

GCSU School of Nursing FY 2017 Systematic Program Evaluation Plan

Table of Contents

Standard I: Mission and Governance	2
Standard II: Program Quality: Institutional Commitment and Resources	5
Standard III: Program Quality: Curriculum and Teaching-Learning Practices1	0
Standard IV: Assessment and Achievement of Program Outcomes1	8

Standard I: 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 program quality.

Key Elements	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
I-A. The mission, goals, and expected	Congruency found in	Mission is reviewed every	Director of SON,	The SON mission,	The SON mission is
program outcomes are:	handbooks, online	five years OR as needed	Assistant Directors of	goals, and	fully congruent
	SON Website	to remain congruent with	Undergraduate and	expected	with GCSU and
1. Congruent with those of the	GCSU Catalog, SON	GCSU and the CoHS.	Graduate Programs,	outcomes will be	CoHS, and the
parent institution; and	shared drive:		Curriculum,	fully congruent	AACN Essentials
	Minutes of NFO and	Curricula are reviewed	Graduate, and EE	with GCSU and	are incorporated
2. Consistent with relevant	EE Committees	every five years.	Committees	CoHS and will be	into all program
professional nursing standards and				consistent with	outcomes.
guidelines for the preparation of	Professional			relevant	
nursing professionals:	standards are			professional	The University
	incorporated into			nursing standards	began the process
a. The Essentials of Baccalaureate	BSN, MSN, and DNP			and guidelines for	of reviewing our
Education for Professional Nursing	curricula found in			the preparation of	liberal arts mission
Practice [American Association of	mapping			nursing	and will likely
Colleges of Nursing (AACN), 2008];	spreadsheets.			professionals.	revise the mission.
b. The Essentials of Master's					BSN Curriculum
Education in Nursing (AACN, 2011);					began a formal
					review in 2016. A
c. The Essentials of Doctoral					proposal will be
Education for Advanced Nursing					drafted in Spring
Practice (AACN, 2006); and					2017 and voted on
					by NFO.
d. Criteria for Evaluation of Nurse					RN-BSN was
Practitioner Programs [National Task					formally reviewed
Force on Quality Nurse Practitioner					in 2017.
Education (NTF), 2012].					2017.
					MSN will be
					formally reviewed
					in 2018.

Key Elements	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
					DNP Curriculum began a revision in Fall 2016 based on student and faculty feedback. It has been approved by NFO, CoHS, Graduate Council. It will become effective Fall 2018.
 I-B. The mission, goals, and expected student outcomes are reviewed periodically and revised, as appropriate, to reflect: 1. Professional nursing standards and guidelines; 2. The needs and expectations of the community of interest. 	Guidelines & Standards, Compliance Assist, SON shared drive: Minutes of NFO Committees, Teaching Communities, Advisory Board. Professional standards are incorporated into BSN, MSN, and DNP curricula found in mapping spreadsheets.	Mission, goals, and expected student outcomes are reviewed every five years OR as needed. Course outcomes are reviewed every semester by the course coordinator, teaching communities, Curriculum or Graduate Committee, and EE Committee.	Director of SON, Assistant Directors of Undergraduate and Graduate Programs, all faculty, students, and communities of interest.	The mission, goals, and expected student outcomes will be reviewed every five years or as needed and revised, as appropriate, to reflect: 1. Professional nursing standards and guidelines; 2. The needs and expectations of the community of interest.	The mission, goals, and expected student outcomes are reviewed every five years and revised, as appropriate. BSN Curriculum began a formal review in 2016. A proposal will be drafted in Spring 2017 and voted on by NFO. RN-BSN was formally reviewed in 2017. MSN will be formally reviewed in 2018. DNP Curriculum began a revision in

Key Elements	Where Documentation is	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
	Found				Fall 2016 based on student and faculty feedback. It has been approved by NFO, CoHS, Graduate Council. It will become effective Fall 2018.
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.	CoHS Tenure and Promotion Guidelines, Faculty Development Standards, Annual Faculty Evaluations, Digital Measures, Faculty Outcomes document	Every Spring semester	Director of SON, EE Committee, all Faculty.	Faculty outcomes will be met annually. Faculty outcomes are listed in Standard IV-F.	All faculty are evaluated annually. Faculty outcomes are addressed in Standard IV-F. Partially met (see results in appendix).
I-D. Faculty and students participate in program governance.	SON shared drive: Minutes of NFO Committees, Teaching Communities, Advisory Board, student groups.	Every semester	EE Committee	NFO Bylaws will include mechanisms for student involvement in program governance. Student participation in program governance will be reflected in at least 50% of NFO	NFO Bylaws do include mechanisms for student involvement in program governance. Student participation in program governance is reflected in 100% of NFO meetings.
I-E. Documents and publications are accurate. A process is used to notify constituents about changes in	GCSU Website, SON Website, GCSU Catalogs, Student	Every Spring semester	Director SON, Assistant Directors for	meetings. Documents and publications will be reviewed	Documents and publications were reviewed and are

Key Elements	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
documents and publications.	Handbooks		Undergraduate and Graduate Programs	annually for accuracy. A process will be used to notify constituents about changes in documents and publications.	accurate. A process is used to notify constituents about changes in documents and publications.
 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: 1. fair and equitable; 2. published and accessible; and 	GCSU Catalog: Academic policies, Student Handbooks, SON Website Policy Committee Minutes will reflect review.	Every Spring semester	Policy Committee	Academic policies of the parent institution and the nursing program will be reviewed annually.	Academic policies of the parent institution and the nursing program were reviewed, congruence is noted.
 Provide and revised as necessary to foster program improvement. 					

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	Where	Timeline for Collection	Who is Responsible	Expected	Actual Outcome
	Documentation is			Outcome	
	Found				
II-A. Fiscal and physical resources are	Annual and ongoing	Annually	Director SON, APR	The Director will	The Director
sufficient to enable the program to	budget, SON shared		Committee.	review fiscal and	reviewed fiscal and
fulfill its mission, goals, and expected	drive: Minutes of EE			physical resources	physical resources
outcomes. Adequacy of resources is	& APR committees		EE Committee will	annually for	annually for

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
reviewed periodically and resources			survey all students	sufficiency.	sufficiency:
are modified as needed.			and faculty every		
			three years to gather	Faculty and	An increase to
			input into resource	students will have	operating
			adequacy. The next	input into	expenses was
			survey of faculty and	reviewing	requested for AY
			students is due in	resources: 80% of	2017-2018 and
			2019.	faculty and	also request to
				student	increase lab fees.
				respondents will	At this time lab fee
				agree or strongly	increases are still
				agree with	are under review
				Standard II-A.	and we did not
					receive an increase in our operating
					expenses. Shortfall
					last year was
					covered by the
					Dean of the CoHS
					out of salary lapse
					for unfilled
					position (Associate
					Dean of CoHS). If
					increased lab fees
					are not approved,
					then we will be
					required to make
					programmatic
					changes to prevent
					from being in
					shortfall.
					FY 2016: 74% of
					faculty (20/27) and
					76 % of students
					(47/62) agree or
					strongly agree with
					Standard II-A.

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
II-B. Academic support services are sufficient to ensure equality and are evaluated on a regular basis to meet program and student needs.	SON shared drive: minutes of EE & APR committees	Every Fall semester	APR Committee annually EE Committee will survey all students and faculty every three years to gather input into academic support adequacy. The next survey of faculty and students is due in 2019.	The APR Committee will review academic support services annually for sufficiency. Faculty and students will have input into reviewing academic support services: 80% of faculty and student respondents will agree or strongly agree with Standard II-B.	The APR Committee reviewed academic support services and were found to be sufficient. FY 2016: 85% of faculty (22/26) and 82% of students (50/61) agree with Standard II-B.
 II-C. The chief nurse administrator: 1. is a registered nurse (RN); 2. holds a graduate degree in nursing; 3. is academically and experientially qualified to accomplish the mission, goals, and expected program outcomes; 4. is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; 5. provides effective leadership to 	Office of Dean CoHS	Every Spring semester	Dean CoHS, APR Committee	The Director will meet all requirements and have comparable authority to that of other unit administrators at GCSU.	The Director meets all requirements and has comparable authority to that of other unit administrators at GCSU.

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
the nursing unit in achieving its					
mission, goals, and expected					
program outcomes.					
II-D. Faculty members are:	Budget, Digital Measures, Semester	Ongoing	Director SON, APR Committee	100% of faculty will have	24 out of 24 (100%) of faculty
1. sufficient in number to accomplish	Schedule of Classes,			academic degrees	both lecturer and
the mission, goals, and expected	Table of faculty			or alternative	T/T are
program outcomes;	expertise and			credentials,	academically and
	teaching assignments			practice	experientially
2. academically prepared for the				experience and	prepared.
areas in which they teach; and				expertise	
				appropriate for	69% of tenure-
3. experientially prepared for the				their teaching	track faculty did
areas in which they teach.				assignments.	not teach an
					overload.
				100% of tenure-	Overload was due
				track faculty will	to: course
				have teaching	coordinator hour
				assignments that	(not recognized by
				do not exceed 12 credit hours per	the university in teaching load) and
				semester or 24	administrative
				credit hours per	release time.
				academic year.	release time.
				(Faculty may	100% of non-
				contract for	tenture track
				additional	faculty did not
				teaching	, teach an overload.
				assignments).	
					The SON requested
				100% of Non-	½ a new Lecturer
				Tenure Track	line (to be added
				faculty will have	to existing ½ line)
				teaching	beginning Fall 2017
				assignments that	and are awaiting
				do not exceed 20	approval. Two
				credit hours per	existing lecturer

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
				semester or 40 credit hours per academic year. (Faculty may contract for additional teaching assignments).	lines have been asked for upgrade approval to Assistant Professor (awaiting approval). A search is underway to fill the Assistant Professor line vacated by Director.
II-E. When used by the program, preceptors, as an extension of faculty, are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes	Office of the Director of the School of Nursing (minutes & annual reports of all committees) Office of the Dean of the CoHS (official agency contracts) Minutes of EE and Graduate Committee Course report for NRSG 4981	Ongoing	Curriculum committee will review course reports for undergraduate precepted courses and Graduate Committee will review graduate course reports for precepted courses. Minutes will reflect that preceptor qualification records meet standards.	100% of Preceptor qualification records will meet standards.	100% of preceptor qualification records met standards.
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.	Digital Measures, Budget, Faculty Annual Evaluations, Class Schedules, Annual faculty survey	Ongoing	Director SON, Task force on Faculty Practice, APR Committee EE Committee will survey all students and faculty every three years to gather input into resource	Faculty will be supported in teaching, scholarship, and service endeavors: 80% of faculty respondents will agree or strongly agree with	Faculty are supported in teaching, scholarship, and service endeavors: FY 2016: 80% of faculty (20/26) agree with Standard II-F.

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
			adequacy. The next survey of faculty and students is due in 2019.	standard II-F.	

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

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

Key Element	Where Documentation is	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
	Found				
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.	Student handbooks, Compliance Assist, SON shared drive: Aggregate Student Outcomes in EE and NFO Committee Minutes, Teaching Community Minutes	BSN, RN-BSN, MSN and DNP Curricula are reviewed every five years or as needed to comply with GCSU and/or CoHS. Course outcomes are reviewed every semester by the course coordinator, teaching communities, Curriculum or Graduate Committee, and EE Committee.	Director of Nursing, Assistant Directors for Undergraduate and Graduate Programs, Curriculum or Graduate Committee, Faculty, EE Committee	The curricula will be fully congruent with expected student outcomes, the SON mission and goals, and with the role for which the program is preparing its graduates.	The curricula reflect expected student outcomes and are congruent with the SON mission and goals, as well as the role that each program is preparing its graduates. BSN Curriculum began a formal review in 2016. A proposal will be drafted in Spring 2017 and voted on by NFO. RN-BSN was formally reviewed in 2017.

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
					MSN will be formally reviewed in 2018.
					DNP Curriculum began a revision in Fall 2016 based on student and faculty feedback. It has been approved by NFO, CoHS, Graduate Council. It will become effective Fall 2018.
 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). 1. Baccalaureate program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008). 	Program and course outcomes, Student handbooks, SON shared drive: Minutes NFO, Teaching Communities, Curriculum Committee	BSN, RN-BSN, MSN and DNP Curricula are reviewed every five years or as needed to comply with GCSU and/or CoHS. Course outcomes are reviewed every semester by the course coordinator, teaching communities, Curriculum or Graduate Committee, and EE Committee.	Director of Nursing, Assistant Directors for Undergraduate and Graduate Programs, Curriculum Committee, & Faculty	All curricula will undergo a formal review and/or revision every five years or as needed to comply with GCSU and/or CoHS. The AACN Essentials will be incorporated into all curricula.	BSN Curriculum began a formal review in 2016. A proposal will be drafted in Spring 2017 and voted on by NFO. RN-BSN was formally reviewed in 2017. MSN will be formally reviewed
 2. 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 				NFT Guidelines will be incorporated into FNP, PMHNP, and Post-Master's FNP Curricula.	in 2018. DNP Curriculum began a revision in Fall 2016 based on student and faculty feedback. It has been approved by

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
professional standards and guidelines as identified by the program.					NFO, CoHS, Graduate Council. It will become
b. All master's degree programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2012).					effective Fall 2018. The AACN Essentials are incorporated into all curricula.
3. Graduate-entry program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and appropriate graduate program standards and guidelines.					NFT Guidelines are incorporated into FNP, PMHNP, and Post-Master's FNP Curricula.
4. All DNP programs incorporate The <i>Essentials of Doctoral Education for Advancing Nursing Practice</i> (AACN, 2006) and additional relevant professional standards and guidelines if identified by the program.					
5. All DNP curricula incorporate professional standards and guidelines as appropriate.					
a. All DNP programs incorporate The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006) and additional relevant professional standards and guidelines if identified by the program.					
b. All DNP programs that prepare					

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2012). 6. Post-graduate APRN certificate programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2012).					
 III-C. The curriculum is logically structured to achieve expected student outcomes. 1. Baccalaureate curricula build upon a foundation of the arts, sciences, and humanities. 2. Master's curricula build on a foundation comparable to baccalaureate level nursing knowledge. 3. DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student. 4. Post-graduate APRN certificate programs build on graduate level nursing competencies and knowledge base. 	Grid showing progression from BSN, MSN, to DNP, SON shared drive: Curriculum or Graduate Committee, & NFO Minutes.	BSN, RN-BSN, MSN and DNP Curricula are reviewed every five years or as needed to comply with GCSU and/or CoHS. Course outcomes are reviewed every semester by the course coordinator, teaching communities, Curriculum or Graduate Committee, and EE Committee.	Faculty, Curriculum Committee/Graduate Committee	Curricula will be logically structured to achieve expected student outcomes. Each program will build upon appropriate foundations, and curricula will demonstrate progression from the Baccalaureate to the Doctorate degrees.	Curricula are logically structured to achieve expected student outcomes. Each program builds upon appropriate foundations, and curricula demonstrate progression from the Baccalaureate to the Doctorate degrees.
III-D. Teaching-learning practices and environments support the achievement of student outcomes.	Course Reports, MOUs, SON shared drive: Teaching Communities	Each semester	Course and/or Program Coordinators EE Committee will	100% of BSN and MSN students will be placed in qualified clinical sites and with	100% of BSN and MSN students were placed in qualified clinical sites and with

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
			survey all students	qualified	qualified
			and faculty every	preceptors.	preceptors.
			three years to gather		
			input into teaching-	100% of RN-BSN	100% of RN-BSN
			learning practices	students will	students identified
			adequacy. The next	identify a	a qualified mentor
			survey of faculty and students is due in	qualified mentor to facilitate their	to facilitate their
			2019.		learning.
			2019.	learning.	100% of DNP
				100% of DNP	students selected
				students will	qualified
				select qualified	committee
				committee	members to
				members to	facilitate defense
				facilitate defense	of their
				of their	translational
				translational	project.
				project.	
					FY 2016: 83% of
				80% of students	BSN students
				and faculty will	(50/60, 76% of
				agree or strongly	MSN students
				agree with	(39/51), 60% of
				Standard III-D.	DNP students
				100% of and of	(6/10), and 88% of
				100% of end-of- course reports	faculty (23/26) agreed or strongly
				will indicate that	agreed or strongly agreed with
				learning activities	Standard III-D. This
				and instructional	standard is not
				materials were	met for the MSN
				assessed in light	and DNP programs.
				of student	
				learning	
				outcomes.	100% of end-of-
					course reports
				100% of learning	indicated that

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
				environments will have a current MOU/letter of agreement stating expectations of each party. 100% of BSN and MSN clinical courses will complete site evaluations by students and faculty and preceptor evaluations by students.	learning activities and instructional materials were assessed in light of student learning outcomes. 100% of learning environments have a current MOU/letter of agreement stating expectations of each party. 100% of BSN and MSN clinical courses completed site evaluations by students and faculty and preceptor evaluations by students.
 III-E. The curriculum includes planned clinical practice experiences that: 1. enable students to integrate new knowledge and demonstrate attainment of program outcomes; and 2. are evaluated by faculty. 	Program and course outcomes, Course Reports, SON shared drive: Minutes from NFO, Teaching Communities, Curriculum or Graduate Committee	BSN, RN-BSN, MSN and DNP Planned clinical experiences are reviewed every five years or as needed to comply with GCSU and/or SON. Course outcomes are reviewed every semester by the course coordinator, teaching communities, Curriculum or Graduate Committee,	Curriculum or Graduate Committee, Faculty, EE Committee	All clinical experiences will be reviewed every five years or as needed to comply with GCSU and/or SON. Course outcomes will be reviewed every semester.	All clinical experiences are reviewed every five years or as needed to comply with GCSU and/or SON. Course outcomes are reviewed every semester.

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
		and EE Committee.			
III-F. The curriculum and teaching- learning practices consider the needs and expectations of the identified community of interest.	Son shared drive: minutes from Curriculum or Graduate Committee, Student representative reports (NFO), Advisory Board	Faculty solicit community of interest needs and expectations from SON Advisory Boards meetings twice a year, CoHS Advisory Board Meeting, Georgia Board of Nursing, FNP Certifying bodies (AANP, ANCC), and students.	Curriculum or Graduate Committee, Faculty All graduating students will complete a program evaluation. EE Committee will survey all employers every three years to gather input into curriculum and teaching-learning practices. The next survey of employers is due in 2019.	The SON will host two Advisory Board meetings each year to solicit needs and expectations. 90% of graduating students will indicate that they met the program outcomes. 80% of employers of graduates will agree or strongly agree that graduates meet role expectations.	The SON hosts two Advisory Board meetings each year to solicit needs and expectations. FY 2016: 100% of graduating BSN students, 100% of MSN students, and 100% of DNP students indicated that they met the program outcomes. FY 2016: XX% of employers of BSN graduates, XX% of employers of MSN graduates, and XX% of employers of DNP graduates agreed or strongly agreed that graduates meet role expectations. Data not available- question was not on 2016 survey.
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.	Course syllabi, handbooks, student folders, clinical course reports, faculty clinical evaluations of students	Every semester	Curriculum or Graduate Committee, Faculty	100% of BSN and MSN students will be clinically evaluated during each clinical course.	100% of BSN and MSN students are clinically evaluated during each clinical course. 100% of RN-BSN

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
				100% of RN-BSN students will successfully complete the RN- BSN Portfolio rubric. 100% of DNP students will achieve outcomes as indicated by the DNP Portfolio rubric and will meet criteria to successfully defend and disseminate the translational project. Evaluation policies and procedures for individual student performance will be defined and consistently	students successfully completed the RN- BSN Portfolio rubric. 100% of DNP students achieved outcomes as indicated by the DNP Portfolio rubric and met criteria to successfully defend and disseminate the translational project. Evaluation policies and procedures for individual student performance are defined and consistently applied.
III-H. Curriculum and teaching- learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.	Compliance Assist, Course reports, SON shared drive: minutes of Teaching Communities and	BSN, RN-BSN, MSN and DNP Curricula are reviewed every five years or as needed to comply with GCSU and/or CoHS.	Curriculum or Graduate Committee, Faculty	applied. 100% of course outcomes will be reviewed at the end of each semester.	100% of course outcomes are reviewed at the end of each semester.
	Curriculum or Graduate Committee	Course outcomes are reviewed every semester by the course coordinator, teaching		100% of faculty will be reviewed by students (SRIS) and the Director	100% of faculty are reviewed by students (SRIS) and the Director

Key Element	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
		communities, Curriculum or Graduate Committee, and EE Committee.		(faculty evaluation) each year.	(faculty evaluation) each year.

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.

Key Elements	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
IV-A. A systematic process is used to determine program effectiveness.	SON shared drive: minutes of NFO and EE	Every Spring and Fall semester 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.	NFO, Curriculum, A&P, Graduate, and EE committees	The SON will have a systematic process in place to determine program effectiveness. Program outcomes will be reviewed annually.	The SON has a systematic process in place to determine program effectiveness. Program outcomes are reviewed annually.
IV-B. Program completion rates demonstrate program effectiveness.	SON shared drive: minutes of NFO and EE, Office of Institutional Research and Effectiveness	Every Fall and Spring semesters	EE and Graduate committees	The program completion rates for all programs will be at least 70% for the calendar year.	Average program completion rates for FY 2017 are as follows: BSN= 89.6% (95/106 FY2017 total; 83.9% for Fall 2016 and 96% for Spring 2017). MSN FNP=

Key Elements	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
					25/29= 86.21% DNP= XX% (X/X)
IV-C. Licensure and certification pass rates demonstrate program effectiveness.	SON shared drive: minutes of NFO and EE ANCC and AANP Certification Reports, Ga BON NCLEX Report	Every Spring and Fall semester	EE and Graduate committees	The 1 st time taker NCLEX rate will be at least 80%. The 1 st time taker Certification pass rates for FNP, PMHNP, and CNE will be at least 80%.	See data below. The 1 st time taker NCLEX rate was 96% for FY 2017. The 1 st time taker Certification pass rates for 2016 were: FNP (AANP) 96% (27/28) (No ANCC testers), PMHNP (no graduates yet). See data below.
IV-D. Employment rates demonstrate program effectiveness.	SON shared drive: minutes of NFO and EE, EE survey results	Every Fall and Spring semesters	EE committee	The employment rate for all graduates will be 70% or higher.	The employment rates for FY2017 were: BSN= 93% Spring 2017 (Note: method for gathering data changed, so no data is available for Fall 2016). RN-BSN = 100 % MSN FNP = 100% MSN PMHNP = no graduates yet

Key Elements	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
					MSN NE = 100%
 IV-E. Program outcomes demonstrate program effectiveness. Program outcomes are defined by the program and incorporate expected levels of achievement. Program outcomes are appropriate and relevant to the degree and certificate programs offered and may include (but not limited to) student learning outcomes; student and alumni achievement; and student, alumni, and employer satisfaction data. Analysis of data demonstrates that, in the aggregate, the program is achieving its outcomes. Any program with outcomes lower than expected provides a written explanation/analysis for the variance. 	SON shared drive: minutes of NFO, EE, and Graduate Committees, Compliance Assist	Every spring and fall semester	Program Assessment Coordinators SON Director	All programs will meet program goals annually as indicated in Compliance Assist. The SON will achieve all goals set in the Annual Progress and Planning Report.	All programs met program goals annually as indicated in Compliance Assist. The SON partially achieved goals set in the Annual Progress and Planning Report. See data below.
IV-F. Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness.	Digital measures, Faculty Annual Evaluations	Every Spring semester	EE Committee, Director of Nursing	Scholarship 80% of tenure- track faculty will engage in scholarly activities. 100% of APRN faculty will maintain certification. <u>Teaching</u> 80% of teaching	Scholarship 15 out of 18 (83.33%) T/T faculty engaged in scholarly activities. Total # for all faculty for 2016- 2017 was: Grants = 10 Presentations = 23 Articles = 16 Chapters 8 10 out of 10

Key Elements	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
				faculty will score at or above the Georgia College mean on the SRIS. <u>Service</u> 80% of faculty will serve on a Georgia College, CoHS, or SON committee.	(100%) APRN Faculty maintained certification. <u>Teaching</u> 11 out of 16 (68.75%) scored at or above the Georgia College mean on the SRIS. (Did not meet this goal). <u>Service</u> 24 out of 24 (100%) of faculty both lecturer and T/T served on a Georgia College, CoHS, or SON committee.
IV-G. The program defines and reviews formal complaints according to established policies.	GCSU Policy Manual, Student handbooks, Files in SON Director's office.	Ongoing	Associate Directors for Undergraduate and Graduate Programs, EE Committee	Review of student complaints includes recommendations for ongoing program improvement, when indicated.	No formal complaints were received in any programs.
IV-H. Data analysis is used to foster ongoing program improvement. The program uses outcome data for improvement. Data regarding completion, certification, and employment rates; other program outcomes; and formal complaints are used as indicated to foster	SON Shared drive: minutes of NFO, EE, Graduate, Curriculum, and A&P Committees	Ongoing	EE committee	Results of the EE plan will be presented to NFO annually. Plans for program improvement will be discussed and	Results of the FY 2017 EE plan were presented to NFO in August 2017. Plans for program improvement will be discussed and

Key Elements	Where Documentation is Found	Timeline for Collection	Who is Responsible	Expected Outcome	Actual Outcome
program improvement.				included in NFO	included in NFO
				minutes.	minutes.

CCNE Standard IV-B FY 2017 Program Completion Rates

BSN Completion Rates						
Semester of Entry/	Retention Rate	Did Not Graduate	Did Not Graduate	Currently in Program		
Expected Grad Date	Graduation Within 6	Personal	Academic			
	Semesters	(Includes Major Change)	(Failure)			
Fall 2014/Spring 2016	48/53 = 90.5%	3/53	2/53	N/A		
Spring 2015/Fall 2016	47/56 = 83.9%	3/56	5/56	1/56		
Fall 2015/Spring 2017	48/50 = 96%	0/50	0/50	2/50		
		RN-BSN Completion Rate				
Spring 2017	14/17= 82.35%	2-withdrew	2			
		1-changed major				
	N	ISN- FNP Completion Rate				
Spring 2017	25/29= 86.21%	1-withdrew	2			
		1-family emergency				
	Post-l	Master's FNP Completion Ra	te			
Spring 2017	4/8 =50%	1-family		1- Will grad Spring 2018		
		1-medical				
		1-withdrew				
	MSI	N- Educator Completion Rate				
Spring 2017	5/6= 83.33%			1- Will grad Spring 2018		
		DNP Completion Rate		•		
Fall 2016	5/6= 83.33%	1- Family emergency				

CCNE Standard IV-C FY 2017 BSN NCLEX Results

FY2017: First-time NCLEX Pass Rate January - July 2017 = 95/99 = 96%

Spring 2017 Cohort: First-time NCLEX Pass Rate Spring 2017 Cohort = 55/57 = 96%

Fall 2016 Cohort: First-time NCLEX Pass Rate Spring 2017 Cohort = 43/45 = 96%

Spring 2017 Cohort Student Name	NCLEX Results (1 st Time)
AFol	Fail (Twice so far)
CPur	Fail (Passed on second attempt)

Fall 2016 Cohort Student Name	NCLEX Results (1 st Time)	
EMac	Fail (Four times so far)	
KPat	Fail (Passed on second attempt)	

CCNE Standard IV-C FY 2017 FNP Certification Results

FY2017: First-time FNP Certification Pass Rate 2017 = 29/29 = 100% (25 FNP students and 4 Post-Master's FNP students). 2 students have not yet taken.

CCNE Standard IV-E FY 2017 School of Nursing Annual Progress and Planning Report (APR) Results

FY 2017 Viability Goals

Goal 1. To fill vacant faculty line, PMHNP and Community Health focus by August 2017.

Not Met: After an unsuccessful search, it was determined that we would relist this position with a Med/Surg focus and relisted so that the faculty line could be filled for the AY 2018. This was a successful search that has resulted in Dr. Jennifer Goldsberry being hired as a tenure track assistant professor. In the fall of 2017, the SON we do an analysis of current positions that are temporarily filled and upcoming vacancies that will come from retirement. After this analysis, we will determine the best direction for the SON job searches this year.

Goal 3. To procure permanent funding to move the Graduate Administrative Position from a ^{1/2} time position to a fulltime position.

Rationale: This is a request from the past three years. We are currently managing with the temporary use of grant funding. It is vital that we move this position from a grant-funded position to permanent funding to maintain the viability, quality, and productivity of the graduate programs.

Not Met: This funding request was not secured. This vital position is being funded this year under grant funding. At this point we have enough for ½ year in current budget but have reduced the number of student worker hours to provide sufficient funds for the entire year. Will request again.

Goal 4. Complete an analysis of the RN-BSN program and determine the best approach to increasing the enrollment and making this a sustainable program that will meet the workforce needs of Georgia.

Goal 5. Complete an analysis of options to increase the enrollment of undergraduate program with an expanded year plan. Also explore options for a four plus one MSN in nursing.

MET: Both goals 4 and 5 were completed last year. The full proposal to recommend that we deactivate the RN-BSN and transition to RN to MSN will move to SON NFO at the September meeting. A teach out and full proposal will then be sent through the university system.

FY17 Quality Goals

FY Goal 1: To complete a full curriculum assessment, revision and implementation of programmatic changes for the following SON programs to ensure compliance with all national standards and to connect our students with the liberal arts and the community: BSN and Doctor of Nursing Practice will be formally evaluated and reviewed by faculty during AY 2016.

Rationale: To ensure continued 1st time pass rates faculty, students and community stake holders must evaluate changing needs and standards in nursing education and workforce needs. The IOM report has called for radical change to nursing education. Current research has found that up to 50% of students' clinical experiences can come from simulation and no differences have been noted in teach scores, pass rates, or clinical evaluations. Being in touch with the community and the workforce needs for a safe beginning practitioner is vital to sustaining a high quality-nursing program.

Measure: Curriculum changes completed and submitted through university channels by end of AY 2017.

Partially Met: The DNP curriculum revision and changes are complete. They have moved through the appropriate university channels. Implementation is schedule for Fall 2018 and a bridge teaching plan is in place for those students who are part-time.

The BSN curriculum revision was approved by the NFO in April of 2017. It will not move forward to CoHS Curriculum Committee at the first meeting in fall 2017. The implementation is planned for Fall of 2018. A teach out plan has been formulated and further development of individual course objectives and simulation plan will be completed during the AY 2017-2018.

Productivity Goals FY 2017

FY17 Goal 1: To increase the percentage of the number of students admitted in graduate program that selects the Nurse Educator and Psychiatric Mental Health Nurse Practitioner focus.

Rationale: These programs are the newest programs. It is vital that we grow the reputation of these programs and ensure the viability, quality, and productively of them. It will be important to focus on them this upcoming year.

Measure: Percentage of graduate students entering the Nurse Educator and Psychiatric Mental Health Nurse Practitioner programs.

Target: 20% increase in the combined PMHNP and PostMaster's numbers anticipated to graduate from 2018 to 2019.

PMHNP Anticipated Graduates Spring 2018-- 5 PostMaster Anticipated Graduates Spring 2018--9

• Total 14

PMHNP Anticipated Graduates Spring 2019--<mark>4</mark> PostMaster Anticipated Graduates Spring 2019--<mark>13</mark>

• Total 17

MET: This was an increase of 21.43% in the total number of anticipated PMHNP graduates.

Nurse Educator

Spring 2016 - Actual Graduated 11

Spring 2017 - Actual Graduated 6

Spring 2018 – Anticipated Graduating 5

Spring 2019 – Anticipated Graduating 2

Not Met: Despite considerable recruitment efforts and strong rating from both students and community stake holders regarding our Nurse Educator Program, the numbers recruited continue to be low.

FY 17 Goal 2: To increase the percentage of faculty who engage in scholarship by providing adequate mentoring and support for faculty.

Rationale: The quality of our programs depends on the ability of our faculty to engage in scholarship. In the past heavy workloads and faculty shortages have made it extremely difficult for faculty to have adequate time for scholarship.

Measure: Percentage of faculty who engage in scholarship.

Target: 20% increase over last 3 year average.

Partially Met: While we did not totally meet this goal, I am extremely pleased with some areas of improvement.

15 out of 18 (83.33%) T/T participated in some type of scholarship activity in 2016-2017 This represents a 7.21% increase in total scholarship activity for the School of Nursing this year. Total # of scholarship activities for all faculty for 2016-2017 was 57:

- Grants = 10(17.5%)
- Presentations = 23 (40.3%)
- Articles = 16(28.1%)
- Chapters 8 + (14.0%)

14 out of 18 (77.7%) T/T participated in some type of scholarship activity in 2015-2016 Total # of scholarship activities for all faculty for 2015-2016 was 65:

- Grants = 32 (49.2%)
- Presentations = 24 (36.9%)
- Articles = 4 (6.15%)
- Chapters 5 (7.69%)

CCNE Standard IV-E FY 2016- 2017 School of Nursing Program Assessment Results (Compliance Assist Data)

BSN			
Student	Results	Plan	

Learning		
Outcome		
1. The student will use effective situational communication.	95% (Fall 2016= 92%, Spring 2017= 98%) rated themselves as satisfactorily meeting the program outcome GOAL MET	Because all outcomes towards students' demonstration of the
	Students averaged 955 (Fall 2016= 1006, Spring 2017 = 904) on the RN Exit Hesi Subscore for Quality and Safety Education (QSEN) Category: Patient-Centered Care- Effective Communication GOAL MET	program goal of health promotion were met, no changes are
	Students averaged 968 (Fall 2016= 986, Spring 2017 = 949) on the RN Exit Hesi Subscore for Quality and Safety Education (QSEN) Category: Teamwork and Collaboration-Effective Communication GOAL MET	recommended at this time. Outcomes for this program goal will be monitored
	Students averaged 952 (Fall 2016= 984, Spring 2017 = 920) on the RN Exit Hesi Subscore for Nursing Concepts Category: Communication GOAL MET	during the next assessment phase.
2. The student will incorporate	100% (Fall 2016= 100%, Spring 2017= 100%) rated themselves as satisfactorily meeting the program outcome GOAL MET	Because all outcomes towards students'
best current evidence with clinical	Students averaged 967 (Fall 2016= 938, Spring 2017 = 995) on the RN Exit Hesi Subscore for Client Needs Category: Safe and Effective Environment GOAL MET	demonstration of the program goal of health promotion were met, no
expertise and client preferences and values.	Students averaged 954 (Fall 2016= 937, Spring 2017 = 970) on the RN Exit Hesi Subscore for Client Needs Category: Management of Care GOAL MET	changes are recommended at this time. Outcomes for this program
and values.	Students averaged 996 (Fall 2016= 938, Spring 2017 = 1054) on the RN Exit Hesi Subscore for Client Needs Category: Safety and Infection Control GOAL MET	goal will be monitored during the next assessment phase.
	Students averaged 961 (Fall 2016= 909, Spring 2017 = 1012) on the RN Exit Hesi Subscore for Client Needs Category: Health Promotion and Maintenance GOAL MET	
	Students averaged 915 (Fall 2016= 913, Spring 2017 = 917) on the RN Exit Hesi Subscore for Client Needs Category: Psychosocial Integrity GOAL MET	
	Students averaged 985 (Fall 2016= 990, Spring 2017 = 979) on the RN Exit Hesi Subscore for Client Needs Category: Physiological Integrity GOAL MET	
	Students averaged 970 (Fall 2016= 980, Spring 2017 = 959) on the RN Exit Hesi Subscore for Client Needs Category: Basic Care and Comfort GOAL MET	
	Students averaged 998 (Fall 2016= 993, Spring 2017 = 1002) on the RN Exit Hesi Subscore for Client Needs Category: Pharm and Parenteral Treatment GOAL MET	
	Students averaged 949 (Fall 2016= 994, Spring 2017 = 904) on the RN Exit Hesi Subscore for Client Needs	

	Category: Reduce Risk Potential GOAL MET	
	Students averaged 1006 (Fall 2016= 988, Spring 2017 = 1023) on the RN Exit Hesi Subscore for Client Needs Category: Physio Adaptation GOAL MET Students averaged 976 (Fall 2016= 969, Spring 2017 = 983) on the RN Exit Hesi Subscore for AACN Curriculum Category: Provider of Care GOAL MET	
3. The student will apply principles of leadership, quality improvement, and client safety to monitor and improve outcomes of nursing care.	 97% (Fall 2016= 100%, Spring 2017= 94%) rated themselves as satisfactorily meeting the program outcome GOAL MET Students averaged 971 (Fall 2016= 921, Spring 2017 = 1021) on the RN Exit Hesi Subscore for Sub-Specialty Area: Leadership GOAL MET Students averaged 955 (Fall 2016= 944, Spring 2017 = 965) on the RN Exit Hesi Subscore for AACN Curriculum Category: Leadership for Quality Care and Patient Safety GOAL MET 	Because all outcomes towards students' demonstration of the program goal of health promotion were met, no changes are recommended at this time. Outcomes for this program goal will be monitored during the next assessment phase.
4. The student will demonstrate professional nursing values of altruism, autonomy, human dignity, integrity and social justice.	 99% (Fall 2016= 100%, Spring 2017= 98%) rated themselves as satisfactorily meeting the program outcome GOAL MET Students averaged 914 (Fall 2016= 889, Spring 2017 = 939) on the RN Exit Hesi Subscore for Specialty Area: Professional Issues Legal/Ethical GOAL MET Students averaged 951 (Fall 2016= 927, Spring 2017 = 975) on the RN Exit Hesi Subscore for AACN Curriculum Category: Professionalism and Professional Values GOAL MET 	Because all outcomes towards students' demonstration of the program goal of health promotion were met, no changes are recommended at this time. Outcomes for this program goal will be monitored during the next assessment phase.
5. The student will provide culturally and spiritually sensitive care.	 94% (Fall 2016= 96%, Spring 2017= 92%) rated themselves as satisfactorily meeting the program outcome GOAL MET Students averaged 1054 (Fall 2016= NA*, Spring 2017 = 1054) on the RN Exit Hesi Subscore for Professional Issues: Cultural/Spiritual GOAL MET Students averaged 1054 (Fall 2016= NA*, Spring 2017 = 1054) on the RN Exit Hesi Subscore for Nursing Concepts Category: Cultural/Spiritual GOAL MET 	Because all outcomes towards students' demonstration of the program goal of health promotion were met, no changes are recommended at this time. Outcomes for this program goal will be monitored during the next

	*The Fall 2016 Exit Exam did not address the provision of culturally and spiritually competent care.	assessment phase.				
	RN-BSN					
1. The student will use effective situational communication.	100% of students rated themselves as satisfactorily meeting the program outcome. GOAL MET. 100% of students scored a minimum of 3 out of 4 on the communication portion of the grading rubric for the RN-BSN portfolio. GOAL MET.	All student outcomes met; no change anticipated.				
2. The student will incorporate best current evidence with clinical expertise and client preferences and values.	 100% of students rated themselves as satisfactorily meeting the program outcome. GOAL MET. 100% of students received a score of 80 or higher on the rubric evaluating the evidence-based practice project. GOAL MET. 100% of students scored a minimum of 3 out of 4 on the evidence based practice portion of the grading rubric for the RN-BSN portfolio. GOAL MET. 	All student outcomes met; no change anticipated.				
3. The student will apply principles of leadership, quality improvement, and client safety to monitor and improve outcomes of nursing care.	 100% of students rated themselves as satisfactorily meeting the program outcome. GOAL MET. 100% of students scored a minimum of 3 out of 4 on the leadership portion of the grading rubric for the RN-BSN portfolio. GOAL MET. 100% of students scored 80 or higher on the rubric for a leadership exercise. GOAL MET. 	All student outcomes met; no change anticipated.				
4. The student will demonstrate professional nursing values of altruism, autonomy, human dignity,	100% of students rated themselves as satisfactorily meeting the program outcome. GOAL MET. 100% of students scored a minimum of 3 out of 4 on the ethics portion of the grading rubric for the RN-BSN portfolio. GOAL MET.	All student outcomes met; no change anticipated.				

integrity and social justice.					
5. The student will provide culturally and spiritually sensitive care.	80% of students 80% of students rubric for the RN	All student outcomes met; no change anticipated.			
		MSN- F	NP		
1. The student will demonstrate effective	Ū	oral Presentation, documentation in EMR, h propriately in paper or electronic health rec Minimum Maximum	ord. (3)	e Answers Scale	This outcome continues to be fully met as faculty review of students indicated that all were on
communication	2.04	2 3		23 1 to 3	track or better for
through collaboration,	Answer Value	Answer Choices N/A: No opportunity, Not observed, or Not	Answer Count	Percent of All Answers	communication skills. All students rated themselves
partnerships, presentations	0	applicable	0	0.00%	as meeting the program outcome. Although his
and scholarly	1	Needs Improvement	0	0.00%	outcome was fully meet, the FNP team is
writing.	2	On track for this level in the FNP Program	22	95.65%	considering the students'
	3	Above Average	1	4.35%	suggestions (see notation in table). Reevaluation of this outcome is planned for the year after next.
	4. Elicits complet diagnoses. (4)	te, appropriate history, with focused pursuit	of information re	levant to probable differential	
	Average Score	Minimum Maximum	Applicabl	e Answers Scale	
	2.09			23 1 to 3	
	Answer Value	Answer Choices N/A: No opportunity, Not observed, or Not		Percent of All Answers	
	0	applicable	0	0.00%	
	1	Needs Improvement	0	0.00%	
	2	On track for this level in the FNP Program	21	91.30%	
	3	Above Average	2	8.70%	

	ooth well-focused physical exam based	l on natient's presenting s	vmntoms and Evidence based
guidelines. (1)	som ven toeuseu physicai exam base	on patient 5 presenting 5	Justoms and Estuciee sased
Average Score	Minimum Maximum	Applicable	
2.09			23 1 to 3
Answer Value	Answer Choices		Percent of All Answers
0	N/A: No opportunity, Not observed, or applicable		0.00%
0	applicable	0	0.00%
1	Needs Improvement	0	0.00%
2	On track for this level in the FNP Prog	ram 21	91.30%
3	Above Average	2	8.70%
Program Outcor	Courses/projects helping students obtain objective me Students stated: Diligence to keep up with deadlines, check all communication outlets, and reach out to our professors as needed were very important	future Students stated:	
	responsibilities needed to	fellow classmates and I on	
	responsibilities needed to accomplish completing this program.		2 2 20
	accomplish completing this	fellow classmates and I on the importance of effective communication and tools to improve our communication skills.	Suggestions include more group projects, writing samples for major papers and

i	with the audience as well. I think providing examples would help future students improve their communication skills on writing assignments.	
	When assessing myself, I realized that I didn't get a great understanding of writing an H&P during the assessment week we did it on campus. I would have liked more practice with that, and more practice interviewing patients.	
Test Statistics ^a Commpost - Commpre		
Z 3.619 ^b Asymp. Sig. (2-tailed) a. Wilcoxon Signed Ranks Test		
program was tested in this analysis. Because the pos	An examination of the changes in score rankings at the program indicated that the students reported a	

2. The student will improve healthcare outcomes using	 Faculty evaluation of students: 5. Completes smooth well-focused physical exam based on patient's presenting symptoms and Evidence based guidelines. (1) 					Faculty rated the students as having achieved this objective at an appropriate level or above. 100% of
scholarly	Average Score	Minimum Maximum	Annlicahl	e Answers Scale		the students indicated that
inquiry and	2.09	2 3	Аррисаы	23 1 to 3		they also felt that they met
analysis of	Answer Value	Answer Choices	Answer Count	Percent of All Answers		this objective.
evidence.	Answei value	N/A: No opportunity, Not observed, or Not	Answer Count	I creent of An Answers		this objective.
eviderice.	0	applicable	0	0.00%		
	0	applicable	0	0.0078		
	1	Needs Improvement	0	0.00%		This outcome was fully met
	1	Reeds improvement	0	0.0070		this year as it was two
	2	On track for this level in the FNP Program	21	91.30%		years ago. Assessment
	2	On the top this level in the TTAT Trogram	21	91.50%		will continue year after
	3	Above Average	2	8.70%		next to see if other items
	5	noove nivelage	2	0.7070		are identified that by the
						students. Students
						suggested having more
	6 Recommends	or orders diagnostic testing, referrals, etc ap	nronriate to exam	findings (2)		information about EBP use
	Average Score	Minimum Maximum	Applicable Answers Scale			in the clinical setting. This
	2.00	2 2	rippiicuor	23 1 to 3		is easily added to the
	Answer Value	Answer Choices	Answer Count	Percent of All Answers		expert panel questions that
		N/A: No opportunity, Not observed, or Not				is part of the course work
	0	applicable	0	0.00%		in the final course of the
						program. These changes
	1	Needs Improvement	0	0.00%		will be made and the
						outcome will be re-
	2	On track for this level in the FNP Program	23	100.00%		evaluated in two years.
		-				
	7. Integrates data	a obtained to formulate probable differentia	l diagnoses. (3)			
	Average Score	Minimum Maximum	Applicabl	e Answers	Scale	
	2.00	2 2		23	1 to 3	
	Answer Value	Answer Choices N/A: No opportunity, Not observed, or Not	Answer Count	Percent of All Answers		
	0	applicable	0	0.00%		
	1	Needs Improvement	0	0.00%		
	2	On track for this level in the FNP Program	23	100.00%		

3	Above Average		0	0.00%	
8. Includes appro Average Score 2.00	opriate pharmacological treatment an Minimum Maximum 2 2	nd writes p	Applicable		Scale 1 to 3
Answer Value	Answer Choices			25 Percent of All Answers	
Answer value			Answer Count	Percent of All Allswers	j
0	N/A: No opportunity, Not observed, or	r Not	0	0.000/	
0	applicable		0	0.00%	
1	Needs Improvement		0	0.00%	
2	On track for this level in the FNP Prog	gram	23	100.00%	
3	Above Average		0	0.00%	
		Idoos stu	dents have for		
	Courses/projects helping students			Faculty	
	obtain objective	future	include in the	response/change	
Program Outcom	0	Students	stated	based on those ideas	
Frogram Outcom	In the first week of pharmacology	Students	stateu:	based on those lueas	
		As much	as I disliked doi	ng	
	class we had to use Epocrates to		as I disliked doin	6	
	look up drug doses and calculate the				
	accurate medication amounts for the		• •		
	specific illness we were creating		e, towards the en	la	
	treatment for. Dr. Coke explained		gram I actually rward to locating	~	
	how to use the program and then		BP research and		
	made it part of the expectation that				
	we use it to base the treatment. Just		ding how it wou	liù	
	this week my preceptor asked me a	affect pat	ient outcomes.		
	question about the guidelines for	I think the	e only suggestion	n I	
	medications in COPD and I could	have to fu		11.1	
	look up the most current using the			to	
	application on my phone.		ding of EBP, is the est speaker that is		
	East days and data to the				
	Each class required electronic		nvolved with EB		
	medical record (EMR) with a		come and present		
	scholarly article summary regarding				
	the treatment plan. This was helpful				
	in developing the skills to find		esearch and its	about how it affects	
	evidence, analyze it, and implement			-	
	it.		any of the SON	can be added to	
	T.1 · 1 .1 · · · · · · · · · ·		e involved in	capstone course and	
EDD	I think this emphasize on guidelines,				
EBP	treatment algorithms, and article	them or a	nother researche	r questions.	

		made it useful and applicable. It wo As much as I disliked doing the EMR's with the research articles in the beginning of the course, towards and s the end of the program I actually their		l on		
	Tes	st Statistics ^a EBPpost-EBPpre				
	program was tes		st score was not no	rmally distributed, a Wi	lcoxin	
	beginning of the statistically signi	program and at the end of the MSN program increase in their ablity to improve here (Z=3.17, p =.002)	ram indicated that	he students' reported a		
3. The student will	17. Communicat Average Score	es with preceptor, office staff, patients and Minimum Maximum	families in a profess Applicable		Scale	Results indicated that students were fully
demonstrate	2.04	2 3		23	1 to 3	meeting expectations on
advanced	Answer Value	Answer Choices	Answer Count	Percent of All Answers		this outcome as they were
leadership and		N/A: No opportunity, Not observed, or Not				two years ago. In addition,
management	0	applicable	0	0.00%		students did not indicate
principles to			0	0.000/		that the SON needed to do
mitigate risk	1	Needs Improvement	0	0.00%		anything to help them
and enhance healthcare delivery systems.	2	On track for this level in the FNP Program	22	95.65%		achieve this outcome except to offer them even more group projects. No real changes are indicated

3	Above Average	1	4.35%		at this time but
	C				assessment will continue
18. Consults an	d seeks assistance from preceptor in a timely,	and respectful apr	propriate manner. (4)		year after next for comparison.
Average Score	Minimum Maximum	Applicable	e Answers	Scale	
2.00 Answer Value	2 2 Answer Choices		23 Percent of All Answers	1 to 3	
Answer value	N/A: No opportunity, Not observed, or Not	Answer Count	refert of All Allswers		
0	applicable	0	0.00%		
1	Needs Improvement	0	0.00%		
2	On track for this level in the FNP Program	23	100.00%		
3	Above Average	0	0.00%		
10 Demonstruct		ag (5)			
Average Score	es initiative to maximize learning opportunitie Minimum Maximum	es. (5) Applicable	e Answers	Scale	
2.00	2 2		23	1 to 3	
Answer Value	e Answer Choices N/A: No opportunity, Not observed, or Not	Answer Count	Percent of All Answers		
0	applicable	0	0.00%		
1	Needs Improvement	0	0.00%		
2	On track for this level in the FNP Program	23	100.00%		
3	Above Average	0	0.00%		
20. Recognizes the roles of othe	own Limitations and respects	2 2	23	1 to 3	
Answer		2 2	Percent o		
	Answer Choices Answer Count		Answers		
	No opportunity, Not observed, ot applicable	0	0.00%		
1 Need	s Improvement	0	0.00%		
2		23	100.00%		
On tr	rack for this level in the FNP				

					-
	Program				
3	Above A	verage	0	0.00%	
Program C	Outcome	Courses/projects helping students obtain objective Students stated: During our advanced pathophysiology course we were required to complete a group project about a disease process commonly seen in the primary care setting.	future Students stated:	Faculty response/change based on those ideas	
Leadership)	practitioner students have been given the greatest opportunity to grow their individual leadership skills has been through the	I feel that more team building exercises or practice in a clinic type setting such as Daybreak would have been helpful before starting clinicals with a preceptor. More group projects or presentations.	Students are suggesting more group activities. Faculty will take this under review and see if additional group activities can be planned.	
	Test S	tatistics ^a			
		LEADpost-			

		LEADpre				
	Z					
	Asymp. Sig. (2-ta	3.601 ^b .000				
	a. Wilcoxon Signe	ed Ranks Test				
	Students' rankin completing the p a Wilcoxin Signe rankings at the b reported a statis	ng of their progress on this program outco program was tested in this analysis. Bec ed Ranks test was used to test for differe beginning of the program and at the end stically significant increase in their ability inciples to mitigate risk and enhance hea	cause the post test s ences. An examinat of the MSN program to demonstrate adv	core was not normally ion of the changes in so n indicated that the stud anced leadership and	distributed, core lents'	
4. The student will model use of legal and		h preceptor/patient/family suggestions for public policy as it relates to family practice ams, etc. (7)				Similar to two year ago, this goal was fully met. Students were rated by
ethical	Average Score	Minimum Maximum	Applicabl	e Answers	Scale	their faculty on obtainment
professional	2.00	2 2			1 to 3	of this outcome during their
standards.	Answer Value			Percent of All Answers	5	clinical rotations. All
	0	N/A: No opportunity, Not observed, or Not applicable	0	0.00%		faculty rated 100% of the students as on track or
	0	applicable	0	0.00%		above average on this
	1	Needs Improvement	0	0.00%		objective. Student
		I				reflections indicated that
	2	On track for this level in the FNP Program	23	100.00%		100% of the students rated
			_			themselves as having
	3	Above Average	0			obtained this outcome and,
						when asked what else the SON could do to help
						future students obtain this
		Before this program I had I th	ink it would have been	n		outcome, a suggestion
			pful to have a discussi			was made to have class
			ard to learn what ethicated	al		discussion in each class so
			emmas other students			that the students could
			re coming in contact w	vith		work through and discuss
	Ethics	legal and ethical role of the in the	heir clinical site.		.11.1	an ethical solutions. The
		FNP with confidentiality for	ing is a difficult artes	Great suggestion and		FNP faculty thought this
		minors and their rights, and Eth documentation and to r	each both personally a		ity.	was a great suggestion and plans are to increase
		documentation and to r	each bour personally a	allu		and plans are to increase

		me about the rights of minors including healthcare options available without the consent of a parent and how to handle these situations in	professionally and I think it is very important to discuss it to help us provide the best care for each patient. I believe providing examples of potential ethical dilemma in the first few courses of the program would be more beneficial for the students as to transition from a hospital- based setting to primary care setting.	s e s	these opportunities regarding ethical, medical problems which may be faced by the FNP students.
	professional standards ove Test Statistic	er the course of the NP prog		a their use of legal and ethical	
	Z Asymp. Sig. (2-tailed) a. Wilcoxon Signed Ranks T	3.022 ^b .003 Test			
	completing the program v a Wilcoxin Signed Ranks rankings at the beginning	progress on this program ovas tested in this analysis. test was used to test for dir of the program and at the nificant increase in their mo	Because the post test sco fferences. An examination end of the MSN program in	re was not normally distributed, of the changes in score indicated that the students'	
5. The student will partner with the client in the provision of compassionate and coordinated care, based on respect for the	Compassionate and Coordinated Care 100% of 2017 Graduates stated they fully achieved this program objective	The parts of this program that helped become more proficient in this were the clinical experiences at Daybreak, clinicals in different office settings throughout the program, and the class time in Adult 1&2, pediatrics and women's	I feel that the SON did an excellent job presenting cultural diversity in the classroom as well as providing opportunities I through clinical experiences such as Daybreak.	Most students felt we were meeting this objective and did not have suggestions. One student did suggest that we assign them a group (cultural or other) to research from class to class so that they gain better understanding of the special	This outcome was fully met again this year. The students were rated by their faculty as being on track or above in communicating in a professional manner utilizing culturally sensitive and ethical approach. The

client's preferences, values and needs.	provide opport courses in the I how the factors general Throug portion instruct various related groups several various such as Africar feedbac conside their ov opened of cultu had nev	Women's health ed me with unities to complete I would recommend du a in caring for patients the course of the progr GTB community and that every student is eir needs and risk assigned a specific cult differ from the religious group to resea population. and present to their classmates. hout the academic of the classes, the cors did report on key considerations to various cultural Additionally, we had students from cultural backgrounds Indian, Asian and that gave excellent ek on specific cultural erations related to wn backgrounds and my mind to aspects aral competency that I ver considered.	am, discussed in our team meetings. ture or	students rated themselves as all having obtained the objective and offered few suggestions on how we as a school could help them obtain this outcome in the future. This outcome will be evaluated again in two years to determine if changes are needed.
	Test Statistics ^a Partner	post		
	Partne			
	Ζ	2.309		
	Asymp. Sig. (2-tailed)	.021		
	a. Wilcoxon Signed Ranks Test			
	completing the program was test a Wilcoxin Signed Ranks test wa rankings at the beginning of the p reported a statistically significant	as on this program outcome at the start of ed in this analysis. Because the post tes s used to test for differences. An examin program and at the end of the MSN progr increase in the their provision of compas nces, values and needs (Z=2.309, $p < .05$	t score was not normally distributed, ation of the changes in score am indicated that the students sionate and coordinated care, based	
		MSN- PMHNP		

1. The student will demonstrate effective communication through collaboration, partnerships, presentations and scholarly writing.	Standardized patient encounters, intake assessment and hx, post encounter notes: 100% are on track for this level in the program.	Based on the faculty evaluation, the PsychNP students are on track for this program goal.
2. The student will improve healthcare outcomes using scholarly inquiry and analysis of evidence.	Care priorities during SP encounters, and case reports: 100% are on track for this level in the program.	Based on the faculty evaluation, the PsychNP students are on track for this program goal.
3. The student will demonstrate advanced leadership and management principles to mitigate risk and enhance healthcare delivery systems.	Observation in clinical and standardized patient encounters: 100% are on track for this level in the program.	Based on the faculty evaluation, the PsychNP students are on track for this program goal.
4. The student will model use of legal and ethical professional standards.	Clinical observations and standardized patient encounters: 100% are on track for this level in the program.	Based on the faculty evaluation, the PsychNP students are on track for this program goal.
5. The student	Observations in the clinical setting and during standardized patient encounters: 93% are on track for	Based on the faculty

will partner with the client in the provision of compassionate and coordinated care, based on respect for the client's preferences, values and needs.	communicating with patients in a professional manner utilizing culturally sensitive and ethical approach; 100% are on track for the remainder of this level in the program.	evaluation, the PsychNP students are on track for this program goal.
	MSN- Nurse Educator	
1. Students will demonstrate effective communication in their interactions with others, partnerships, presentations and scholarly writing.	 Achieved100% of students rated themselves as fully met (67%) or "met beyond expectations (33%) on self evaluation of achieving this outcome. Met Achieved80% of students scored 80% or higher on rubric evaluating Course Paper Presentation and Peer Review (midpoint measure) Achieved-100% of preceptor evaluations rated students at a 4 or 5 on this measure, with an average score of 4.625. Met Achieved-100% of students scored 85% or higher on portfolio rubric 	Results indicate that students are able to demonstrate effective communication to include orally and written communication. Last cycle recommendation was to add a mid-point measure which was added and achieved for this criteria. Improvement in portfolio rubric to provide outcome specific numerical data is planned for next cycle.
2. Students will improve healthcare outcomes using scholarly inquiry and analysis of evidence.	 Achieved-100% of students completing survey rated themselves fully met or higher on this outcome. Met Achieved-100% of students scored 80% or higher on rubric evaluating clinical teaching project to improve healthcare outcomes using scholarly inquiry and analysis of evidence. Met Achieved-100% of preceptors rated students at a 4 or 5 on this outcome. Met Achieved, more specific rubric criteria needed to evaluate scholarly inquiry and analysis of evidence 	Both midpoint and final program measures were achieved for this measure. More specific measure will be implemented for portfolio rubric.

3. Students will demonstrate advanced leadership and management principles to mitigate risk and enhance healthcare delivery systems.	 Achieved-100% of students completing survey (3 of 5) rated themselves fully met on this outcome. Met Achieved-100% of students scored 85% or higher on portfolio rubric. Met 	Graduates demonstrate advanced leadership and management skills based on the outcome measures. Implementation of improved portfolio evaluation rubric will provide a more specific measure for each outcome.
4. Students will model use of legal and ethical professional standards.	 Achieved-100% of students completing survey (3 of 5) rated themselves fully met or higher on this outcome. Met Achieved-100% of students scored a minimum of 80% on development of unfolding case study related to legal/ethical aspects of the nurse educator role. Met Achieved-100% of students were rated a minimum of a 3 on a scale of 1-5 on this outcome. Met Achieved-100% of students scored 85% or higher on portfolio rubric. Met 	Outcome has been achieved, however, implementation of a revised portfolio rubric will improve this measure by specifically measuring evidence of achieving legal/ethical professional standards.
5. Students will partner with the client in the provision of compassionate and coordinated care, based on respect for the client's preferences, values and needs.	 Achieved-100% of students completing survey (3 of 5) rated themselves fully met or higher on this outcome. Met Achieved-100% of students scored 85% or higher on portfolio rubric. Met 	Results support student achievement of this outcome. Modifications will be made to the portfolio analysis rubric to improve individual outcome measurement.
	DNP	
1. The student will model exemplary communication	100% of students will rated themselves as satisfactorily meeting the program outcome 100% of students successfully defended their translational project	Outcome fully met; on track or better. Will continue to monitor for compliance and will look for ways to improve.
through	100% of students scored an 83% or higher on the final portfolio evidencing achievement of DNP Program Outcomes and	the lock for ways to improve.

collaboration, partnerships, presentations, and scholarly writing.	DNP Essentials	
2. The student will transform healthcare outcomes through evidence and scholarly inquiry.	100% of students rated themselves as satisfactorily meeting the program outcome 100% of students successfully defended their translational project by Jan. 2017 100% of students scored an 83% or higher on the final portfolio evidencing achievement of DNP Program Outcomes and DNP Essentials	Outcome fully met; on track or better. Will continue to monitor for compliance and will look for ways to improve.
3. The student will exhibit leadership to create effective healthcare delivery systems.	100% of students rated themselves as satisfactorily meeting this program outcome 100% of students successfully defended their DNP translational project by Jan 2017 100% of students scored an 83% or higher on the final portfolio (all made an A) evidencing achievement of DNP Program Outcomes and DNP Essentials	Outcome fully met; on track or better. Will continue to monitor for compliance and will look for ways to improve.
4. The student will exemplify ethics as a foundation for practice and risk management.	 100% of students rated themselves as satisfactorily meeting this program outcome 100% of students successfully defended their translational project by Jan. 2017. 100% of students scored an 83% or higher on the final portfolio evidencing achievement of DNP Program Outcomes and DNP Essentials 	Outcome fully met; on track or better. Will continue to monitor for compliance and will look for ways to improve.
5. The student will use cultural expertise to develop HC models that influence universal health seeking/ Health Promotion behaviors.	 100% of students rated themselves as satisfactorily meeting this program outcome 100 % of students successfully defended their DNP translational project by Jan. 2017. 100% of students scored an 83% or higher on the final portfolio evidencing achievement of DNP Program Outcomes and DNP Essentials 100% of students scored an 83% or higher on the vulnerable populations paper which included cultural expertise content in the Vulnerable Populations course 	Outcome fully met; on track or better. Will continue to monitor for compliance and will look for ways to improve.

CCNE Standard IV-F Faculty Outcomes

Teaching	Scholarship	Service
Goal: 80% of teaching faculty will score at or	80% of tenure-track faculty will engage in scholarly	80% of faculty will serve on a Georgia College,
above the Georgia College mean on the SRIS.	activities.	CoHS, or SON committee.
Results: 11 out of 16 (68.75%) scored at or above the Georgia College mean on the SRIS. (Did not meet this goal).	 100% of APRN faculty will maintain certification. Results: 15 out of 18 (83.33%) T/T faculty engaged in scholarly activities. Total # for all faculty for 2016-2017 was: Grants = 10 Presentations = 23 Articles = 16 Chapters 8 10 out of 10 (100%) APRN Faculty maintained certification. 	Results: 24 out of 24 (100%) of faculty both lecturer and T/T served on a Georgia College, CoHS, or SON committee.