

**CENTRAL METHODIST UNIVERSITY  
DEPARTMENT OF NURSING  
SYSTEMATIC PROGRAM EVALUATION PLAN  
PROGRAMS: MSN-Clinical Nurse Leader (MSN-CNL), and MSN-Nurse Educator (MSN-NE)  
Fall Meeting: Annual summary MSN-CNL/NE (Aug 1 – July 31)  
Report for AY16-17**

**CCNE Standard I: Program Quality: Mission and Governance**

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

Key Element I-A: The mission, goals, and expected program outcomes of the program are:

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

<b>Evaluation Component</b>	<b>Documentation</b>	<b>Responsible Person/People</b>	<b>Frequency of Assessment</b>	<b>Assessment Method</b>	<b>Benchmark</b>	<b>Report</b>	<b>Results</b>	<b>Action Plan (Y/N)</b>
University Mission Statement, University Values, Nursing Department Philosophy, and Program Outcomes	University website, University CGES catalog; Student Handbook for MSN; Department of Nursing syllabi	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, and Nursing Programs Assessment Committee	Annual Review	Review website, catalogs, handbooks, syllabi	Congruency between all documents; professional standards evident in documents	Fall	Met	No

<i>Essentials of Baccalaureate Education for Professional Nursing Practice</i> (AACN, 2008), <i>Essentials of Master's Education in Nursing</i> (AACN, 2011)	Nursing Program Outcomes for:  Masters level <ul style="list-style-type: none"> <li>• CNL</li> <li>• NE</li> </ul>	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, and Nursing Programs Assessment Committee	Annual Review	Review of Program Outcomes, syllabi	Consistency between documents; professional standards evident in documents	Fall	Met	No
--	--	--	---------------	-------------------------------------	--	------	-----	----

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

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

<b>Evaluation Component</b>	<b>Documentation</b>	<b>Responsible Person/People</b>	<b>Frequency of Assessment</b>	<b>Assessment Method</b>	<b>Benchmark</b>	<b>Report</b>	<b>Results</b>	<b>Action Plan (Y/N)</b>
Mission, goals and expected student outcomes compared with professional standards	Professional accreditation reports (HLC, CCNE, MOSBN); certification rates; graduation rates; job placement rates; achievement of student outcomes/course objectives, and program outcomes; student rating of self and program	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, and Nursing Programs Assessment Committee	Annual Review	Review actual achievement rate for identified criteria with established thresholds	HLC: full accreditation	Fall	Met	No
					CCNE: Full accreditation	Fall	Met	No
					Certification pass rates: 80%	Fall		
					Number of Graduates: MSN	Fall		
					MSN students report they are in a job	Reported in Fall for		

	for achievement of program outcomes				utilizing knowledge/skills gained in program: 90% at time of report of post-graduate survey (sent in December for all graduates).	previous year		
Mission, goals, and expected outcomes compared with expectations of the community of interest	Professional accreditation reports (HLC, CCNE); certification pass rates; graduation rates; job placement rates	Advisory Board chairperson; Program Administrator, Nursing Program Coordinators, Clinical Coordinator, and Nursing Programs Assessment Committee	Annual Review	Documented discussion of thresholds and achievement rates with Advisory Board; Graduate/alumni/ Employer surveys	Advisory board reviews and approves mission, goals, and expected outcomes.  Alumni, and employer surveys indicate mission, goals, and program outcomes are congruent with expectations in practice environment: 80% rate extremely well or well. (All surveys sent out in Dec. of each year.)	Fall  Reported in fall from previous Dec.'s survey.	Met  Met: 100%	No  No

Key Element I-C: Expected faculty outcomes are clearly identified by the nursing unit, are written and communicated to the faculty, and are congruent with institutional expectations.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Faculty outcomes in teaching, scholarship, service, and practice compared to mission, goals, and expected outcomes	Faculty handbook, Scholarly activities specific to nursing faculty; NLN Core Competencies of Nurse Educators, Faculty files, SEIs, surveys, faculty job descriptions	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, Dean of University	Annual Review	Review job descriptions	80% of full time faculty will be rated positively on teaching, scholarship, service, and practice in annual faculty evaluation	Fall	Met 89%	No
				Annual faculty evaluation (includes self-evaluation, Department Chair evaluation of faculty, and response from Dean's office)	Mean SEI score for faculty will 4.0 or greater	Fall	Met 4.57	No
				Student evaluations of instruction (SEI)				
				surveys from alumni				

Key Element I-D: Faculty and students participate in program governance.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Faculty participation in program and program governance	Faculty Handbook, Meeting minutes from Program Faculty meetings	Program Administrator, Nursing Program Coordinators	Annual Review	Review of meeting minutes	Faculty will participate in program and university –wide governance	Fall	Met Angie Cornelius serves on the IRB	No

Student participation in program governance	MSN Student Handbook, Meeting Minutes from Program Faculty meetings	Program Administrator, Nursing Program Coordinators	Annual Review	Review of meeting minutes	Students will have the opportunity to participate in program governance, mainly through comments on SEIs or through student evaluation of program effectiveness.	Fall	Met	No
---	---	---	---------------	---------------------------	--	------	-----	----

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

<b>Evaluation Component</b>	<b>Documentation</b>	<b>Responsible Person/People</b>	<b>Frequency of Assessment</b>	<b>Assessment Method</b>	<b>Benchmark</b>	<b>Report</b>	<b>Results</b>	<b>Action Plan (Y/N)</b>
University and program documents and publications	University catalogs(CGES and CLAS), university website, Nursing Student Handbooks, marketing brochures	Program Administrator, Nursing Program Coordinators Director of Admissions, Director of Marketing	Annual Review	Review of documents and publications	Information in all documents and publications is accurate.	Fall	Met	No

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

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

<b>Evaluation Component</b>	<b>Documentation</b>	<b>Responsible Person/People</b>	<b>Frequency of Assessment</b>	<b>Assessment Method</b>	<b>Benchmark</b>	<b>Report</b>	<b>Results</b>	<b>Action Plan (Y/N)</b>
Academic policies: admission, transfer, academic conduct, scholastic standards, (retention and progression)	University catalogs (CLAS and CGES), Nursing Department Student Handbook, University website, individual course syllabi	Program Administrator, Nursing Program Coordinators, Nursing Programs Assessment Committee	Annual Review	Review policies for congruency; Review Nursing Department-specific academic policies for fairness and equitability and ability to improve programs	Academic policies of the University and the Department of Nursing are congruent.	Fall	Met	No
					Nursing Department-specific academic policies are fair, equitable, and reflective of ongoing attempts at program improvement and increasing professional standards.	Fall	Met	No

## CCNE Standard II: Program Quality: Institutional Commitment and Resources

The parent institution demonstrates ongoing commitment to and support for the nursing program. The institution makes resources available to enable the program to achieve its mission, goals, and expected outcomes. The faculty, as a resource of the program, enable the achievement of the mission, goals, and expected program outcomes.

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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Fiscal and physical resources including: personnel resources, fiscal/budget resources, physical plant resources, clinical resources	Personnel resources: Faculty load assignment grid	Program Administrator, Nursing Program Coordinators, Nursing Programs Assessment Committee, Provost of the University, VP of Finance/CFO, Nursing Department Clinical Coordinator	Annual Review	Review resources to determine if there are any deficiencies in personnel or fiscal resources.  Review graduate survey results to determine student perceptions of adequacy of these resources.	Full time faculty teaching load averages 12 hours per semester; faculty may elect, with Chair approval, to teach overload for pay	Fall	Met	No
	Fiscal/budget resources: University budget (CLAS and CGES), Graduate Budget				Student-to-faculty ratios in NU courses do not exceed 30:1 in the classroom (online or on ground)	Fall	Met	No
	Physical plant resources: any existing building blueprints, classroom space availability grids				Fiscal resources are adequate to support and maintain functioning of all nursing programs, including provisions for growth.	Fall	Met	No
	Surveys				Physical plant resources are adequate to accommodate any planned or actual meeting for each nursing program.	Fall	Met	No

					Mean SEI scores of 4.0 of higher indicate students feel that faculty provide appropriate support and services	Fall	Met 4.56	No
					Graduate surveys will indicate that 80% or more of students are “satisfied” or better with University-level support services, Program-level services, and Program effectiveness.	Fall	Met 97.62% 100% 97.96%	No

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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Academic support services: Library, Center for Learning and Teaching, Technology Services	Description of services: Library, Center for Learning and Teaching, Technology Services	Director of Information Resources, Director of Center for Learning and Teaching, VP for Information Services, Program Administrator, Nursing Program Coordinators	Annual Review	Review resources to determine if there are any deficiencies in academic support services.	Academic support services are adequate to facilitate student learning and success in the online learning environments.	Fall	Met 100%	No
	Description of resources: Library, Center for Learning and Teaching, Technology Services			Review alumni survey results to determine alumni perceptions of adequacy of academic support services.	Academic support services are solvent enough to support planned growth in programs.	Fall	Met	No
	Surveys			Graduate surveys will indicate that 80% or		Fall	98.53%	No



					more of graduates are “satisfied” or better with overall performance of support services.			
--	--	--	--	--	---	--	--	--

Key Element II-C: The chief nurse administrator:

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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Academic, experiential, and leadership qualifications of chief nurse administrator	CV of chief nurse administrator, Guidelines from MOSBN and CCNE, Faculty handbook, surveys	Provost of the University	Annual Review	Review of CV of chief nurse administrator	Chief nurse administrator meets qualifications as required by MSBN and CCNE.	Fall	Met	No
				Review guidelines from MOSBN and CCNE to determine if chief nurse administrator meets qualifications set out by those bodies.	Chief nurse administrator is reappointed to his/her position.	Fall	Met	No
				Annual evaluation of chief nurse administrator	80% of graduates will report chief nursing administrator was responsive to student concerns.	Fall	Met 100%	No

				(includes self-evaluation and response from Dean's office)  Faculty evaluation of chief nurse administrator (nursing faculty evaluates performance of Division Chair)  Review student evaluations of instruction (SEI) (if pertinent)  Review graduate surveys				
--	--	--	--	--	--	--	--	--

Key Element II-D: Faculty members are:

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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Faculty academic and experiential preparation	CV of faculty, Guidelines from CCNE, Faculty handbook	Program Administrator, Nursing Program Coordinators,	Ongoing	Review of updated faculty CVs	Faculty academic and experiential preparation for all nursing programs meets requirements	Fall	Met	No

		Provost of the University		Annual faculty evaluation (includes self-evaluation, Department Chair evaluation of faculty, and response from Dean's office)	of the university and CCNE  80% of faculty in the MSN programs will attend or participate in at least one continuing education activity, pertinent to their courses taught, per year.	Fall	Met 100%	No
Numbers of qualified faculty and adequacy of those numbers	Faculty load assignment grid	Program Administrator, Nursing Program Coordinators, Provost of the University	Ongoing	Review numbers of faculty (and load assignments) to determine if there are any deficiencies in ability to effectively deliver education to students	Full time faculty teaching load in all nursing programs averages 12 hours per semester; faculty may, with Chair approval, teach overload for additional pay	Fall	Met	No
				Review SEIs to determine student perceptions of adequacy of numbers of faculty	Student-to-faculty ratios do not exceed 30:1 in NU courses in the online classroom	Fall	Met Largest MSN course was 25:1	No
				Review graduate survey results to determine student perceptions of adequacy of	Mean SEI score for faculty will be 4.0 or greater in the areas of "professor was available outside of class for help" and "professor provided results of graded	Fall	Met 4.69 and 4.63	No

				numbers of faculty.	assignments in a timely fashion.”			
--	--	--	--	---------------------	-----------------------------------	--	--	--

Key Element II-E: Preceptors, when used by the program as an extension of the faculty, are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Academic and experiential qualifications of preceptors	MSN Preceptor Handbook	Program Administrator, Nursing Program Coordinators, Clinical Coordinator	Annual Review	Review academic and experiential qualifications of preceptors	<del>80% or more of NU500 and NU522 precepted students rate their preceptor as “good” or “excellent” in “providing the right amount of supervision and assistance” and “was competent and knowledgeable.”</del>	Fall	NU500 now uses ShadowHealth, an online program that requires students to assess model patients and allows for consistency in the types and extensiveness of required assessments; NU522 now uses mentors and facility resources instead of.	No

Key Element II-F: The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.

<b>Evaluation Component</b>	<b>Documentation</b>	<b>Responsible Person/People</b>	<b>Frequency of Assessment</b>	<b>Assessment Method</b>	<b>Benchmark</b>	<b>Report</b>	<b>Results</b>	<b>Action Plan (Y/N)</b>
Institutional and program support for faculty teaching, scholarship, service, and practice	Faculty handbook, budgets for CGES and Graduate Programs budget.	Provost of the University, Program Administrator, Nursing Program Coordinators	Annual Review	Review policies regarding faculty teaching, scholarship, service, and practice.	Policies regarding faculty teaching, scholarship, service, and practice are in place, current, and readily available to faculty.	Fall	Met	No
				Review faculty utilization of resources for development.	80% of faculty utilize development resources for scholarly endeavor/support.	Fall	Met	Met

### **CCNE Standard III: Program Quality: Curriculum and Teaching-Learning Practices**

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

Key Element III-A: The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program’s mission and goals, and with the roles for which the program is preparing its graduates.

<b>Evaluation Component</b>	<b>Documentation</b>	<b>Responsible Person/People</b>	<b>Frequency of Assessment</b>	<b>Assessment Method</b>	<b>Benchmark</b>	<b>Report</b>	<b>Results</b>	<b>Action Plan (Y/N)</b>
MSN level-curriculum and learning outcomes	University catalog (CGES), MSN Student Handbook, MSN syllabi	Program Administrator, Nursing Program Coordinators, MSN-level Curriculum Committee	Ongoing	Review MSN curriculum and learning outcome statements to ensure congruency with program’s mission, goals and expected aggregate student outcomes	MSN curricula clearly reflect expected learning outcomes (in the form of course objectives and program outcomes) that are congruent with the program’s mission, goals, and aggregate student outcomes.	Fall	Met	No

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

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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
MSN-CNL & NE curriculum, learning outcomes, and professional nursing standards and guidelines	University catalog (CGES), MSN Student Handbook, MSN-CNL & NE syllabi, <i>The Essentials of Master’s Education for Advanced Practice Nursing</i>	Program Administrator, Nursing Program Coordinators, MSN-level Curriculum Committee	Ongoing	Review MSN-level curriculum and learning outcome statements to ensure congruency with <i>The Essentials of Master’s Education for Advanced Practice Nursing</i> (See Standard Alignment Grids)	MSN curricula clearly reflect expected learning outcomes (in the form of course objectives and program outcomes) that are congruent with <i>The Essentials of Master’s Education for Advanced Practice Nursing</i>	Fall	Met  Program Outcomes for the MSN tracks will be reviewed/ revised at this meeting	No

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

- Baccalaureate curricula build upon a foundations of the arts, sciences, and humanities.
- Master’s curricula build on a foundation comparable to baccalaureate level nursing knowledge.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
MSN-CNL & NE curricular structure	University catalog (CGES), MSN Student Handbook	Program Administrator, Nursing Program Coordinators, MSN-level Curriculum Committee	Annual Review	Review course sequencing and curricular structure	The MSN curricula build on a foundation comparable to baccalaureate level nursing knowledge.	Fall	Met	No
					Students will complete baccalaureate requirements prior to admission into the MSN program (a BSN portfolio may be used to demonstrate the completion of baccalaureate requirements).	Fall	Met	No

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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
MSN teaching-learning practices/	SEI reports for each course, survey reports, course summaries	Program Administrator, Nursing Program Coordinators,	Ongoing (Minimum of Annually)	Review data from: SEI reports, survey reports, course summaries	Mean SEI scores (all categories) will exceed 4.0 for all nursing courses and nursing	MSN Fall	Met 4.56; 4.58 from	No



environments and student outcomes	(exemplars), course assessment reports, CNL certification exam reports; CNE Practice Exam, Department of Nursing Administrative Database (attrition rates, graduation rates, surveys reports)	MSN-level Curriculum Committee		(exemplars), Course Objective Achievement Reports , Alumni surveys, CNL certification exam reports, and NE practice test reports	professors in MSN program.	MSN Fall	GRFA16 to GRSU17 Met 91.3	No
					80% or more of students will report that the program prepared them to meet the designated program outcomes.	MSN Fall	Met CORE: NU500 – 61.2% NU502 – 100% NU504 – 58% NU514 – 100% CNL: NU508 – 94.1% NU510 – 82.3% NU512 – 99% NU516 – 98.3% NU518 – 100% NU522 – 100% NE: NU509 – 89.5% NU511 – 96.1% NU513 – 90.6% NU515 – 94.1% NU517 – 100% NU519 – 100% NU523 – 91.6%	Evaluate all course assignments used for assessment purposes for continued appropriateness.
					80% or more of students will meet or exceed the 80% threshold for individual course learning assessments	MSN Fall	Not met: Summer 16 to Spring 17 pass rate for 1 <sup>st</sup> time testers was	Yes
					80% of the MSN-CNL students who take this exam will pass the CNL Certification exam at or above 80% on the first attempt.			

							5/7 or 71.4%.	Yes
					The MSN-NE students will score 80% or higher on the CNE Practice Exam.	Fall	Not met: GRFA16: 2/8 (25%) GRSU17: 5/8 (62.5%)	Yes
					The annual academic attrition rate in program will be at or less than 15%.	Fall	Not met: Cohort attrition rate appears to be 50/80 (62.5%) looking at data from the last 5 years.	Yes
					The graduation rate from the program will be 80% or higher.	Fall	Not met: Graduation rate from 2012 and beyond is a total of 55/78 or 70%.	Yes

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

- Enable students to integrate new knowledge and demonstrate attainment of program outcomes; and
- Are evaluated by faculty.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
MSN-level students have the opportunity to develop professional competencies in practice settings. The design, implementation, and evaluation of clinical practice experiences are aligned to student and program outcomes.	Faculty evaluation of student achievement of clinical outcomes, student self-evaluation of achievement of program outcomes.	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, MSN-level Curriculum Committee	Ongoing (Minimum of Annually)	Review data from student logs of professional roles of the CNL.  Review data from the	100% of students who earned a passing grade in a course with a clinical/project component passed the clinical/project component with a 'satisfactory' or higher rating	MSN Fall	Met	No

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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Curriculum and teaching-learning practices compared with needs and expectations of the community of interest	Advisory board meeting minutes, Employer Satisfaction Surveys, Accreditation reports CCNE, preceptor evaluations of students	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, MSN-level Curriculum Committees	Annual Review	Review Advisory board meeting minutes, Employer Satisfaction Surveys, and Accreditation reports from CCNE, preceptor evaluations of	The curriculum and teaching-learning practices will meet the needs and expectations of the identified community of interest.  (1) Advisory Board (2) Employer/ Providers (3) Graduates	Fall	Mostly Met  Met Met Met	

				students from NU500	(4) Alumni (5) Evaluation of students by Preceptors (6) CCNE		Met Criteria no longer applies  Not met; CCNE requires CNL exam pass rate of 80%; Pass rate from Summer 2016 to Spring 2017 was 71.4%	
--	--	--	--	---------------------	--	--	--	--

Key Element III-G: Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Faculty evaluation of and communication of individual student performance	University CGES catalog, MSN Student Handbook, Course syllabi, SEI reports, survey reports, Student assignments,	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, MSN-level	Ongoing (Minimum of Annually)	Review Curricular Alignment Grids to determine evaluation criteria for each course	Mean SEI scores of 4.0 or higher reflect student satisfaction that faculty evaluates expected individual student learning outcomes and	Fall	Met 4.66; 4.69 (GRFA16 to GRSU17)	No

	Curriculum Alignment Grids	Assessment Committee		<p>Review archived assignments or portfolios for examples of feedback provided to students</p> <p>Review SEI and graduate survey reports to determine student perceptions of evaluative feedback provided by faculty</p>	<p>communicates that evaluation in a timely fashion.</p> <p>Portfolios or archived assignments will demonstrate examples of evaluative feedback provided to students.</p> <p>Mean SEI scores of 4.0 or higher reflect student satisfaction that “course assignments and exams fairly evaluated knowledge”.</p> <p>Mean SEI scores of 4.0 or higher reflect student satisfaction that faculty attributes support knowledge acquisition.</p>	<p>Fall</p> <p>Fall</p> <p>Fall</p>	<p>Met</p> <p>Met 4.53</p> <p>Met 4.58; 4.53 from GRFA16 to GRSU17</p>	<p>No</p> <p>No</p> <p>No</p>
Evaluation (grading) policies and procedures for classroom and clinical/project performance defined	University CGES catalog, MSN Student Handbook, Course syllabi	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, MSN-level Assessment Committee	Ongoing (Minimum of Annually)	Review all documents to determine clarity of evaluation policies and procedures	<p>Evaluation policies and procedures will be clearly defined in relevant documentation (catalogs, handbooks, and syllabi).</p> <p>Clinical evaluation policies (including</p>	<p>Fall</p> <p>Fall</p>	<p>Met</p> <p>Met</p>	<p>No</p> <p>No</p>

					grading rubrics and clinical evaluation tools) will be as clearly defined as classroom evaluation policies.  Evaluation policies are defined and consistently applied within each track (CNL and NE)	Fall	Met	No
--	--	--	--	--	--	------	-----	----

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

<b>Evaluation Component</b>	<b>Documentation</b>	<b>Responsible Person/People</b>	<b>Frequency of Assessment</b>	<b>Assessment Method</b>	<b>Benchmark</b>	<b>Reports</b>	<b>Results</b>	<b>Action Plan (Y/N)</b>
Evaluation schedules of curriculum and teaching-learning practices	Minutes from MSN faculty meetings (these meetings may be held virtually), Guidelines as defined by Program Evaluation Plan (this document)	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, MSN-level Assessment and Curriculum Committees	Ongoing (Minimum of Annually)	Review meeting minutes	Curriculum and teaching-learning practices will be evaluated at regularly scheduled intervals, as defined by the Program Evaluation plan, to foster ongoing improvement.	Fall	Met	No

## **CCNE Standard IV: Program Effectiveness: Aggregate Student and Faculty Outcomes**

The program is effective in fulfilling its mission and goals as evidenced by achieving expected program outcomes. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. Data on program effectiveness are used to foster ongoing improvement.

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

<b>Evaluation Component</b>	<b>Documentation</b>	<b>Responsible Person/People</b>	<b>Frequency of Assessment</b>	<b>Assessment Method</b>	<b>Benchmark</b>	<b>Report</b>	<b>Results</b>	<b>Action Plan (Y/N)</b>
MSN surveys and data sources are used to determine program effectiveness	Student Surveys: SEIs for each course, Course summaries, Clinical evaluation surveys for each clinical course	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, and MSN-level Assessment Committee	Annual Review	Review surveys and data sources	Surveys and other data are used to collect information about student, graduate, alumni, and employer satisfaction and demonstrated achievements of graduates.	Fall	Met	No
	Graduate surveys				Surveys and other data sources will provide appropriate information for analysis	Fall	Met	No
	Alumni Surveys				100% of graduates will receive (be sent) surveys and 50% of 3 <sup>rd</sup> year alumni will be sent surveys to complete.	Fall	Met	No
	Employer surveys				Employer surveys will be sent to facilities where graduates are employed	Fall	Met	No
	Standardized Exam Data: CNL Certification exam reports & scores from the CNE Practice Exam				(Graduate, Alumni, and Employer surveys are sent annually in December. Alumni are surveyed in their 3 <sup>rd</sup> year following graduation. The grad survey for MSN graduates who complete	Fall	Met	No

	Direct Data Sources: Grading rubrics for individual course assignments and archived examples of students' completed assignments, Clinical Evaluation Tools				the program later in the year than Term 5 is delayed 1 year to allow them time to find jobs that require their new skill-set and knowledge base.)			
--	---	--	--	--	---	--	--	--

Key Element IV-B: Program completion rates demonstrate program effectiveness.

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
The program demonstrates achievement of required program outcomes regarding completion.	Program database section that tracks attrition and graduation rates.	Program Administrator, Nursing Program Coordinators	Ongoing (Minimum of Annually)	<p>The completion rate for each of the three most recent calendar years is provided.</p> <p>The program specifies the point of entry and defines the time period for completion.</p> <p>The program describes the formula is uses to calculate the completion rate.</p> <p>The completion for the most recent calendar year is 70% or higher. However, if the completion rate for the most</p>	MSN: Cohort attrition rate will be less than 15%.	Fall	<p>Not met: Recent data tables show cohort attrition rate at 50/80, which is 62.5%. This is looking at students from 2012</p>	Yes



				<p>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 student who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or transfer to another institution of higher education.</p> <p>A program with a completion rate of less than 70% for the most recent calendar year provides a written explanation/ analysis with documentation for the variance.</p>	<p>Graduation rate will be 80% or higher.</p>	<p>Fall</p>	<p>to present. Graduation rate from students beginning in 2012 or after is 55/78, which is 70.5%.</p>	<p>Yes</p>
--	--	--	--	--	---	-------------	---	------------

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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
The graduate program demonstrates achievement of required program outcomes regarding certification.	Reports of pass rate for CNL certification and score reports for the NE practice exam results.	Program Administrator, Nursing Program Coordinators	Ongoing (Minimum of Annually)	<p>Review of CNL certification pass rate reports and reported scores from the CNE Practice Exam</p> <p>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.</p> <p>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</p>	80% or higher CNL certification pass rate	Fall	Not met; 71.4% first-time pass rate from Summer 2016 to Spring 2017	Yes
					80% or higher NE practice test score	Fall	Not met: GRFA16: 2/8 (25%) GRSU17: 5/8 (62.5%)	Yes

				<p>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 rate for the three most recent calendar years are averaged.</p> <p>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 with documentation 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.</p>				
--	--	--	--	--	--	--	--	--

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

<b>Evaluation Component</b>	<b>Documentation</b>	<b>Responsible Person/People</b>	<b>Frequency of Assessment</b>	<b>Assessment Method</b>	<b>Benchmark</b>	<b>Report</b>	<b>Results</b>	<b>Action Plan (Y/N)</b>
The program demonstrates achievement of required outcomes regarding	Student reports of employment from Graduate surveys.	Program Administrator, Nursing Program Coordinators	Ongoing (Minimum of Annually)	<p>Review of student-reported employment post program completion.</p> <p>The employment rate is collected separately for each degree program.</p>	90% of MSN graduates report employment as an RN that utilizes their advanced	Fall (reported for previous year)	Not met: Only 67% of graduates report they are working in	Yes

employment rates.				<p>Data are collected within 12 months of program completion.</p> <p>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.</p> <p>Any program that has an employment rate of less than 70% provides a written explanation/analysis with documentation for the variance.</p>	degree at time of graduate survey (6-12 months).		a job that utilizes their advanced degree at the time of the graduate survey.	
-------------------	--	--	--	--	--	--	---	--

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

<b>Evaluation Component</b>	<b>Documentation</b>	<b>Responsible Person/People</b>	<b>Frequency of Assessment</b>	<b>Assessment Method</b>	<b>Benchmark</b>	<b>Report</b>	<b>Results</b>	<b>Action Plan (Y/N)</b>
Analysis of actual and expected student outcomes demonstrate program effectiveness.	Minutes from MSN faculty meetings (these meetings may be held virtually), Guidelines as defined by Program Evaluation Plan (this document), Results and Action columns	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, and BSN-level and MSN-level Assessment Committees	Ongoing (Minimum of Annually)	<p>Compare actual student outcomes to expected student outcomes (benchmarks set in this Program Evaluation Plan) and analyze differences</p> <p>Discuss analysis in "Results/Action" sections (or attached</p>	<p>Aggregate student outcome data will be analyzed and compared with expected student outcomes. Analysis will be shown in "Results" section of Program Evaluation Plan.</p> <p>Major benchmarks for analysis are as follows:</p>			

	<p>of Program Evaluation Plan (this document), Any tables or graphs created to provide visual representation of analyzed data</p>			<p>Action Plans) of the Program Evaluation Plan</p>	<p><u>MSN:</u> 80% or more of students will report that the course prepared them to meet the designated program outcomes.</p> <p>80% of MSN-CNL graduates who attempt will pass the CNL certification exam on their first attempt.</p> <p>80% of MSN-NE graduates who attempt will score 80% or higher the CNE practice exam on their first attempt.</p> <p>Annual academic attrition rate will be less than 15%.</p> <p>Graduation rate will be 80% or higher.</p>	<p>Fall</p> <p>Fall</p> <p>Fall</p> <p>Fall</p>	<p>Met 91.3%</p> <p>Not met; 71.4% pass rate from Summer 2016 to Spring 2017.</p> <p>Not met: GRFA16: 2/8 (25%) GRSU17: 5/8 (62.5%)</p> <p>Not met: Recent data tables show cohort attrition rate at 50/80, which is 62.5%. This is looking</p>	<p>No</p> <p>Yes</p> <p>Yes</p> <p>Yes</p>
--	---	--	--	---	---	---	---	--

							at students from 2012 to present. Graduation rate from students beginning in 2012 or after is 55/78, which is 70.5%.	
--	--	--	--	--	--	--	--	--

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

<b>Evaluation Component</b>	<b>Documentation</b>	<b>Responsible Person/People</b>	<b>Frequency of Assessment</b>	<b>Assessment Method</b>	<b>Benchmark</b>	<b>Report</b>	<b>Results</b>	<b>Action Plan (Y/N)</b>
Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness.	CV of faculty, Faculty handbook, Faculty transcripts and/or CEU certificates, SEI reports, Annual faculty evaluations	Program Administrator, Program Coordinators, and Dean of the University	Annual Review	Review of and aggregation of data regarding faculty outcomes in teaching, scholarship, service, and practice.	Evaluation of faculty outcomes is consistent with the institution's and program's definition of faculty role expectations.	Fall	Met	No

				Review faculty role descriptions and responsibilities	There is congruence between expectations of the faculty in their roles and evaluation of faculty performance.	Fall	Met	No
--	--	--	--	---	---	------	-----	----

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

Evaluation Component	Documentation	Responsible Person/People	Frequency of Assessment	Assessment Method	Benchmark	Report	Results	Action Plan (Y/N)
Formal complaints (grievances) and program quality and effectiveness	University CGES catalog, MSN Student Handbook	Program Administrator, Program Coordinators, and Dean of the University	Ongoing	Review of grievance policy and all formal grievances received	Grievance policies and procedures present and used to foster program quality and effectiveness.	Fall	Met	No
					All grievances will be reviewed and used, as appropriate, to foster program quality and effectiveness.	Fall	Met	No
					Nursing programs will demonstrate 100% compliance with CMU grievance policies.	Fall	Met	No

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

<b>Evaluation Component</b>	<b>Documentation</b>	<b>Responsible Person/People</b>	<b>Frequency of Assessment</b>	<b>Assessment Method</b>	<b>Benchmark</b>	<b>Report</b>	<b>Results</b>	<b>Action Plan (Y/N)</b>
Aggregate outcome data is analyzed and used to foster ongoing program improvement	Faculty meeting minutes and "Action" column on Program Evaluation Plan	Program Administrator, Nursing Program Coordinators, Clinical Coordinator, MSN-level Assessment and Curriculum Committees	Ongoing (Minimum of Annually)	Review of all outcome data in comparison to benchmarks for achievement of mission, goals, and expected outcomes.  Review meeting minutes and Program Evaluation Plan	If aggregate student, faculty, and program outcome data do not demonstrate evidence of program effectiveness, a detailed plan for improvement will be developed and provided at programmatic meetings and available through the Program Administrator's office. If there is not sufficient space in the Meeting Minutes or Program Evaluation Plan to describe plan for ongoing program improvement, a separate "Program Improvement Plan" document may be created in response.	Fall		



**CENTRAL METHODIST UNIVERSITY**

**MASTER OF SCIENCE IN NURSING (MSN) PROGRAM**

**ACTION PLAN FOR AY 2016-2017; TO ACCOMPANY FINDINGS IN SYSTEMATIC PROGRAM EVALUATION PLAN**

Course assessment achievement at 80%	Assignment Achievement for NU500 and NU504 are below the published threshold of 80% (61.2% and 58%). Those are among the first courses of the program, and students are still coming up to speed with the rigor of graduate level coursework and the expectation for writing at the graduate level.	We will continue to watch this for a trend. This appears to be cohort based, and is a reflection of the strength and group attitude of the individual cohorts.
CNL Pass rate	Pass rate for Summer 16 to Spring 17 was 71.4%. Benchmark is 80%. This pass rate is expected and is the reason the full review and revision of the CNL curriculum that was undertaken.	CNL Faculty have completed a curricular review, including a CNL faculty meeting, which included mapping content from the CNL certification exam to each course in the CNL curriculum. The same mapping was done with CNL recommended clinical experiences.
CNE practice exam pass rate	GRFA16 Pass rate was only 25%. GRSU17 Pass rate was 62.5%. Benchmark is 80%. There is no incentive for students to do their best work on this practice exam. There are currently no points attached, just the fact of completion.	Faculty are exploring ways of incentivizing this exam within the NU523.
Attrition	Cohort attrition rate (meaning percentage of students who do not stay with their entry cohort) is 62.5%. It is very difficult to track attrition with the current systems (CARS) available to us. Students also appear to not understand the concept of a cohort model. This is something that needs to be discussed starting with recruiting information.	<p>Student comments continue to revolve around their dislike of overlapping courses and only short breaks, when they occur, except over Christmas.</p> <p>Implement a new tracking system with the January 18 cohort (Data will need to be tracked by hand) and the working definition for attrition will be changed to intentional exclude individuals who leave for personal or family issues, medical reasons, or reasons pertaining to job responsibilities. We will report as attrition only students who leave due to</p>

		<p>dissatisfaction with the program or for academic reasons are not successful.</p> <p>The graduation rate is more reflective of student persistence.</p>
Graduation rate	Graduate rate is 70%. This is the first reported instance of not meeting this threshold.	Track and monitor for a trend.
Graduate Surveys	Only 67% of graduates report that their employment as an RN that utilizes their advanced degree at time of graduate survey (6-12 months). Benchmark is 80%. Students appear not to understand the question on the survey.	Program Coordinator will coordinate an electronic meeting to discuss rewording the graduate and alumni surveys to better elicit the information we are trying to gather.