column on Program Evaluation Plan | Program Administrator, Nursing Program Coordinators,  Clinical Coordinator, MSN-level Assessment and Curriculum Committees | Ongoing (Minimum of Annually) | Review of all outcome data in comparison to benchmarks for achievement of mission, goals, and expected outcomes.  Review meeting minutes and Program Evaluation Plan | If aggregate student, faculty, and program outcome data do not demonstrate evidence of program effectiveness, a detailed plan for improvement will be developed and provided at programmatic meetings and available through the Program Administrator’s office. If there is not sufficient space in the Meeting Minutes or Program Evaluation Plan to describe plan for ongoing program improvement, a separate “Program Improvement Plan” document may be created in response. | Fall | Met | See action plan. |