



Evaluation Team Report on the Accreditation Review of the Master's Degree Program in Nursing at United States University

Commission on Collegiate Nursing Education

On-Site Evaluation: September 8-10, 2014

Evaluation Team:

Lynda J. Davidson, PhD, RN, Team Leader

Christy P. Davidson, DNP, RNC-OB

Joshua M. Hamilton, DNP, RN-BC, NP-C, CNE

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Introduction

This report presents the findings of the evaluation team from the Commission on Collegiate Nursing Education (CCNE), the accrediting body responsible for the evaluation of baccalaureate and graduate nursing programs, regarding the Master of Science in Nursing (MSN) program at United States University and its compliance with CCNE's standards for accreditation. The MSN program is being reviewed for initial accreditation.

United States University (USU) is a private, proprietary institution that has evolved from a small non-profit establishment known as InterAmerican College (IAC), which was founded in 1997. This non-profit college's mission was to provide educational opportunities to working professionals, Latinos, and educated immigrants to increase bilingual capacity in education and healthcare in southern California. Due to fiscal exigencies and at the suggestion of its regional accreditor, Western Association of Schools and Colleges (WASC), the institution became a for-profit institution in 2007 and received approval and accreditation from WASC in 2009. In April 2010 the college was renamed United States University, and in May 2011 the campus was moved to Chula Vista, California.

Currently, USU has four colleges (business, health sciences, nursing, and education) and an enrollment of 412 students, which increased from 239 students in Spring 2013. USU holds a Carnegie classification of Bac/A&S.

In 2012, USU underwent a major administrative reorganization, which included hiring a new president in July 2012. Following a WASC site visit in May 2013, the university was placed on probation, and this status will be reviewed in June 2015. The most recent WASC accreditation action taken was approval of a structural change regarding new ownership in May 2014.

USU's MSN program prepares family nurse practitioners (MSN-FNP), advanced practice nurse administrators (MSN-Administration), and advanced practice nurse educators (MSN-Education). The MSN-Administration and MSN-Education tracks are offered in a completely online format and the MSN-FNP track is offered in a partially online format.

The College of Nursing (CON) opened in 2009, offering a two-level entry-level master's (ELM) track, which stopped enrolling students in 2013. In 2010, the university began to offer the WASC-approved MSN-FNP track. In Spring 2011, the online MSN-Administration and MSN-Education tracks were added. At present there are 85 students enrolled in the MSN program: 59 students in the MSN-FNP track, 13 students in the MSN-Administration track, and 13 students in the MSN-Education track. There are currently five full-time faculty and 13 part-time faculty in the CON. The MSN-FNP track was granted continued approval by the California Board of Registered Nursing (BRN) in November 2013 after a deferred action in February 2013 and a subsequent follow-up visit in July 2013.

The CON has had a succession of nine deans/directors and faculty over the last 6 years.

The MSN-FNP track encountered difficulties in meeting the BRN rules and regulations. Additionally, the MSN-FNP track had difficulty complying with *The Essentials of Master's Education in Nursing (Master's Essentials)* [American Association of Colleges of Nursing (AACN), 2011] and the *Criteria for Evaluation of Nurse Practitioner Programs (NTF Criteria)* [National Task on Quality Nurse Practitioner Education (NTF), 2012]. As a result, BRN and outside consultants were utilized by the program. The current dean was hired in June 2014.

The team was afforded full cooperation in its efforts to assess the MSN program and to confirm the self-study document. The team would like to take this opportunity to thank the program for its hospitality and consideration during the on-site evaluation.

As part of the review, the team verified that the program afforded the opportunity for constituents to submit third-party comments directly to CCNE, in accordance with CCNE procedures. One letter was received, and this input was considered in the evaluation of the program.

Meeting of CCNE Standards

While visiting the campus in Chula Vista, California, the evaluation team had an opportunity to interview school and university officials; program faculty, students, and alumni; and community representatives. The team reviewed information in the self-study document and in the resource room, as well as other materials provided at its request. In addition, the team also observed classroom and clinical activities. The following assessments were made regarding compliance with the *CCNE Standards for Accreditation of Baccalaureate and Graduate Nursing Programs* by the master's degree program in nursing at the institution.

Standard I Program Quality: Mission and Governance

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

This standard is met for the master's degree nursing program.

I-A. The mission, goals, and expected program outcomes are:

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

Elaboration: The program's mission statement, goals, and expected program outcomes are written and accessible to current and prospective students, faculty, and other constituents. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. A mission statement may relate to all nursing programs offered by the nursing unit or specific programs may have separate mission statements. Program goals are clearly differentiated by level when multiple degree/certificate programs exist. Student outcomes may be expressed as competencies, objectives, benchmarks, or other terminology congruent with institutional and program norms.

The program identifies the professional nursing standards and guidelines it uses. CCNE requires, as appropriate, the following professional nursing standards and guidelines:

- *The Essentials of Baccalaureate Education for Professional Nursing Practice* [American Association of Colleges of Nursing (AACN), 2008];
- *The Essentials of Master's Education in Nursing* (AACN, 2011);
- *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006); and
- *Criteria for Evaluation of Nurse Practitioner Programs* [National Task Force on Quality Nurse Practitioner Education (NTF), 2012].

A program may select additional standards and guidelines.

A program preparing students for certification incorporates professional standards and guidelines appropriate to the role/area of education.

An APRN education program (degree or certificate) prepares students for one of the four APRN roles and in at least one population focus, in accordance with the Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (July 2008).

Compliance Concern?

Master's:

No

Rationale:

The university and CON have recently revised the mission statement and master's program learning outcomes, respectively. In interviews with the team, academic leaders and faculty were able to articulate and explain the consonance between institutional and programmatic missions and student learning outcomes.

Documentation of these connections is readily available in the self-study document.

The dean identified the *Master's Essentials*, BRN's California Article 8 §1480-1485, and WASC standards as the professional standards and guidelines in use by the program. The program director for the MSN-FNP track also confirmed that the track incorporates the *Nurse Practitioner Core Competencies (NONPF Core Competencies)* [National Organization of Nurse Practitioner Faculties (NONPF), 2011] and the *NTF Criteria*. These standards are also referenced in the self-study document.

The program director for the MSN-Administration and MSN-Education tracks confirmed the incorporation of the *Nurse Executive Competencies* [American Organization of Nurse Executives (AONE), 2005] in the MSN-Administration track, but did not identify specific competencies or professional standards for the MSN-Education track. No further discussion or documentation was available for review on site.

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

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

Elaboration: There is a defined process for periodic review and revision of program mission, goals, and expected student outcomes. The review process has been implemented and resultant action reflects professional nursing standards and guidelines. The community of interest is defined by the nursing unit. The needs and expectations of the community of interest are reflected in the mission, goals, and expected student outcomes. Input from the community of interest is used to foster program improvement.

Compliance Concern?	Master's:	No
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Rationale:

USU leadership recently met to review and revise the mission, vision, and institutional learning outcomes. The CON continues to discuss and revise program learning outcomes for the graduate program. The dean reported that a revision occurred as recently as September 7, 2014. The updated program learning outcomes reflect an increasing awareness and incorporation of the *Master's Essentials*, and additional revisions have been geared toward a common set of core competencies, augmented with relevant outcomes for specific specializations (e.g. FNP, Administration and Nursing Education). The dean stated in an interview with the team that the mission, goals, and expected student outcomes will be reviewed annually.

In meetings with the team, the dean and faculty were able to clearly articulate the characteristics and needs of the community of interest. Given the unique nature of faculty practice and the organic feedback between faculty and the student population, the college incorporates the needs of its community of interest into its mission and learning outcomes. Feedback was only recently solicited from area employers and survey data were not sufficient to generate a robust analysis of employers' needs. Through anecdotal evidence, the CON determined that employers' needs include practitioners who are multi-lingual and culturally competent, and these emphases are evident in the program learning outcomes. The dean stated that she plans to form a program advisory committee to aid in this endeavor.

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.

Elaboration: The nursing unit identifies expectations for faculty, whether in teaching, scholarship, service, practice, or other areas. Expected faculty outcomes are congruent with those of the parent institution.

Compliance Concern? **Master's:** **No**

Rationale:

The expected faculty outcomes for USU faculty are clearly identified in the USU faculty handbook. Expected faculty outcomes are available in the self-study document and were reviewed by the team in documents provided on-site. During discussions with the team, CON administrators and faculty confirmed that they will comply with the expected workload and faculty governance expectations of the university, which were developed in Fall 2014. According to the handbook, faculty activities are classified under five domains: teaching/advising, governance, scholarship, professional service, and community service. Sixty percent of faculty workload is allocated to teaching/advising, 20% of faculty workload is allocated to governance, and 20% of faculty workload is allocated to scholarship/creative activities and service activities. The USU faculty handbook also clearly explains the promotion expectations for full-time faculty. In meetings with the team, the president and chief academic officer confirmed that a formal process for evaluation of full-time faculty was approved by the Faculty Senate on June 26, 2014. The formal faculty evaluation process will provide information to faculty about policies regarding reappointment, promotion, and merit which will include a required portfolio. A process to review part-time and adjunct faculty will be developed. Based on a review of curricula vitae (CVs) available in the resource room, the team confirmed that nursing faculty actively participate in scholarly activities, as is expected of faculty at the university.

I-D. Faculty and students participate in program governance.

Elaboration: Roles of the faculty and students in the governance of the program, including those involved in distance education, are clearly defined and promote participation. Nursing faculty are involved in the development, review, and revision of academic program policies.

Compliance Concern? **Master's:** **No**

Rationale:

In discussions with students, faculty, CON administrators, and the dean, the team verified that faculty and students are afforded the opportunity to participate in CON governance. Active participation on the general nursing faculty committee and the USU Faculty Senate is expected of faculty. The dean confirmed that additional committees have been created and implemented. The first of these committees is the Nursing Curriculum Committee, which met for the first time on September 6, 2014. The dean also chaired a faculty curriculum retreat and strategic planning meeting for CON directors, full-time faculty, and staff. The dean and faculty confirmed that students will be added as members to the Nursing Curriculum Committee and additional

committees, as appropriate. The dean maintains an open-door policy and encourages students to share concerns as they arise until a formal mechanism for governance is developed and implemented. In meetings with the team, faculty stated that they understand their opportunities and obligations to participate in CON governance at all levels. In meetings with the team, students also stated that they are invited to participate in the governance of the CON, feel comfortable voicing concerns, and feel that their needs are addressed in a timely fashion. One example was a cohort of MSN-FNP students that informed the CON that they felt more comfortable attending face-to-face classes rather than learning through the online format. As a result of this cohort's request, classes transitioned back to face-to-face.

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

Elaboration: References to the program's offerings, outcomes, accreditation/approval status, academic calendar, recruitment and admission policies, grading policies, degree/certificate completion requirements, tuition, and fees are accurate. Information regarding licensure and/or certification examinations for which graduates will be eligible is accurate. For APRN education programs, transcripts or other official documentation specify the APRN role and population focus of the graduate.^{1,2}

If a program chooses to publicly disclose its CCNE accreditation status, the program uses either of the following statements:

"The (baccalaureate degree in nursing/master's degree in nursing/Doctor of Nursing Practice and/or post-graduate APRN certificate) at (institution) is accredited by the Commission on Collegiate Nursing Education, One Dupont Circle, NW, Suite 530, Washington, DC 20036, 202-887-6791."

"The (baccalaureate degree in nursing/master's degree in nursing/Doctor of Nursing Practice and/or post-graduate APRN certificate) at (institution) is accredited by the Commission on Collegiate Nursing Education (<http://www.aacn.nche.edu/ccne-accreditation>)."

¹ *Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education* (July 2008).

² *Criteria for Evaluation of Nurse Practitioner Programs* (National Task Force on Quality Nurse Practitioner Education, 2012).

Compliance Concern? **Master's:** **No**

Rationale:

Documents and publications reviewed by the team online and on site were accurate. The dean stated that all publications are updated yearly. The documents on the website, including documents about accreditation status, were accurate. Students confirmed to the team that they receive notification of programmatic and other changes through email. The dean has also started a newsletter, which she plans to distribute once per month. The first newsletter provided information regarding all programs, including information about accreditation and faculty plans for reviewing the curriculum of the master's program.

However, during an interview with the team, eight MSN-FNP graduates from the last two years all stated that they had been told by a former dean that after the master's program becomes accredited, accreditation would be retroactive and the graduates would be eligible to take a certification exam. The graduates were not aware that CCNE accreditation is not retroactive.

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

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

Elaboration: Academic policies include, but are not limited to, those related to student recruitment, admission, retention, and progression. Policies are written and communicated to relevant constituencies. Policies are implemented consistently. Differences between the nursing program policies and those of the parent institution are identified and support achievement of the program's mission, goals, and expected student outcomes. A defined process exists by which policies are regularly reviewed. Policy review occurs and revisions are made as needed.

Compliance Concern?

Master's:

No

Rationale:

Currently, the academic program policies for the CON are the same as those of the university. Policies are located in: the USU catalog, which was revised in Spring 2014; the USU faculty handbook, which was revised in Fall 2014; and the MSN-FNP student handbook, which was revised in 2014. The dean stated that the catalog and website are reviewed annually to update information. In meetings with the team, full-time faculty confirmed that part of the prescribed faculty role includes developing, updating, and disseminating any program-unique policies and procedures necessary to ensure both program excellence and congruence between the CON and USU.

The dean stated that she is currently working on a nursing-specific policy regarding clinical placement. Once it is written, the policy will be presented to the full faculty for discussion, revision, and adoption. Following adoption, the new policy will be shared with students via email and on the website. The dean also stated that she will be starting a policy committee over the next year to address CON-specific policies.

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.

This standard is met for the master's degree nursing program.

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

Elaboration: The budget enables achievement of the program's mission, goals, and expected outcomes. The budget also supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of qualified faculty and staff. Physical space is 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) are sufficient to achieve the program's mission, goals, and expected outcomes.

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

Compliance Concern? Master's: No

Rationale:

The team reviewed USU's three-year budget in the on-site resource room. The dean, president, and chief financial officer work collaboratively to develop and approve the budget, noting any exceptions. In interviews with the team, the dean and faculty reported that funds are sufficient to support acquisition and maintenance of facilities, equipment, and supplies. The dean and faculty stated that the CON has no budgetary constraints that adversely affect achievement of the program's mission, goals, and expected outcomes. Faculty have been encouraged to develop a "wish list" for equipment and supplies to inform subsequent capital budgeting. The dean stated that adjunct and part-time salaries are below the national average; however, in conversations with the team, full-time faculty stated that their salaries are competitive. The institution recently recruited and retained multiple full-time faculty, most of whom started within 60 days of the on-site evaluation.

During a facility tour, the team noted a bank of office cubicles that are used by the faculty. There are nearby conference spaces that provide private meeting spaces for faculty and students. The dean also reported that there is a plan to move full-time faculty into private offices. However, in a meeting with the team, the director of facilities stated that the current configuration of the facility may prove to be a limitation in moving full-time faculty into private offices, particularly as the size of the faculty grows. The skills lab, computer lab, and classroom spaces are of sufficient size and appointment to achieve the program mission, goals, and expected outcomes.

In interviews with the team, members of the Board of Trustees and the school owner discussed the recent change in university ownership and the subsequent inflow of more than \$20 million in financial support to the institution. The board members and owner voiced dedication to the mission and vision of the university and pledged additional fiscal support to bridge any shortfalls that may occur before the university reaches a break-even (or revenue-generating) position in the near term.

In discussions with the team, the faculty and administrators were unable to articulate a systematic plan to review the adequacy of program resources. There was no related supporting documentation available in the resource room for the team to review.

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

Elaboration: Academic support services (e.g., library, technology, distance education support, research support, admission, and advising services) are adequate for students and faculty to meet program requirements and to achieve the mission, goals, and expected program outcomes. There is a defined process for regular review of the adequacy of the program's academic support services. Review of academic support services occurs and improvements are made as appropriate.

Compliance Concern? Master's: No

Rationale:

In interviews with the team, two admissions advisors for the CON articulated the process by which prospective students are pre-interviewed, determined to be qualified, and presented to the college admissions committee for consideration. A newly-created student advocate role provides assistance with progression-related tasks and issues, including advising/registration, referral for additional remediation or tutoring through writing support (Smarthinking[®]), and counseling related to college policies and procedures. In interviews with the team, students indicated that they use available writing support services. The college works closely with the student advocate to track student requirements via American DataBank[®]. Accommodation requests related to the Americans with Disabilities Act (ADA) are addressed by the university's director of human resources. The financial aid director presented information about funding options for students, including federal loans, a university nursing scholarship, and an interest-free flexible payment option. In meetings with the team, the librarian discussed her role in student orientation; development of the evidence-based project; and support for the literature review process, citations, and writing. She also provides one-on-one training and assistance to students via phone meetings and WebEX[®]. Students expressed a high level of satisfaction with the library and librarian. During interviews with student support services staff, the team also learned that USU recently added an online bookstore. USU emphasizes the use of electronic references and e-books. While USU does not offer career services per se, there is a page on the university website that offers useful tips and links to related information and opportunities. Smarthinking[®] also offers students critical review of their resumes and cover letters.

The college recently transitioned from a locally-developed learning management system (LMS) to Pearson's OpenClass, and the response from users has been favorable. USU offers Tier I support during normal operating hours, and Pearson offers 24-hour support for the LMS.

USU surveys graduates annually regarding satisfaction with support services (2013 and 2014 survey results were reviewed by the team on-site). In interviews with the team, current students stated that USU uses feedback to streamline processes and policies in an effort to improve the student experience. The move from the locally-developed LMS to Pearson OpenClass is one example of a change that was a result of evaluation data analysis.

II-C. The chief nurse administrator:

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

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 perceived by the communities of interest to be an effective leader of the nursing unit. The program provides a rationale and a plan to come into compliance if the chief nurse administrator does not hold a graduate degree in nursing and a doctoral degree (if applicable).

Compliance Concern?

Master's:

No

Rationale:

The team reviewed the dean's CV in the on-site resource room, and through interviews with the team, confirmed her relevant education, skills, and abilities that qualify her to serve as the CON's chief nurse administrator. The dean has a Doctor of Philosophy (PhD) in nursing education and she has been involved in post-secondary education since 1976. She maintains a clinical advanced practice in pediatrics. She also has experience in program/curriculum design, consultation, and leadership in professional organizations. Since her arrival at USU in July 2014, the dean has focused on curricular redesign, implementation of technology, and building trust with students. She is well-respected by the president, chief academic officer, faculty, staff, and students.

In interviews with the team, faculty described the dean as an energetic, student-centered, and visionary leader. They commented on her accessibility, integrity, and inclusiveness. They also expressed admiration for her understanding and compassion for the students at USU.

II-D. Faculty are:

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

Elaboration: The full-time equivalency (FTE) of faculty involved in each program is clearly delineated, and the program provides to CCNE its formula for calculating FTEs. The overall faculty (whether full-time or part-time) is sufficient in number and qualifications to achieve the mission, goals, and expected program outcomes. Faculty-to-student ratios ensure 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 rationale 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.

Compliance Concern?

Master's:

No

Rationale:

In interviews with the team, faculty were unable to articulate a specific workload policy, stating that they typically negotiate their teaching loads with the dean. Factors that determine individual workload include appointment type (core, affiliate, adjunct, or visiting), team teaching structure, low section enrollment, and administrative responsibilities. The university workload policy is located in the newly-approved (but not yet implemented) USU faculty handbook, which was reviewed by the team in the resource room.

The team reviewed faculty workload for Fall 2014, teaching assignments, and faculty qualifications (including current licenses, certifications, continuing professional education, and CVs) in the resource room. Specific faculty-to-student ratios are not reported in the self-study document or in in supplementary documents, and were not presented verbally by college personnel during on-site interviews.

The team reviewed the six full-time faculty files, including the dean's. Three faculty are PhD-prepared, and three faculty are Doctor of Nursing Practice (DNP)-prepared. Two are family nurse practitioners, one is an adult-gerontology nurse practitioner, one is a pediatric nurse practitioner, one is a certified nurse administrator, and one is an emergency department clinical nurse specialist. None of the full-time faculty possess a certified nurse educator credential; however, the team reviewed evidence that faculty participate in professional development activities related to graduate nursing education. The program directors are credentialed in the appropriate advanced practice population focus for their respective tracks. The team also

reviewed 11 adjunct instructor files. The adjunct faculty's academic and advanced practice credentials reflect sufficient preparation to address the major concepts included in the MSN-FNP and MSN-Administration coursework.

In discussions with the team, the dean identified challenges related to recruiting qualified faculty to teach obstetrics and geriatric content; who can work well with the unique student population; and who can meet the Friday, Saturday, and evening scheduling requirements of the MSN-FNP track. She stated that she is actively working to increase the size of the qualified, available pool of adjunct faculty.

II-E. Preceptors, when used by the program 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.

Elaboration: The roles of preceptors with respect to teaching, supervision, and student evaluation are:

- *clearly defined;*
- *congruent with the mission, goals, and expected student outcomes; and*
- *congruent with relevant professional nursing standards and guidelines.*

Preceptors have the expertise to support student achievement of expected outcomes. Preceptor performance expectations are clearly communicated to preceptors and are reviewed periodically. The program ensures preceptor performance meets expectations.

Compliance Concern?

Master's:

No

Rationale:

The team reviewed policies specific to the MSN-FNP track regarding preceptor selection and qualifications in the self-study document and in documents available in the resource room. In meetings with the team, the director of the MSN-FNP track confirmed that the program assesses preceptor qualifications on an ongoing basis. Through a review of preceptor CVs, the team confirmed that preceptor qualifications are appropriate in regards to students' (who are placed with preceptors in the clinical field) programs of study. Preceptors confirmed that ongoing contact with CON faculty is maintained via telephone conversations and personal site visits throughout the term. The preceptor handbook and clinical manual clearly explain the process for identifying, screening, and qualifying potential preceptors. The dean stated that the CON has no difficulties with preceptor identification and selection. There are clear explanations and guidelines of preceptor, student, and clinical faculty responsibilities, including those of the full-time clinical placement coordinator (a new position within the CON). These guidelines are congruent with relevant professional guidelines (e.g., *NTF Criteria*). The handbook and manual also clearly explain, and offer examples of, the process by which preceptors and clinical sites are evaluated by CON faculty and students; however, aggregate data were not available for review. These policies are specific to the MSN-FNP track.

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.

Elaboration: Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role and in support of the mission, goals, and expected faculty outcomes. For example:

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

Compliance Concern?

Master's:

No

Rationale:

In interviews with the team, the dean and faculty mentioned a strong commitment to faculty teaching and practice. However, there is not a clearly established policy or statement of commitment to a specific faculty role emphasis, and no faculty job description was available for review on-site. Written documentation indicates that all nursing faculty are currently ranked as instructors; however, the new full-time faculty stated that they are currently ranked higher than instructor according to their education and experience. This assertion was confirmed by the dean. Existing faculty will be evaluated and ranked over the next year according to the guidelines set out in USU's new faculty handbook.

Faculty mentioned that they feel well-supported in their roles as teachers and practicing clinicians. The team reviewed anecdotal reports of institutional support for faculty travel to specific conferences (particularly to conferences that are student-centered). However, in the absence of an implemented promotion and tenure policy, faculty were not able to clearly articulate their professional roles nor the university's expectations for engagement in service and scholarship activities in order to maintain and/or advance their standing within the institution. The dean indicated there is a budget request for additional faculty development funds in the 2015-2016 fiscal year, and this request was confirmed during the team's document review. The team did not find written policies to confirm the availability and extent of support for scholarship, research or service endeavors. Although it was not finalized at the time of the on-site evaluation, the dean has requested resources to be available to the CON to facilitate faculty scholarship and development.

A newly-approved university faculty handbook was reviewed by the team in the resource room. This document outlines the faculty ranking and evaluation process, including an annual review of faculty portfolios, which serves as the primary evidence for faculty engagement in teaching, scholarship, and service. Each faculty member submits a portfolio that is reviewed annually by the dean, who prepares a letter of evaluation to support reappointment (or non-reappointment). The faculty member may also pursue promotion and/or merit increase by submitting the portfolio to USU's academic promotion committee. At the time of the site evaluation, the handbook had not yet been disseminated to the faculty.

Standard III

Program Quality: Curriculum and Teaching-Learning Practices

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

This standard is met for the master's degree nursing program.

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.

Elaboration: Curricular objectives (e.g., course, unit, and/or level objectives or competencies as identified by the program) provide clear statements of expected learning that relate to student outcomes. Expected outcomes relate to the roles for which students are being prepared.

Compliance Concern?

Master's:

No

Rationale:

The mission of the CON is to “.....to develop diverse lifelong learners grounded in Caring Science and prepared to be innovative leaders in a dynamic healthcare system.” The MSN program's statements of expected student outcomes are consistent with the CON's mission and goals. In meetings with team, the dean, associate dean, and faculty confirmed the process of faculty involvement in the current programmatic review/revision process. Meeting minutes reviewed by the team from the faculty curriculum retreat and strategic planning meeting held September 6, 2014, provide evidence that changes identified by various committees are being incorporated into curricular development.

Through a review of materials in the resource room and interviews with faculty, students, and a preceptor, the team confirmed that the MSN curricula in all three tracks are designed to foster student achievement of program outcomes.

In addition, during the on-site evaluation, the team reviewed an overview of a CON evaluation plan, including a 360-degree evaluation of data, which will include an annual review of the program learning outcomes.

III-B. Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

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

- Graduate-entry program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) and appropriate graduate program standards and guidelines.
- DNP program 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 nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).
- Post-graduate APRN certificate programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).

Elaboration: Each degree/certificate program incorporates professional nursing standards and guidelines relevant to that program, area, role, population focus, or specialty. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.

APRN education programs (degree and certificate) (i.e., Clinical Nurse Specialist, Nurse Anesthesia, Nurse Midwife, and Nurse Practitioner) incorporate separate comprehensive graduate level courses to address the APRN core, defined as follows:

- *Advanced physiology/pathophysiology, including general principles that apply across the lifespan;*
- *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
- *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.

Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for students enrolled in post-master's DNP programs who hold current national certification as advanced practice nurses, unless the program has deemed this necessary.

Master's programs that have a direct care focus but are not APRN education programs (e.g., nursing education and Clinical Nurse Leader), incorporate graduate level content addressing the APRN core. They are not required to offer this content as three separate courses.

Compliance Concern? Master's: Yes

Rationale:

The professional standards used to guide the development and implementation of the MSN-FNP, MSN-Administration, and MSN-Education tracks is the *Master's Essentials*. The MSN-FNP track also incorporates the *NONPF Core Competencies* and the *NTF Criteria*. The team's review of courses and objectives confirmed that the curriculum is in compliance with these standards. Students and faculty described how the *Master's Essentials* and other professional guidelines are included in the curriculum. The team's review of the self-study document, course syllabi, curriculum plans, and samples of student work confirmed that the outcomes of the MSN program are based on and follow these standards and guidelines. During an interview with the team, faculty identified the *Nurse Executive Competencies* as additional professional standards for the MSN-Administration track. No additional specialty standards or guidelines were identified for the MSN-Education track.

The MSN-FNP core curriculum includes separate, advanced, graduate-level courses in health assessment (with lab), pathophysiology/physiology, and pharmacology. A review of the course syllabi confirmed that these courses are across the lifespan and the course objectives support the overall program outcomes.

However, the team's review of the curriculum and discussion with the dean confirmed that the MSN-Education track does not currently incorporate advanced health assessment, advanced pathophysiology/physiology, or advanced pharmacology content, either in separate courses or integrated in core/specialization courses. Therefore, there is a compliance concern for this key element.

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

- **Baccalaureate curricula build upon a foundation of the arts, sciences, and humanities.**
- **Master's curricula build on a foundation comparable to baccalaureate level nursing knowledge.**
- **DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student.**
- **Post-graduate APRN certificate programs build on graduate level nursing competencies and knowledge base.**

*Elaboration: Baccalaureate program faculty and students articulate how knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice. Post-baccalaureate entry programs in nursing incorporate the generalist knowledge common to baccalaureate nursing education as delineated in *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) as well as advanced course work.*

*Graduate curricula are clearly based on a foundation comparable to a baccalaureate degree in nursing. Graduate programs delineate how students who do not have a baccalaureate degree in nursing acquire the knowledge and competencies comparable to baccalaureate education in nursing as a foundation for advanced nursing education. Accelerated programs that move students from basic nursing preparation (e.g., associate degree or diploma education) to a graduate degree demonstrate how these students acquire baccalaureate level knowledge and competencies delineated in *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008), even if they do not award a baccalaureate degree in nursing in addition to the graduate degree.*

*DNP programs, whether post-baccalaureate or post-master's, demonstrate how students acquire doctoral-level competencies delineated in *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006). The program provides a rationale for the sequence of the curriculum for each program.*

Compliance Concern?	Master's:	No
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Rationale:

All tracks in the MSN program build upon the baccalaureate degree foundation in nursing and competencies described in AACN's *The Essentials of Baccalaureate Education for Professional Nursing Practice* (2008). The curriculum structure indicates that content is driven by the program objectives and the *Master's Essentials*. Students are expected to have completed a baccalaureate degree in nursing, which was confirmed through the team's review of the admission criteria and during meetings with the dean and faculty.

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

Elaboration: Teaching-learning practices and environments (classroom, clinical, laboratory, simulation, distance education) support achievement of expected individual student outcomes identified in course, unit, and/or level objectives.

Compliance Concern? Master's: No

Rationale:

The teaching-learning practices and learning environments support expected individual student learning outcomes at the MSN level. The MSN-Administration and MSN-Education tracks are offered online. The MSN-FNP track was primarily conducted face-to-face, but has transitioned to offering core didactic courses online, while the clinical courses remain face-to-face. Online courses are delivered via the Pearson OpenClass LMS. During its review of an online course, the team confirmed that the platform is user-friendly and organized in a clear manner to support student learning. Course tools and learning methodologies include: course mail, online discussion threads, signature assessments, video streaming, and website resources.

Teaching methodologies for the MSN-FNP track's face-to-face courses include: lectures, discussions, group work, and videos. MSN-FNP clinical labs and practicum courses provide a variety of experiences and take into account the entire lifespan.

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

- **enable students to integrate new knowledge and demonstrate attainment of program outcomes;**
- and
- **are evaluated by faculty.**

Elaboration: To prepare students for a practice profession, each track in each degree program and post-graduate APRN certificate program affords students the opportunity to develop professional competencies in practice settings aligned to the educational preparation. Clinical practice experiences are provided for students in all programs, including those with distance education offerings. Clinical practice experiences involve activities that are designed to ensure students are competent to enter nursing practice at the level indicated by the degree/certificate program. The design, implementation, and evaluation of clinical practice experiences are aligned to student and program outcomes.

Compliance Concern? Master's: Yes

Rationale:

The MSN-FNP track provides clinical placements and preceptors for students, which are facilitated by the director of the MSN-FNP track and the newly-hired clinical placement coordinator.

Clinical sites are varied and maintain a primary care focus. The team reviewed student clinical logs, which provide documentation of competency achievement and clinical hours. The newly-adopted web-based application, ProjectConcert (previously named Project Nurse), provides a robust system to track and report clinical hours and students' experience. Faculty and preceptors are able to review students' various types of

patient interactions and are better able to assist students in finding varied activities to meet the appropriate combination of experiences to foster students' successful completion of outcomes. Through its clinical site visit and interview with a current preceptor and student, the team confirmed that clinical sites provide ample opportunities for students to care for a diverse population and have appropriate procedures and point of care testing opportunities. MSN-FNP students are required to complete 768 clinical hours. This includes 87 clinical laboratory hours and 681 direct clinical practice hours conducted in a variety of clinical settings.

Neither the MSN-Administration track nor the MSN-Education track includes planned clinical experiences. Therefore, there is a compliance concern for this key element.

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

Elaboration: The curriculum and teaching-learning practices (e.g., use of distance technology, didactic activities, and simulation) are appropriate to the student population (e.g., adult learners, second language students, students in a post-graduate APRN certificate program) and consider the needs of the program-identified community of interest.

Compliance Concern? **Master's:** **No**

Rationale:

The needs and expectations of the CON's community of interest guide curricular development and teaching-learning practices. The community of interest is defined as students, faculty, alumni, employers, nurses, the Board of Trustees, and members of the professional community. The team had the opportunity to speak with representatives from all groups of the community of interest. Each of these individuals spoke of regular and ongoing interactions with the dean, track directors, and faculty. Input from the community of interest will be included in the upcoming MSN curriculum review/revision process.

In discussions with the team, clinical partners and community leaders indicated that they have a strong relationship with the CON, track directors, faculty, and staff, and feel that their needs are well-received and considered. During a meeting with the team, clinical representatives and alumni applauded the MSN-FNP track director's effort in uniting the nursing education and practice communities. The clinical representatives and alumni noted that they have ample opportunities to correspond with the CON and provide input, and that they value the attention their suggestions receive.

Students have several mechanisms to provide input into the curriculum and teaching-learning practices. Students review faculty, courses, preceptors, and clinical sites each semester. In discussions with the team, students indicated that faculty are receptive to their input, and reported that their feedback has been used in several circumstances, including the continued availability of face-to-face course instruction for MSN-FNP students.

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.

Elaboration: Evaluation of student performance is consistent with expected student outcomes. Grading criteria are clearly defined for each course, communicated to students, and applied consistently. Processes exist by which the evaluation of individual student performance is communicated to students. In instances where preceptors facilitate students' clinical learning experiences, faculty may seek input from preceptors regarding student performance, but ultimately faculty are responsible for evaluation of individual student outcomes. The requirement for evaluation of student clinical performance by qualified faculty applies to all students in all programs. Faculty evaluation of student clinical performance may be accomplished through a variety of mechanisms.

Compliance Concern? Master's: No

Rationale:

Evaluation of individual student performance is conducted by CON faculty, who consistently apply standardized methods throughout the MSN program. The team reviewed the policies and procedures for individual student evaluation that reflect achievement of expected outcomes. Program outcomes and course evaluation methods, including grading policies, are available in course syllabi. The team confirmed that terminal performance expectations, in the form of course objectives and mechanisms by which student achievement of objectives is evaluated, are included in course syllabi. Faculty evaluation and feedback on individual student performance was evident in student work reviewed by the team through the use of rubrics designed to ensure faculty consistency and objectivity during the evaluation process. Evaluation of MSN students' clinical practicum performance is conducted by course faculty with input from clinical preceptors through assessment followed by a discussion with the preceptor and student at the clinical site. The team's review of clinical evaluation forms and discussions with students provided evidence of this evaluative process. In discussions with the team, students, faculty, and preceptors all stated that expected outcomes, evaluation methods, and grading criteria are clearly presented at the beginning of each term and are fairly and consistently applied.

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

Elaboration: Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of student outcomes. Such evaluation activities may be formal or informal, formative or summative. Curriculum is regularly evaluated by faculty and other communities of interest as appropriate. Data from the evaluation of curriculum and teaching-learning practices are used to foster program improvement.

Compliance Concern? Master's: No

Rationale:

The dean provided to the team an overview of an evaluation plan by which regular evaluation of the courses, program, and curriculum will occur in the MSN program. The team confirmed the proposed processes and participation of the dean, track directors, faculty, and students. Evaluation methods are based on review of

evolving societal trends, external standards, and advances in relevant knowledge, and include: the faculty's individual course evaluations each term, students' evaluation of courses, and clinical site evaluations. The dean also explained that the proposed evaluation process will begin with the core faculty creating all course syllabi. At the end of the term, all faculty, including adjunct faculty, will meet to discuss the results of the student evaluations and any identified changes needed to improve course facilitation and student learning. A determination will be made to either incorporate changes into the course or to provide supplemental resources for faculty to use, as appropriate. The dean confirmed that a complete systematic evaluation plan will be developed this coming year. In discussions with the team, faculty referenced the use of student evaluations for curricular revisions.

Standard IV

Program Effectiveness: 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.

This standard is not met for the master's degree nursing program.

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

Elaboration: The program uses a systematic process to obtain relevant data to determine program effectiveness. The process:

- *is written, ongoing, and exists to determine achievement of program outcomes;*
- *is comprehensive (i.e., includes completion, licensure, certification, and employment rates, as required by the U.S. Department of Education; and other program outcomes);*
- *identifies which quantitative and/or qualitative data are collected to assess achievement of the program outcomes;*
- *includes timelines for collection, review of expected and actual outcomes, and analysis; and*
- *is periodically reviewed and revised as appropriate.*

Compliance Concern?

Master's:

Yes

Rationale:

The process for determining CON program effectiveness is currently subsumed in the USU strategic plan and the program review and learning outcomes assessment. These documents are used by all schools at USU to evaluate their programs, with reviews completed on a five-year cycle. While surveys have been conducted with nursing students, alumni, and employers, there is no systematic process specific to the CON in place, and therefore, the team noted a compliance concern for this key element. The dean stated that a CON-specific evaluation plan will be developed over the next year, and she provided an overview of the plan during the on-site evaluation.

IV-B. Program completion rates demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of required program outcomes regarding completion. For each degree program (baccalaureate, master's, and DNP) and post-graduate APRN certificate program:

- *The completion rate for each of the three most recent calendar years is provided.*
- *The program specifies the entry point and defines the time period to completion.*
- *The program describes the formula it uses to calculate the completion rate.*
- *The completion rate for the most recent calendar year is 70% or higher. However, if the completion rate for the most recent calendar year is less than 70%, (1) the completion rate is 70% or higher when the annual completion rates for the three most recent calendar years are averaged or (2) the completion rate is 70% or higher when excluding 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.*

A program with a completion rate less than 70% for the most recent calendar year provides a written explanation/analysis with documentation for the variance.

This key element is not applicable to a new degree or certificate program that does not yet have individuals who have completed the program.

Compliance Concern?

Master's:

Yes

Rationale:

The CON defines on-time completion as 150% of “normal” time to completion, which is 36 months for the MSN-FNP track and 24 months for the MSN-Administration and-MSN Education tracks. Completion rates were not provided by degree level. As reported in the self-study document, the completion rate for the MSN-FNP track has consistently been below 70%. Over the last three years, the completion rate has ranged from 65% in 2012 to 43% in 2014. Therefore, there is a compliance concern for this key element. The dean stated this low completion rate is partially due to the RN-MSN ELM program. Several students in this program opted to drop out after receiving the Bachelor of Science in Nursing, thereby decreasing the completion rate for the MSN program. The ELM program was discontinued and stopped admitting students in 2013, so the dean expects the MSN-FNP completion rate to increase over the next few years.

The MSN-Administration and the MSN-Education tracks have had completion rates of 75% or higher over the last two years. Data regarding reasons for student withdrawal have been not been routinely collected, but the dean stated that CON will be monitoring withdrawals more closely in the future.

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

Elaboration: The pre-licensure program demonstrates achievement of required program outcomes regarding licensure.

- *The NCLEX-RN® pass rate for each campus/site and track is provided for each of the three most recent calendar years.*
- *The NCLEX-RN® pass rate for each campus/site and track is 80% or higher for first-time takers for the most recent calendar year. However, if the NCLEX-RN® pass rate for any campus/site and track is less than 80% for first-time takers for the most recent calendar year, (1) the pass rate for that campus/site or track is 80% or higher for all takers (first-time and repeat) for the most recent calendar year, (2) the pass rate for that campus/site or track is 80% or higher for first-time takers when the annual pass rates for the three most recent calendar years are averaged, or (3) the pass rate for that campus/site or track is 80% or higher for all takers (first-time and repeat) when the annual pass rates for the three most recent calendar years are averaged.*

A campus/site or track with an NCLEX-RN® pass rate of less than 80% for first-time takers for the most recent calendar year provides a written explanation/analysis with documentation for the variance and a plan to meet the 80% NCLEX-RN® pass rate for first-time takers. The explanation may include trend data, information about numbers of test takers, data relative to specific campuses/sites or tracks, and data on repeat takers.

The graduate program demonstrates achievement of required program outcomes regarding certification. Certification results are obtained and reported in the aggregate for those graduates taking each examination, even when national certification is not required to practice in a particular state.

- *Data are provided regarding the number of graduates and the number of graduates taking each certification examination.*

- *The certification pass rate for each examination for which the program prepares graduates is provided for each of the three most recent calendar years.*
- *The certification pass rate for each examination is 80% or higher for first-time takers for the most recent calendar year. However, if the pass rate for any certification examination is less than 80% for first-time takers for the most recent calendar year, (1) the pass rate for that certification examination is 80% or higher for all takers (first-time and repeat) for the most recent calendar year, (2) the pass rate for that certification examination is 80% or higher for first-time takers when the annual pass rates for the three most recent calendar years are averaged, or (3) the pass rate for that certification examination is 80% or higher for all takers (first-time and repeat) when the annual pass rates for the three most recent calendar years are averaged.*

A program with a pass rate of less than 80% for any certification examination for the most recent calendar year provides a written explanation/analysis for the variance and a plan to meet the 80% certification pass rate for first-time takers. The explanation may include trend data, information about numbers of test takers, and data on repeat takers.

This key element is not applicable to a new degree or certificate program that does not yet have individuals who have taken licensure or certification examinations.

Compliance Concern? Master's: No

Rationale:

The MSN-FNP track has been in existence since 2009 and has 34 graduates. All graduates have been successfully licensed in California, which does not require specialty certification to practice. Fall 2014 is the first time the CON has sought national accreditation for its MSN program. While MSN-FNP graduates identified a desire to be certified, the graduates to date are not eligible to take the certification exam since both certification agencies, the American Nurses Credentialing Center (ANCC) and the American Association of Nurse Practitioners (AANP), require graduation from an accredited program to be eligible to sit for the exam. In discussions with the team, the dean articulated a plan to collect certification data once program accreditation is achieved.

IV-D. Employment rates demonstrate program effectiveness.

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. For example, employment data may be collected at the time of program completion or at any time within 12 months of program completion.*
- *The employment rate is 70% or higher. However, if the employment rate is less than 70%, the employment rate is 70% or higher when excluding graduates who have elected not to be employed.*

Any program with an employment rate less than 70% provides a written explanation/analysis with documentation for the variance.

This key element is not applicable to a new degree or certificate program that does not yet have individuals who have completed the program.

Compliance Concern? Master's: Yes

Rationale:

The practicum coordinator and program directors track student employment details. There were 13 graduates from the MSN-FNP track in 2013, and 100% of the graduates have obtained employment, according to the director of the MSN-FNP track. Over the last three years, there have been 11 graduates from the MSN-Administration and MSN-Education tracks, for which there are no employment data. Thus, there is a compliance concern for this key element. Employment rates were not provided by degree level.

IV-E. Program outcomes demonstrate program effectiveness.

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

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 are not limited to) student learning outcomes; student and alumni achievement; and student, alumni, and employer satisfaction data.

Analysis of the 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.

Compliance Concern?	Master's:	Yes
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Rationale:

Program learning outcomes are evaluated in each course; however, no aggregate data are available to compare actual outcomes with expected outcomes. The CON does not currently have a systematic evaluation plan, but during the on-site evaluation, the dean provided to the team a document outlining plans for the development of an evaluation plan. Currently, data regarding student, alumni, and employer satisfaction are being collected and used to address achievement of program goals developed in 2013. The dean stated that the response rate from employers is very low, and no results were available for review. Other data, including a 100% employment rate for MSN-FNP students, were reported. Data to support this key element are limited and not clearly linked to program goals at this time, so the team determined there is a compliance concern.

Recently, ProjectConcert was purchased to assist in data collection. Project Concert links course outcomes with program learning outcomes and professional standards. The data generated will be used to track aggregate outcomes.

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

Elaboration: The program demonstrates achievement of expected faculty outcomes. Expected faculty outcomes:

- *are identified for the faculty as a group;*
- *incorporate expected levels of achievement;*
- *reflect expectations of faculty in their roles and evaluation of faculty performance;*
- *are consistent with and contribute to achievement of the program's mission and goals; and*
- *are congruent with institution and program expectations.*

Actual faculty outcomes are presented in the aggregate for the faculty as a group, analyzed, and compared to expected outcomes.

Compliance Concern? Master's: Yes

Rationale:

There is a compliance concern for this key element because prior to this year faculty were not formally evaluated, and therefore, there are no aggregate faculty data to compare to expected faculty outcomes. The newly formed Faculty Senate has created a handbook outlining faculty expectations and responsibilities that will be implemented this coming year. The dean stated that faculty outcomes will be included in the evaluation plan that will be developed by the faculty over the next year. In addition, the CON is developing a new adjunct faculty handbook.

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

Elaboration: The program defines what constitutes a formal complaint and maintains a record of formal complaints received. The program's definition of formal complaints includes, at a minimum, student complaints. The program's definition of formal complaints and the procedures for filing a complaint are communicated to relevant constituencies.

Compliance Concern? Master's: No

Rationale:

The formal student complaint policy is available in the USU catalog, and there is a process to address student complaints. The dean stated that there have been no formal complaints made by MSN students. In addition, there is a policy for faculty grievances in the faculty handbook.

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

Elaboration: The program uses outcome data for improvement. Data regarding completion, licensure, certification, and employment rates; other program outcomes; and formal complaints are used as indicated to foster program improvement.

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

Compliance Concern? Master's: Yes

Rationale:

There is a compliance concern for this key element because no formal plan exists for analyzing data to foster program improvement. However, the dean and faculty have begun to analyze data to foster program

improvement in faculty meetings, as documented in meeting minutes reviewed by the team. The CON dean and faculty have identified the critical need for a systematic evaluation plan and will be creating this plan over the next year. The dean stated that she is committed to making decisions collaboratively and wants to have time to include the faculty in developing the evaluation plan. She provided the team with an overview of how she and the faculty will create a formal evaluation plan.