

# **MINUTES**

## September 2018 Educational Effectiveness

9/21/2018 11:00 AM | 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 II were determined by EE and the NFO motion will read: "The Educational Effectiveness Committee recommends revisions to the EE plan (Standard II) for the 2018-2019 academic year to comply with recently revised 2018 CCNE Standards." See below for NFO attachment:

## 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 and staff, as resources of the program, enable the achievement of the mission, goals, and expected program outcomes.

II-A Key Element:

Fiscal resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of fiscal resources is reviewed periodically and resources are modified as needed.

II-A elaboration: The budget enables achievement of the program's mission, goals, and expected outcomes. The budget supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of faculty and staff.

A defined process is used for regular review of the adequacy of the program's fiscal resources. Review of fiscal resources occurs and modifications are made as appropriate.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>Annual and ongoing budget</li> <li>SON shared drive: Minutes of EE &amp; NFO committees</li> </ul>	Annually	<ul> <li>Director SON</li> <li>EE Committee</li> <li>EE Committee will survey all faculty every three years to gather input into fiscal resource adequacy. The next survey of faculty is due in 2019.</li> </ul>	The Director will present budget information annually to the NFO. 80% of faculty respondents will agree or strongly agree with Standard II-A.	

II-B Key Element:

Physical resources and clinical sites enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of physical resources and clinical sites is reviewed periodically and resources are modified as needed.

II-B elaboration: Physical space and facilities (i.e. faculty and staff work space, classrooms, meeting areas) are sufficient and configured in ways that enable the program to achieve its mission, goals, and expected outcomes. Equipment and supplies (e.g., computing, laboratory, and teaching- learning materials) are sufficient to achieve the program's mission, goals, and expected outcomes. Clinical sites are sufficient, appropriate, and available to achieve the program's mission, goals, and expected outcomes.

A defined process is used to determine currency, availability, accessibility, and adequacy of learning resources (e.g., clinical simulation, laboratory, computing, supplies, and clinical sites) and modifications are made as appropriate.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>Annual and ongoing budget</li> <li>SON shared drive: Minutes of EE, Graduate, UG Curriculum,</li> </ul>	Annually	<ul> <li>Director SON</li> <li>Curriculum/Gradu ate Committee/Simul ation Director</li> </ul>	The Director and Curriculum/Graduate committees, Simulation Director will review physical resources and	

Simulation Task Force, & NFO committees • MOUs are on file in the Dean's office.	<ul> <li>EE Committee will survey all faculty every three years to gather input into physical and clinical resource adequacy. The next survey of faculty is due in</li> </ul>	clinical sites annually for sufficiency. 80% of faculty and student respondents will agree or strongly agree with Standard II-A.	
	faculty is due in 2019.		

II-C Key Element:

### Academic support services are sufficient to meet program and student needs and are evaluated on a regular basis.

II-C elaboration: Academic support services, which may include library, technology, distance education support, research support, admission, and advising services foster achievement of program outcomes. A defined process is used for regular review of academic support services and improvements are made as appropriate.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>SON shared drive: Minutes of EE, Graduate, APR, &amp; NFO committees</li> </ul>	Every Spring semester	<ul> <li>Director SON</li> <li>APR/Graduate Committees</li> <li>EE Committee will survey all faculty every three years to gather input into academic support adequacy. The next survey of faculty and students is due in 2019.</li> </ul>	The Director and APR/Graduate committees will review academic support services annually for sufficiency. The Director will review recommendations and make requests for academic support services. 80% of faculty and student respondents will agree or strongly agree with Standard II-C.	

II-D Key Element:

The chief administrator of the nursing unit:

1. is a registered nurse (RN);

- 2. holds a graduate degree in nursing;
- 3. holds a doctoral degree if the nursing unit offers a graduate program in nursing;
- 4. is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes;
- 5. provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.

II-D elaboration: The administrative authority of the chief nurse administrator is comparable to that of chief administrators of similar units in the institution. He or she consults, as appropriate, with faculty and other communities of interest to make decisions to accomplish the mission, goals, and expected program outcomes. The chief nurse administrator is an effective leader of the nursing unit.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>Office of Dean CoHS</li> </ul>	Every Spring semester	• Dean CoHS	The Director will meet all requirements and have comparable authority to that of other unit administrators at GCSU.	

II-E Key Element:

Faculty are:

- 1. sufficient in number to accomplish the mission, goals, and expected program outcomes;
- 2. academically prepared for the areas in which they teach; and
- 3. experientially prepared for the areas in which they teach.

II-E elaboration: The faculty (whether full- time, part-time, adjunct, or other) for each degree and post-graduate APRN certificate program are sufficient in number and qualifications to achieve the mission, goals, and expected program outcomes. The program defines faculty workloads. Faculty-to-student ratios provide adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines.

Faculty are academically prepared for the areas in which they teach. Academic preparation of faculty includes degree specialization, specialty coursework, or other preparation sufficient to address the major concepts included in courses they teach. Faculty teaching in the nursing program have a graduate degree. The program provides a justification for the use of any faculty who do not have a graduate degree.

Faculty who are nurses hold current RN licensure. Faculty teaching in clinical/practicum courses are experienced in the clinical area of the course and maintain clinical expertise. Clinical expertise may be maintained through clinical practice or other avenues. Faculty teaching in advanced practice clinical courses meet certification and practice requirements as specified by the relevant regulatory and specialty bodies.

Advanced practice nursing tracks are directly overseen by faculty who are nationally certified in that same population-focused area of practice in roles for which national certification is available.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>Budget</li> <li>Digital Measures</li> <li>Table of faculty expertise and semester teaching assignments</li> </ul>	Ongoing	<ul> <li>Director SON/UG Assistant Director/Grad Assistant Director</li> <li>APR Committee</li> </ul>	100% of faculty will have academic degrees or alternative credentials, practice experience and expertise appropriate for their teaching assignments.	
			100% of tenure-track faculty will have teaching assignments that do not exceed 12 credit hours per semester or 24 credit hours per academic year. (Faculty may contract for additional teaching assignments).	
			100% of Non-Tenure Track faculty will have teaching assignments that do not exceed 20 credit hours per semester or 40 credit hours per academic year. (Faculty may contract for additional teaching assignments).	

II-F Key Element:

Preceptors (e.g., mentors, guides, coaches), if used by the program as an extension of faculty, are academically qualified for their role.

*II-F* elaboration: The roles and performance expectations for preceptors with respect to teaching, supervision, and student evaluation are:

- 1. clearly defined and communicated to preceptors;
- 2. congruent with the mission, goals, and expected student outcomes;

- 3. congruent with relevant professional nursing standards and guidelines; and
- 4. reviewed periodically and revised as appropriate.

Preceptors have the expertise to support student achievement of expected outcomes. The program ensures preceptor performance meets expectations.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
<ul> <li>Nursing Shared Drive</li> <li>Undergraduate Practicum course</li> <li>Minutes of Graduate Committee</li> </ul>	Ongoing	<ul> <li>Faculty teaching in the Undergraduate Practicum course will review course reports for undergraduate precepted courses.</li> <li>Graduate Committee will review graduate course reports for precepted courses.</li> </ul>	100% of Preceptor qualification records will meet standards as reflected in meeting minutes.	

#### II-G Key Element:

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.

II-G elaboration: Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role (whether full-time, part-time, adjunct, or other) and in support of the mission, goals, and expected faculty outcomes.

- Faculty have opportunities for ongoing development in teaching.
- If scholarship is an expected faculty outcome, the institution provides resources to support faculty scholarship.
- If service is an expected faculty outcome, expected service is clearly defined and supported.
- If practice is an expected faculty outcome, opportunities are provided for faculty to maintain practice competence.
- Institutional support ensures that currency in clinical practice is maintained for faculty in roles that require it.

Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome

<ul> <li>Digital Measures</li> <li>Budget</li> <li>Faculty annual evaluations</li> <li>Faculty survey</li> <li>CETL</li> <li>Library</li> <li>P&amp;T Document</li> <li>Faculty Development Funds</li> </ul>	<ul> <li>Dean CoHS, Director SON</li> <li>EE Committee will survey faculty every three years to gather input into resource adequacy. The next survey of faculty is due in 2019.</li> <li>80% of faculty respondents will agree or strongly agree with standard II-F.</li> <li>100% of faculty will update Digital Measures and be evaluated by the Director SON annually.</li> </ul>	
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Adjourn at 12:00 pm

Next Meeting

October 19, 2018 @ 1:00