

**MINUTES** 

# November 2018 Educational Effectiveness

11/9/2018 12:00 PM | Meeting called to order by Leslie Moore

# In Attendance

Sallie Coke, Dean Baker, Debby MacMillan, Leslie Moore, Josie Doss

Old Business

1. EE Plan for 2018-2019:

- The committee determined the need to review and revise each standard in our EE plan to ensure compliance with CCNE standards and key elements, and also to better reflect our actual procedures.
- We will strive to complete one standard per EE meeting.
- Revisions will be presented as an NFO motion to amend the EE plan.
- Revisions to Standard IV were determined by EE and the NFO motion will read: "The Educational Effectiveness Committee recommends revisions to the EE plan (Standard IV) for the 2018-2019 academic year to comply with recently revised 2018 CCNE Standards." See below for NFO attachment:

Standard IV: Assessment and Achievement of Program 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 program improvement.

**IV-A Key Element:** 

A systematic process is used to determine program effectiveness.

IV-A elaboration: The program (baccalaureate, master's, DNP, and/or post-graduate APRN certificate) uses a systematic process to obtain relevant data to determine program effectiveness. The process:

1. is written, ongoing, and exists to determine achievement of program outcomes;

- 2. is comprehensive (i.e., includes completion, licensure, certification, and employment rates, as
- 3. required by the U.S. Department of Education; faculty outcomes; and other program outcomes);
- 4. identifies which quantitative and/or qualitative data are collected to assess achievement of the

5. program outcomes;

- 6. includes timelines for data collection, review of expected and actual outcomes, and analysis; and
- 7. is periodically reviewed and revised as appropriate.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>SON shared drive: minutes of: Curriculum/Gradu ate,A&amp;P/Graduate Committees and EE Committees</li> <li>Course reports</li> <li>Online university assessment tool</li> </ul>	Ongoing EE Committee will survey students, faculty, alumni, and employers every three years to gather input into resource adequacy. The next surveys are due in 2019.	<ul> <li>NFO</li> <li>Curriculum/Gradu ate Committees</li> <li>A&amp;P/Graduate Committees</li> <li>EE Committee</li> <li>Program assessment coordinators</li> <li>SON Director</li> <li>Course faculty</li> </ul>	The SON has a systematic process in place to determine program effectiveness. Program outcomes will be reviewed and reported annually. The EE plan is reviewed annually.	

IV-B Key Element:

Program completion rates demonstrate program effectiveness.

IV-B elaboration: The program (baccalaureate, master's, DNP, and/or post-graduate APRN certificate) demonstrates achievement of required program outcomes regarding completion in any one of the following ways:

- the completion rate for the most recent calendar year is 70% or higher;
- the completion rate is 70% or higher when averaged for the three most recent calendar years; or
- the completion rate is 70% or higher when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education.

The program identifies the cohort(s), specifies the entry point, and defines the time period to completion, each of which may vary by track; however, the program provides the completion rate for the overall degree/certificate program. The program describes the formula it uses to calculate the completion rate. The program identifies the factors used and the number of students excluded if some students are excluded from the calculation.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>SON shared drive: minutes of: NFO and EE Committees</li> <li>Office of Institutional Research and Effectiveness website</li> <li>Online university assessment tool</li> </ul>	Annually or biannually as appropriate per program	<ul> <li>EE Committee</li> <li>Program assessment coordinators</li> <li>SON Director</li> <li>APR Committee for UG</li> <li>MSN and DNP program coordinators</li> </ul>	The program completion rates for all programs will be at least 70% for the calendar year.	

IV-C Key Element:

#### Licensure pass rates demonstrate program effectiveness.

IV-C elaboration: The pre-licensure program demonstrates achievement of required program outcomes regarding licensure. A program demonstrates that it meets the licensure pass rate if 80% in any one of the following ways:

- the NCLEX-RN<sup>®</sup> pass rate for each campus/site and track is 80% or higher for first-time takers for the most recent calendar year (January 1 through December 31);
- the pass rate for each campus/site or track is 80% or higher for all takers (first-time and repeaters who pass) for the most recent calendar year;
- the pass rate for each campus/site or track is 80% or higher for first-time takers across the three most recent calendar years; or
- the pass rate for each campus/site or track is 80% or higher for all takers (first-time and repeaters who pass) across the three most recent calendar years.

Identify for each campus/site track which of the above methods for calculating the pass rate was used.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>SON shared drive: minutes of NFO and EE</li> <li>GA BON NCLEX Report</li> </ul>	Annually	<ul> <li>EE Committee</li> <li>Program assessment coordinators</li> <li>SON Director</li> </ul>	The 1st time taker NCLEX pass rate will be at least 80%.	

Office of						
Institutional						
Research and						
Effectiveness						
IV-D Key Element:						
Certification pass rates de	nonstrate program effective	eness.				
regarding certification. For	r programs that prepare stud	ents for certification, certif	lemonstrate achievement of r ication rates are obtained and d to practice in a particular s	d reported for those		
			e number of completers takin ata regardless of the number			
A program that prepares stu one of the following ways:	udents for certification demo	onstrates that it meets the c	ertification pass rate of 80%,	for each examination, in any		
<ul> <li>through December 2</li> <li>the pass rate for eac calendar year;</li> <li>the pass rate for eac the p</li></ul>	<ul> <li>through December 31);</li> <li>the pass rate for each certification examination is 80% or higher for all takers (first-time and repeaters who pass) for the most recent calendar year;</li> <li>the pass rate for each certification examination is 80% or higher for first-time takers across the three most recent calendar year;</li> </ul>					
A program provides certification pass rate data for each examination, but may combine certification pass rate data for multiple examinations relating to the same role and population when calculating the pass rate described above.						
Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome		
<ul> <li>SON shared drive: minutes of NFO and EE</li> <li>ANCC, AANP, and/or NLN certification</li> </ul>	Annually	<ul> <li>EE Committee</li> <li>Program assessment coordinators</li> <li>SON Director</li> </ul>	The 1st time taker certification pass rates for FNP, PMHNP, and CNE will be at least 80%.			

reports

### IV-E Key Element:

Employment rates demonstrate program effectiveness.

IV-E elaboration: The program demonstrates achievement of required outcomes regarding employment rates.

- The employment rate is collected separately for each degree program (baccalaureate, master's, and DNP) and post-graduate APRN certificate program.
- Data are collected within 12 months of program completion, not at program entry. For example, employment data may be collected at the time of program completion or at any time within 12 months after 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.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>SON shared drive: minutes of NFO and EE</li> <li>NRSG 4981 End of Semester Student Survey</li> <li>Program coordinators</li> </ul>	Annually	<ul> <li>EE Committee</li> <li>Program assessment coordinators</li> <li>SON Director</li> <li>Graduate administrative assistant</li> </ul>	The employment rate for all graduates will be 70% or higher.	

IV-F Key Element:

Data regarding completion, licensure, certification, and employment rates are used, as appropriate, to foster ongoing program improvement.

*IV-F* elaboration: The program uses outcome data for improvement.

- 1. Discrepancies between actual and CCNE expected outcomes (program completion rates70%, licensure pass rates 80%, certification pass rates 80%, employment rates 70%) inform areas for improvement.
- 2. Changes to the program to foster improvement and achievement of program outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.
- 3. Faculty are engaged in the program improvement process.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>SON shared drive: minutes of NFO and EE</li> <li>University online assessment tool</li> <li>Course reports</li> </ul>	Annually	<ul> <li>EE Committee</li> <li>Program Assessment Coordinators</li> <li>SON Director</li> <li>NFO</li> </ul>	Data regarding completion, licensure, certification, and employment rates will be used, as appropriate, to foster ongoing program improvement. Results regarding completion, licensure, certification, and employment rates will be presented to NFO annually.	

# IV-G Key Element:

Aggregate faculty outcomes demonstrate program effectiveness.

IV-G elaboration: The program demonstrates achievement of expected faculty outcomes as identified in Key Element IV-D. In order to demonstrate program effectiveness, outcomes are consistent with and contribute to achievement of the program's mission and goals, and are congruent with institution and program expectations. Expected faculty outcomes:

- 1. are identified for the faculty as a group;
- 2. specify expected levels of achievement for the faculty as a group; and
- 3. reflect expectations of faculty in their roles.

Actual faculty outcomes are presented in the aggregate for the faculty as a group, and each outcome is compared to its expected level of achievement.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>Digital measures</li> <li>Faculty Annual Evaluations</li> <li>SRIS results</li> </ul>	Every Spring semester	<ul> <li>EE Committee</li> <li>SON Director</li> <li>Individual faculty</li> </ul>	<u>Scholarship</u> 100% of Full-Time Appointment, One-Year Temporary, and Part-Time	ADD 2019 OUTCOMES

(Classroom) Appointment faculty will engage in scholarly activities as described in the SON Promotion and Tenure document and evidenced in Digital Measures.
100% of Full-Time Appointment, One-Year Temporary, and Part-Time Appointment faculty will maintain the GA Board of Nursing required continuing education hours.
100% of Full-Time Appointment, One-Year Temporary, and Part-Time Appointment APRN faculty will maintain certification.
<u>Teaching</u> 65% of individual Full- Time Appointment, One- Year Temporary, and Part-Time (Classroom) Appointment faculty scores on the SRIS item "instructor teaching as excellent" will be at or above the Georgia College mean.
65% of individual Full- Time Appointment, One- Year Temporary, and Part-Time (Classroom) Appointment faculty scores on the SRIS item

"course rating as excellent" will be at or above the Georgia College mean.
100% of Full-Time Appointment, One-Year Temporary, and Part-Time (Classroom) Appointment faculty will meet with the Director to discuss teaching evaluations and review the faculty self- reflection and plan.
100% of Part-Time (Clinical) faculty will be evaluated by students (clinical evaluation) and Assistant Director (faculty evaluation) annually.
Service 100% of Full-Time Appointment, One-Year Temporary, and Part-Time (Classroom) Appointment faculty will serve on a Georgia College, CoHS, or SON committee.

IV-H Key Element:

Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.

*IV-H elaboration: The program uses faculty outcome data for improvement.* 

- 1. Discrepancies between actual and expected outcomes inform areas for improvement.
- 2. Changes to the program to foster improvement and achievement of program outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.
- 3. Faculty are engaged in the program improvement process.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>SON shared drive: minutes of NFO and EE</li> <li>University's online assessment tool</li> <li>Annual Progress and Planning report</li> </ul>	Ongoing	<ul><li>EE Committee</li><li>SON Director</li><li>NFO</li></ul>	Aggregate faculty outcome data will be analyzed and used, as appropriate, to foster ongoing program improvement.	

IV-I Key Element:

#### Program outcomes demonstrate program effectiveness.

IV-I elaboration: The program demonstrates achievement of outcomes other than those related to completion rates (Key Element IV-B), licensure pass rates (Key Element IV-C), certification pass rates (Key Element IV-D), and employment rates (Key Element IV-E); and those related to faculty (Key Element IV-G).

Program outcomes are defined by the program and incorporate expected levels of achievement. The program describes how outcomes are measured. Actual levels of achievement, when compared to expected levels of achievement, demonstrate that the program, overall, is achieving its outcomes. Program outcomes are appropriate and relevant to the degree and certificate programs offered.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>SON Shared drive: minutes of NFO, EE, Graduate, Curriculum, and A&amp;P Committees</li> <li>University's online assessment tool</li> <li>Annual Progress and Planning report</li> </ul>	Ongoing	<ul> <li>EE Committee</li> <li>SON Director</li> <li>Program Assessment Coordinators</li> <li>Curriculum/Gradu ate Committee</li> </ul>	All programs will meet program goals annually as indicated in the University's online assessment tool. The SON will achieve all goals set in the Annual Progress and Planning Report. If not, the administrative team will analyze why goals were not met.	

		Results of program assessment and the Annual Progress and Planning report will b presented to NFO annually.	ie		
IV-J Key Elemen	t:				
Program outcome data are used, as appropriate, to foster ongoing program improvement.					
IV-J elaboration: For program outcomes defined by the program:					

- Discrepancies between actual and expected outcomes inform areas for improvement.
   Changes to the program to foster improvement and achievement of program outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.
- 3. Faculty are engaged in the program improvement process.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>SON Shared drive: minutes of NFO, EE, Graduate, Curriculum, and A&amp;P Committees</li> <li>Annual Progress and Planning report</li> </ul>	Ongoing	<ul> <li>EE Committee</li> <li>SON Director</li> <li>Program Assessment Coordinators</li> <li>NFO</li> </ul>	Plans for program improvement will be discussed and included in NFO minutes. Results of the EE plan and Annual Progress and Planning Report will be presented to NFO annually.	

### Adjourn at 1:00 pm

Next Meeting

TBD