

**CENTRAL METHODIST UNIVERSITY
DEPARTMENT OF NURSING
SYSTEMATIC PROGRAM EVALUATION PLAN
PROGRAM: BSN-Completion (BSN-C)
Annual summary for BSN-C (Term 5 – Term 4)
June 1, 2016 through May 31, 2017**

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.

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 catalogs (CLAS and CGES); Student Handbooks for BSN-G & ABSN, BSN-C, & CNL; 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	BSN-level Program Outcomes were revised by faculty in May of 2017 and integrated into course syllabi.

<i>Essentials of Baccalaureate Education for Professional Nursing Practice</i> (AACN, 2008), <i>Essentials of Master's Education in Nursing</i> (AACN, 2011)	Nursing Program Outcomes for: Bachelors level <ul style="list-style-type: none"> • BSN-G • ABSN • BSN-C Masters level <ul style="list-style-type: none"> • CNL • ANE 	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
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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.

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 and NCLEX pass rates; graduation rates; job placement rates; achievement of student outcomes/course objectives; student rating of self and program for	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	Fall	Met	No
					MSBN: full approval	Fall	Met	No
					CCNE: Full accreditation	Fall	Met	No
					Number of Graduates: BSNC	Fall	Met	No
					Achievement of individual course	Fall	Met	No

	achievement of program outcomes				student outcomes/objectives: 80%		88.4% - 100%	
					Student evaluation of self-achievement of program outcomes: 2.25 or lower	Fall	Met 1.52	This element will be eliminated from the next report as there are multiple other data points that cover this content.
					Student evaluation of program facilitation of program outcomes achievement: 2.25 or lower	Fall	Met BSNC: 1.36	No
					BSNC 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	Met: 100%	No

Mission, goals, and expected outcomes compared with expectations of the community of interest	Professional accreditation reports (HLC, CCNE, MOSBN); certification and NCLEX 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 Fall	Met No employer surveys returned Alumni surveys: 91.3% rated extremely well or well.	Board meets face-to-face each fall, and has bi-monthly written reports distributed the rest of the year. Special meetings can be called, if needed. We have 3 new active members for AY16-17 Clinical Coordinator will attempt hand-delivering surveys to local hospitals who have employed our graduates
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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.

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	Faculty handbook, Scholarly activities specific to nursing faculty; NLN Core Competencies of Nurse Educators, Faculty files, SEIs,	Program Administrator, Nursing Program Coordinators, Clinical Coordinator,	Annual Review	Review job descriptions Student evaluations of instruction (SEI)	Mean SEI score for faculty will 4.0 or greater	Fall	Met BSNC: 4.51	No

mission, goals, and expected outcomes	surveys, faculty job descriptions	Dean of University		surveys from alumni				
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Key Element I-D: Faculty and students participate in program governance.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Faculty participation in program and university-wide governance	Faculty Handbook, Nominations committee assignments, Meeting minutes from various university-wide committees, Minutes from Nursing Department Faculty meetings (both CLAS and CGES)	Program Administrator, Nursing Program Coordinators	Annual Review	Review of committee assignments and meeting minutes	Faculty will participate in program and university –wide governance	Fall	Met All full time faculty participate in program and university-wide governance; adjunct faculty may participate in program governance	No
Student participation in program governance	Nursing Department Student Handbook, Meeting Minutes from Nursing Department Faculty meetings (both CLAS and CGES)	Program Administrator, Nursing Program Coordinators	Annual Review	Review of meeting minutes	Students have the opportunity to participate in program governance through SEI comments.	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.

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	No

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.

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, Nursing Department Curriculum	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.	Fall	Met	No
					Nursing Department-specific academic policies are fair, equitable, and reflective of ongoing attempts at program	Fall	Met	No

		Committee (BSN-G)			improvement and increasing professional standards.			
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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.

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	Program Administrator, Nursing Program Coordinators, Nursing Programs Assessment	Annual Review	Review resources to determine if there are any deficiencies in personnel, fiscal, physical plant, or clinical resources.	Student-to-faculty ratios in NU courses do not exceed 30:1 in the classroom (online or on ground)	Fall	Met: Courses are broken into 2 sections once enrollment exceeds 25	No
	Fiscal/budget resources: University budget (CLAS and CGES), Department of Nursing Budget	Committee, VP and Dean of the University, VP of Finance/CFO, Nursing Department		Review graduate survey results to determine student perceptions of adequacy of these resources.	Fiscal resources are adequate to support and maintain functioning of all nursing programs, including provisions for growth.	Fall	Met	No
	Physical plant resources: any existing building blueprints,	Department Clinical Coordinator		Review Clinical SEIs to review	Physical plant resources are	Fall	Met	No

	classroom space availability grids Clinical resources: Mid-Missouri Coordinating Council clinical assignment grid Surveys			student perceptions of the adequacy of clinical sites.	adequate to accommodate planned and actual cohort numbers 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	Met BSNC: 4.52 Met Univ level: 97.62 % Prog level: 100% Prog effect: 97.96%	No No
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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.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Academic support services:	Description of services: Library, Center for Learning	Director of Information Resources,	Annual Review	Review resources to determine if there are any	Academic support services are adequate to facilitate student	Fall	Met	No

Library, Center for Learning and Teaching, Technology Services	and Teaching, Technology Services	Director of Center for Learning and Teaching, VP for Information Services, Program Administrator, Nursing Program Coordinators		deficiencies in academic support services.	learning and success in both the traditional classroom and online learning environments.	Fall	Met	No
	Description of resources: Library, Center for Learning and Teaching, Technology Services			Review alumni survey results to determine alumni perceptions of adequacy of academic support services.	Academic support services are solvent enough to support planned growth in programs.			
	Surveys				Graduate surveys will indicate that 80% or more of graduates are "satisfied" or better with overall performance of support services.	Fall	Met 95.53%	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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Academic, experiential, and leadership	CV of chief nurse administrator, Guidelines from	VP and Dean of the University	Annual Review	Review of CV of chief nurse administrator	Chief nurse administrator meets qualifications as	Fall	Met	No

qualifications of chief nurse administrator	MOSBN and CCNE, Faculty handbook, surveys			Review guidelines from MOSBN and CCNE to determine if chief nurse administrator meets qualifications set out by those bodies.	required by MSBN and CCNE.	Fall	Met	No
				Chief nurse administrator is reappointed to his/her position.	80% of graduates will report chief nursing administrator was responsive to student concerns.	Fall	Met 100%	No
				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				

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.

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 MOSBN and CCNE, Faculty handbook	Program Administrator, Nursing Program Coordinators, VP and Dean of the University	Ongoing	Review of updated faculty CVs	Faculty academic and experiential preparation for all nursing programs meets requirements of the university, MSBN, and CCNE	Fall	Met	No
Numbers of qualified faculty and adequacy of those numbers	Faculty load assignment grid, Guidelines from MOSBN	Program Administrator, Nursing Program Coordinators, VP and Dean of the University	Ongoing	Review numbers of faculty (and load assignments) to determine if there are any deficiencies in ability to effectively deliver classroom and clinical education to students Review SEIs to determine student perceptions of adequacy of faculty numbers.	Student-to-faculty ratios do not exceed 30:1 in NU courses in the classroom (online or on ground). Mean SEI score for faculty will be 4.0 or greater in the areas of “professor was available outside of class for help” and “professor provided results of graded assignments in a timely fashion.”	Fall Fall	Met Met BSNC: 4.46	No No

				Review graduate survey results to determine student perceptions of adequacy of numbers of faculty.				
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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.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Result	Action Plan (Y/N)
Academic and experiential qualifications of preceptors	MOSBN preceptor guidelines (State of MO Nursing Practice Act and Rules, Statute: Chapter 335-0111), Preceptor licensure information and verification (available on MOSBN website), BSN Preceptor Handbook, MSN Preceptor Handbook	Program Administrator, Nursing Program Coordinators, Clinical Coordinator (BSN)	Annual Review	Review academic and experiential qualifications of preceptors	Academic and experiential qualifications of preceptors are congruent with MSBN preceptor guidelines. 80% or more of precepted students in the BSN-level programs will rate their preceptor as “good” or “excellent” in “providing the right amount of supervision and assistance” and “was competent and knowledgeable.”	<i>Preceptors not used in the BSNC program.</i>		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.

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 CLAS and CGES	VP and Dean 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.	Fall	Met	No

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.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
BSN-level curriculum and learning outcomes	University catalog (CLAS & CGES), Nursing Student Handbooks, BSN-level syllabi	Program Administrator, Nursing Program Coordinators, BSN-level	Ongoing	Review BSN-level curriculum and learning outcome statements to ensure	BSN-level curricula clearly reflect expected learning outcomes (in the form of course objectives	Fall	Met	No

		Curriculum Committee (all BSN-level full time faculty)		congruency with program's mission, goals and expected student outcomes	and program outcomes) that are congruent with the program's mission, goals, and student outcomes.			
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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.
 - a. 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.
 - b. All master's degree programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
BSN-level curriculum, learning outcomes, and professional nursing standards and guidelines	University catalogs (CLAS and CGES), Nursing Student Handbooks, BSN-level syllabi, <i>The Essentials of Baccalaureate Education for Professional Nursing Practice</i>	Program Administrator, Nursing Program Coordinators, BSN-level Curriculum Committee	Ongoing	Review BSN-level curricula and learning outcome statements to ensure congruency with <i>The Essentials of Baccalaureate Education for Professional Nursing Practice</i> (See Standard Alignment Grids)	BSN-level curricula clearly reflect expected learning outcomes (in the form of course objectives and program outcomes) that are congruent with <i>The Essentials of Baccalaureate Education for Professional Nursing Practice</i>	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.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
BSN-C curricular structure	University catalogs (CLAS and CGES), and BSN-C Student Handbooks	Program Administrator, Nursing Program Coordinators, BSN-level Curriculum Committee	Annual Review	Review course sequencing and curricular structure	The baccalaureate curricula build upon a foundation of the arts, sciences, and humanities.	Fall	Met	No
					Students will complete pre-requisites for the major and general education coursework.	Fall	Met	No
					Courses in the baccalaureate curricula are sequenced in a way to allow student development from knowledge to application and analysis.	Fall	Met	No

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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
BSN- level teaching-learning practices/ environments and student outcomes	SEI reports for each course, graduate survey reports, clinical site evaluations, simulation evaluations, preceptor evaluations, Course summaries (or exemplars), course assessment reports, Thesis, Department of Nursing Administrative Database (attrition rates, graduation rates, survey reports)	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, BSN-level Curriculum Committee	Ongoing (Minimum of Annually)	Review data from: SEI reports, survey reports, course summaries, Course Objective Achievement Reports, Senior Thesis scores, Attrition reports, employer surveys	Mean SEI scores (all categories) will exceed 4.0 for all nursing courses and nursing professors in BSN-level programs.	Fall	Met BSNC: 4.51 (range 3.61 – 5; 6 of 96 courses evaluated did not meet the 4.0 threshold)	No. The Program Coordinator will work with individual faculty who fell below threshold.
					80% or more of students will meet or exceed the 80% threshold for individual course learning assessments	Fall	Met BSNC range: 88.4% - 100%	No
					Mean score of 4.0 or higher on SEIs for faculty attributes that support education	Fall	Met 4.52	No
					The attrition rate, figured for the BSNC for the rolling 5-year period allowed for program completion, will be at or less than 20% with 15% being the aspirational target.	Fall	Met 11.6%	No

					The BSN-C reports the number of graduates by calendar year.	Fall	BSNC: 291	No
					BSNC graduation rate, figured for a retroactive 5-year period, is at least 80%.	Fall	Not Met: 76.7%	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.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
BSN-level students in each track 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 clinical performance, provider facility evaluation of clinical groups and instructors, student evaluation of clinical placements, student evaluation of preceptor, student evaluation of clinical instructor, student self-evaluation of achievement of program outcomes.	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, BSN-level Curriculum Committee	Ongoing (Minimum of Annually)	Review data from Faculty evaluation of student performance on final projects, and student self-evaluation of achievement of program outcomes.	100% of students who earned a passing grade in a course with a clinical component passed the clinical component with a 'satisfactory' or higher rating	Fall	Met	No
					80% of students on their self-evaluation of achievement of program outcomes rate themselves at or better than the 2.5 threshold (lower number is better)	Fall	Met BSNC/self: 1.52 Prog: 1.36	No

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

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 from MSBN and CCNE, preceptor evaluations of students	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, BSN and MSN-level Curriculum Committees	Annual Review	Review Advisory board meeting minutes, Employer Satisfaction Surveys, and Accreditation reports from MSBN and CCNE, preceptor evaluations of students	The curriculum and teaching-learning practices will meet the needs and expectations of the identified community of interest. Advisory Board Employer/Providers Graduates Alumni MSBN CCNE	Fall	Met Met No surveys returned Met Met Met Met	No For the 17-18 academic year, we will attempt to hand-deliver employer evaluations to local hospitals.

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.

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	University catalogs (CLAS and CGES), , BSN-C Student Handbook, Course syllabi, SEI reports, survey reports,	Program Administrator, Nursing Program Coordinators, Clinical Coordinator,	Ongoing (Minimum of Annually)	Review Course Assessment Grids to determine evaluation criteria for each course;	Mean SEI scores of 4.0 or higher reflect student satisfaction that faculty evaluates expected individual student learning	Fall	Met BSNC: 4.39	No

student performance	Student assignments, Curriculum Alignment Grids	BSN-level Assessment Committee, MSN-level Assessment Committee		Review archived assignments or portfolios for examples of feedback provided to students	outcomes and communicates that evaluation in a timely fashion.	Fall	Met	No
				Review SEI and graduate survey reports to determine student perceptions of evaluative feedback provided by faculty	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”.	Fall	Met BSNC: 4.48	No
					Mean SEI scores of 4.0 or higher reflect student satisfaction faculty attributes support knowledge acquisition.	Fall	Met BSNC: 4.52	No
Evaluation (grading) policies and procedures for both classroom and clinical performance defined	University catalogs (CLAS and CGES), BSN-G, A-BSN, BSN-C, and MSN Student Handbooks, Course syllabi	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, BSN-level Assessment	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).	Fall	Met	No

		Committee, MSN-level Assessment Committee			Evaluation policies are defined and consistently applied within each program	Fall	Met	No
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Key Element III-H: Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.

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 BSN-C and 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, BSN-level Assessment and Curriculum Committees, 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.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
BSN-C surveys and data sources are used to determine program effectiveness	Student Surveys: SEIs for each course, Course summaries	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, and BSN-level Assessment Committee	Annual Review	Review surveys and data sources	Surveys and other data are used to collect information about student, alumni, and employer satisfaction and demonstrated achievements of graduates.	Fall	Met	No
	Graduate surveys Alumni Surveys				Surveys and other data sources will provide appropriate information for analysis	Fall	Met	No
	Employer surveys				100% of students will receive (be sent) surveys and 50% of alumni will be sent surveys to complete.	Fall	Met	No
	Direct Data Sources: Grading rubrics for individual course assignments and copies of students' completed assignments				Employer surveys will be sent to at least 10 facilities where	Fall	Met	No

					<p>graduates are employed Program will track number of graduates who report post-program employment as RN with employers who prefer BSN-level preparation.</p> <p>(Graduate, Alumni, and Employer surveys are sent annually in December. Graduate, Alumni, and Employer surveys will be sent annually in December.)</p> <p>Alumni are surveyed in their 3rd year following graduation.)</p>	<p>Fall</p> <p>Fall</p>	<p>Met</p> <p>Met</p>	<p>No</p> <p>No</p>
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Key Element IV-B: Program completion rates demonstrate program effectiveness.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Attrition and graduation rates demonstrate program effectiveness.	Program database section that tracks attrition and graduation rates.	Program Administrator, Nursing Program Coordinators	Ongoing (Minimum of Annually)		BSN-C: attrition rate will be equal to or less than 20%, with 15% or lower being our aspirational threshold.	Fall	Met 11.6%	No
					Annual Graduation number is reported.	Fall	291	No
					Graduation rate, reported for the rolling 5-year period for program completion, is equal to or greater than 80%	Fall	Not Met: 76.7	Yes

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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Licensure and certification rates demonstrate program effectiveness.	Reports of NCLEX pass rates; reports of pass rate for CNL certification and NE practice exam results.	Program Administrator, Nursing Program Coordinators	Ongoing (Minimum of Annually)	Review of NCLEX pass rate reports and CNL certification pass rate reports.	NA for BSNC – there is no certification or NCLEX pass rate available for this group of students		<i>This area does not apply to the BSN completion program</i>	No

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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Employment rates demonstrate program effectiveness.	Student reports of employment from Graduate surveys.	Program Administrator, Nursing Program Coordinators	Ongoing (Minimum of Annually)	Review of student-reported employment post program completion.	90% of BSN-C graduates report employment as an RN that utilizes their advanced degree at time of graduate survey (6-12 months).	Fall	Met: 100%	No

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

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 BSN-G and A-BSN departmental faculty meetings (monthly and May special meeting), Minutes from BSN-C and MSN-CNL faculty meetings (these meetings may be held virtually), Guidelines as defined by Program Evaluation Plan (this document), Results and Action	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.	Fall	Met	No
					Major benchmarks for analysis are as follows: Surveys and SEI benchmarks as discussed in previous sections of the	Fall	Met	No

	columns of Program Evaluation Plan (this document), Any tables or graphs created to provide visual representation of analyzed data				<p>Program Evaluation Plan</p> <p>80% or more of students will successfully achieve course-level assessment thresholds.</p> <p>100% of students will achieve a grade of B or higher on their Senior Thesis</p> <p>The rolling 5-year period for program attrition rate will be less than 20%, with 15% being our aspirational threshold. The BSN-C reports calendar year.</p> <p>80% or more of graduating students will report that the program prepared them to meet the designated program outcomes.</p>	<p>Fall</p> <p>Fall</p> <p>Fall</p> <p>Fall</p>	<p>Met: 100%</p> <p>Met</p> <p>Met: 11.6%</p> <p>Met 91.3</p>	<p>No</p> <p>No</p> <p>No</p> <p>No</p>
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					Number of graduating students is reported annually.	Fall	291	No
					The graduation rate, figured for the 5-year rolling period allowed for program completion is at least 80%	Fall	Not Met: 76.7%	Yes

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

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.	Evaluation of faculty outcomes is consistent with the institution's and program's definition of faculty role expectations.	Fall	Met:	No.
				Review faculty role descriptions and responsibilities	There is congruence between expectations of the faculty in their roles and evaluation of faculty performance.	Fall	Met	No

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

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 catalogs (CLAS and CGES), Student Handbooks (BSN-G, A-BSN, BSN-C, MSN), Program Complaint Forms (housed in evaluation binder)	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.	Fall	Met	No
					All grievances will be reviewed and used, as appropriate, to foster program quality and effectiveness.	Fall	Met	No
					Nursing programs will demonstrate 100% compliance with CMU grievance policies.	Fall	Met	No

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

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 (all programs) and "Action" column on Program Evaluation Plan	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, BSN-level Assessment and Curriculum	Ongoing (Minimum of Annually)	Review of all outcome data in comparison to benchmarks for achievement of mission, goals, and expected outcomes.	If aggregate student, faculty, and program outcome data do not demonstrate evidence of program effectiveness, a detailed plan for improvement will be developed and	Fall	Met	No

		Committees, MSN-level Assessment and Curriculum Committees		Review meeting minutes and Program Evaluation Plan to ensure	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.			
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BSNC Action plan for retention rate below 80%:

Beginning Spring 2018, the BSNC Program Coordinator will identify those students who did not return from the previous semester and did not complete their degree. These students will receive a retention survey to identify the reason(s) why they are not continuing in the program. Survey data will be collected Spring 2018 through Fall 2018. Based on the data collected, interventions will be implemented to increase the retention rate to the goal of 80%.